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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements. For the 2011 calendar year, or tax year beginning Jul 1 , 2011, and ending Jun , 2012 D Employer Identification Number Check if applicable C Name of organization VERMONT ASSOCIATION OF BROADCASTERS Address change 03-0288683 Number and street (or P.O. box if mail is not delivered to street addr) E Telephone number Room/suite Name channe Initial return 70 JOY DRIVE (802) 658-1230 City, town or country State ZIP code + 4 Terminated SOUTH BURLINGTON VT 05403 Amended return **G** Gross receipts \$ 187,575 H(a) Is this a group return for affiliates? F Name and address of principal officer Application pending H(b) Are all affiliates included? DENNIS SNYDER P.O. BOX 4489 BURLINGTON VT 05406 Yes If 'No,' attach a list (see instructions) Tax-exempt status 501(c)(3) X 501(c) (6) ◀ (insert no.) 4947(a)(1) or Website: ► www.vab.org H(c) Group exemption number Form of organization X Corporation L Year of Formation 1954 Trust Other ► M State of legal domicile Association Part | Summary Briefly describe the organization's mission or most significant activities: TRADE ASSOCIATION Governance if the organization discontinued its operations or disposed of more than 25% of its net assets Check this box ► Number of voting members of the governing body (Part VI, line 1a) 3 6 Number of independent voting members of the governing body (Part VI, line 1b) 4 6 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 10 6 Total unrelated business revenue from Part VIII, column (C), line 12 7 a 0. b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year** Current Year Contributions and grants (Part VIII, line 1h) 12,988. 14,036. Program service revenue (Part VIII, line 2g) 164,505. 170,220. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 2,984. 2,097. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,222. 1,488. 12 Total revenue - add-lines-8-through-11-(must-equal Part VIII, column (A), line 12) 187,575. 181,965 Grants and similar amounts paid (Fart 13), column (A), lines 1-3) 65,000. 40,000. Benefits paid love for members (Part IX, column (A), line 4) Salaries, other compensation employee benefits (Part IX, column (A), lines 5-10) 45,809 43,205. 16a Professional fundialising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX; column (D), line 25) ► Other expenses (Part X column (A), tines 11a 11d, 11f-24e) 80,879 139,246. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) . 191,688. 222,451. Revenue less expenses Subtract line 18 from line 12 -9,723. -34,876. Beginning of Current Year End of Year Total assets (Part X, line 16) 581,356. 546,480. 21 Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from line 20 581,356. 546,480. Partil Signature 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 than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign Here DENNIS SNYDER Type or print name and title Date Check 08/30/12 **Paid** Dennis N. Perrault, CPA P01256595 self employed Preparer ► Salvador and Babic PC Use Only Firm's address ► PO Box 593 Firm's EIN > 03-0275888 Barre VT 05641 Phone no (802) 476-8673 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes

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

Form 990 (2011)

Form	990 (2011) VERMONT ASSOCIATION OF BROADCASTERS	03-0	28868	3	F	age 2
Pai	到國 Statement of Program Service Accomplishments					
	Check if Schedule O contains a response to any question in this Part III					X
1	Briefly describe the organization's mission					
	TRADE ASSOCIATION					
2	Did the organization undertake any significant program services during the year which were not listed on the	prior				
	Form 990 or 990-EZ? .			Yes	X	No
	If 'Yes,' describe these new services on Schedule O		_		_	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	es?		Yes	X	No
	If 'Yes,' describe these changes on Schedule O.				_	
4	Describe the organization's program service accomplishments for each of its three largest program services	. as me	asured	bv exp	enses	;
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount	nt of gr	ants an	alloc	ations	to
	others, the total expenses, and revenue, if any, for each program service reported					
4 a	(Code) (Expenses \$ 30,502. including grants of \$ 0.) (Ref					0.)
	ANNUAL CONVENTION AND SEMINARS - INFORMATIONAL PRESENTATIONS,					
	EDUCATIONAL & PROMOTIONAL ACTIVITIES FOR THE BROADCAST TRADE					
41	(Code) (Expenses \$ 2,825. including grants of \$ 0.) (Rev	venue	\$			0.)
	MEMBER STATIONS TOOK ADVANTAGE OF THE ALTERNATIVE					
	BROADCAST INSPECTION PROGRAM IN 2011-2012. THE ABIP PROGRAM					
	ENSURES OUR MEMBERS ARE OPERATING WITHIN FCC GUIDELINES.					
-						
40	: (Code) (Expenses \$ 40,000. including grants of \$ 40,000.) (Rev					
	SCHOLARSHIPS - AWARDED SCHOLARSHIPS AT VERMONT AND					
	MAINE COLLEGES OFFERING BROADCAST COURSES					
4	d Other program services (Describe in Schedule O.)					
	(Expenses \$ 57,960. including grants of \$ 0.) (Revenue \$			0.)	
40	e Total program service expenses ► 131, 287.					
BAA	TEEA0102 07/05/11			Form	990	(2011)

			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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		_,_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, 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		Х
0	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	and the land	X
1	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.			
â	Did the organization report an amount for land, buildings and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI	11 a		Х
ł	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	11 b		Х
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	11 c		Х
C	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	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
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	11 f		Х
2 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		х
	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, XII, and XIII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
42	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ł	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
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		х
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16_		Х
7	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		х
8	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		х
9	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		Х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
ŀ	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

ЗАА		<u> </u>	990 (2011)
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	x	
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		Х
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		
Ь	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		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u>
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
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		х
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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
c	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		х
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV .	28b		х
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions)			
2 7	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		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
Ь	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		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
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		
b	complete Schedule K If 'No,'go to line 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		Х
24 a	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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and			
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? <i>If 'Yes,' complete Schedule J</i>	23		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2° If 'Yes,' complete Schedule I, Parts I and III	22	x	-
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	X	110
		1 1	resi	NO

Form 990 (2011) VERMONT ASSOCIATION OF BROADCASTERS Part V Statements Regarding Other IRS Filings and Tax Compliance

,,,,,,	Check if Schedule O contains a response to any question in this Part V						
						Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1 a			0		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1ь			0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors (gambling) winnings to prize winners?	and re	eportable	gaming	1 c		
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	2 a					
h	If at least one is reported on line 2a, did the organization file all required federal employment to		urns?		2 b	22502	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see inst						
3 2	Did the organization have unrelated business gross income of \$1,000 or more during the year?		113)		3a	E 3/5/2	X
	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O				3b		
	At any time during the calendar year, did the organization have an interest in, or a signature of financial account in a foreign country (such as a bank account, securities account, or other financial account.)	r other ancial	r authorit account)	y over, a	4a	A CONTRACT	X
b	If 'Yes,' enter the name of the foreign country				_		
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Fin		Account	s.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax			٠	5a		<u>X</u>
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter	trans	action?		5b		_X
С	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?				5с		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, an solicit any contributions that were not tax deductible?	d did t	he organ	ization	. 6a		Х
b	olf 'Yes,' did the organization include with every solicitation an express statement that such con not tax deductible?	tributi	ons or gi	fts were	. 6ь		
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 particles provided to the payor?	rtly for	goods a	nd	. 7a		X
b	of Yes,' did the organization notify the donor of the value of the goods or services provided?				7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for white Form 8282?	ch it w	as requi	red to file	7c		х
d	If 'Yes,' indicate the number of Forms 8282 filed during the year	7d					
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal b	enefit	contract?	·	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit	fit con	tract?		7 f		Х
Q	If the organization received a contribution of qualified intellectual property, did the organization as required?	ı file F	orm 889	9	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the c Form 1098-C?	rganız	zation file	ea 	7 h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, har holdings at any time during the year?	g orga ve exc	nizations ess busi	Did the ness	8		
9	Sponsoring organizations maintaining donor advised funds.						
a	Did the organization make any taxable distributions under section 4966?				9a		
t	Did the organization make a distribution to a donor, donor advisor, or related person?				9 b	-	E-0200000
10	Section 501(c)(7) organizations. Enter.						
	Initiation fees and capital contributions included on Part VIII, line 12	10 a					
t	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b					
11	Section 501(c)(12) organizations. Enter						
ā	a Gross income from members or shareholders	11 a					
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11 b					
12 a	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of		1041? .		. 12a	ASSESSMENTS	is-rEvara.
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			_		
	Section 501(c)(29) qualified nonprofit health insurance issuers.						
ā	a is the organization licensed to issue qualified health plans in more than one state?		•	•	13a		Serent 14
	Note. See the instructions for additional information the organization must report on Schedule	0			13.0		
	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 .	13Ь		_			
	c Enter the amount of reserves on hand	13 c			100		
	a Did the organization receive any payments for indoor tanning services during the tax year?				14a		<u>X</u>
!	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in So	hedule	e O		14b	000	(0011)

Form 990 (2011) VERMONT ASSOCIATION OF BROADCASTERS 03-0288683 Page 6 Rankwik Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision Х 3 of officers, directors or trustees, or key employees to a management company or other person? . . Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Δ Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х 6 X Did the organization have members or stockholders? 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? 7 a Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a 8ь Х b Each committee with authority to act on behalf of the governing body? Is there any officer, director or 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 B. Policies (This Section B requests information about policies not required by the Internal Revenue Code., Yes No 10 a 10 a Did the organization have local chapters, branches, or affiliates? X b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a 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 12 a Х b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12 b to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12 c 13 13 Did the organization have a written whistleblower policy? 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? a The organization's CEO, Executive Director, or top management official 15 a 15b b Other officers of key employees of the organization 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? 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 taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply X Upon request Another's website 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the organization 20 BURLINGTON, VT 05406 (802) 658-1230 PO BOX 4489

Form 990 (2011)	VERMONT	ASSOCIATION	OF	BROADCASTERS

03-0288683

age 7

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

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

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

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

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

Check this box if neither the organization	nor any r	elated	org	anız	atio	n con	pen	sated any current offic	er, director, or trustee	e
(A) Name and title	(B) Average hours per week	(do no unles	Position (do not check more than one box, unless person is both an officer and a director/trustee)				(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation	
	(describe hours for related organiza- tions in Schedule O)	מר קונפרגסנ מר קונפרגסנ	anstitutional foistee	Offirer	Key employee	Highest coincensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) JIM_CONDONEXECUTIVE DIRECTOR	20.00	x						30,000.	0.	0.
(2) ERIC MICHAELS PRESIDENT	3.00			х				0.	0.	0.
(3) CANDIS LEOPOLD VICE PRESIDENT	1.00			х				0.	0.	0.
_(4) DENNIS SNYDER TREASURER	2.00			х				0.	0.	0.
	1.00			х				0.	0.	0.
_(6) ALEX_MARTIN MEMBER AT LARGE	1.00	х						0.	0.	0.
_(7)_KEN_KASZUBOWSKI PAST_PRESIDENT	1.00	х						0.	0.	0.
_(8)	:			Ĭ						
(9)										
(10)										
(1)										
(12)										
(13)									.,	
(14)									7.	

Particula Section A. Officers, Directors, Trust	ees, r	<u>(ey</u>	Em			es, a	and	Highest Com	pensated Emp	loyees (cont)
(A) Name and title	(B) Average hours per	box,	, unles cer an	Pos heck	rson i Iirecto	than our both or/trust	n an tee)	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other compensation
	per week (describ e hours for related organi- zations in Sch O)	Individual frustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099 MISC)	from the organization and related organizations
<u>(15)</u>										
<u>(16)</u>	-									
(17)										
<u>(18)</u>	-					İ			12 1101 - 2001 -	<u> </u>
<u>(19)</u>	†									
<u>(20)</u>										
<u>(21)</u>							<u>'</u>			
(22)	-									
(23)										
(24)	-									
(25)	-									
1 b Sub-total c Total from continuation sheets to Part VII, Section A	· ·		· · ·				> > >	30,000.	0.	
d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited	to thos	se lis	ted	abo	ve) v			30,000. eived more than \$1	0 . 00,000 of reportab	
from the organization										Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such inc	dıvıdua	1		•	·	·	J	•	. ,	3 X
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th such individual									m	4 X
5 Did any person listed on line 1a receive or accrue co for services rendered to the organization? If 'Yes,' co	mpens omplete	atior Sci	า froi าedu	m ar ıle J	ny ui for :	nrela such	ted <i>per</i>	organization or in	dividual	5 X
Section B. Independent Contractors	•		- 1						2100 000 74	
Complete this table for your five highest compensate compensation from the organization Report compensation.	d indep	ena for th	ent d ne ca	conti alen	dar y	ors tr year	nat i end	ling with or within	the organization's t	
Name and business address	s							Description of	f services	(C) Compensation
									_	
2 Total number of independent contractors (including to \$100,000 in compensation from the organization ►	out not	limite	ed to	o tha	se I	ısted	l ab	ove) who received	more than	

Pa	tivilli Statement of Revenue			·	·		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
SS	1a Federated campaigns	1 a					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	b Membership dues .	1b	10,270.				
	c Fundraising events .	1 c					
	d Related organizations	1 d					A Profession
₫	e Government grants (contributions)	1 e					
SNS	•	- '-	<u> </u>				
55	f All other contributions, gifts, grants, and similar amounts not included above	اء ا	2 766				
E.P.	·	1f	3,766.				
S S	g Noncash contributions included in Ins 1a-1	f. \$					
	h Total. Add lines 1a-1f			14,036.			
PROGRAM SERVICE REVENUE	0- 2003		Business Code				
2	2a NCSA		515100	161,818.	0.	0.	161,818.
ii ii	b CONVENTION		900099	4,852.	4,852.	0.	0.
≥	c STATION INSPECTION PROG	RAM	541900	3,550.	3,550.	0.	0.
SE	d						
ΑÃ	e						
Ö	f All other program service revenue	•	·				
- 2	g Total. Add lines 2a-2f .			170,220.			
	3 Investment income (including divi	dends	, interest and				:
	other similar amounts)		•	2,097.	0.	0.	2,097.
	4 Income from investment of tax-ex	empt	bond proceeds				
	5 Royalties		<u> </u>				
	(ı) Re	eal	(II) Personal				
	6a Gross rents					1900	
	b Less. rental expenses						
	c Rental income or (loss)						7 × 4 × 7
	d Net rental income or (loss)				,		
	7a Gross amount from sales of (i) Secu	irities	(II) Other				A CONTRACTOR OF STREET
	assets other than inventory						
	b Less cost or other basis						
	and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)						
UE	8a Gross income from fundraising ev (not including \$	ents					
OTHER REVENU	of contributions reported on line 1	c).					
RE:	See Part IV, line 18		a				
94	b Less direct expenses		b				
6	c Net income or (loss) from fundrais	sına e	vents ►				and the second s
	9a Gross income from gaming activit See Part IV, line 19	-	a				
	b Less direct expenses .		h				PERSONAL CONTRACT
	c Net income or (loss) from garning	activ	ities ►	BOURDER WARRENDERN EN ERMERN DES ER BEE	Pathawara a practice water and	Note that the first has been selected from	
	10a Gross sales of inventory, less retu and allowances	urns	a				
	b Less cost of goods sold		h				
	c Net income or (loss) from sales o	f inve	ntory >	ALCOHOLOGY STATE S	The Address of the Control of the Co	the first of the same section.	[1] \$ 1 100 HE TO BE SOUTH \$ 100 HE TO BE
	Miscellaneous Revenue	11110	Business Code				
	11a NAT'L ASSOC OF BROADCAST	rers	900099	1,222.	1,222.	0.	0.
	b						
	c						
	d All other revenue		1				
	e Total. Add lines 11a-11d .			1,222.			
	12 Total revenue. See instructions		. •	187,575.		0.	163,915.
					·	<u> </u>	

Partix Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	Check if Schedule O contains a response to any question in this Part IX									
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	40,000.		7-14						
2	Grants and other assistance to individuals in the United States. See Part IV, line 22									
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16									
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	30,000.								
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	13,205.								
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)									
9	Other employee benefits									
10	Payroll taxes .									
11	Fees for services (non-employees).									
	Management .									
	Legal	2,763.								
	Accounting	762.								
	Lobbying	2,538.								
	Professional fundraising services See Part IV, line 17	2,000.			<u> </u>					
	Investment management fees .		SANTAL LEGISLES SANTANAMAN SANTA							
	Other									
_	Advertising and promotion									
	· .	004								
13	Office expenses	884.								
14	Information technology .									
15	Royalties .									
16	Occupancy									
17	Travel									
18	Payments of travel or entertainment expenses for any federal, state, or local public officials									
19	Conferences, conventions, and meetings .	30,502.								
20	Interest .									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization									
23	Insurance									
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	EAS PROGRAM REIMBURSEMENT	56,000.								
b	SUPPLIES	1,946.								
	AWARDS BANQUET EXPENSE	37,363.								
	WEBSITES	1,081.	-		· · · · · · · · · · · · · · · · · · ·					
	All other expenses	5,407.								
	Total functional expenses. Add lines 1 through 24e	222,451.			<u> </u>					
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 ►									
	001 30 2 (100 300 /20)	<u> </u>	I .	1	<u> </u>					

Pa	ii(X)	Balance Sheet		,	
			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	146,209.	1	111,288.
	2	Savings and temporary cash investments	435,147.	2	435,192.
	3	Pledges and grants receivable, net .		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	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) .		6	
ŝ	7	Notes and loans receivable, net		7	
S S E T	8	Inventories for sale or use		8	
Ś	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b		10 c	
	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) .	581,356.	16	546,480.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue .		19	
Ļ	20	Tax-exempt bond liabilities		20	
A B I	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
L	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Ţ	23	Secured mortgages and notes payable to unrelated third parties		23	
E S		Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0.
N E T		Organizations that follow SFAS 117, check here ► X and complete lines			
Ť		27 through 29 and lines 33 and 34.			
A Ş	27	Unrestricted net assets .	581,356.	27	546,480.
ASSETS	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets .		29	
Q R		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete			
F		lines 30 through 34.			
F UND	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ê	32	Retained earnings, endowment, accumulated income, or other funds		32	
BALANCES	33	Total net assets or fund balances	581,356.	33	546,480.
5	34	Total liabilities and net assets/fund balances	581,356.	34	546,480.

BAA

Form 990 (2011)

Forn	1990 (2011) VERMONT ASSOCIATION OF BROADCASTERS (<u> </u>	Page 12
Pa	能XIII Reconciliation of Net Assets		
	Check if Schedule O contains a response to any question in this Part XI	·	
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1	187,575.
2	Total expenses (must equal Part IX, column (A), line 25)	2	222,451.
3	Revenue less expenses. Subtract line 2 from line 1	. 3	-34,876.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	581,356.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	546,480.
Pa	Financial Statements and Reporting		
	Check if Schedule O contains a response to any question in this Part XII		
		·	Yes No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.		
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a X
	b Were the organization's financial statements audited by an independent accountant?		2b X
,	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight or review, or compilation of its financial statements and selection of an independent accountant?	f the audit,	2c
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
	d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is separate basis, consolidated basis, or both	sued on a	
	Separate basis Consolidated basis Both consolidated and separate basis		
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	ne Single	3a X
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the re or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired audit	3b

Form 990 (2011)

BAA

TEEA0112 07/06/11

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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. ► See separate instructions.

OMB No 1545-0047

2011

Openitor Public (Lispection)

If the organization answered 'Yes,' to 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,' to 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

		ganizations Complete Part III	ronn 950-EZ, Part V,	ille 33a (Proxy Tax), ti	ien			
_	of organization	 		Employer identific	ation number			
VEF	RMONT ASSOCIATION O	F BROADCASTERS		03-028868	3			
Par	Complete if the or	ganization is exempt under section	on 501(c) or is a s	section 527 organi	zation.			
1	Provide a description of the o	rganization's direct and indirect political ca	mpaign activities in P	art IV				
2	Political expenditures							
3	Volunteer hours							
Par	Complete if the or	ganization is exempt under section	on 501(c)(3).					
1	Enter the amount of any excis	se tax incurred by the organization under so	ection 4955 .	► \$				
2	Enter the amount of any excis	se tax incurred by organization managers u	nder section 4955	► \$				
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for t	his year?		Yes No			
4 a	Was a correction made?		•		Yes No			
	If 'Yes,' describe in Part IV.							
Pai	Complete if the or	ganization is exempt under section	on 501(c), excep	t section 501(c)(3).				
1	Enter the amount directly exp	ended by the filing organization for section	527 exempt function	activities . ►\$				
2	Enter the amount of the filing function activities	organization's funds contributed to other o	rganizations for section	on 527 exempt > \$				
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b							
4	Did the filing organization file	Form 1120-POL for this year?		•	☐ Yes ☐ No			
5	organization made nauments	and employer identification number (EIN) on For each organization listed, enter the amons received that were promptly and directly action committee (PAC). If additional space	ount naid from the fili	na organization's filinds	Also enter the			
	(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)								

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2011

Cahadula C (Farm 000 as 000 F7) 201	. UPDMONE A C	ACCIPATION OF PRO	A D.C.A. CMITD.C	02.000	
Rancile C (Form 990 or 990-EZ) 201 Rancile A Complete if to section 501(the organization			03-0288 nd filed Form 5768 (el	
A Check ► If the filin	g organization bel	longs to an affiliated group	(and list in Part IV eac	h affiliated group member's	name.
		nd share of excess lobbying		,	,
		ecked box A and 'limited co	•		
	Limits on Lobb	oying Expenditures eans amounts paid or incu		(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	res to influence o	iblic opinion (grass roots le	hbyina)		-
		legislative body (direct lob)			
c Total lobbying expenditu			bying)		······································
d Other exempt purpose ex	•	and to) .	•		
• • •	•	nos 1s and 1d\			
e Total exempt purpose ex	thenuntules (and ii	nes ic and id)	•		
both columns.		nount from the following tal	ble ın		
If the amount on line 1e, colu	ımn (a) or (b) ıs	The lobbying nontaxable	amount is		
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1,	000,000	\$100,000 plus 15% of the exce	ss over \$500,000		
Over \$1,000,000 but not over \$	1,500,000	\$175,000 plus 10% of the exce	ss over \$1,000,000.		
Over \$1,500,000 but not over \$	17,000,000	\$225,000 plus 5% of the excess	s over \$1,500,000.		
Over \$17,000,000		\$1,000,000.			
g Grassroots nontaxable a	mount (enter 25%	of line 1f) .			
h Subtract line 1g from line	e 1a If zero or les	ss, enter -0			
i Subtract line 1f from line	e 1c. If zero or less	s, enter -0-			
j If there is an amount oth section 4911 tax for this	ner than zero on e	ther line 1h or line 1i, did t	he organization file For	m 4720 reporting	☐Yes ☐No
	ne organizations t	4-Year Averaging Period hat made a section 501(h) nns below. See the instruc	election do not have to	complete all of the five gh 2f.)	7 (100)
	Lol	bbying Expenditures Durin	g 4-Year Averaging Pe	riod	
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					-

f Grassroots lobbying expenditures

BAA

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011 VERMONT ASSOCIATION OF BROADCASTERS 03-0288683 [Partition of the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each Week recovery to three In the same It had an extended to the International Control of the Inte	(a)	(b)
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Amount
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?	1		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?c Media advertisements?			
d Mailings to members, legislators, or the public?			
e 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			
2a Did 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 under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Ratelli All Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5).	or	200 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
section 501(c)(6).	. , , , , ,		
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1 X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			. 2 X
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			3 X
PaidIII B Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5),	ors	ection
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' O answered 'Yes.'	Ř (b)	Part	III-A, line 3, is
1 Dues, assessments and similar amounts from members .		1	
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).	0.00		
a Current year	ſ	2a	
b Carryover from last year .	F	2b	
c Total	Γ	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	al	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	F	5	
Partine Supplemental Information	<u> </u>	<u> </u>	
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, Part Also, complete this part for any additional information	II-A; aı	nd Pai	t II-B, line 1
Pt I-A Line 1 THE EXECUTIVE DIRECTOR PAYS EXPENSES PERSONALLY AND	D		
USES PERSONAL TIME TO LOBBY FOR ISSUES THAT MAY BE	NEFIT	<u>г</u> <u>тн</u>	<u>E</u>
ORGANIZATION. THE ORGANIZATION HAS NO DIRECT			
EXPENDITURES FOR POLITICAL AND/OR LOBBYING ACTIVITY	res.		
BAA Sch	edule C	(Forr	n 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011 VERMONT ASSOCIATION OF BROADCASTERS	03-0288683	Page 4
Schedule C (Form 990 or 990-EZ) 2011 VERMONT ASSOCIATION OF BROADCASTERS Partix Supplemental Information (continued)		
NAC SA MANAGERO		
		

SCHEDULE I

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 21 or 22.

Attatch to Form 990.

201

OMB No 1545-0047

Employer identification number

2 □ Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. X Yes Bandlin Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to 03-0288683 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. VERMONT ASSOCIATION OF BROADCASTERS

Raidin General Information on Grants and Assistance Name of the organization

Politi 930, Fait IV, little 21 tot any recipient that received more than \$3,000. One of the company received man \$3,000. Part II can be duplicated if additional space is needed	lor any recipient i Fadditional space	is needed		יייי איייי אייייי אייייי אייייי איייייי איייייי			▲
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) CASTLETON STATE COLLEGE 62 ALUMNI DRIVE CASTLETON VT 05735	03-0213787		10,000.				SCHOLARSHIP
02	03-0220266		10,000.				SCHOLARSHIP
re_college	03-0213787		10,000.				SCHOLARSHIP
i i	04-3349703		10,000.				SCHOLARSHIP
(5)							
(6)							
ω							
(8)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	3) and government org	anizations listed in	the line 1 table				

Schedule I (Form 990) (2011)

TEEA3901 06/01/11

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3 Enter total number of other organizations listed in the line 1 table

Page 2 Schedule I (Form 990) (2011) VERMONT ASSOCIATION OF BROADCASTERS

Partill Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(f) Description of non-cash assistance							and any other additional information.				 					 	
(e) Method of valuation (book, FMV, appraisal, other)							rt I, line 2, and any othe	구1	LABLION:INE	1 1		1 1 1 1 1 1 1 1	 	t t t 1 1 1 1 1 1 1 1		 	
(d) Amount of non-cash assistance							to provide the information required in Part I, line 2,	THE ORGANIZATION'S PRESIDENT RECEIVES A REPORT EACH YEAR FROM ALL	SELECTION PROCESS FOR STUDENTS WHO RECEIVE THE SCHOLARSHIPS IS		1 1 1 1 1 1 1 1 1]]	1 1 1 1 1 1 1 1 1	 	t ; ; ; ; ; ; ; ; ;	
(c) Amount of cash grant							provide the inform	NT RECEIVES A	ENTS WHO RECE	CHOOLS.	, 		 	 	1 1 1 1 1 1 1 1 1	 	! ! ! ! !
(b) Number of recipients							plete this part to	ION'S PRESIDE	KECELVED SCHO	DISCRETION OF THE SCHOOLS.	 	 	 		 	! ! ! ! ! ! !	
(a) Type of grant or assistance		m	4	ı	9	7	限氧碳冰器 Supplemental Information. Complete this part	Pt_L Line_2THE_ORGANIZAT	THAT CANOLING THAT COLORS TO SELECT THAT COLORS THAT C	TO THE DISCRE	 	i 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

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Schedule I (Form 990) (2011)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047 **2011**4. Openito Public

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization 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.

VERMONT ASSOCIATI	ION OF BROADCASTERS	03-0288683
	ORGANIZATION HAS ANNUAL MEETING ALLOWING MEMBER	RS_TO_VOTE
	FOR THE GOVERNING BODY EVERY TWO YEARS. USUAL	LY HELD DURING
	THE MONTH OF MAY.	
Pt_VI,_Line_6	THE ORGANIZATION HAS MEMBERS WHO PAY MEMBERSHI	P DUES
Pt_VI,_Line_11a_	THE TREASURER AND PRESIDENT REVIEWED AND APPRO	VED OF THE
	FORM 990 BEFORE FILING THE FORM.	
Pt_VI,_Line_19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS	AVAIABLE FOR
	PUBLIC INSPECTION AT THE LOCATION OF THE ORGAN	IZATION

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4d (continued)

Describe the exempt purpose achievements for each of the organization's other program
services. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to
report the amount of grants and allocations to others, the total expenses, and revenue, if any, for
each program service reported.

		* • • = = •
Code:	Description:	WEBSITE - PROVIDES INFORMATION ON VERMONT MEMBER
Expenses	1,960.	STATIONS, AND ON WEATHER RELATED SCHOOL CLOSINGS
Grants Of	0.	
Revenue _	0.	
Code:	Description:	EMERGENCY ALERT SYSTEM (EAS) REIMBURSEMENT
Expenses _	56,000.	PROGRAM - REIMBURSES \$1,000 TO EACH VERMONT RADIO
Grants Of _	0.	STATION THAT UPGRADES THEIR EAS SYSTEM EQUIPMENT
Revenue	0.	MADE MANDATORY TO ALL VERMONT STATIONS BY THE FCC
		AND THE DEPARTMENT OF HOMELAND SECURITY.