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Department of the Treasury

**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)

The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047 2011 Open to Public

inte	mai Revenu		The organization may have to use a copy of this return to satisfy state re	porting requi	rements	Inspection
<u>A</u>	For the	2011 c	alendar year, or tax year beginning , and ending			
В	Check if app	olicable	C Name of organization GREATER PINE STREET BUSINESS		D Employ	er identification number
	Address cha	ange	ASSOCIATION INC			
	Name chan	ae l	Doing Business As		30-	0256263
		Ť	Number and street (or P O box if mail is not delivered to street address)	E Telepho	ne number	
	Initial return		404 PINE STREET	_	802	-859-9222
	Terminated		City or town, state or country, and ZIP + 4			
. $\square$	Amended re	eturn	BURLINGTON VT 05401		G Gross rece	ipts \$ 146,175
	Application	nonduna.	F Name and address of principal officer			
	Application	penuing	ADAM BROOKS	H(a) Is this a	group return for a	iffiliates? Yes X No
			404 PINE STREET	H(b) Are all a	ffiliates included	? Yes No
			BURLINGTON VT 05401	If "N	lo," attach a list	(see instructions)
$\overline{}$	Tax-exemp	ot status	501(c)(3) X 501(c) ( 6 ) ◀ (insert no ) 4947(a)(1) or 527			
	Website:	_	WW.SEABA.COM	H(c) Group e	xemption numbe	ar <b>b</b>
<u></u>	Form of org				1986	M State of legal domicile VT
	Part I		ımmary	or torination -		III Cuato or rogar continue v =
	1		escribe the organization's mission or most significant activities			
•		•	Schedule O			
9	1	see	schedule o			
<u>a</u>	1					
je je	1		<del></del>			
<b>C</b> YÓ	2 C		is box $ ightharpoonup$ if the organization discontinued its operations or disposed of more than 25% of	fits net asse	ts , ,	
lj	3 N	umber c	of voting members of the governing body (Part VI, line 1a)		3	11
<b>≥</b> is	4 N	umber d	of independent voting members of the governing body (Part VI, line 1b)		4	
GANNAOS Activities & Governance	5 To	otal num	nber of individuals employed in calendar year 2011 (Part V, line 2a)		5	4
THE S	6 To	otal num	nber of volunteers (estimate if necessary)		6	200
	7a To	otal unre	elated business revenue from Part VIII, column (C), line 12		7a	0
DEC	b N	et unrela	ated business taxable income from Form 990-T, line 34		7b	0
				Prior Ye		Current Year
6 <b>I</b> nue	8 C		ions and grants (Part VIII, line 1h)		9,935	68,581
enc	9 P	rogram :	service revenue (Part VIII, line 2g)	1	4,603	39,712
<b>2102</b> Revei	10 In	vestme	nt income (Part VIII, column (A), lines 3, 4, and 7d)		23	0
22,	11 0	ther rev	renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0,528	37,882
_	12 To	otal reve	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	13	5,089	<u>146,175</u>
	13 G	rants ar	nd similar amounts paid (Part IX, column (A), lines 1–3)		3,448	2,125
	14 B	enefits p	paid to or for members (Part IX, column (A), line 4)		0	0
. 8	15 S	alaries,	other compensation, employee benefits (Part IX, column (A), lines 5–10)	6	7,726	70,724
Expenses	16a Pi	rofessio	nal fundraising fees (Part IX, column (A), line 11e)		0	0
×	. b To	otal fund	draising expenses (Part IX, column (D), line 25) ▶ 0			:
ù			penses (Part IX, column (A), lines 11a–11d, 11f–24e)  RECEIVED		5,721	95,588
	18 Te	otal exp	lenses Add lines 13–17 (must equal Part IX, column (A), line 25)	13	6,895	<u>168,437</u>
	19 R	<u>e</u> venue			1,806	-22,262
ŏ	893		i I (F	Beginning of Co		End of Year
Net Assets or	20 T	otal ass	ets (Part X, line 16)	3	1,469	8,057
ž.	<b>21</b> Te	otal liabi	ultiles (Part X, line 26)		1,935	800
ž	22 N		ts or fund balances Subtract line 21 from line 20		9,534	7,257
_ <u>F</u>	Part II	Si	gnature Block			
			perjury, I declare that I have examined this return, including accompanying schedules and statements			wledge and belief, it is
tr	ue, correc	t, and co	omplete Declaration of preparer (other than officer) is based on all information of which preparer has	any knowledg	je	
		<b>\</b> -	Calame Joolin			19/12
Si	gn	s	Signature of officer		Date	•
He	ere	_	ADAM BROOKS EXECUT	IVE DI	RECTOR	
			ype or print name and title			
		Print/Type	e preparer's name Preparer's signature PARICAMBV	Date	Check	f PTIN
Pai	id	Patric	ria M. Bisson Patricia M. Bisson	11/0	4/12 self-emp	ployed P00974078
		Firm's nar	me Compucount, Inc.		Firm's EIN	03-0306127
Us	e Only		PO Box 7, 341 VT RT 66	"		<del></del>
		Firm's add	D 4-1-b 177 05060	ļ	Phone no	802-728-4461
Ma			s this return with the preparer shown above? (see instructions)		-	X Yes No
Fo	r Paperw		duction Act Notice, see the separate instructions.			Form <b>990</b> (2011)
DAA			•			• •

orm 9	990 (2011) GREATER PINE STREET BUSINESS	30-0256263 Page	2
	art III Statement of Program Service Accomplishments		_
	Check if Schedule O contains a response to any question i	n this Part III	L
	Bnefly describe the organization's mission		
Se	See Schedule O		
2	Did the organization undertake any significant program services during the year which	h were not listed on the	_
	prior Form 990 or 990-EZ?	Yes X No	0
	If "Yes," describe these new services on Schedule O	<del></del>	
3	Did the organization cease conducting, or make significant changes in how it conduct	ts, any program	
	services?	Yes X No	0
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three la	rgest program services, as measured by	
	expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trust	ts are required to report the amount of	
!	grants and allocations to others, the total expenses, and revenue, if any, for each pro	gram service reported	
	(Code. ) (Expenses \$ including grants of \$	) (Revenue \$	<del>_</del>
II SI	PRESENTED VERMONT'S LARGEST VISUAL ARTS EVINCLUDED KID'S HOP WHICH WAS ATTENDED BY OSHOW, 500 ARTISTS AND 100 SITES WERE INVOLUTION OF THE SOUTH END OF BURLINGTON.	OVER 300 CHILDREN, STRUT FASHION	
C( W( E)	O (Code ) (Expenses \$ Including grants of \$ COLLABORATED WITH 2 ARTS ORGANIZATIONS TO WORKSHOP COVERING ISSUES RELATED TO BUSINE EXHIBITING THEIR WORK. ALSO PRESENTED A MRELATED TO THE ARTS IN BURLINGTON.		<del>_</del> )
	: (Code: ) (Expenses \$ including grants of \$	) (Revenue \$	
			•
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$	) (Revenue \$	
4e	e Total program service expenses ▶	c 990 co	_
		r QQN /oo	

## Form 990 (2011) GREATER PINE STREET BUSINESS 30-0256263 Checklist of Required Schedules

		_	Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			X
•	complete Schedule A	1_2	X	
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
3	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		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		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		X
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		x
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		x
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
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 169 If "Yes," complete Schedule D, Part VII	11b		X
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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	ļ
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		X
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, XII, and XIII is optional	12b		X
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
Ь	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	14b		x
_	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	140		
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	15		x
_	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	15		
6	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		x
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	.0		
•	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		x
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			├ <u></u> -
-	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		x
0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules (continued)

	The Office of Required School Continued,		V	No
24	Did the executation report more than \$5,000 of grants and other accustones to any government or organization	$\Box$	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II	21		x
	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			<del></del> -
22		22		x
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			<del></del>
23	·			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	23		x
24-	employees? If "Yes," complete Schedule J			
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	24a		x
_	through 24d and complete Schedule K. If "No," go to line 25	24b		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24c		
	to defease any tax-exempt bonds?	24d		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240		_
25a	· · · · · · · · · · · · · · · · · · ·	25a		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	256		
	If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	26		x
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	27		x
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	21		
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)	28a		х
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	20a		
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28b		x
	Schedule L, Part IV	200		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	28c		x
	was an officer, director, trustee, or direct or indirect owner? If Yes," complete Schedule L, Part IV	29		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	25		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	30		х
	conservation contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	31		x
••	Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	32		x
••	complete Schedule N, Part II	132		<del></del>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		x
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<del></del> -
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	34	х	
25-	IV, and V, line 1	35a	x	$\vdash$
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	- 33a		<del>                                     </del>
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	35b		x
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	335		-
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	36	1	
	related organization? If "Yes," complete Schedule R, Part V, line 2	30		$\vdash$
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,	37		x
20	Part VI	"	$\vdash$	<del>                                     </del>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	38	x	
	19? Note. All Form 990 filers are required to complete Schedule O	1 30	_ <del></del>	

Рa	rt V Statements Regarding Other IRS Fillings and Tax Compliance  Check if School Is O contains a response to any question in this Part V					$\Box$
	Check if Schedule O contains a response to any question in this Part V				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	5	ſ	103	1
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0		1	I
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	•			1	Ī
	reportable gaming (gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1	l			
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	4			Ī
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	rns?		2b	X	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)			1	Ī
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	ļ	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	<u> </u>	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other $\frac{1}{2}$	authonty				
	over, a financial account in a foreign country (such as a bank account, securities account, or other fir	nancial				
	account)?			4a	<del> </del>	X
b	If "Yes," enter the name of the foreign country					I
_	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial	Accounts			i	† •
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a 5b	+	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction for the large form 1996 T2	SHOIT		5c	+	<del>  ^</del>
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  Does the organization have annual gross receipts that are normally greater than \$100,000, and did the state of the state	20		30	+	<u> </u>
6a	organization solicit any contributions that were not tax deductible?	10		6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contribute	ons or		<u></u>	<b>†</b>	
-	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods				
	and services provided to the payor?			7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as				
	required to file Form 8282?	1		7c	ļ	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	<u> </u>			Ī
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e	+	<del>                                     </del>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr			<u>7f</u>	┿	<del> </del>
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7 <u>9</u>	_	<del>                                     </del>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		Form 1098-C7	<u>7h</u>	<del> </del>	<del> </del> —
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			1		•
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	J		8	1	Ť
9	organization, have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.				+	<del> </del>
a	Did the organization make any taxable distributions under section 4966?			9a	1	1
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				1
11	Section 501(c)(12) organizations. Enter		•			
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources					
	against amounts due or received from them )	11b				1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of For		1	12a	4—	1
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			142	+	1
а	Is the organization licensed to issue qualified health plans in more than one state?			13a	<del>' </del>	1
	Note. See the instructions for additional information the organization must report on Schedule O  Enter the amount of reserves the organization is required to maintain by the states in which					1
b	the organization is licensed to issue qualified health plans	13b				1
С	Enter the amount of reserves on hand	13c				1
14a	- · · · · · · · · · · · · · · · · · · ·			14a		X
h	If "Ves." has it filed a Form 720 to report these navments? If "No." provide an explanation in Schedul	e O		146	_	1

Form 990 (2011) GREATER PINE STREET BUSINESS 30-0256263 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule X O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 11 1a Enter the number of voting members of the governing body at the end of the tax year 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 11 Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customanly performed by or under the direct 3 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 6 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 X 7a one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following R X 8a The governing body? X 8b b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a 10a Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official 15b Other officers or 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 X 16a 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 take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure None List the states with which a copy of this Form 990 is required to be filed ▶ 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year 20 State the name, physical address, and telephone number of the person who possesses the books and records of the 404 PINE STREET ADAM BROOKS organization >

802-859-9222

VT 05401

BURLINGTON

30-0256263

Page 7

Part VII 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 organ	nization nor any	relate	ed or	ganı	zatio	ns co	ompe	ensated any current officer,	director, or trustee	
(A) Name and Title	(B) Average hours per week (describe	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	hours for related organizations in Schedule O)	Key employee  Officer  Institutional trustee Individual trustee or director		Highest compensated employee	Former	(W-2/1099-MISC)	(VV-2/1099-MISC)	organization and related organizations		
(1) MARIE DAVIS	1 00	<u> </u>			Г					
DIRECTOR	1.00	X	<u> </u>	_	<u> </u>		_	0	0	0
(2) GARY COFFEY DIRECTOR	1.00	x					i	0	o	0
(3) JON SHENTON					Г					
DIRECTOR	1.00	x	İ			ļ		0	O	0
(4) YVES BRADLEY										
DIRECTOR	1.00	x						.0	0	0
(5) SUZI WIZOWATY										
DIRECTOR	1.00	X						0	0	0
(6) TERESA DAVIS										
DIRECTOR	1.00	X			L.	L		0	0	0
(7) ROY FELDMAN										
EXEC DIRECTOR	40.00		<u> </u>	X	ᆫ	<u> </u>		27,072	0	2,069
(8) MARK WASKOW VICE PRESIDENT	1.00			x				0	o	
(9) ROB CHAPMAN										
PRESIDENT	1.00	<u> </u>	L_	X		ļ		0	0	0
(10) PAMELA POLSTON										
SECRETARY	1.00			X	Ц.		<u> </u>	0	0	0
(11) RICK NORCROSS VICE PRESIDENT	1.00			x				o	0	0
(12) TRACY STOLESE			$\vdash$	<u> </u>	_	T				<u>_</u>
TRRASURER	1.00			x		-		0	0	0
(13)										
(14)			-			-	-	-		

	990 (2011) GREATER I								30-025			ا	Page <b>8</b>
Par	(Å)	(B)	tees	s, Ke	- (0	C)	yees	s, ar	nd Highest Compensated (D)	(E)		F)	
	、 Namê and title	Average hours per week (describe hours for	bo of	x, unle ficer a	check ess pe nd a d	rson i Irecto	than o	an ee)	Reportable compensation from the organization	Reportable compensation from related organizations (W-2/1099-MISC)	amo ot compe	nated unt of her insation n the	
		related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		and r	ization related izations	
(15)													
(16)													
(17)													
(18)			-										
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
1b c	Sub-total  Total from continuation shee	ets to Part VII. S	ectio	on A				<b>&gt; &gt;</b>	27,072			2,	069
<u>d</u>	Total (add lines 1b and 1c)							<u></u>	27,072			2,	069
2	Total number of individuals (increportable compensation from				ose	liste	d abo	ove)	who received more than \$1	00,000 in 		·· · · · ·	<del></del>
3	Did the organization list any fo								vee, or highest compensated	l		Yes	
4	employee on line 1a? If "Yes," For any individual listed on line organization and related organ	1a, is the sum of	rep	ortab	le co	omp	ensat	tion		m the	3		X
5	individual  Did any person listed on line 1s	a receive or acci	ie co	mpe	nsat	ion f	rom :	any	unrelated organization or inc	dividual	4	+	X
Sec	for services rendered to the ortion B. Independent Contract		s,¨ c	omp	ete s	Sche	eaule	J 10	r such person		5	J.	
1	Complete this table for your fiv compensation from the organization	zation Report cor	nsate nper	ed inc	depe	nde r the	nt co	ntra enda	ir year ending with or within t	he organization's tax year			
	Name and	(A) d business address						-	Descrip	(B) tion of services		(C) Compens	ation
								-					
								-					
	<del>.</del>							-				-	
2	Total number of independent of received more than \$100,000								e listed above) who	0			<u> </u>
DAA			_								F	om 99	(2011)

Pa	rt V	III Statement of Reve	nue						
						(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
40.40			· .		-		revenue		512, 513, or 514
in the	1a	Federated campaigns	1a		04 570			I	
50	b	Membership dues	1b		24,578	1		I	
A,	С	Fundraising events	<u>1c</u>	-				I	
ar Figit	d	Related organizations	1d					1	
S.E	е	Government grants (contributions)	1e					I	
it S	f	All other contributions, gifts, grants,			1			I	
흎		and similar amounts not included above	1f		44,003			1	
dat	g	Noncash contributions included in lines 1a-	1f	\$	ŀ			İ	
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f			<b>•</b>	68,581			
					Busn Code			1	
Ne l	2a	ART & MERCHANDISE S	ALES			22,918			22,918
8	b	EVENT ADMISSIONS				9,055			9,055
iç.	С	REGISTRATIONS				4,970			4,970
Sen	đ	FEES INCOME				2,769			2,769
E	е								
Program Service Revenue	f	All other program service rever	ue						
ڇ		Total. Add lines 2a-2f			<b>•</b>	39,712			
	3	Investment income (including d	ividen	ds, interes	st,				
		and other similar amounts)			▶				
	4	Income from investment of tax-	exemp	t bond pr	oceeds 🕨				
	5	Royalties		•	▶ [				· <del>-</del>
		(ı) Real		(n)	Personal				
	6a	Gross rents 9	,300					Ī	
	b	Less rental exps						I	
			,300						
	d	Net rental income or (loss)			▶	9,300		Ţ	9,300
		Gross amount from (i) Securities		(1)	) Other				<u> </u>
		sales of assets other than inventory		†				I	
	h	Less cost or other						•	
	_ ~	basis & sales exps							
	_	Gain or (loss)		<del> </del>	-			I	
		Net gain or (loss)		I.	•			Ť	
		Gross income from fundraising ever	nte						
nue	Va	(not including \$	113		1			1	
ven		of contributions reported on line 1c)							
Re		See Part IV, line 18	3						
Other Reve		Less direct expenses	b						
₹		Net income or (loss) from fundi	-	evente				†	
		Gross income from gaming activities	-	CACLIES		<del> </del> "		1	
	Ja	See Part IV, line 19	,						
		Less: direct expenses	a h					l l	
		Net income or (loss) from gami	-	vitios				†	
			ny aci	VILLES					
	Tua	Gross sales of inventory, less	_					1	
		returns and allowances	a b			ì		1	
		Less cost of goods sold	_				:	Ī	
	C	Net income or (loss) from sales	or inv	епіогу	Busn. Code	<del>1101 11 11 11 11 11 11 11 11 11 11 11 11</del>	··· · · · · · · · · · · · · · · · · ·		<del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>
	4.4	Miscellaneous Revenue			Busn. Code	27 520	:	<u> </u>	27 520
	11a				<del>                                     </del>	27,538			27,538
	b	MISCELLANEOUS			<b> </b>	1,012	· · · · · · · · · · · · · · · · · · ·		1,012
	C	OTHER				32		+	32
	d	All other revenue			<u> </u>	20 500			
	e	Total. Add lines 11a-11d			<b>P</b>	28,582		<u> </u>	77 564
	<u> 12</u>	Total revenue. See instruction	S		<u> </u>	146,175	0	0	77,594

Form 990 (2011) **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			· · · · · · · · · · · · · · · · · · ·	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		· -	<del> · . · . · . · . · . · . · . · . · </del>	<del></del>
'	organizations in the U.S. See Part IV, line 21	2,125			
2	Grants and other assistance to individuals in				<del></del> .
4	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
,	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				<del>,</del>
5	Compensation of current officers, directors,				
J	trustees, and key employees	29,141			
6	Compensation not included above, to disqualified				
٠	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	35,031			
8	Pension plan accruals and contributions (include			—	
Ŭ	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits		<del></del>		
10	Payroll taxes	6,552			
11	Fees for services (non-employees)				
	Management				 
b	Legal	*****	<u></u>		
c	Accounting	3,175			
d	Lobbying	-			
e	Professional fundraising services See Part IV, line 17			•••	
f	Investment management fees				
g	Other	1,094			
12	Advertising and promotion	26,539			
13	Office expenses	621	<del>-</del>		
14	Information technology	1,415			
15	Royalties				
16	Occupancy	25,293			
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	22,817			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	109			
23	Insurance	859			
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	COST OF GOODS SOLD	10,021			
b	REPAIRS & MAINTENANCE	2,092	<u> </u>		
C	SALES TAX	744			
đ	STORAGE	240			
е	All other expenses	569			
25	·-	168,437	0	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation Check here ▶ ☐ if				
	following SOP 98-2 (ASC 958-720)	L			- 000

Part 2	Balance Sheet				
	•		(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing		15,825	1	1,786
2	Savings and temporary cash investments		6,664	2	
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net		8,800	4	
5	Receivables from current and former officers, directors, trust	ees, key			
	employees, and highest compensated employees Complete				
	Schedule L	<u> </u>		5	
6	Receivables from other disqualified persons (as defined und	er section			
	4958(f)(1)), persons described in section 4958(c)(3)(B), and				
	employers and sponsoring organizations of section 501(c)(9)				
<b>₹</b>	employees' beneficiary organizations (see instructions)	L		6	
Assets 2 2	Notes and loans receivable, net	<u>Į</u>		7	
₹   8	Inventories for sale or use	<u>į</u>		8	
9	Prepaid expenses and deferred charges			9	
10a	Land, buildings, and equipment cost or				
	other basis Complete Part VI of Schedule D	10a 19,693			
b	Less accumulated depreciation	10b 13,602		10c	6,091
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		180	15	180
16	Total assets. Add lines 1 through 15 (must equal line 34)		31,469	16	8,057
17	Accounts payable and accrued expenses		335	17	
18	Grants payable	ļ.		18_	
19	Deferred revenue	<u></u>	800	19	
20	Tax-exempt bond liabilities	_		20	
21	Escrow or custodial account liability Complete Part IV of Sci	ſ		21	
န္မ 22	Payables to current and former officers, directors, trustees, k				
≝	employees, highest compensated employees, and disqualified	ed persons			
Liabilities	Complete Part II of Schedule L	-		22	
23	Secured mortgages and notes payable to unrelated third par	L L		23	
24	Unsecured notes and loans payable to unrelated third parties	Г		24	
25	Other liabilities (including federal income tax, payables to rel				
	parties, and other liabilities not included on lines 17-24) Con	nplete Part X	800	0.5	800
	of Schedule D	-	1,935	25 26	800
26	Total liabilities. Add lines 17 through 25	and complete	1,933	20	300
ω l	,	and complete			
ğ	lines 27 through 29, and lines 33 and 34.		29,534	27	7,257
E 27	Unrestricted net assets	ŀ	25,331	28	7,257
g 28	Temporarily restricted net assets		29		
E 29	Permanently restricted net assets  Organizations that do not follow SFAS 117, check here	▶ □ and		23	
造		anu			
Net Assets or Fund Balances 22 23 30 31 32	complete lines 30 through 34.			30	
SSet 30	Capital stock or trust principal, or current funds  Paid-in or capital surplus, or land, building, or equipment fun	d		31	
S 31	Retained earnings, endowment, accumulated income, or oth		-	32	
	Total net assets or fund balances	ici iulius	29,534	33	7,257
33	Total liabilities and net assets/fund balances		31,469		8,057
34	rotal habilities and het assets/fullu balances		32,203		Form 990 (2011)

orm	990 (2011) GREATER PINE STREET BUSINESS 30-0256263			Pag	e 12			
Pa	rt XI 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		16,1				
2	Total expenses (must equal Part IX, column (A), line 25)	2		58,4 22,2				
3	Revenue less expenses Subtract line 2 from line 1							
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2	29,534				
5	Other changes in net assets or fund balances (explain in Schedule O)	5			<u>- 15</u>			
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		7,2	257			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response to any question in this Part XII				<u>l</u>			
	<u> </u>			Yes	No			
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		_	I				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			1				
	Schedule O			#				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		$\frac{\mathbf{x}}{\mathbf{x}}$			
b	Were the organization's financial statements audited by an independent accountant?		2b		<u>X</u>			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight							
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c					
	If the organization changed either its oversight process or selection process during the tax year, explain in			1				
	Schedule O			1				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			1				
	issued on a separate basis, consolidated basis, or both			1				
	Separate basis Consolidated basis Both consolidated and separate basis			I				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			į				
	the Single Audit Act and OMB Circular A-133?		3a		<u>X</u>			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the							
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b					
			Fon	m 990	(2011)			

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

### **Political Campaign and Lobbying Activities**

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

▶ See separate instructions.

2011
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

Nam	e of organization GREATER PINE STREET I	BUSINESS		Employer identificati					
	ASSOCIATION INC	- · <u>-</u>		30-02562					
Par	t I-A Complete if the organization is exem	pt under section 501(c)	or is a section	<u>527 organizatio</u>	<u>n.                                      </u>				
1	Provide a description of the organization's direct and indirec	t political campaign activities in F	Part IV						
2	Political expenditures			▶ \$					
3	Volunteer hours								
Par	t I-B Complete if the organization is exem	pt under section 501(c)	(3)	. ———					
1	Enter the amount of any excise tax incurred by the organization	tion under section 4955		▶ \$					
2	Enter the amount of any excise tax incurred by organization	managers under section 4955		▶ \$					
3	If the organization incurred a section 4955 tax, did it file Form	n 4720 for this year?			Yes No				
4a	Was a correction made?				Yes No				
*******	If "Yes," describe in Part IV			#04( \/a\					
Pai	t I-C Complete if the organization is exem	ipt under section 501(c),	except section	n 501(c)(3).					
1	Enter the amount directly expended by the filing organization	n for section 527 exempt function	1						
	activities			▶ \$					
2									
	527 exempt function activities   \$\Bigsir \\$ \\$								
3									
	line 17b ►\$								
4	4 Did the filing organization file Form 1120-POL for this year?								
5	5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing								
	organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter								
	the amount of political contributions received that were prom								
	as a separate segregated fund or a political action committee	e (PAC) If additional space is no	eded, provide inform	nation in Part IV	Г				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political				
				filing organization's	contributions received and promptly and directly				
				funds If none, enter -0-	delivered to a separate				
					political organization If				
					none, enter -0-				
(1)									
			-						
(2)									
			ļ	_ <del> </del>					
(3)									
(4)									
(5)			]						
			ļ <del></del>						
(6)									
		<u> </u>	<u> </u>		L				

Sched	ule C (Form 990 or 990-EZ) 2011 GREAT	ER PINE STE	REET BUSINES	SS	30-0256263	Page <b>2</b>
Pai	rt II-A Complete if the organi	zation is exemp	t under section 5	01(c)(3) and file	d Form 5768 (elec	
	*section 501(h)).					
4 (	Check ▶ ☐ if the filing organizati	on belongs to an	affiliated group (a	nd list in Part IV	each affiliated grou	ıp member's
	name, address, EIN,	expenses, and s	share of excess lob	bying expenditu	res).	
в (	Check 🕨 🔲 if the filing organizati	on checked box	A and "limited cont	trol" provisions a	pply.	
	Limits on Lo	bbying Expendi	tures		(a) Filing	(b) Affiliated
	(The term "expenditures"			<u> </u>	organization's totals	group totals
1a	Total lobbying expenditures to influence pu	blic opinion (grass roo	ots lobbying)			<del></del>
b	Total lobbying expenditures to influence a le	egislative body (direct	t lobbying)			
C	Total lobbying expenditures (add lines 1a a	nd 1b)				
d	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (add lir	es 1c and 1d)				
f	Lobbying nontaxable amount Enter the am	ount from the following	ng table in both			
_	columns		<u>.</u>			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxal	ble amount is:			
L	Not over \$500,000	20% of the amount on li	ne 1e			
Ĺ	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of th	ne excess over \$500,000			
L	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	ne excess over \$1,000,000			
Ļ	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,000			
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25%	of line 1f)		<u> </u>		
h	Subtract line 1g from line 1a If zero or less	, enter -0-				
i	Subtract line 1f from line 1c If zero or less,	enter -0-				
j	If there is an amount other than zero on eit	ner line 1h or line 1i, o	did the organization file	Form 4720		
	reporting section 4911 tax for this year?			· <del></del>	<del></del>	Yes No
		4-Year Averagi	ng Period Under	Section 501(h)		
	(Some organizations th				complete all of th	e five
			structions for line			
				<del></del>		. <u>.</u>
	LOD	bying Expenditi	ures During 4-Yea	ir Averaging Pe	<u> </u>	
	Calendar year (or fiscal year	(-) 0000	(1) 2000	(=) 2040	(4) 2014	(a) Tatal
	beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) Total
2a	Lobbying nontaxable amount					
	Labburg colleg amount					
D	Lobbying ceiling amount					
	(150% of line 2a, column(e))		<b>+</b>			1
C	Total lobbying expenditures					
-			1		·	1
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount					

Schedule C (Form 990 or 990-EZ) 2011

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

GREATER PINE STREET BUSINESS

30-0256263

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT file (election under section 501(h)).	d F	orm	5768		Page	
	(a	)	(t	)		
For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	es	No	Amo	ount		
Dunng 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  Volunteers?						
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?	$\dashv$					
d Mailings to members, legislators, or the public?	$\neg$				-	
e Publications, or published or broadcast statements?						
f Grants to other organizations for lobbying purposes?	ヿ					
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?						
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5 501(c)(6).	), o	rsec	tion			
001(0)(0).				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	1	х	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		X	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (answered "Yes."		f Par		3, is	3	
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).	İ	<b>a</b>				
a Current year	ŀ	2a 2b				
b Carryover from last year	- }	2c				
C Total  Aggregate amount reported in section 6033(c)(1)(A) notices of pendeductible section 163(e) dues	ŀ	3				
<ul> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the</li> </ul>	ł	<del>-</del>		_		
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	ı					
and political expenditure next year?	İ	4				
5 Taxable amount of lobbying and political expenditures (see instructions)	ŀ	5				
Part IV Supplemental Information						
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 II-A, and Part II-	B, lır	ne				

1 Also, complete this part for any additional information

Schedule C (Form 990 or 990-EZ) 2011 GREATER PINE ST.

Part IV Supplemental Information (continued)

**SCHEDULE D** (Form 990)

**Supplemental Financial Statements** 

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

	REATER PINE STREET BUSINESS		Employer	dendification number
	SSOCIATION INC		30-0	256263
	rt I Organizations Maintaining Donor Advised Fu	nds or Other Similar Funds or Ac		
• •	organization answered "Yes" to Form 990, Part I		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		(a) Donor advised funds	(k	) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that	the assets held in donor advised		
	funds are the organization's property, subject to the organization's exclu-			Yes No
6	Did the organization inform all grantees, donors, and donor advisors in w	_		
	only for charitable purposes and not for the benefit of the donor or donor			
	conferring impermissible private benefit?	,		Yes No
Pa	rt II Conservation Easements. Complete if the orga	nization answered "Yes" to Form 9	90. Part	
1	Purpose(s) of conservation easements held by the organization (check a		<u> </u>	
•	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically impo	ortant land	area
	Protection of natural habitat	Preservation of a certified historic		
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conserv	ration contribution in the form of a conservati	on	
	easement on the last day of the tax year			
				Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic structure inclu	ded in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/0	6, and not on a		
	historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, released, exti	nguished, or terminated by the organization	during the	
	tax year ▶			
4	Number of states where property subject to conservation easement is lo	cated ▶		
5	Does the organization have a written policy regarding the periodic monitor	oring, inspection, handling of		
	violations, and enforcement of the conservation easements it holds?			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing	ng conservation easements during the year		
	<b>&gt;</b>			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing co	enservation easements during the year		
	<b>▶</b> \$			
8	Does each conservation easement reported on line 2(d) above satisfy the	e requirements of section 170(h)(4)(B)		
	(i) and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIV, describe how the organization reports conservation easeme	•		
	balance sheet, and include, if applicable, the text of the footnote to the o	rganization's financial statements that descri	bes the	
_	organization's accounting for conservation easements	Historical Transcensor on Other Si	lasilas A	
Pa	organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to F		illillar A	isseis.
4		•	choot	<del></del>
12	If the organization elected, as permitted under SFAS 116 (ASC 958), no works of art, historical treasures, or other similar assets held for public e			
	public service, provide, in Part XIV, the text of the footnote to its financia		CE UI	
<b>.</b>	If the organization elected, as permitted under SFAS 116 (ASC 958), to		cheet	
U	works of art, historical treasures, or other similar assets held for public e			
	public service, provide the following amounts relating to these items			
	(i) Revenues included in Form 990, Part VIII, line 1		•	\$
	(ii) Assets included in Form 990, Part X		•	\$
2	If the organization received or held works of art, historical treasures, or o	other similar assets for financial dain provide	e the	<del>*</del>
•	following amounts required to be reported under SFAS 116 (ASC 958) re		<del>-</del>	
а	Revenues included in Form 990, Part VIII, line 1		•	\$
	Assets included in Form 990, Part X			\$

4 Describe in Part XIV the intended uses of the	e organization s endowinent idi	lus		
Part Vi Land, Buildings, and Equ	ipment. See Form 990,	Part X, line 10.		
Description of property	(a) Cost or other basis	(b) Cost or other basis	(c) Accumulated	(d) Book value
	(investment)	(other)	depreciation	
1a Land				
<b>b</b> Buildings				
c Leasehold improvements		5,400	69	5,331
d Equipment		14,293	13,533	760
e Other				
Total. Add lines 1a through 1e (Column (d) must	equal Form 990, Part X, columi	n (B), line 10(c) )	<b></b>	6,091

Schedule D (Form 990) 2011

Part VII	Investments—Other Securities. See Form 9		30-0256263	Page 3
•	(a) Description of security or category	(b) Book value	(c) Method o	f valuation
•	(including name of security)		Cost or end-of-ye	ar market value
(1) Financial	denvatives	_		
	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				•
(G)				
(H)				
(1)				
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 12.)	<b>•</b>		
Part VIII	Investments—Program Related. See Form	990, Part X, line 13.		
	(a) Description of investment type	(b) Book value	(c) Method o	f valuation
			Cost or end-of-ye	ar market value
(1)				
(2)				<u> </u>
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, col (B) line 13)	<b>&gt;</b>		
Part IX	Other Assets. See Form 990, Part X, line 15	•		
•	(a) Description			(b) Book value
(1)				
(2)			<del></del>	
(3)				
(4)				
(5)				
(6)				
(7)			<del>-</del>	
(8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, col (B) line 15)		<b>•</b>	
Part X	Other Liabilities. See Form 990, Part X, line	25.		
1.	(a) Description of liability	(b) Book value		
	income taxes		_	
	NT DEPOSIT	80	0	
(3)			_	
(4)			_	
(5)			_	

(1) Federal income taxes
(2) TENANT DEPOSIT
(3)
(4)
(5)
(6)
(7)
(8)
(9)
(10)
(11)
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Sche	dule D (Form 990) 2011 GREATER PINE STREET BUSINESS	30-025		Page <b>4</b>
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	<b>Audited Financial Sta</b>	atements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3		
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Pnor penod adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4 through 8	9		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		
Pa	art XII Reconciliation of Revenue per Audited Financial Statemen	nts With Revenue per		
1	Total revenue, gains, and other support per audited financial statements		1	<del>_</del>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1		
а	Net unrealized gains on investments	_2a		
þ	Donated services and use of facilities	2b		
C	Recovenes of pnor year grants	2c		
d	Other (Describe in Part XIV)	_2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	1 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	I	
þ	Other (Describe in Part XIV)	4b		
	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Pa	art XIII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses	. 1 1	· · · · · · · · · · · · · · · · · · ·
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 - 1		
	Donated services and use of facilities	2a	<b></b>	
	Pnor year adjustments	2b	<del> </del>	
С		2c	<b></b>	
d	, , , , , , , , , , , , , , , , , , ,			
	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	1 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	<del>-  </del>	
	Other (Describe in Part XIV )	4b	<del> </del>	
	Add lines 4a and 4b		4c	
5	······································	<u></u>		<del></del>
₽a	art XIV Supplemental Information			

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

30-0256263

Page 5

Part XIV Supplemental Information (continued)

SCHEDULE O' (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### 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.

2011
Open to Public Inspection

OMB No 1545-0047

Name of the organization

GREATER PINE STREET BUSINESS ASSOCIATION INC

Employer Identification number 30-0256263

Doing Business As - Additional Names
ASSOCIATION

Form 990 - Organization's Mission or Most Significant Activities
ENHANCE THE ECONOMIC VITALITY AND ECLECTIC MIX OF BURLINGTON, VERMONT'S
ARTS AND BUSINESS COMMUNITY.

PROMOTING THE UNIQUE BLEND OF ART, COMMERCE, INDUSTRY AND ENTREPRENEURIAL SPIRIT; PROVIDING AN INFLUENTIAL VOICE TO PROMOTE AND ENSURE OUR MEMBERS' COMMON INTEREST; AND INFORMING OUR MEMBERS OF ISSUES THAT AFFECT OUR COMMUNITY AND ACTIONS WE TAKE ON ITS BEHALF.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 REVIEWED AS DETERMINED BY THE BOARD.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

ANY CONFLICTS OF INTEREST ARE DISCLOSED AT REGULAR MEETINGS OF THE BOARD.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation PHOTOCOPIED VERSIONS OF THE ORGANIZATION'S BY-LAWS AND ARTICLES OF INCORPORATION ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Related Organizations and Unrelated Partnerships ▶ See separate instructions. SCHEDULE R (Form 990)

Open to Public Inspection OMB No 1545-0047 2011

▶ Attach to Form 990.

Employer Identification number 30-0256263

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) GREATER PINE STREET BUSINESS ASSOCIATION INC Department of the Treasury Internal Revenue Service Name of the organization

Part

	(a) Name, address, and EIN of disregarded entity	(b) Pnmary activity	(c) Legal domicile (state or foreign country)		(d) Total income	(e) End-of-year assets	(f) Direct controlling entity	ē.
(1)				;				
(2)								
(3)								
(4)								
(5)								
Part II	Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	omplete if the orgix year)	ganization answe	red "Yes" to For	m 990, Part IV, I	ıne 34 because ı	t had	
	(a) Name, address, and ElN of related ongenzation	(b) Primary activity	(c) Legal domicile (state	(d) Exempt Code section	(e) Public chanty status	(f) Direct controlling	(g) Section 512(b)(13) controlled entity?	b)(13) ntity?
			or foreign country)		(if section 501(c)(3))	entity	Yes	S N
(1) SEAU 404 BUR	SEABA EXHIBITIONS INC 404 PINE STREET BURLINGTON VT 05401	ARTS PRGRM	Ę	50103	7	N/A		×
(2)								
(6)								
(4)				:				
(2)								

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2011

93490 •

Page 2

30-0256263 GREATER PINE STREET BUSINESS Schedule R (Form 990) 2011

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

Schedule R (Form 990) 2011 (k) Percentage "ownership Percentage ownership Ξ (I) General or managing partner? Yes No Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Code V—UBI amount in box 20 of Schedule K-1 end-of-year assets (Form 1065) Share of 9 (h)
Disproportionate
alloc ? Yes Share of total Income Share of end-of-year assets ô (С согр, S согр, Type of entity or trust) (f) Share of total income Direct controlling (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections
512-514) entity € (d)
Direct controlling
entity foreign country) Legal domicile (state or ē (c) Legal domicile (state or foreign Primary activity Pnmary activity Vame, address, and EIN of related organization (a) Name, address, and EIN related organization Part IV § A ΙΞ 2 |ଇ 3 E 3 100 ₹

Schedule R (Form 990) 2011 ŝ × × × × × × × × × × × × × × × × Yes 13 4 10 19 1a 9 무 ę 1р 16 19 두 # = Ħ # ÷ = Method of determining amount involved € 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds Amount involved During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Transaction type (a-r) ê k Performance of services or membership or fundraising solicitations for related organization(s) 1 Performance of services or membership or fundraising solicitations by related organization(s) m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity Lease of facilities, equipment, or other assets from related organization(s) Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule i Lease of facilities, equipment, or other assets to related organization(s) Other transfer of cash or property from related organization(s) c Gift, grant, or capital contribution from related organization(s) p Reimbursement paid by related organization(s) for expenses o Reimbursement paid to related organization(s) for expenses Vame of other organization q Other transfer of cash or property to related organization(s) b Gift, grant, or capital contribution to related organization(s) d Loans or loan guarantees to or for related organization(s) n Sharing of paid employees with related organization(s) e Loans or loan guarantees by related organization(s) g Purchase of assets from related organization(s) h Exchange of assets with related organization(s) Sale of assets to related organization(s) 3 ₹ <u>છ</u> € ල 9

Page 4

GREATER PINE STREET BUSINESS Schedule R (Form 990) 2011

30-0256263

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile	(d) Predominant income (related,	(e) Are all partners section	(f) Share of total income	(h) Disproportionate allocations?		(j) General or managing	(k) Percentage ownership
		(state or foreign	unrelated, excluded from tax under section 512-514)	501(c)(3) organizations?		2		<b>•</b> •	
(1)		"		Yes		Yes	0	Yes	
(2)				<u>-</u>					
(3)									
(4)									
(5)									
(9)									
(2)									
(8)									
(6)							1		
(10)									
(11)									
							Sche	Schedule R (Form 990) 2011	990) 2011

Schedule R (Form 990) 2011 GREATER PINE STREET BUSINESS

30-0256263

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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

Form **4562** 

**Depreciation and Amortization** 

(Including Information on Listed Property)

Department of the Treasury Internal Revenue Service

► See separate instructions.

► Attach to your tax return.

Name(	s) shown on re		ER PINE STRE IATION INC	ET BUSIN	ESS	·				025	6263
	-	o which this form relates  ORGANIZATI									
Pa	ert l		ense Certain Prop					. =			
			any listed property	<u>, complete Pa</u>	rt V bet	ore you co	omple	ete Part I	·		500,000
1		amount (see instruction								1 2	300,000
2			ty placed in service (see			۵)				3	2,000,000
3			roperty before reduction i		iştrüction	S)				4	2,000,000
4			line 3 from line 2 If zero t line 4 from line 1 If zero or		rnod filma	congratoly co	o inetni	ctions		5	
5	Dollar limita		ption of property	less, enter -0 II ma		business use on			Elected cost	1.3	<del> </del>
<u>6</u>		(a) Descri	plion of property		(8) 5031 (	Decirios des cir		(5)			
7	Listed pro	perty Enter the amou	nt from line 29	·	<u> </u>		7				
8	•	•	9 property Add amounts	ın column (c), line	s 6 and 7	,				8	
9			smaller of line 5 or line 8	, , ,						9	
10	Carryove	of disallowed deducti	on from line 13 of your 20	010 Form 4562						10	
11	•		er the smaller of business		than zer	o) or line 5 (s	see ins	tructions)		11	
12	Section 1	79 expense deduction	Add lines 9 and 10, but	do not enter more	than line	11				12	
13			on to 2012 Add lines 9 a			<b>•</b>	13				
Note	: Do not us	e Part II or Part III bel	ow for listed property Ins	itead, use Part V							
Pa	art II	Special Depreci	ation Allowance a	nd Other Dep	reciation	on (Do no	t incl	ude liste	d prope	rty ) (S	See instructions)
14	Special de	epreciation allowance	for qualified property (oth	er than listed prop	perty) pla	ced in servic	е				
	during the	tax year (see instruct	ions)							14	
15	Property :	subject to section 168(	f)(1) election							15	
16	Other der	reciation (including A								16	109
_Pa	art III	<b>MACRS Deprec</b>	iation (Do not inclu	de listed prope	erty ) (S	<u>ee instruc</u>	ctions	<u>.)                                     </u>			
				Sec	tion A					,	<del></del>
17	MACRS	leductions for assets p	placed in service in tax ye	ears beginning bef	ore 2011					17	<del>-</del>
18	If you are ele		ced in service during the tax year							<u> </u>	
		Section E	3—Assets Placed in Se	1		ar Using the	e Gene	eral Depre	ciation S	ystem	
	(a) Cla	ssification of property	(b) Month and year placed in service	(c) Basis for depre (business/investmen onty-see instruc	nt use	(d) Recovery period	(e) (	Convention	(f) Meth	od	(g) Depreciation deduction
<u>19a</u>	3-year p	roperty					<u> </u>				<del></del>
b	5-year p	roperty					<u> </u>				
c	7-year p	roperty				<b></b>					
<u>d</u>	10-year p	roperty					<u> </u>				
<u>e</u>	15-year p	roperty		<del></del>							
f	20-year p	roperty					1				
_ g	25-year p	roperty				25 yrs	-		S/l		
h	Residenti	al rental		ļ		27 5 yrs	-	MM	S/l		
	property	<del></del>				27 5 yrs		MM	S/l		
i	Nonreside	ential real				39 yrs	-	MM	S/I		
	property						<u> </u>	MM	] <u>S/L</u>		
			-Assets Placed in Serv	rice During 2011	ıax Yea	r Using the	Altern	ative Depi			<u> </u>
	Class life		_			12	-		S/I		
	12-year					12 yrs	<del>  -</del>		S/I		
	40-year			<u> </u>		40 yrs	1	MM	S/I		<u> </u>
	art IV	Summary (See				-				Lat	· · · · · · · · · · · · · · · · · · ·
21		perty Enter amount fi		40			<b>.</b> .	. b		21	
22			2, lines 14 through 17, lin				⊏ntei	nere			109
	and on th	e appropriate lines of	your return Partnerships	and S corporation	ıs—see ı	nstructions		,		22	109

For assets shown above and placed in service during the current year, enter the