

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**

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)

2012

Open to Public

Department of the Treasury Internal Revenue Service

Inter	nal Rever	nue Service		ne organizatio	in may have to us	e a copy or thi	s return to s	ausiy su	ате героп	ing requ	nii eiii eii (2		#115	pection	
A	For the	e 2012 calenda	r year, or tax	year begin	ning 7/0)1	, 20)12, an	d endin	g	6/30		, 201		
В	Check if	applicable	С								Dı	Employer	Identification	Number	
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	Nam	ne change	P.O. BOX	587							E 1	[elephone	e number	·	
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	Ame	ended return									اهر	Gross rec	eints \$	383	888.
	\vdash	<u> </u>	F Name and add	ress of princip	al officer CH	RIS D'E	T.T.A		-	H(a)			for affiliates?	Yes	X No
	U	·	SAME AS C		C.					H(b) /	re all affiliat	tes includ	led? see instructions		No
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	8 Contributions and grants (Part VIII, line 1h)										Prior `	Year	Cı	urrent Ye	ar
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comp	olete Dec	claration of prepar	er (other than offic	er) is based o	n all information of	of which prepar	er has any k	nowledge	9		anomicage an	o benen, n	113 000, 0011000,		
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MONTPELIER, VT 05602

May the IRS discuss this return with the preparer shown above? (see instructions)

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

Form 990 (2012)

No

(802) 223-6261

X Yes

Phone no

TEEA0113L 12/18/12

Part III Statement of Program Service Accomplishments Check Schoolable Continuals are response to any question in this Part III		990 (2012) VERMONT BANKERS ASSOCIATION, INC.	03-0164	275	P	age 2
1 Breity describe the organization's mission: TO PROMOTE AN ENVIRONMENT HIGH FOSTERS A VIBRANT BANKING COMMUNITY, THUS SUPPORTING A PROSPEROUS VERMONT ECONOMY. 2 Did the organization undertake any significant program services during the year which were not listed on the prior form 900 or 990-627. 1 If Yes, 'Genetic these new services on Schedule O. 3 Did the organization coase conducting, or make significant changes in how it conducts, any program services? Yes No. 11 Yes, 'Genetic the program service of the complete organization coase conducting, or make significant changes in how it conducts, any program services? Yes No. 11 Yes, 'Genetic the organization coase conducting, or make significant changes in how it conducts, any program services? Yes No. 11 Yes, 'Genetic the organization of schedule O. 4 Describe the organization coase conducting, or make significant changes in how it conducts, any program services? Yes No. 11 Yes, 'Genetic the organization of schedule O. 4 Describe the organization coase conducting or make significant changes in how it conducts, any program services? Yes No. 11 Yes, 'Genetic the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported 4 Describe the organization of the program service accomplishments for such of the three largest program services? A Describe the organization of the program service of the p	Par	<u></u>				-
TO PROMOTE AN ENVIRONMENT WHICH FOSTERS A VIBRANT BANKING COMMUNITY, THUS SUPPORTING A PROSPEROUS VERMONT ECONOMY. 2 Dut the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990 E2? Yes No Yes, discarche these new services on Schedule 0. 3 Dut the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No Yes, discarche these changes on Schedule 0. 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Others, the total expenses, and revenue, it any, for each program service reported. 4 Cache Expenses Conducting organis of No Nevenue No Nevenue No Nevenue No No No No No No No N						<u> X</u>
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				Form	990	(2012)

			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? <i>If</i> '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		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
a	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	
k	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		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	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
€	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		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	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 and XII is optional	12 b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
k	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		X
15	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
16	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
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
k	olf 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Part IV Checklist of Required Schedules (continued)

		ŀ	res	NO
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		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 ⁷ If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23	х	
24 a	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 complete Schedule K. If 'No, 'go to line 25	24a		Х
Ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
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		
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest 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
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
	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):			
	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
k	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28ь		Х
	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
	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		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
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
34	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
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	o If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37	-	х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 192 Note. All Form 990 filers are required to complete Schedule O	38	Х	
BAA		Form	990 (2012)

- 41	Check if Schedule O contains a response to any question in this Part V				
				Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable.	1a 6			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors (gambling) winnings to prize winners?	and reportable gaming	1 c	Х	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-				
	ments, filed for the calendar year ending with or within the year covered by this return	2a 2			
b	If at least one is reported on line 2a, did the organization file all required federal employment	ļ.	2 b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see ins	-			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year	? [3 a		X
b	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		3 b		
	At any time during the calendar year, did the organization have an interest in, or a signature financial account in a foreign country (such as a bank account, securities account, or other fire the country of the coun	or other authority over, a nancial account)?	4 a		Х
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 Fi				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax	· .	5 a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter	r transaction?	5 b		Х
C	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, ar solicit any contributions that were not tax deductible as charitable contributions?	nd did the organization	6 a		Х
b	If 'Yes,' did the organization include with every solicitation an express statement that such co not tax deductible?	ntributions or gifts were	6 b		
	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 paservices provided to the payor?	artly for goods and	7 a		
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for wh	iich it was required to file			
	Form 8282?	11	7с		
	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d			:
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal t		7 e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit	•	7 f		
ç	If the organization received a contribution of qualified intellectual property, did the organization as required?	n file Form 8899	7 g		
۲	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form $1098\text{-}C^2$	organization file a	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, he holdings at any time during the year?	organizations. Did the ave excess business	8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9 a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9 b		-
10	Section 501(c)(7) organizations. Enter				
а	Initiation fees and capital contributions included on Part VIII, line 12	10 a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 ь			
11	Section 501(c)(12) organizations. Enter				
	Gross income from members or shareholders	11 a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11 ь			
12 a	Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of	l	12 a	i i	
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12 ь			
	Section 501(c)(29) qualified nonprofit health insurance issuers.				
	Is the organization licensed to issue qualified health plans in more than one state?		13a		
•	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 the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14 a	Did the organization receive any payments for indoor tanning services during the tax year?		14 a		X
Ł	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in S	chedule O	14b		

. 0,,,,	TOTAL PARTITION AND AND AND AND AND AND AND AND AND AN			- 3					
Par	Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chair	for nges	ın						
	Schedule O. See instructions Check if Schedule O contains a response to any question in this Part VI			X					
Sec	tion 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad subtraction is compatible or smaller or material of the governing body and properties of the governing body and properties of the governing body and properties of the governing body at the end of the tax year II a II a III a								
b	authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent 1 b 9								
2		2		Х					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х					
4	Did the organization make any significant changes to its governing documents								
	since the prior Form 990 was filed?								
5 6	CEE CCHEDITE O								
7 a	7 a 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?								
b	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?								
8	8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following								
	The governing body?	8 a	X						
b	Each committee with authority to act on behalf of the governing body?	8ь	X						
9	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	2 1	X_					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	enue	Coae Yes	e.) No					
10 a	Did the organization have local chapters, branches, or affiliates?	10 a	163	X					
	olf '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?	10 ь							
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		Х					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE 0								
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	X						
	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b		Х_					
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		Х					
13	Did the organization have a written whistleblower policy?	13		Х					
14	Did the organization have a written document retention and destruction policy?	14	Х						
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?		.,						
	The organization's CEO, Executive Director, or top management official SEE SCHEDULE O	15 a	X						
t	o Other officers of key employees of the organization SEE SCHEDULE O	15 b	Х						
16 a	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16 a		х					
ŀ	taxable entity during the year? 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	10 a		Α.					
_	organization's exempt status with respect to such arrangements?	16 b							
	List the states with which a copy of this Form 990 is required to be filed NONE								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) avainspection. Indicate how you make these available. Check all that apply.	lable	or pu	blic					
	Own website Another's website X Upon request Other (explain in Schedule O)								
19	the public during the tax year SEE SCHEDULE O								
	State the name, physical address, and telephone number of the person who possesses the books and records of the orga	nızatıc	n:						
BAA	JUDY RIBOLINI PO BOX 587 MONTPELIER VT 05601-0587 (802)229-0341 TEEA0106L 08/08/12	Form	990	(2012)					

Form 990 (2	2012) VERMONT	BANKERS	ASSOCIATION,	INC.	03-0164275	Page
Part VII	Compensation of	of Officers,	Directors, Truste	es, Key	Employees, Highest Compensated Employees, and	
	Independent Co	ontractors				_

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

- 1 a 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 $\cdot 0 \cdot$ in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) (A) (B) (F) Reportable compensation from related organizations (W-2/1099-MISC) Name and Title Estimated amount of other Reportable Average hours per week (list compensation from the organization (W-2/1099-MISC) compensation from the organization Individual nsututional employee any hours (ey employee highest compensated director for related organiza-tions and related organizations below trustee dotted trustee (1) GEOFFREY R. HESSLINK 0.25 0 X 0 0. DIRECTOR 0 (2) CHRIS D'ELIA 40 0 X X 125,820 0 30,563. PRESIDENT 0.25 (3) MICHAEL L. SEAVER 0. 0. DIRECTOR 0 X 0 0.25 (4) THOMAS J. GALLAGHER 0. DIRECTOR 0 Х 0 0 0.25 (5) JAMES D. BROWN DIRECTOR 0 X 0 0 0. (6) SARAH COWAN 0.25 DIRECTOR X 0 0 0. 0 0.25 (7) GARY W. GRAY 0 0 0. DIRECTOR 0 X (8) MARK S. YOUNG 0.5 0. 0 X 0. 0 CHAIRMAN Х (9) MATTHEW K. DURKEE 0.25 Х Х 0 0 0. SECOND VICE CHA 0 DAVID P. SILVERMAN 0.25 VICE CHAIRMAN Х Х 0 0 0. 0 (11) JUDITH H. RIBOLINI 40 Х 0 CORPORATE SECRE 0 64,000 24,035. (12)(13) (14)

Part VII Section A. Officers, Directors, Trust		y Er	npl			and	H	ighest Comper	sated Employee	s (co	nt)	
(A) Name and title	Average hours per week (list any	box	unle er ar	Pos heck ss pe	erson direct	than is bott or/trus	n an tee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	amo	(F) stimated unt of ot upensation	ther ion
	hours	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	01:	from the ganizatio nd related ganization	on d
(15)		-										
(16)												
(17)	 	-										
(18)												
(19)		-		L								
(20)												
(21)												
(22)												
(23)											·	
(24)												
(25)									-			
1 b Sub-total							>	189,820.	0.		54,5	
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	ı A						►	0.	0.		E 4 . E	0.
Total number of individuals (including but not limit	ed to tho	se lis	ted	abo	ve)	who	rec	189,820. eived more than \$		le com	54,5 pensat	
from the organization 1											V	Ma
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such	or or trust	tee, k	еу (emp	loye	e, or	hig	phest compensate	d employee	3	Yes	No X
4 For any individual listed on line 1a, is the sum of in the organization and related organizations greater such individual	reportable than \$15	e con 50,00	nper 0? <i>l</i>	nsat If 'Ye	ion a	and o	the <i>lete</i>	r compensation fr Schedule J for	om	4	Х	
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,	compens ' complet	satior e Sc	n fro hed	m a ule .	any u <i>J for</i>	ınrela suci	atec 1 pe	d organization or in	ndıvıdual	5	*	Х
Section B. Independent Contractors 1 Complete this table for your five highest compens	ated inde	pend	lent	con	trac	tors t	hat	received more that	an \$100,000 of			
compensation from the organization Report comp (A)	· ·	for t	he c	aler	ndar	year	en	(B)			r C)	
Name and business address Description of services Compensa									ensatio	<u> </u>		
							_					
							_					
Total number of independent contractors (including \$100,000 in compensation from the organization).	_	limit	ed t	o th	ose	listed	d ab	ove) who received	d more than			
\$100,000 in compensation from the organization	. 0											

•	Check if Schedule O contains a respon	nse to any questio	n in this Part VIII			
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
N S	1 a Federated campaigns 1 a				~~~~~~~	······································
중립	b Membership dues 1 b					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	c Fundraising events 1 c					
	d Related organizations 1 d					
S S	e Government grants (contributions).					
SIBUTE THER	f All other contributions, gifts, grants, and similar amounts not included above					
	g Noncash contributions included in Ins 1a-1f \$					
	h Total. Add lines 1a-1f	▶				
PROGRAM SERVICE REVENUE		Business Code			***************************************	
۳	2 a MEMBERSHIP DUES & ASSESSMENTS	561499	263,600.	263,600.		
2		561499	53,722.	53,722.		
욁		561499	30,168.	30,168.		
띯		561499	28,417.	28,417.		1
₹		51140	6,150.	6,150.		
<u></u>	f All other program service revenue	51140	0,130.	0,130.		
쭕	g Total. Add lines 2a-2f	>	382,057.			
\neg	3 Investment income (including dividends,	interest and	362,037.			
	other similar amounts)	Interest and ▶	1,831.	1,831.		
	4 Income from investment of tax-exempt b	ond proceeds	1,001.	1,001.		
	5 Royalties	.				
	(i) Real	(II) Personal				
	6 a Gross rents					
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)	<u> </u>	ĺ			
	7 a Gross amount from sales of (i) Securities	(II) Other				
	assets other than inventory					
	b Less cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)					

삨	8a Gross income from fundraising events (not including \$					
죝	of contributions reported on line 1c)					
9	See Part IV, line 18					
OTHER REVENU	b Less: direct expenses b					
5	c Net income or (loss) from fundraising ev	L				
		ents				
	9 a Gross income from gaming activities. See Part IV, line 19 a					
	b Less direct expenses b)				
	c Net income or (loss) from gaming activit	ies •				
	10 a Gross sales of inventory, less returns and allowances					
	b Less cost of goods sold b	L				
	c Net income or (loss) from sales of inven					
	Miscellaneous Revenue	Business Code	l			
	11a					
	D					
	C					
	d All other revenue					
	e Total. Add lines 11a-11d	•				
	12 Total revenue. See instructions	•	383,888.	383,888.	0.	0.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX (D) Do not include amounts reported on lines 6b, Total expenses Management and Fundraising Program service 7b, 8b, 9b, and 10b of Part VIII general expenses expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 189,000 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and section 403(b) 73,701 employer contributions) 38,683. Other employee benefits Payroll taxes 14,467. 11 Fees for services (non-employees) a Management **b** Legal 12,290. c Accounting **d** Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees 4,940. g Other (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch O). 12 Advertising and promotion 3,459 Office expenses Information technology 14 Royalties 26,491 16 Occupancy 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest Payments to affiliates 21 22 Depreciation, depletion, and amortization 12,431 2,710 23 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) 10,396 a GOVERNMENT RELATIONS 7,927. b VEHICLE EXPENSES 6,413. c EQUIPMENT RENTAL/MAINTENANCE 3,484. d PRESIDENTS EXPENSE <u>11,382</u>. e All other expenses 417,774. 25 Total functional expenses. Add lines 1 through 24e 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)

Part X'

Balance Sheet

Check if Schedule O contains a response to any question in this Part X (A) Beginning of year (B) End of year Cash - non-interest-bearing 1,195. 2,429 1 2 Savings and temporary cash investments 2 303,969 329,073. Pledges and grants receivable, net 3 Accounts receivable, net 2,587 4 1,653. 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 8 Inventories for sale or use Prepaid expenses and deferred charges. 10,395 9 <u>11,1</u>03. 10 a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10 a 63,533. 10 b **b** Less accumulated depreciation 10 c 51,102. 24,862 12,431. 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 Intangible assets. 14 14 15 Other assets. See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 344,242 16 355,455. 17 Accounts payable and accrued expenses 1,439 17 3,067 Grants payable 18 19 Deferred revenue 19 7,000. 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties. 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 25 <u>177,234</u>. 140,763 Total liabilities. Add lines 17 through 25 142,202 26 187,301. Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 202,040. 27 168,154. 28 Temporarily restricted net assets 28 29 29 Permanently restricted net assets R Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 33 202,040. 168,154. Total liabilities and net assets/fund balances 34 344,242. 34 355,455. BAA Form 990 (2012)

Forn	990 (2012) VERMONT BANKERS ASSOCIATION, INC.	<u> </u>		Рa	ge 12					
Pai	t 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	3	83,8	<u> 888</u>					
2	Total expenses (must equal Part IX, column (A), line 25)	2	417,774							
3	Revenue less expenses Subtract line 2 from line 1	3	-33,886							
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2	02,0	040.					
5	Net unrealized gains (losses) on investments	5								
6	6 Donated services and use of facilities 6									
7	7 Investment expenses 7									
8	Prior period adjustments	8								
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.					
10										
Pa	t XII Financial Statements and Reporting									
	Check if Schedule O contains a response to any question in this Part XII				X					
				Yes	No					
1	Accounting method used to prepare the Form 990 Cash X Accrual Other									
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O									
2 8	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		Х					
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both:	ewed on a								
	Separate basis Consolidated basis Both consolidated and separate basis									
-	Were the organization's financial statements audited by an independent accountant?		2 b	Х						
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both:	arate								
	X Separate basis Consolidated basis Both consolidated and separate basis									
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	of the audit,	2 c	Х						
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.									
3	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?									
	of 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required audit	3 b							
BAA			Form	990	(2012)					

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

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

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

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. P	Part IV. line 5 (P	Proxy Tax) or	r Form 990-EZ.	Part V. line 35a	(Proxy Tax	d. then
n are organization and merca tos	,	an () () ()	1049 144701	, , o, , , , , , , , , , , , , , , , ,	, all t, illic cou	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,

Name	of organization	Employer identifica	Employer identification number							
VE	RMONT BANKERS	S ASSOC	IATION, INC.		03-016427	5				
Pai	t I-A Complete	if the org	ganization is exempt under section	501(c) or is a sect	ion 527 organizatio	n.				
1	Provide a descript	ion of the c	organization's direct and indirect political ca	ampaign activities in F	Part IV					
2	Political expenditu	ires			▶ \$					
3	Volunteer hours									
Pai	t I-B Complete	e if the o	rganization is exempt under sect	ion 501(c)(3).						
1	Enter the amount	of any exci	se tax incurred by the organization under	section 4955	▶ \$					
2	Enter the amount	of any exci	se tax incurred by organization managers	under section 4955	▶\$					
3	If the organization	incurred a	section 4955 tax, did it file Form 4720 for	this year?		Yes No				
4 :	a Was a correction r	made?				Yes No				
ı	f 'Yes,' describe i	n Part IV				ا ليبيأ				
Pai	t I-C Complete	e if the o	rganization is exempt under sect	ion 501(c) , exce _l	ot section 501(c)(3)).				
1	Enter the amount	directly exp	pended by the filing organization for section	n 527 exempt function	activities >\$					
2	Enter the amount	of the filing	organization's funds contributed to other	organizations for secti	on 527 exempt					
	function activities			ŭ	► \$					
3	3 Total exempt function expenditures. Add lines 1 and 2 Enter here and on Form 1120-POL,									
	line 17b.				▶ \$					
4	Did the filing organ	nızatıon file	Form 1120-POL for this year?			Yes X No				
5	Enter the names,	addresses	and employer identification number (EIN) of For each organization listed, enter the ar	of all section 527 polit	ical organizations to whi	ch the filing				
	amount of political	l contributio	ons received that were promptly and direct	ly delivered to a sepai	rate political organization	n, such as a separate				
	segregated fund o	r a political	action committee (PAC). If additional spa	ce is needed, provide	information in Part IV.					
	(a) Name	•	(b) Address	(c) EIN	(d) Amount paid from filing	(e) Amount of political				
	• • •		,		organization's funds If none, enter 0	contributions received and promptly and directly				
						delivered to a separate political organization If				
		-				none, enter -0-				
(1)			-							
(2)				-						
				 						
(3)		٠								
										
(4)										
(5)		-								
(5)										
(6)										

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

Schedule C (Form 990 or 990-EZ) 2012

n	2	_	n	1	64	2	75
u		_	u		n 4		וכו

).	is exempt and section		d Form 5768 (election	n under
A Check ► ☐ if the filing of		ngs to an affiliated group (a	nd list in Part IV each	affiliated group member's	name,
1 1	_	d share of excess lobbying e			
B Check ► ☐ If the filing of	organization chec	ked box A and 'limited cont	rol' provisions apply		
· (The term 'e		ring Expenditures	d.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures	s to influence pul	olic opinion (grass roots lobb	oying)		!
b Total lobbying expenditures					
c Total lobbying expenditures					
d Other exempt purpose exp	enditures				
e Total exempt purpose expe	enditures (add lin	es 1c and 1d)			
f Lobbying nontaxable amou both columns	int Enter the am	ount from the following table	e in		
If the amount on line 1e, column	(a) or (b) is	The lobbying nontaxable a	mount is		
Not over \$500,000		20% of the amount on line 1e		ļ	
Over \$500,000 but not over \$1,000	,000	\$100,000 plus 15% of the excess of	over \$500,000	1	
Over \$1,000,000 but not over \$1,50	00,000	\$175,000 plus 10% of the excess of	over \$1,000,000	ł	
Over \$1,500,000 but not over \$17,0	000,000	\$225,000 plus 5% of the excess ov	ver \$1,500,000		
Over \$17,000,000 \$1,000,000					
g Grassroots nontaxable amount (enter 25% of line 1f)					
h Subtract line 1g from line 1a. If zero or less, enter -0-					
Subtract line 1f from line 1	c If zero or less	, enter -0-			
j If there is an amount other section 4911 tax for this ye	than zero on eitear?	her line 1h or line 1i, did the	e organization file Form	4720 reporting	Yes No
(Some		4-Year Averaging Period Unat made a section 501(h) ele	ection do not have to c		
	colum	ns below. See the instruction	ms for mics Lu mougi	ո 2f.)	
		ons below. See the instruction bying Expenditures During 4			
Calendar year (or fiscal year beginning in)					(e) Total
Calendar year (or fiscal year beginning in) 2 a Lobbying non-taxable amount	Lobi	bying Expenditures During 4	l-Year Averaging Perio	d	(e) Total
year beginning in) 2 a Lobbying non-taxable	Lobi	bying Expenditures During 4	l-Year Averaging Perio	d	(e) Total
year beginning in) 2 a Lobbying non-taxable amount b Lobbying ceiling amount (150% of line	Lobi	bying Expenditures During 4	l-Year Averaging Perio	d	(e) Total
year beginning in) 2 a Lobbying non-taxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying	Lobi	bying Expenditures During 4	l-Year Averaging Perio	d	(e) Total
year beginning in) 2 a Lobbying non-taxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures d Grassroots nontaxable	Lobi	bying Expenditures During 4	l-Year Averaging Perio	d	(e) Total
year beginning in) 2 a 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	Lobi	bying Expenditures During 4	l-Year Averaging Perio	(d) 2012	(e) Total

	(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	An	ount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of		-			
a Volunteers?					
 b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 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		. [_			
2 a 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		L			
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 5 section 501(c)(6).	501(c)(5), or 		· T·····	·
2.14				Yes	N
1 Were substantially all (90% or more) dues received nondeductible by members?			1		2
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	-	2
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		2
Part III-B Complete if the organization is exempt under section 501(c)(4), section 5 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (answered 'Yes.'	b) Part), or s III-A, l	ine 3, i	501(c	;)
1 Dues, assessments and similar amounts from members		1		263,6	50C
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).					
		2a		20,9	947
a Current year					
, , , , , , , , , , , , , , , , , , , ,		2 b			
a Current year	·			20,9	947
a Current year b Carryover from last year		2 b		20,9	
 a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and portion of the exceeds the amount on line 3. 		2 b 2 c 3			
 a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poexpenditure next year? 		2 b 2 c 3			C
 a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poexpenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 		2 b 2 c 3			C
 a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poexpenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information 	litical	2 b 2 c 3 4 5		20,9	<u>(</u>
 a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poexpenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 	litical	2 b 2 c 3 4 5	d group	20,9	(
 a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poexpenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 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, F 	litical	2 b 2 c 3 4 5	d group	20,9	(

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

VEI	RMONT BANKERS ASSOCIATION, INC	•	03-0164275
Par	t Organizations Maintaining Donor A	dvised Funds or Other Similar Funds or A	Accounts. Complete if
	the organization answered 'Yes'	to Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) 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 don are the organization's property, subject to the	or advisors in writing that the assets held in doi organization's exclusive legal control?	nor advised funds Yes No
6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit?	s, and donor advisors in writing that grant fund of the donor or donor advisor, or for any other	s can be used only purpose conferring Yes No
Par	t II Conservation Easements. Comp	lete if the organization answered 'Ye	s' to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by	the organization (check all that apply)	
	Preservation of land for public use (e.g., re	ecreation or education) Preservation	of an historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space	_	
2	Complete lines 2a through 2d if the organization last day of the tax year	n held a qualified conservation contribution in t	
			Held at the End of the Tax Year
	Total number of conservation easements		2 a
	Total acreage restricted by conservation easer		2 b
•	: Number of conservation easements on a certif	ied historic structure included in (a)	2 c
•	Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/06, and not on a histori	2 d
3	Number of conservation easements modified, tax year ►	transferred, released, extinguished, or terminat	ed by the organization during the
4	Number of states where property subject to co	nservation easement is located ►	
5	• • • •	garding the periodic monitoring, inspection, han	 adling of violations,Yes No
6	Staff and volunteer hours devoted to monitorin	g, inspecting, and enforcing conservation ease	ments during the year
7	Amount of expenses incurred in monitoring, in ▶\$	specting, and enforcing conservation easement	ts during the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements of sec	ction 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization rep include, if applicable, the text of the footnote to conservation easements	orts conservation easements in its revenue and the organization's financial statements that de	d expense statement, and balance sheet, and escribes the organization's accounting for
Pai	Organizations Maintaining Collect Complete if the organization ans	ti ons of Art, Historical Treasures, or O tl wered 'Yes' to Form 990, Part IV, line	her Similar Assets. e 8.
1 a	a If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIII, the text of the footnote to its finan-	s held for public exhibition, education, or resear	nue statement and balance sheet works of ch in furtherance of public service, provide,
ł	If the organization elected, as permitted under historical treasures, or other similar assets hel following amounts relating to these items	SFAS 116 (ASC 958), to report in its revenue s d for public exhibition, education, or research in	statement and balance sheet works of art, n furtherance of public service, provide the
	(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 ar amounts required to be reported under SFAS	rt, historical treasures, or other similar assets for 116 (ASC 958) relating to these items	or financial gain, provide the following
á	Revenues included in Form 990, Part VIII, line	1	▶\$
1	Assets included in Form 990, Part X		► \$

Schedule D (Form 990) 2012 VERMONT BANK	ERS ASSOCIATION,	INC.	03-016		Page 2
Part III Organizations Maintaining Colle	ctions of Art, Historic	al Treasures, or Utr	ner Similar Assets (continuea,	<u>) </u>
3 Using the organization's acquisition, accession items (check all that apply)			that are a significant us	e of its collec	ction
a Public exhibition		or exchange programs			
b Scholarly research	e [] Other				
c Preservation for future generations					
4 Provide a description of the organization's co Part XIII,				: In	
5 During the year, did the organization solicit o to be sold to raise funds rather than to be ma	r receive donations of art, aintained as part of the or	historical treasures, or ganization's collection?	other similar assets	Yes	No
Part IV Escrow and Custodial Arrangements.			Form 990, Part IV, line	9, or	
reported an amount on Form 99	90, Part X, line 21.				
1 a Is the organization an agent, trustee, custodi on Form 990, Part X?	an, or other intermediary	for contributions or othe	r assets not included	Yes	
b If 'Yes,' explain the arrangement in Part XIII	and complete the followin	g table	'		_
				Amount	
c Beginning balance			1 c		
d Additions during the year			1 d	·	
e Distributions during the year			1 e		
f Ending balance			[1f]		
2 a Did the organization include an amount on Fo	· · ·			Yes	∐ No
b If 'Yes,' explain the arrangement in Part XIII	Check here if the explant	tion has been provided i	n Part XIII		
Part V Endowment Funds. Complete if	the organization and	wared 'Ves' to Form	990 Part IV line	10	
(a) Curre			(d) Three years	(e) Four y	years
1 a Beginning of year balance	(, ,	1,,,,		 `` '	<u>'</u>
b Contributions				1	
c Net investment earnings, gains,				†··	
and losses					
d Grants or scholarships					
Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					
2 Provide the estimated percentage of the curr	ent year end balance (line	e 1g, column (a)) held a	S		
a Board designated or quasi-endowment	*				
b Permanent endowment ►	%				
c Temporarily restricted endowment ►	% 				
The percentages in lines 2a, 2b, and 2c shou	iid equal 100%				
3 a Are there endowment funds not in the posses organization by	ssion of the organization	hat are held and admini	stered for the	Yes	s No
(i) unrelated organizations				3a(i)	
(ii) related organizations				3a(ii)	_
b If 'Yes' to 3a(ıı), are the related organizations	· ·			3b	
4 Describe in Part XIII the intended uses of the					
Part VI Land, Buildings, and Equipme Description of property	(a) Cost or other basis	'art X, line 10. (b) Cost or other	(a) Assumulated	(d) Book	
Description of property	(investment)	basis (other)	(c) Accumulated depreciation	(u) Book	. value
1 a Land					
b Buildings					
c Leasehold improvements					
d Equipment		63,533.	51,102.	1	12,431.
e Other					
Total. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part X, c	olumn (B), line 10(c))	<u> </u>		12,431.
BAA			Sched	dule D (Form	990) 2012

Schedule D (Form 990) 2012 VERMONT BANKERS	ASSOCIATION, IN	IC. 03-0164275	Page :
Part VI) Investments - Other Securities. See f			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(A) (B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(I)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)	•		
Part VIII Investments - Program Related. S	ee Form 990, Part >	X, line 13. N/A	
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or	
		end-of-year market value	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)	-		
(7)		1	
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13)	•		
Part IX Other Assets. See Form 990, Part 3			
	Description	(b) Boo	ok value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column		>	
Part X Other Liabilities. See Form 990, Pa			
(a) Description of liability	(b) Book value	e	
(1) Federal income taxes			
(2) NET PENSION BENEFIT OBLIGATION	171,8		
(3) PAYROLL TAX LIABILITIES	5,3		
(4) ROUNDING		_1.	
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	► 177,2		
2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnot	te to the organization's financial	I statements that reports the organization's liability for uncertain	tax positions
under FIN 48 (ASC 740) Check here if the text of the footnote has been p	· · · · · · · · · · · · · · · · · · ·		
BAA	TEEA3303L 12/23/12	Schedule D (For	m 990) 2013

Schedule D (Form 990) 2012 VERMONT BANKERS ASSOCIATION, INC.		03-0164275	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements	With Revenue p	er Return	
1 Total revenue, gains, and other support per audited financial statements		1	383,888.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a Net unrealized gains on investments	2 a		
b Donated services and use of facilities	2 b		
c Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII)	2 d		
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1		3	383,888.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
b Other (Describe in Part XIII)	4 b		
c Add lines 4a and 4b		4 c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	383,888.
Part XII Reconciliation of Expenses per Audited Financial Statement	ts With Expenses	per Return	
1 Total expenses and losses per audited financial statements		1	417,774.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25			
a Donated services and use of facilities	2 a		
b Prior year adjustments	2 b		
c Other losses	2 c		
d Other (Describe in Part XIII.)	2 d		
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1	1 1	3	417,774.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
b Other (Describe in Part XIII) c Add lines 4a and 4b	4 b		
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	Y	4 c	417,774.
Part XIII Supplemental Information			417,774.
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, F ine 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also cor	nplete this part to pro	vide any additional inform	
BAA		Schedule D (Fo	rm 990) 2012

SCHEDULE J (Form 990)

Compensation Information

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

OMB No 1545-0047

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.
 ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

03-0164275

Department of the Treasury Internal Revenue Service Name of the organization

VERMONT BANKERS ASSOCIATION, INC

Employer identification number

rar	Questions Regarding Compensation				
				Yes	No
1 a	Check the appropriate box(es) if the organization provided an VII, Section A, line 1a Complete Part III to provide any relevant	y of the following to or for a person listed in Form 990, Part ant information regarding these items			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization reimbursement or provision of all of the expenses described a	on follow a written policy regarding payment or above? If 'No,' complete Part III to explain	1 b		
2	Did the organization require substantiation prior to reimbursin trustees, and the CEO/Executive Director, regarding the items		2	Х	
3	Indicate which, if any, of the following the filing organization u CEO/Executive Director Check all that apply. Do not check are establish compensation of the CEO/Executive Director, but ex	ny boxes for methods used by a related organization to			
	Compensation committee	X Written employment contract			
	Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensation committee			
	During the year, did any person listed in Form 990, Part VII, S or a related organization Receive a severance payment or change-of-control payment?	Section A, line 1a with respect to the filing organization	4 a		Х
b	Participate in, or receive payment from, a supplemental nonq	ualified retirement plan?	4 b		X
c	Participate in, or receive payment from, an equity-based com	pensation arrangement?	4 c		Х
	If 'Yes' to any of lines 4a-c, list the persons and provide the a	pplicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must comp	olete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, d contingent on the revenues of	id the organization pay or accrue any compensation			
а	The organization?		5 a		<u> </u>
b	Any related organization?		5 b		
	If 'Yes' to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section A, line 1a, d contingent on the net earnings of:	id the organization pay or accrue any compensation			
а	The organization?		6 a		
b	Any related organization?		6 b		
	If 'Yes' to line 6a or 6b, describe in Part III.				
7	For persons listed in Form 990, Part VII, Section A, line 1a, d payments not described in lines 5 and 6° If 'Yes,' describe in	id the organization provide any non-fixed Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or act to the initial contract exception described in Regulations section (No. 1) describe in Part III.	crued pursuant to a contract that was subject on 53 4958-4(a)(3)?			
	If 'Yes,' describe in Part III		8		
9	If 'Yes' to line 8, did the organization also follow the rebuttabl section 53 4958-6(c)?	e presumption procedure described in Regulations	9		

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

Schedule J (Form 990) 2012

Page 2

03-0164275

VERMONT BANKERS ASSOCIATION, INC. Schedule J (Form 990) 2012

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable columns (D) and (E) amounts for that individual.

	-	(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	compensation	(C) Retirement	(D) Nontaxable	(E) Total of	(F) Compensation
(A) Name and Title	l <u>.</u>	(i) Base compensation	(II) Bonus and incentive compensation	(III) Other reportable compensation	and otner deferred compensation	penellis	columns(B)(I)-(U)	deferred in prior Form 990
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15	(E)							
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16	(ii)		- 1					
ВАА			TEEA4102L 12/11/12	2			Schedule J	Schedule J (Form 990) 2012

Schedule J (Form 990) 2012

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

2012

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

VERMONT BANKERS ASSOCIATION, INC.	03-0164275
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DES	CRIPTION
MONITORED AND COMMUNICATED TO MEMBERS OTHER MATTERS (OF INTEREST INCLUDING FRAUDULENT
ACTIVITIES DIRECTED AT THE BANKING SYSTEM.	
FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBE	ERS OR SHAREHOLDER
THE ASSOCIATION IS COMPRISED OF BANKS AND BANKING INS	STITUTIONS DOING BUSINESS IN
VERMONT.	
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
FORM 990 IS REVIEWED BY THE PRESIDENT AND THE CORPORA	ATE SECRETARY OF THE BOARD
PRIOR TO FILING. COPIES ARE MADE AVAILABLE TO ALL BOX	ARD_MEMBERS.
FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROV	AL PROCESS - CEO, TOP MANAGEMENT
ALL COMPENSATION IS DETERMINED BY INDEPENDENT MEMBERS	S OF THE BOARD AND IS RECORDED
IN THE MEETING MINUTES.	
FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROV	AL PROCESS - OFFICERS & KEY EMPLOYEES
ALL COMPENSATION IS DETERMINED BY INDEPENDENT MEMBERS	S OF THE BOARD AND IS RECORDED
IN THE MEETING MINUTES.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS	PUBLICLY AVAILABLE
FORM 990 IS PUBLISHED AT GUIDESTAR.ORG AND IS ALSO AV	VAILABLE UPON REQUEST. ALL
OTHER DOCUMENTS ARE AVAILABLE UPON REQUEST.	
FORM 990, PART XII, LINE 2 - CHANGE OF OVERSIGHT OR SELE	CTION PROCESS
INDEPENDENT ACCOUNTANT SELECTED BY THE BOARD ANNUALLY	Y. FINANCIAL STATEMENTS
REVIEWED BY THE TREASURER AND THE BOARD PRIOR TO FINA	ALIZING.
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