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Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

Open to Public

Dep Inte	artment of t	he Treasury e Service	► Th	e organization	may have to us	e a copy of this	return to satis	sfy state reporti	ng requirem	ents.		- Open to Pu 	DIIC SII	
A			ar year, or tax y	year beginr	ing Jul	1	, 2012,	, and ending	Jun	30	1.220	, 2013	design of the Party is a	
В	Check if ap		C Name of organiz				ans Asso	ciation	, Inc.	D Employ	er Ident	tification Number		
	Addre	ss change	Doing Business			-			•	03-	0357	491		
	Name	change	Number and stre	eet (or PO bo	x if mail is not d	elivered to street	addr)	Room/s	uite	E Telepho	one num	ber		
	Initial									(80	2) 4	77-5075		
	Termu	-					State	ZIP code + 4		· · · · ·				
	Amen	ded return	Barre				VT	05641		G Gross r	eceipts	\$ 391,45	9.	
	Applic	ation pending	F Name and addre	ess of principal	officer:				H(a) Is this a	group retui	n for aff			
		Í	Danny Hale	e 14 Don	Camp Driv	e Barre	V'	T 05641	H(b) Are all if 'No,'	affiliates inc	luded?	Ye	s No	
1	Tax-exer		X 501(c)(3)	501(c) (sert no.)	4947(a)(1) or	527	II NO,	attach a list	(see ins	structions)		
J	Websi	te: ► N/F	1				<u> </u>		H(c) Group e	exemption n	umber 🏲	•		
ĸ	Form of	organization	X Corporation	Trust	Association	Other ►	L	Year of Formati	on 1998	3 Ms	State of I	legal domicile. V	T	
P	art 12.3	Summary	,	!!	<u> </u>					<u> </u>				
			e the organizat	ion's missic	on or most si	gnificant acti	ıvıtıes: Ιπ	mplement s	tatewio	de main	corri	idor and se	condary	
a	<u>t</u> :	rail sys	tems_incl	luding	trail ma	intenan	ce, saf	ety iss	ues an	d pub.	lic	educatio	n	
a C														
Activities & Goldense	 			. _		. _		· -						
S	2 Ch		► ☐ If the c									ets.	_	
చ్ల	3 Nu		ng members of ependent voting								3 4		5	
Cyg	5 To		of individuals er								5		5	
煜	6 To		of volunteers (e			RE	CEIV	[] es			6		2,598	
さ	7a To		business reve								7a		0.	
		t unrelated b	ousiness taxabl	e income fr	om Form 99	0 Ε πε β Υ	T 07 20	113 Q			7b			
]			_				S	Pı	rior Year		Current		
Constitution F. I.			ind grants (Par			00	OFN			417,3			5,944.	
2	1	-	ce revenue (Par								14.	<u></u>	<u>5,336.</u>	
₹	I .		ome (Part VIII,							5	40.		<u> 179.</u>	
			(Part VIII, colu							401 3		20	450	
90			- add lines 8 th					e 12)	 	421,3	192.	39.	1,459.	
	1		nılar amounts p									·····		
	1	14 Benefits paid to or for members (Part IX, column (A), line 4)										12	0 140	
8	15 Sa	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)								109,2	36.	13	9,140.	
Expenses	16a Pro		_					• • • • • • • • • • • • • • • • • • • •	t rita Brogadilla	.) it is to be a strong that the	10782002			
ă. X	b To	tal fundraisii	ng expenses (P	art IX, colu	mn (D), line	25) -		<u> </u>			arith.	1839 - 14 7		
ш	17 Oti	•	s (Part IX, colu							286,7		313	3,358.	
			. Add lines 13-				line 25)			395,9		452	2 <u>,498.</u>	
 •		venue less e	expenses. Subt	ract line 18	from line 12			· · · · · ·	<u> </u>	<u>25,3</u>			1,039.	
Net Assets of Fund Balance		<u></u>							Beginning	g of Curren		End of Y		
Asse	20 Tot		art X, line 16)	· · · ·		• • •				449,3			1,216.	
¥ 5	21 Tot		(Part X-line 26	' \					 	214,2			7,162.	
	ZZ IVE		und balances. S	Subtract line	e 21/from lin	e 20	· · · · · ·	··· ·· ·· ·	L	235,0	93.	174	4,054.	
		Signature			_;//									
Unde	er penalties o plete. Declar	of perjury, I dect ation of prepare	are that I have exar	nined this retui	rn, including acco	ompanying scheo which prepage?	dules and stater has any knowle	ments, and to the dge.	e best of my	knowledge	and beli	ef, it is true, corre	ct, and	
—		1	1	110140		 			V	Ol	201	12		
c:		Signature	of-officer -	M					Date	e 74	74			
Sig He	jii re	Dann	45											
110			y H&Te rint name and title				 -							
		Print/Type pre	parer's name		Preparer's sign	ature		Date		Check	ıf	PTIN	<u></u>	
D-	:A	1 .	hite CPA, I	מקי פקי	P 1	white	CPA	09/30/		self-employe	J	P0075092	3	
Pa	eparer	Firm's name						100/00/				_ 00 , 00 0 0 2		
	e Only	Firm's address								Firm's EIN	- ∩4-	-3366373		
	,	inin address	BARRE	HEK SIF	Tan	τ:	/T 0564	1	——	Phone no	(802		91	
Mar	the IRS	discuss this	return with the	nrenarer s	hown above?			<u> </u>			1002	X Yes	No	
<u> </u>			duction Act No					TEFA	0101 03/14	V13			0 (2012)	
	u			, ***	ha.a.a.								- \/	

Form 990 (2012)	Vermont ATV Spor	rtsmans Association, Inc	03-03	57491 Page 2
Part III States	nent of Program Se	rvice Accomplishments		
Check ı	f Schedule O contains a r	esponse to any question in this Part III	l <u></u>	
	e the organization's missi			
	=	corridor and secondary	,	
		trail maintenance, safe		ducation.
25455-005	, 2 7, 10 - 2, 10 - 2 - 2, 10 - 3 -		21 Tana 22 And Basta 20	
2 Did the organiz	ration undertake any sign	ificant program services during the year	ar which were not listed on the prior	
		· · · · · · · · · · · · · · · · · · ·	•	. Yes 😿 No
	be these new services on			· [] res K no
•		or make significant changes in how it o	anduots, any program por year?	□ vee □ ve
_	e these changes on Sch	•	orducts, any program services?	Yes X No
	-		area largest areasam comuses, es mar	sourced by overseas
Section 501(c)	(3) and 501(c)(4) organiz	vice accomplishments for each of its the ations and section 4947(a)(1) trusts are if any, for each program service repo	e required to report the amount of gra	nts and allocations to
4a (Code:) (Expenses \$	448,483, including grants of	\$() (Revenue	\$ 391,280.)
Implement	statewide main	corridor and secondary	trail systems includir	ng_trail
maintenar	ice, safety issu	es, and public education	n.	
-				
4 b (Code:) (Expenses \$	including grants of	\$) (Revenue	\$)
		. 		
				
4 c (Code:) (Expenses \$	including grants of	\$) (Revenue \$	§)
		· · · · · · · · · · · · · · · · · · ·		
				
	(Described 201	hadula O)		
	services. (Describe in Sc		\(\(\mathbb{C}\)=	•
	\$	including grants of \$) (Revenue \$)
	service expenses 🕨	448,483.		
AA		TEEA0102 08/08/12		Form 990 (2012)

03-0357491 Page 3 Partily Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Х Schedule A Х 2 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 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 Х 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. Х 5 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, Х 6 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' 8 Х 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 Х 9 10 X 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. a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule X D. Part VI 11 a Х 11 b Х 11 c Х 11 d Х e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X. 11 e 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 X 11 f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Х Schedule D, Parts XI, and XII . . 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and 12 b X Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 Х 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, Х 14b 15 Х 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 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 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, Х 18 lines 1c and 8a? If 'Yes,' complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' Х 19 complete Schedule G, Part III

20

20 b

X

b if 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

Form 990 (2012) Vermont ATV Sportsmans Association, Inc.

Part IV Checklist of Required Schedules (continued)

			Yes	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? 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? <i>If 'Yes,' complete Schedule J</i>	23		х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		х
ı	b 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		
(d 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		х
ı	b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		_ X
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):			20 25 C
i	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ı	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
(c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
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		X
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		X
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		X
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	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ŀ	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		x
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		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	
BAA		Form	990 (2	2012)

Form 990 (2012) Vermont ATV Sportsmans Association, Inc. Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	••••		<u>l</u>
			Yes	No
	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0		100 mg 84.11	
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	سنند	
2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 a	7 4 7 m		7. T.
	b if at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	5.11	ي د سروخ	100
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	1	X
	b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3 b		
4	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		х
	b If 'Yes,' enter the name of the foreign country: ►	***	. 4 v Vr. 1951	
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		3	
5	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter 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, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		х
	b if 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).	14.60		1427 1427
	a 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?	7 a		X
	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 which it was required to file	7 c		х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year	() () () () ()	ار اوس ایر اوس	为数
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
	as required?	7 g		
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h	- 44	8 G 8 JF 8
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	1000	N. Car	(4.14)
-	a Did the organization make any taxable distributions under section 4966?	9 a	Bene King	ئۇلگەكىلىنىدىد رايالىدىدىد
	b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:	N.	:000	in the
	a 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			
	Section 501(c)(12) organizations. Enter:	個層		
	a Gross income from members or shareholders			
1	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12	a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	b if 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	CHI ST	7.33.3	*lun
	Section 501(c)(29) qualified nonprofit health insurance issuers.		10 A.M.	
	a 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.		12.03	r XES
1	Enter the amount of reserves the organization is required to maintain by the states in		72	
	which the organization is licensed to issue qualified health plans	**************************************		
	Effect the difficulty of 100c1100 city and	14-	13 TE	<u>^&1</u> X
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		
	o If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O		990 (

Pa	rt VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below	ow, ar	nd fo	r
	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chai Schedule O. See instructions.	nges i	n	
	* Check if Schedule O contains a response to any question in this Part VI			🗷
Se	ction A. Governing Body and Management			T
1	a Enter the number of voting members of the governing body at the end of the tax year		Yes	No
•	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad	2	3, 13	
	of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		۱ ، ۱ رو	
	b Enter the number of voting members included in line 1a, above, who are independent 1 b	;	, ,	
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2		X
3		3		x
4	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
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?	7a	х	
	b Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or other persons other than the governing body?	7 b	X	5353
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	1.00	医肾	
	a The governing body?	8a	X	للتعطاط
	b Each committee with authority to act on behalf of the governing body?	8b		
	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		x
	ction B. Policies (This Section B requests information about policies not required by the Internal Rev		Cod	
<u> </u>	tion b. Folicies (This occitor b requests information about policies not required by the internatives	7	Yes	No
10	a Did the organization have local chapters, branches, or affiliates?	10a		x
	of '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?	10Ь		
11	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.	£.	2) (3	
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х	
	b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12c	x	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	a The organization's CEO, Executive Director, or top management official	15a	X	
1	Other officers of key employees of the organization	15 b	X	427.2-9
16	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			
	taxable entity during the year?	16 a		X
	o 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	16b	1.3	
500	organization's exempt status with respect to such arrangements?tion C. Disclosure	100		
	List the states with which a copy of this Form 990 is required to be filed >			
18	1000 (1000 (1000 (1000) 1000) (1000) (1000)	ılable f	or pul	blic
	W Own website			
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available 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 organ	zation.		
ı	Danny Hale 143 Mackville Road Hardwick VT 05843 (0	80)_2		
	TEEA0106 08/08/12	Form	aan r	2012

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Form 990 (2012) Vermont ATV Spo	ortsmar	ns A	ssc	ci	at	ion,	I	nc.	03-0357	7491 Page 7
Rarta Compensation of Officer Independent Contractors	s. Direc	tors,	Tru	ıste	es	, Key	En	nployees, Highes	t Compensated I	Employees, and
Check of Schedule O contains a	response	to any	que	stio	n in	this F	art '	VII		🛮
Section A. Officers, Directors, Tru	stees, K	(ey E	mp	loy	ees	s, an	dH	ighest Compensa	ted Employees	
1 a Complete this table for all persons requir organization's tax year.	ed to be li	sted.	Repo	ort c	omp	ensat	ion 1	for the calendar year o	ending with or within t	he
 List all of the organization's current of compensation. Enter -0- in columns (D), (E) 	ficers, dire , and (F) i	ectors, f no c	trus	tee:	s (w atıor	hethe	r ınd paid	ividuals or organization.	ns), regardless of an	nount of
 List all of the organization's current ke 										
 List the organization's five current high who received reportable compensation (Box organization and any related organizations. 	hest comp 5 of Form	ensate W-2	eđ e and/	mplo or B	oyee	s (oth of Fo	er th	nan an officer, director 1099-MISC) of more th	r, trustee, or key emp nan \$100,000 from the	loyee) e
 List all of the organization's former off of reportable compensation from the organization 	icers, key ation and	emplo any re	yee elate	s, a	nd h gan	ighes izatio	t cor 1s.	npensated employees	who received more to	han \$100,000
 List all of the organization's former dir organization, more than \$10,000 of reportab 	ectors or le compen	truste isatior	es ti 1 froi	hat r m th	rece le oi	ived, i ganiz	ın th atıor	e capacity as a forme n and any related orga	r director or trustee o inizations.	f the
List persons in the following order: individua employees; and former such persons.	l trustees	or dire	ector	s; ır	istiti	utiona	l trus	stees; officers; key em	nployees; highest com	npensated
Check this box if neither the organization	nor any r	elated	lorg	anız	atic	n con	pen	sated any current offic	cer, director, or truste	e
				(0	;)					
(A) Name and Title	(B) Average hours per	one bo	x, ùn!	ess p	ersor	more the start of	an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
_(1) Danny Hale	40.00						'		_	_
Executive Director		_X	\vdash					62,307.	0.	0.
(2) Bruce Durkee	2.00				١.,				•	
President (2) Ct.	2 00			Х			-	0.	0,	<u> </u>
(3) Steve Carlin Vice President	2.00			х				o.	0.	^
	2.00	 -	\vdash	^	-			0.1		0.
Treasurer	2.00		1 1	х				0.1	0.	0.
(5) Tracy Durkee	2.00	 		<u> </u>	_					
Secretary				х				0.	0.	0,
(6) Rusty Heath	1.00									
Board Member	[- -	х						0.	0.	0.
(8)										
(9)									·· ··· ·······························	
(10)					\dashv					

(11)

(12)

(13)___

Form 990 (2012) Vermont ATV Sportsmans A	Assoc	iat	<u>io</u>	<u> </u>	In	c			03-03574	91 Page 8
Part VII Section A. Officers, Directors, Trus		Key	En			es,	and	d Highest Con	pensated Em	ployees (cont)
,	(B)	İ			C) sition					
, (A)	Average hours	(do	not c	heck	more	than o	one	(D)	(E)	(F)
Name and title	per	offi	cer a	nd a	dırect	or/trus	tee)	Reportable compensation from	Reportable compensation from	Estimated amount of other
	(list any	or director	Ist	Officer	S	Highest compensated employee	흑	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the
	for related	Sirec No.	Ē	(전 (전	Key employee	o st	[₹			organization and related
	organiza - tions	Q 9	ᇗ		Ş	le S				organizations
	below dotted	usi	न्ध		8	8		1		
	line)	ď	8			sate	-[1
	<u> </u>	<u> </u>					L			
(15)	.	-			}]		
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(16)	- -	.								
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(18)	.	.						}		Ì
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(19)	.	.]								
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(21)	.	.]					
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(23)	- -	ı					ŀ			
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(24)	·]]		ļ		
<u></u>	1				<u> </u>					
(25)										
1 b Sub-total	<u> </u>	<u> </u>			<u> </u>		_	62,307.		
c Total from continuation sheets to Part VII, Section							▶	62,307.	0	0.
d Total (add lines 1b and 1c)	A		• •		•	, .	▶	62 307		 -
d Total (add lines 1b and 1c)	d to the	····	tod	abos	····	who r		02,307.	00 000 of reportal	. O.
from the organization	d to tho:	se 115	ieu -	abov	ve) v	WIIO I	ece	sived more than \$1	oo,ooo or reportar	ole compensation
non the organization										Yes No
2 0 11										Tes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such it			-	empi	oye	e, or	nıg	nest compensated	employee	3 X
·				-						Martines I de M
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t	portable han \$15	0.00	npen 0? <i>Ii</i>	ısatı f <i>'Ye</i>	on a	ina oi omple	tner <i>ete</i>	r compensation fro Schedule J for	om	
such individual			• • • •				٠.,			
5 Did any person listed on line 1a receive or accrue of	ompens	ation	froi	m ar	ny u	nrela	ted	organization or in	dıvıdual	
for services rendered to the organization? If 'Yes,' or	complete	Sch	edu	le J	for :	such	per	son	<u> </u>	. 5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensate	ad Indo				roote	20 46		received more than	- ¢100 000 of	
compensation from the organization. Report compe	ea inae; nsation	oenae for th	ent d ie ca	alen	dar ı	year	end	ling with or within	the organization's	tax year.
(A)								(B)		(C)
Name and business addres	ss							Description o		Compensation
	-							·		
										· · · · · · · · · · · · · · · · · · ·
2 Total number of independent contractors (including	but not	imite	ed to	tho	se l	sted	abo	ove) who received	more than	
\$100,000 in compensation from the organization										Characterist Acti

		Check if Schedule O	contains a resp	onse to any question	n in this Part VIII .	· · · · · · · · · · · · · · · · · · ·		<u>. </u>
\$,	***			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	b	Federated campaigns Membership dues Fundraising events Related organizations		89,821.	, -	· ·		
BUTIONS, THER SIM		Government grants (contributions) all other contributions, gifts, similar amounts not included		202,577.				() y ()
CONTRI AND O	g	Noncash contributions included Total. Add lines 1a-1f	d in Ins 1a-1f: \$		385,944.			
ᄬ				Business Code	303, 244.			i i i i i i i i i i i i i i i i i i i
PROGRAM SERVICE REVENUE	2 a b	Miscellaneous_	<u> Income</u>	900099	5,336.	5,336.	0.	0.
OGRAM SEF	d e f	All other program service	 ce revenue					
찙		Total. Add lines 2a-2f			5,336.		, , , , , , , , , , , , , , , , , , ,	
	3	Investment income (incother similar amounts)	luding dividend	s, interest and	179.	0.	0.	179.
	4	Income from investmen	t or tax-exempt	bona proceeus -				
	5	Royalties			. No. 1990 BR (Ph		74 : 162 1 8 1 -/;	Y 3 344
		Gross rents	(i) Real	(ii) Personal				
	С	Rental income or (loss)				1 1 4 2 4 3 7		
		Net rental income or (lo	ss)		altoritational faithful said on interest staids		200	de de la companya della companya della companya de la companya della companya del
			(i) Securities	(ii) Other	: 4. 35° 3 ~ 2° 9	- PAT & 5 1 5	er, 4 (5) 34 , 200	("in "the same " heller" (")
	7 a	Gross amount from sales of	(i) Codainas	(.,, 0.3.0.	w,	1 5 6 6 6	il i de di	
	b	assets other than inventory . Less: cost or other basis and sales expenses						
	С	Gain or (loss)				1944章 重世春。	10. 10. 10. 10. 10. 10. 10. 10. 10. 10.	海 多小手
	d	Net gain or (loss)						
ENUE		Gross income from function (not including . \$of contributions reported	traising events					Marite St.
OTHER REVENU		See Part IV, line 18		а	As the property of			
	b	Less: direct expenses .		b		1 me . 3 1 1 me .	i grand signal and and and a	المستعملات المستعملات
5		Net income or (loss) fro		events ►	Nicon with the control of the contro		- many processory or symposium months from an arrange of finding account by and a second	
		Gross income from gam	_					· · · · · · · · · · · · · · · · · · ·
	b	Less, direct expenses .		b[\$\$3 \hat{A} \h		i di a di	25 1t. ii . ii . ii
	С	Net income or (loss) fro	m gaming activ	rities .				
		Gross sales of inventory and allowances		a	, 14		Jack 18 grant	· · · · · · · · · · · · · · · · · · ·
		Less: cost of goods sold		D[12 4 2		<u> </u>	<u> </u>
ļ	С	Net income or (loss) fro				, , , , , , , , , , , , , , , , , , ,		
		Miscellaneous Reven	ue	Business Code	<u> </u>		* * **, **-1	10 1 mm 1 mm
	11 a							
	b						<u> </u>	<u> </u>
	С							
	_	All other revenue				18 1 (bo) 25	and the second of the second	
		Total. Add lines 11a-11d				· 通 · 1 · 1 · 1 · 1	 立い数 や 項 	f-a- 1 - 3
	12	Total revenue. See insti	ructions .	<u></u>	391,459.	5,336.	0.	179.

Part IX | Statement of Functional Expenses

Seci	Check if Schedule O contains a r			·····	1 1
Do r	not include amounts reported on lines 6b.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members			\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	The way of the Wall of the Wall of the Wall
5	Compensation of current officers, directors, trustees, and key employees	67,899.	67,899.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	55,438.	55,438.	0.	0.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	5,576.	5,576.	0.	0.
10	Payroll taxes	10,227.	10,227.	0.	0.
11					
	Management				
	Legal				
	Accounting	2,700.	2,700.	0.	0.
	Lobbying	30,065.	30,065.	0.	0.
	Professional fundraising services See Part IV, line 17			A Company of the	
	Investment management fees				
	Other, (If line 11g amt exceeds 10% of line 25, col-	66	65	0	
	umn (A) amt, list line 11g expenses on Sch O)	65.	65.	0.	0.
	Advertising and promotion	5,021.	5,021.	0. 0.	0.
13	Office expenses	1,859.	1,859.		
14 15					
16	Royalties	7,653.	7,653.	0.	0.
17	Travel	10,189.	10,189.	0.	0.
18	Payments of travel or entertainment	10,109.	10,103.	<u> </u>	·
.0	expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	9,176.		0.	0.
20	Interest	8,303.	8,303.	0.	0.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization		30,287.	0.	0.
23	Insurance Other expenses. Itemize expenses not	69,764.	69,764.	0.	0.
24	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)				
a	· ! <u>Telephone/Internet</u> _	4,663.	4,663.	0.	0.
	Property Tax	4,762.	4,762.	0.	0.
	Utilities	1,258.	1,258.	0.	0.
c	Professional Development	2,006.		0.	0.
e	All other expenses	125,587.	121,572.	4,015.	0.
25	Total functional expenses. Add lines 1 through 24e .	452,498.	448,483.	4,015.	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)				

Balance Sheet

Check if Schedule O contains a response to any question in this Part X ... (B) End of year (A) Beginning of year Cash - non-interest-bearing . . . 1 120,536 80,665. 2 Savings and temporary cash investments 11 3 3 Pledges and grants receivable, net 30,984 20,367. Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L ... 6 7 8 ጸ 9 8,251 7,866 10 a <u>385,402</u> b Less: accumulated depreciation ... 10b 289,555 10 c 302,318 Investments - publicly traded securities 11 11 Investments – other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 14 15 15 16 16 Total assets. Add lines 1 through 15 (must equal line 34) ... 449,337 411,216. 17 15,018 17 7,493 18 Grants payable 18 19 Deferred revenue 46,954 19 42,826. 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 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 Secured mortgages and notes payable to unrelated third parties ... 23 159,797 179,318. 23 Unsecured notes and loans payable to unrelated third parties ... 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . 25 25 26 214,244 237,162 Organizations that follow SFAS 117 (ASC 958), check here > | and complete lines 27 through 29, and lines 33 and 34. 27 27 Unrestricted net assets 235,093 174,054 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 32 Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances . 33 33 174,054 235,093 Total liabilities and net assets/fund balances . 34 449,337 411,216. Form 990 (2012) BAA

TEEA0111 01/03/13

Forr	n 990 (2012) Vermont ATV Sportsmans Association, Inc. 03-	035749	91	Pa	ige 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	3	91,4	159.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4	52,4	198.
3	Revenue less expenses Subtract line 2 from line 1	3		61,0	39.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		35,0	
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1	74,0	<u>)54.</u>
Pa	TXII				
	Check if Schedule O contains a response to any question in this Part XII				للر
				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	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:	on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
1	b Were the organization's financial statements audited by an independent accountant?		2b	х	l
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate		2.24	100	
	basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
•	of Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit,	2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			學的學句	
3 a	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Audit Act and OMB Circular A-133?	ngle · · · · · · · · ·	За		х
1	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the require or audits, explain why in Schedule O and describe any steps taken to undergo such audits	ed audit	3b		
BAA			Form	990 (2012)

TEEA0112 08/09/11

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public

Name of th	e organization						-	Employe	r identificat	tion number		
	nt ATV Sports							<u> </u>	357491			
			(All organizations) See i	nstruct	ions.		
.The orga	inization is not a privat	e foundation because	e it is: (For lines 1 throu	gh 11, cl	neck onl	y one bo	ox.)					
1	A church, convention	of churches or associ	ation of churches desc	ribed in s	section	170(b)(1)(A)(i).					
2	A school described in	section 170(b)(1)(A)	(ii). (Attach Schedule E	.)								
3	A hospital or a coope	rative hospital service	e organization describe	d in sect	ion 170((b)(1)(A)	(iii).					
4	A medical research o	rganization operated	in conjunction with a ho	ospital de	escribed	ın secti	on 170	(b)(1)(A)	(iii). Ente	er the hospi	tal's	
<u> </u>	name, city, and state	•										
5	170(b)(1)(A)(iv). (Cor	mplete Part II.)	a college or university		-	-		mental u	nıt descr	ibed in sec	tion	
6			vernmental unit describ									
7 🔀	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities											
8 _								_				
9	related to its exempt fu unrelated business tax (Complete Part III.)	unctions — subject to c able income (less secti	ertain exceptions, and (2 on 511 tax) from business	2) no mor ses acqui	e than 3 red by th	3-1/3% d e organiz	of its sup zation a	port from ter June	n aross u	nvestment ii	ncome	e and
10			xclusively to test for put							of one or m	ara ab	hliolu
11 [An organization organi supported organizatio supporting organizati	ns described in sectio	usively for the benefit of, t n 509(a)(1) or section 50 s 11e through 11h.	to perforn 09(a)(2).	n the tun See sec	ctions of tion 509	, or carr (a)(3). (y out the p Check the	purposes e box tha	t describes	the typ	e of
	a ∏Type I b	1.36	: Type III Functior			•		,		ınctionally ı	ntegra	ted
e [By checking this box, other than foundation section 509(a)(2).	I certify that the organization managers and other	anization is not controlle than one or more publi	ed directl cly supp	y or ind orted or	rectly by ganization	y one o	r more d cribed in	squalifie section	ed persons 509(a)(1) o	or	
f	If the organization recheck this box		mination from the IRS t		• • • • • •				• • • • • •	anızatıon,		
g	Since August 17, 200	6, has the organization	on accepted any gift or	contribu	tion fror	n any of	the fol	lowing p	ersons?			
								(.)			Yes	No_
	below, the gove	rning body of the sup	ontrols, either alone or toported organization? .		• • • • • • •		•••		• • • • •	. 11g (i)		
			oed in (i) above?							. 11g (ii)		
			described in (i) or (ii) ab							· 11g (iii)		
h	Provide the following	information about the	e supported organization	n(s).						·		_
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) is organiza column (i your go docur) listed in verning	(v) Did yo the organi column (i) supp	of your	organiz colun organize	s the ation in nn (i) d in the S ?	(vii) Amoun sup	t of mon port	etary
				Yes	No	Yes	No	Yes	No			
(A)								ļ <u></u>				
(B)												
(C)	<u></u>			 	 			 				
(D)												
(E)					ļ		-13 - 2	353 5				
Total											00 ===	- 0011
BAA Fo	r Paperwork Reduction	n Act Notice, see the	Instructions for Form 9	390 or 99	W-EZ.			Schedul	e A (For	m 990 or 9	90-EZ)	2012

Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	tion A. Public Support						
		-					
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	392,357.	455,188.	458,007.	417,338.	385,944.	2,108,834.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge.						
4	Total. Add lines 1 through 3	392,357.	455,188.	458,007.	417,338.	385,944.	2,108,834.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						2,108,834.
Sec	tion B. Total Support					,	
	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	392,357.	455,188.	458,007.	417,338.	385,944.	2,108,834.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	465.	268.	203.	540.	179.	1,655.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	3,032.	3,666.	2,464.	3,514.	5,336.	18,012.
11	Total support. Add lines 7 through 10						2,128,501.
12	Gross receipts from related active	ities, etc (see inst	ructions)			12	
13	First five years. If the Form 990 organization, check this box and	is for the organiza stop here	ition's first, second	d, third, fourth, or	fifth tax year as a	section 501(c)(3)	- [
Sec	tion C. Computation of Pu	blic Support P	Percentage				
14	Public support percentage for 20	12 (line 6, column	(f) divided by line	e 11, column (f))			
15	Public support percentage from 2	2011 Schedule A,	Part II, line 14.				97.71%
	a 33-1/3% support test — 2012. If and stop here. The organization	qualifies as a pub	licly supported or	ganization			- K
	b 33-1/3% support test — 2011. If t and stop here. The organization	qualifies as a pub	olicly supported or	ganization .			📋
	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a -and-circumstance	nd-circumstances' es' test. The orgar	test, check this b nization qualifies a	ox and stop nere , s a publicly suppo	rted organization	' now ►
	b 10%-facts-and-circumstances to or more, and if the organization in organization meets the 'facts-and	meets the 'facts-a d-circumstances' t	nd-circumstances' est. The organizat	test, check this basion qualifies as a	ox and stop here. publicly supported	Explain in Part IV Lorganization	now tne ►
18	Private foundation. If the organiz	ation did not ched	ck a box on line 13	s, iba, ibb, i/a, 0			0. or 000 EZ 2012
	_						

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support	stea below, piedst		'			
Calen	dar year (or fiscal yr beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include any unusual grants.)				1		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from						
b	disqualified persons	-					
c	Add lines 7a and 7b		·				
	Public support (Subtract line 7c from line 6.)					的學院的感	
Sec	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b						
-	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
	Total support. (Add Ins 9, 10c, 11, and 12)						
	First five years. If the Form 990 organization, check this box and			I, third, fourth, or f	fifth tax year as a	section 501(c)(3)	▶ □
	tion C. Computation of Pu			10 10			
	Public support percentage for 20	-				15	
	Public support percentage from 2				 	16	&
Sec	tion D. Computation of Inv				- (0)		
			naturan 19 amudad	by line 13 colum	n (f))	17	*
17	Investment income percentage for	•					
17 18	Investment income percentage fr	om 2011 Schedule	A, Part III, line 1	7		18	8
17 18 19 a	Investment income percentage fr 33-1/3% support tests – 2012. If is not more than 33-1/3%, check	om 2011 Schedule the organization of this box and stop	e A, Part III, line 1 did not check the t here. The organiz	7 oox on line 14, and ation qualifies as	d line 15 is more t a publicly support		sine 17 ►
17 18 19 a	Investment income percentage fr 33-1/3% support tests - 2012. If	om 2011 Schedule the organization of this box and stop the organization d , check this box ar	e A, Part III, line 1 did not check the there. The organized and check a bound stop here. The	oox on line 14, and attention qualifies as a on line 14 or line organization quali	d line 15 is more t a publicly support e 19a, and line 16 ifies as a publicly	han 33-1/3%, and I led organization	% ine 17

Schedule A (Form 990 or 990-EZ) 2012 Vermont ATV Sportsmans Association, Inc. 03-0357491 Page 4
Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
Other Income Part II, Line 10
Description: Miscellaneous Revenue
2008: 3032.
2009: 3666.
2010: 2464.
2011: 3514.
2012: 5336.

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

OMB No. 1545-0047

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.

Open to Public Inspection

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 35a (Proxy Tax), then

		rganizations: Complete Part III.										
	e of organization			1	Employer identification number							
Ve:	rmont ATV Sportsman	ns Association, Inc.		03-035749	91							
		rganization is exempt under secti			zation.							
		organization's direct and indirect political ca										
2	•			· · · · · · · · · · · · · · · · · · ·								
Pai	rt I-B Complete if the o	rganization is exempt under secti	on 501(c)(3).	<u> </u>								
1		ise tax incurred by the organization under s										
2	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 4720 for t	his year?		· · · Yes No							
4:	a Was a correction made?				Yes No							
1	b If 'Yes,' describe in Part IV.											
Pai	tel-C Complete if the o	rganization is exempt under secti	on 501(c), excep	t section 501(c)(3).								
		pended by the filing organization for section										
2	Enter the amount of the filing	organization's funds contributed to other o	rganizations for section	on 527 exempt								
_	function activities											
3	Total exempt function expendine 17b	ditures. Add lines 1 and 2. Enter here and d	n Form 1120-POL,	> \$	s							
4	Did the filing organization file	Form 1120-POL for this year?			Yes No							
5	Enter the names, addresses organization made payments amount of political contributions	and employer identification number (EIN) of the control of the con	f all section 527 politi ount paid from the fili or delivered to a separ	cal organizations to whi ing organization's funds ate political organization	ch the filing Also enter the							
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter .0							
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												

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

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 20	012 Vermont ATV	Sportsmans Asso	ciation, Inc.	03-035	7491 Page 2
	f the organization i	is exempt under se			
A Check ► if the file	ing organization belong	s to an affiliated group (and list in Part IV each	affiliated group member's	s name,
address	, EIN, expenses, and s	hare of excess lobbying	expenditures).		
B Check ► I If the file	ing organization checke	ed box A and 'limited cor	ntrol' provisions apply.		
(The terr	Limits on Lobbying n 'expenditures' means	g Expenditures s amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendit					
b Total lobbying expendit		· -			
c Total lobbying expendit	_				
d Other exempt purpose	expenditures				· · · · · · · · · · · · · · · · · · ·
e Total exempt purpose e					
f Lobbying nontaxable ar both columns	mount Enter the amour	nt from the following tabl	e in		
If the amount on line 1e, co		he lobbying nontaxable			
Not over \$500,000		% of the amount on line 1e.			
Over \$500,000 but not over \$	1,000,000 \$1	00,000 plus 15% of the excess	over \$500,000.		
Over \$1,000,000 but not over	\$1,500,000 \$1	75,000 plus 10% of the excess	over \$1,000,000.	\$ 24	
Over \$1,500,000 but not over	\$17,000,000 \$2	25,000 plus 5% of the excess	over \$1,500,000.	7 77	
Over \$17,000,000	\$1	,000,000.		* ,	ί .,
g Grassroots nontaxable					
h Subtract line 1g from lii					· ···
i Subtract line 1f from lin	ne 1c. If zero or less, er	nter -0			
j If there is an amount of section 4911 tax for this		line 1h or line 1i, did the	=	· -	Yes No
(Sor	me organizations that r	ear Averaging Period U nade a section 501(h) el below. See the instructi	ection do not have to co	omplete all of the five a 2f.)	
	Lobbyir	ng Expenditures During	4-Year Averaging Perio	d	
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))	Market Comments of the Comment				
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					
RΔΔ				Schedule C (Form	990 or 990-EZ) 2012

(election under section 501(h)).					
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes			(b) nount	
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?	X				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X				5 T
c Media advertisements?	 	Х			
d Mailings to members, legislators, or the public?		Х			
e Publications, or published or broadcast statements?		X			
f Grants to other organizations for lobbying purposes?		Х	· .		
g Direct contact with legislators, their staffs, government officials, or a legislative body?		Х			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X			
i Other activities?	X	(\$Par of Cat)		30,0	
	- 10 mg	Trees.	# 1 × 100 × 100 × 100 × 100	30,0	065.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	. Et abber fi	Loren tek	2005		
b If 'Yes,' enter the amount of any tax incurred under section 4912			<u> </u>		
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912		227	c \$66.5 p.m. 3.5 ps. 446	en value	Lander to
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			A PARTY OF THE	* Xinn	2
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or			
section 501(c)(6).				7.	1 40
4. W				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?				 -	-
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?					├
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?					<u> </u>
(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) Fanswered 'Yes.'	(c)(5) Part II	, or s I-A, I	ine 3, is	ж1(с))
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).					
a Current year		2a			
b Carryover from last year		2b			
c Total		2 c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			

4 if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	al 	4			
5 Taxable amount of lobbying and political expenditures (see instructions)		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 Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.	II-A (a	ffiliate	ed group li	st);	
Pt_II-B Line 1i Legal fees were paid to attorneys to monitor					
potential_tax_laws_that_could_impact_"All_Terrain_					
				~ 	

Schedule C (F	orm 990 or 990-E2) 201	Vermont ATV	/ Sportsmans	Association	n, Inc.	03-0357491	Page 4
Part IV	Supplemental	Information (c	ontinued)				
					-		

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number Vermont ATV Sportsmans Association, Inc. 03-0357491 Part Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) . . . Aggregate grants from (during year) . . . Aggregate value at end of year . 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 exclusive legal control? No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? . Part II Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements b Total acreage restricted by conservation easements 2 h c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?...... In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Partills Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV. line 8. 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

Schedule D (Form 990) 2012 Verm	ont ATV Spo.	rtsmans Asso	ciation, Inc.	03-035		Page 2
Partill Organizations Mainta	ining Collection	ons of Art, Histo	rical Treasures, o	r Other Similar Ass	sets (contir	nued)
3 Using the organization's acquisiti items (check all that apply):	on, accession, and	d other records, che	ck any of the following	that are a significant us	e of its collect	ion
a Public exhibition		d Loan	or exchange programs			
b Scholarly research		e 💹 Other				
c Preservation for future gener						
4 Provide a description of the organ Part XIII.		•			·IN	
5 During the year, did the organiza to be sold to raise funds rather th	ian to be maintaine	ed as part of the org	janization's collection?		Yes	No
Pant IV Escrow and Custodial reported an amount o	Arrangements. n Form 990, P	Complete if the cart X, line 21.	rganizatıon answer	ed 'Yes' to Form 990	, Part IV, lin	e 9, or
1 a is the organization an agent, trus on Form 990, Part X?	tee, custodian, or	other intermediary f	or contributions or othe	r assets not included	Yes	□No
b If 'Yes,' explain the arrangement						
Dir 100, explain the untangement	mir and van and oo		,		Amount	
c Beginning balance				1c		
d Additions during the year						
e Distributions during the year .						
f Ending balance						
2a Did the organization include an a	mount on Form 99	0, Part X, line 21?			Yes	No
b If 'Yes,' explain the arrangement	ın Part XIII. Check	here if the explanti	on has been provided ii	n Part XIII		
Part V Endowment Funds. C		organization an				
	(a) Current	(b) Prior yea	r (c) Two years	(d) Three years	(e) Four ye	ears
1 a Beginning of year balance						
b Contributions						
c Net investment earnings, gains, and losses				Į.		
d Grants or scholarships						
e Other expenditures for facilities and programs						
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentage	e of the current year	ar end balance (line	1g, column (a)) held as	s:		
a Board designated or quasi-endow	vment ►	¥				
b Permanent endowment ►	8					
c Temporarily restricted endowment	nt ►	 &				
The percentages in lines 2a, 2b,	and 2c should equ	al 100%.				
3 a Are there endowment funds not in organization by:	n the possession o	f the organization th	at are held and admini	stered for the	Yes	No
(i) unrelated organizations					3a(i)	
(ii) related organizations					3a(ii)	\top
b If 'Yes' to 3a(II), are the related o	rganizations listed	as required on Sch	edule R?		. 3b	
4 Describe in Part XIII the intended	uses of the organi	ization's endowmen	t funds.			
Partwil Land, Buildings, and	Equipment. Se	ee Form 990, Pa	rt X, line 10.			
Description of property	(a) (Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book v	/alue
1 a Land			27,575.		27	7,575.
b Buildings			183,500.	19,409.		4,091.
c Leasehold improvements			48,986.	4,335.	4 4	4,651.
d Equipment			16,661.	15,175.		1,486.
e Other			108,680.		64	4,515.
Total. Add lines 1a through 1e. (Column	n (d) must equal F	orm 990, Part X, co	lumn (B), line 10(c).) .		302	2,318.
BAA				Sched	ule D (Form 9	90) 2012

BAA

Schedule	D (Form 990) 2012 Vermont ATV Sport	smans Associat	ion, Inc.	03-03	57491	Page
Part VII	Investments - Other Securities. See	Form 990, Part X,	line 12			
	(a) Description of security or category (including name of security)	(b) Book value	(c)	Method of valuation end-of-year market	n: Cost or value	
(1) Finant	cial derivatives					
(2) Closel	y-held equity interests					
(3) Other						
(A)						
(B)						
			<u> </u>	,		
(0)						
(G) (H)						
(I) — — —		 				
	mn (b) must equal Form 990, Part X, column (B) line 12.) .				3)	
	Investments - Program Related. See		line 13.	T - 14 7 1-14-1		<u> </u>
I dia VIII	(a) Description of investment type	(b) Book value	(c)	Method of valuation	: Cost or	
				end-of-year market	value	
(1)			· · · · · · · · · · · · · · · · · · ·			
(2)						
(3)						
<u>(4)</u> (5)						
(6)						
(7)						
(8)						
(9)						
(10)						
Total. (Colui	mn (b) must equal Form 990, Part X, column (B) line 13.) 🕨		THE PERSON NAMED IN	第1748年後間	大学を選択・共	2017 700 P
Part IX					r	
	(a) De	scription			(b) Book	value
(1)					<u> </u>	
(2)			·		 	
(4)					 	
(5)				· -		
(6)						
(7)						
(8)						
(9)						
(10)						
	olumn (b) must equal Form 990, Part X, column (B		<u></u>	<u></u> ▶		
Part X	Other Liabilities. See Form 990, Part		\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	, , , ,		
	(a) Description of liability	(b) Book value		新兴·波克尔·加基。		添水源
	eral income taxes			And the second s	利塞 拉 \$	
(2)					اً الله الله الله الله الله الله الله ال	
(3)					William - I	SE TERM
(4) (5)				الأفور الأثار المراجعة والمهاج الأراجية المراجعة ومحرات والحارب الإراجية	r skich	The state of the s
(6)						
(7)				الشاها الاجهوات المراجعة ال		
(8)			- Shell the			
(9)						
(10)					rg handstyring in	
(11)					يُرُ اللَّهُ وَالْمُؤْمِّةُ مُعْمِيهِ	Ř. Co.h
	nn (b) must equal Form 990, Part X, column (B) line 25.)	. •			· · · · · · · · · · · · · · · · · · ·	
2. FIN 48 (A	SC 740) Footnote. In Part XIII, provide the text of the footnote to	o the organization's financial s			for uncertain tax	positions
under FIN 48	(ASC 740). Check here if the text of the footnote has been prov	idea in Part XIII	· · · · · · · · · · · · · · · · · · ·	······		000 000

Schedule D (Form 990) 2012 Vermont ATV Sportsmans Association, Inc. 0	3-0357491	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn	
1 Total revenue, gains, and other support per audited financial statements	1	391,459.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	Seri	
a Net unrealized gains on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants 2c		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	201 450
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	42 (42	391,459.
a Investment expenses not included on Form 990, Part VIII, line 7b	-	
b Other (Describe in Part XIII)		
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. 5	391,459.
RankXII Reconciliation of Expenses per Audited Financial Statements With Expenses per	<u> Return</u>	
1 Total expenses and losses per audited financial statements	1	452,498.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities		
b Prior year adjustments	_ ##	
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	452,498.
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		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	452,498.
Part XIII 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, line 4, Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any and a second secon	additional inform	ation.
ΒΔΔ	Schedule D (Fo	rm 990) 2012

001100000	(VCIMONE AT	V Sportsmar	13 A33CCIA	cron, ruc.		<u> </u>	, age .
Part XIII	Supplementa	Information ((continued)					
			. – – – – – – –					
					 -			
						-		
			. 					
					 _			
						. _		
								
			_					

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service	-	Attach to Form 990 or 990-EZ.		lisbeegon. Obsure strong
Name of the organization	' ' '		Employer identificat	ion number
Vermont ATV S	portsmans Association,	Inc.	03-0357491	:
Pt_VI,_Line_6	The organization b	nas members.		
Pt_VI,_Line_7	Yes, the members	elect_the_governing_boar	<u>rd</u>	
Pt_VI,_Line_7	Decisions of the	governing body is subject	ct to approval by	_members.
Pt_VI,_Line_l	lb The accountant prepa	ares the 990 and gives a cor	y to the govenning	body to review.
	After they review	the 990 they sign it ar	nd mail it in	
Pt_VI,_Line_1	oa The organization us	ses a comparability data	along with compar	ing local area
	organizations_comp	ensation to make their	determination	
Pt_VI,_Line_1	b The organization us	ses a comparability data	along with compar	ing local area
	organizations_comp	ensation to make their	determination.	
Pt_VI, Line_12	c Any conflicts are	noted at each meeting a	and dealt with at	_that_time
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Form **4562**

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172 2012

Department of the Treasury Internal Revenue Service (99)

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No 179

Name(s) shown on return Identifying number Vermont ATV Sportsmans Association, Inc. 03-0357491 Business or activity to which this form relates Form 990 / Form 990EZ Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 2 Total cost of section 179 property placed in service (see instructions) 2 3 4 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions ... 6 (a) Description of property 7 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7......... Я Tentative deduction. Enter the smaller of line 5 or line 8 9 9 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs) ... Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 Carryover of disaflowed deduction to 2013. Add lines 9 and 10, less line 12 ▶ 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the 14 15 Property subject to section 168(f)(1) election Other depreciation (including ACRS) ... Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A MACRS deductions for assets placed in service in tax years beginning before 2012 Section B — Assets Placed in Service During 2012 Tax Year Using the General Depreciation System (a) (b) Month and (C) Basis for depreciation (d) (e) (f) Method (g) Depreciation Classification of property (business/investment use only — see instructions) Recovery period deduction 19 a 3-year property 7,300. 5.0 yrs 200 DB **b** 5-year property HY 1,460. c 7-year property 35,752 10.0 yrs ΗY 200 DB 3,575 d 10-year property e 15-year property f 20-year property 25 yrs S/L g 25-year property 27.5 yrs S/L h Residential rental MM 27.5 yrs MM S/L property 39 yrs MM S/L i Nonresidential real S/L MM property Section C - Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System 20 a Class life S/L 12 yrs S/L 40 yrs S/L **c** 40-year MM Part IV Summary (See instructions.) 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions. 22 30,287

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

	m 4562 (2012)	Vermont A	ATV Sport	smans	Asso	ciati	on, l	nc.					03-0	35749	1	Page 2
Pa		Property (Inc	clude automob							rs, and	prope	rty use	d for ent	tertainm	ent,	
		on, or amuseme or any vehicle fo	•	re usina f	he stand	lard mile	eage rai	te or i	deducti	ına lea	se ext	oense. o	complete	e only 24	4a 24h.	
	· columns	(a) through (c)	of Section A,	all of Se	ction B,	and Sec	tion C i	f appl	licable.							
		n A – Deprecia			<u>-</u>										-	
24	a Do you have evi		t the business/	ınvestmei	nt use cla	imed?	Yes	_Ц	No 24	tb If 'Ye	es,' is th	e eviden	ce written?		Yes	No
	(a) Type of property	(b)	(c) Business/	(c Cost		Racic f	(e) or depreci	ation		f) overy		(g) ethod/	Den	(h) reciation		(i) lected
	(list vehicles first)	Date placed in service	investment	other		(busine	ess/invest		i .	nod		vention		duction	sect	ion 179
25	Special depres	iation allowance	percentage	listed are	north old	<u> </u>	use only)	durino	the te		and	т	 -			cost
25	used more than	1 50% in a quali	ified business	use (see	instructi	ons)	ervice i		y ti le ta	year		25	}			
26	Property used	more than 50%	ın a qualified l	business	use:											
		ļ				ļ							_			
						<u> </u>										
27	Property used 5	00% or less in a	qualified busi	ness use	:										1	
		 	 					\rightarrow					 		- 1 - 7	, ,
			 			 									-	
28	Add amounts in	column (h) lin	es 25 through	27 Enter	r here ar	d on lin	e 21 n	ane 1				28			- · · · · · · · · · · · · · · · · · · ·	
	Add amounts in		_					. go i				<u> </u>		. 29		<u>````</u>
	, , , , , , , , , , , , , , , , , , , ,			Section			on Use	of V				·. <u>·</u>				
Com	plete this section	n for vehicles us	sed by a sole p	roprietor	, partner	, or other	er 'more	than	5% ov	wner,' d	or rela	ted per	son. If y	ou provi	ded veh	icles
to yo	our employees, fi	irst answer the	questions in S	ection C	to see if	you mee	et an ex	ception	on to c	omplet	ting th	ıs secti	on for th	ose veh	icles.	
30	Total business/	investment mile	es driven	(a	i) cie 1	(b Vehic		Ι.,	(c)	,	(d			e)	(f) cle 6
-	during the year (do not include			Verii	Cie i	veriid	.ie 2	V	ehicle	3	Vehicle 4		veni	icle 5	Verii	cie 6
21	•	es)		}		<u> </u>		┼		-+			 		 	
31 32		illes driven during ti sonal (noncomm	-					 					 			
J_	•			L											<u> </u>	
33				1				į		ļ					1	
	lines 30 through	h 32		Yes	No	Yes	No	Ye	e I N	10	Yes	No	Yes	No	Yes	No
34	Was the vehicle	e available for p	ersonal use	103		103		1	+	-			1.03	1.0	103	110
•	during off-duty	hours?						<u> </u>					ļ	<u> </u>		
35	Was the vehicle	e used primarily or related perso	by a more										1	ł	i '	
36		cle available for											 	{	1	
30		cie available foi						<u> </u>					<u> </u>			
			C – Questions												-	
Ansv	wer these question owners or related	ons to determine	e if you meet a	n except	on to co	mpleting	Section	n B f	or vehi	cles us	sed by	employ	yees who	o are no	t more t	han
		· ···· ····													Yes	No
37	Do you maintail	n a written polic	y statement th		its all pe	ersonal u	ise of v	ehicle	es, ıncl	uding (commi	uting,			162	NO
38	Do you maintail				its nersc	nal use	of vehi	cles i	except	comm	utına.	by you	 r	••••		
50	employees? Se	e the instruction	ns for vehicles	used by	corporat	e officer	s, direc	tors,	or 1%	or mor	e own	ers				ļ
39	Do you treat all	use of vehicles	by employees	as perso	onal use	?										
40	Do you provide	more than five	vehicles to you	ur employ	ees, obt	aın ınfoi	mation	from	your e	mploye	ees ab	out the	use of t	ihe		
		etain the informa								• • • • •		• • • •				
41	Do you meet the Note: If your an	e requirements	concerning qu	alified au	tomobile	demon	stration <i>Section</i>	use?	See ı the co	instruct o <i>vered</i>	tions.) <i>vehicl</i>	 es	• • • • • • • • • • • • • • • • • • • •			
Day	rt VI Amorti					inpicto.										. بهر ^{و د} یر .
I ai	C VI AIIIOICI	(a)			(b)		(c)		T	(d)			(e)		(f)	
	Des	cription of costs		Date an	nortization egins		Amortizabl amount	е	}	Code section		Amo	ortization	1	Amortization for this yea	
					- Build		announ.						riod or rcentage			
42	Amortization of	costs that begin	ns during your	2012 tax	year (se	e instru	ctions):							,		
														<u> </u>		
									<u>l</u>				T			
43		f costs that bega			-			• • •		•	• •		43	 		
44	i otal. Add amo	ounts in column	(i). See the in	Struction		z0812 08		··· <u>·</u>	····	<u> </u>	<u> </u>	• • • •	44	<u> </u>	orm 456 2	2 (2012)
																_ (~~ '~)

03-0357491

Depreciation and Amortization Report

Vermont ATV Sportsmans Association, Inc.

Form 990 - / Form 990EZ

Form 4562

Tax Year 2012 ► Keep for your records

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation
DEPRECIATION												
Flail Mower		07/09/12	7,300		100.00			7,300	5.00	200DB/HY		1,460
Z35U Compact Excavator		11/26/12	35,752		100.00			35,752	10.00	200DB/HY		3,575
SUBTOTAL CURRENT YEAR			43,052	0		0	0	43,052			0	5,035
OFFICE EQUIPMENT		05/01/07	14,231		100.00			14,231	5.00	200DB/HY	13,434	0
2007 ATV		10/01/01	3,000		100.00			3,000	5.00	200DB/HY	2,827	173
2007 ATV		10/01/01	3,000		100.00			3,000	5.00	200DB/HY	2,827	173
TRAILER		10/01/01	2,000		100.00			2,000	5.00	200DB/HY	1,885	115
LAND		02/30/08	0	27,575	100.00							0
HQ BUILDING		02/30/08	183,500		100.00			183,500 39.00	39.00	SL/MM	14,704	4,705
BUILDING IMPROVEMENTS		06/14/10	26,277		100.00			26,277	39.00	SL/MM	1,376	674
Computer		01/10/10	1,544		100.00			1,544	5.00	200DB/HY	803	296
Gas Grill		07/20/10	291		100.00			291	5.00	200DB/HY	151	56
SUV		08/01/10	6,057		100.00			6,057	5.00	200DB/HY	3,150	1,163
Heating System		08/01/10	11,965		100.00			11,965	39.00	SL/MM	575	307
Adobe System	\int	08/31/10	449		100.00			449	5.00	200DB/HY	233	98
Water Heater		08/08/11	770		100.00			770	5.00	200DB/HY	154	246
Doors	\int	03/30/12	1,474		100.00			1,474	5.00	200DB/HY	295	472
Soft		05/14/12	147		100.00			147	3.00	200DB/HY	49	65
2012 Ford F-350		05/23/12	43,797		100.00			43,797	5.00	200DB/HY	8,759	14,015
Trailer		05/31/12	3,574		100.00			3,574	5.00	200DB/HY	715	1,144
Roof		05/31/12	4,500		100.00			4,500	39.00	SL/MM	14	115
Trailer	\int	06/11/12	4,200		100.00			4,200	5.00	200DB/HY	840	1,344
Patio		06/27/12	4,000		100.00			4,000	39.00	SL/MM	4	103
SUBTOTAL PRIOR YEAR			314,776	27,575		0	0	314,776			52,795	25,252
TOTALS			357 828	27 575				257 000			000	100 00
											77,130	
	\int											
	\int											

Code: S = Sold, A = Auto, L = Listed, C = COGS

FDIV3601 08/27/12

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03-0357491

Alternative Minimum Tax Depreciation Report

Vermont ATV Sportsmans Association, Inc. / Form 990EZ

Form 990 - ,

Form 4562

Tax Year 2012 ► Keep for your records

Asset Description C	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation	Adjustment/ Preference
DEPRECIATION													
Flail Mower	0	07/09/12	7,300		100.00			7,300	5.00	150DB/HY		1,095	365.
235U Compact Excavator	П	11/26/12	46,400		100.00			46,400	10.00	150DB/HY		3,480	95.
SUBTOTAL CURRENT YEAR			53,700	0		0	0	53,700			0	4,575	460.
OFFICE EQUIPMENT	0	05/01/07	14,231		100.00			14,231	5.00	150DB/HY	14,231		
2007 ATV	-	10/01/01	3,000		100.00			3,000	5.00	150DB/HY	2,750	250	-77.
2007 ATV	н	10/01/01	3,000		100.00			3,000	5.00	150DB/HY	2,750	250	-77-
TRAILER	1	10/01/01	2,000		100.00			2,000	5.00	150DB/HY	1,833	167	-52.
LAND	0	02/30/08	0	27,575 100.00	100.00								
HQ BUILDING	0	05/30/08	183,500		100.00			183,500	39.00	SL/MM	14,704	4,705	0.
BUILDING IMPROVEMENTS	٥	06/14/10	26,277		100.00			26,277	39.00	SL/MM	1,376	674	0.
Computer	0	01/10//0	1,544		100.00			1,544	5.00	150DB/HY	625	276	20.
Gas Grill	0	01/50/10	291		100.00			291	5.00	150DB/HY	118	52	4.
SUV	.0	08/01/10	6,057		100.00			6,057	5.00	150DB/HY	2,453	1,081	82.
Heating System	0	08/01/10	11,965		100.00			11,965	39.00	SL/MM	575	307	0.
Adobe System	0	08/31/10	449		100.00			449	5.00	150DB/HY	182	80	. 9
Water Heater	9	08/08/11	770		100.00			770	5.00	150DB/HY	116	196	50.
Doors	0	03/30/12	1,474		100.00			1,474	5.00	150DB/HY	221	376	.96
Adobe Software	0	05/14/12	147		100.00			147	3.00	150DB/HY	37	55	10.
2012 Ford F-350	0	05/23/12	43,647		100.00			43,647	5.00	150DB/HY	6,547	11,130	2,885.
Trailer	0	05/31/12	3,574		100.00			3,574	5.00	150DB/HY	536	911	233.
Roof	9	05/31/12	4,500		100.00			4,500	39.00	SL/MM	14	115	0.
Trailer	0	06/11/12	4,200		100.00			4,200	5.00	150DB/HY	630	1,071	273.
Patio	_	06/27/12	4,000		100.00			4,000	39.00	ST/MM	4	103	0.
SUBTOTAL PRIOR YEAR	_		314,626	27,575		0	0	314,626			49,702	21,799	3,453.
													- 1
TOTALS			368,326	27,575		0	0	368, 326			49,702	26,374	3,913.
	$\frac{1}{2}$												

Code: S = Sold, A = Auto, L = Listed, C = COGS, P = Passive

FDIV3701 08/27/12

Page 1 of 1

Vermont ATV Sportsmans Association, Inc.

03-0357491

Form 990 p 10: Part IX Statement of Functional Expenses

	Line 22 - Deprecia	tion, Depletion, a	and Amortizatio	n Smart Worksh	eet
1	To enter assets, QuickZoom to view a calculated report of QuickZoom to the Depreciation QuickZoom to Form 4562 for F	all depreciation info n/Amortization Rep	ormation for Form	990, 	
The following items carry to line 22 below:					
	Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
A B C	Depreciation	30,287.	30,287.	0.	0.

Supporting Statement of:

Form 990 p 10/Line 12 col (B)

Description	Amount
NSE Advertising	38.
SE Advertising	4,574.
NSE Apparel Advertising	409.

Supporting Statement of:

Form 990 p 10/Line 16 col (B)

Description	Amount
NSE Occupancy SE Occupancy	6,488. 1,165.
Total	7,653.

Supporting Statement of:

Form 990 p 10/Line 20 col (B)

Description	Amount
NSE Interest	814.
SE Interest	6,070.
NSE Auto Interest	1,419.
Total	8,303.

Supporting Statement of:

Form 990 p 10/Line 24 col (B)-2

Description	Amount
NSE Property Taxes	2,381.
SE Property Taxes	2,381.
Total	4,762.

Supporting Statement of:

All Other Expenses/Line 24e col (B) -4

Description	Amount
NSE Postage SE Postage	3,528. 1,746.
Total	5,274.

Supporting Statement of:

All Other Expenses/Line 24e col (B) -5

Description	Amount
NSE Printing SE Printing	4,343. 1,267.
Total	5,610.

Supporting Statement of:

All Other Expenses/Line 24e col (B) -14

Description	Amount
NSE Other	10,135.
SE Other	11,346.
Total	21,481.

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ Form 990, Page 10, Line 24e All Other Expenses (continued)

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Registrations	2,267.	2,267.	0.	0.
Mileage Reimbursement	10,521.	10,521.	0.	0.
Worker's Comp	2,839.	2,839.	0.	0.
Postage & Delivery	5,274.	5,274.	0.	0.
Printing & Reproduction	5,610.	5,610.		
Consultants	30,000.	30,000.	0.	0.
Public Outreach	81.	81.	0.	0.
Special Events	2,582.	2,582.	0.	0.
Dues & Subscriptions	910.	910.	0.	0.
Trail Maintenance & Development	27,058.	27,058.	0.	0.
Maps & Forms	4,353.	4,353.	0.	0.
Board Expenses	4,015.	0.	4,015.	0.
Law Enforcement	2,753.	2,753.	0.	0.
Other Expenses	21,481.	21,481.	0.	0.
Yamaha Grant Expense	5,843.	5,843.	0.	0.
Rounding				

Supporting Statement of:

Form 990 p 11/Line 17, column (A)

Description	Amount
Accounts Payable	2,559.
Accrued Payroll	4,934.
Total	7,493.

Supporting Statement of:

Form 990 p 11/Line 17, column (B)

Description	Amount
Accounts Payable	8,631.
Accrued Payroll	6,387.
Total	15,018.

Supporting Statement of:

Sch D, page 2/Other col (b)

Description	Amount
Vehicles	108,680.
Total	108,680.

Supporting Statement of:

Sch D, page 2/Other col (c)

Description	Amount
A/D Vehicles	44,165.
Total	44,165.