## 5 990 Form

## **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2024

Open to Public Inspection

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

Do not enter social security numbers on this form as it may be made public.

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

For the 2024 calendar year, or tax year beginning 2024, and ending . 20 Check if applicable: C Name of organization VERMONT MOUNTAIN BIKE ADVOCATES D Employer identification number 03-0356194 Address change Doing business as VERMONT MOUNTAIN BIKE ASSOCIATION Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number P.O. BOX 681 (802)342 - 7568Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/terminated WATERBURY, VT 05676 **G** Gross receipts \$1,335,106. Amended return H(a) Is this a group return for subordinates? Yes No Application pending F Name and address of principal officer: NICK BENNETTE, P.O. BOX 681, WATERBURY, VT 05676 H(b) Are all subordinates included? Yes No Tax-exempt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions. H(c) Group exemption number Website: WWW.VMBA.ORG Form of organization: X Corporation Trust Association Other 2001 M State of legal domicile: VT L Year of formation: Part I **Summary** Briefly describe the organization's mission or most significant activities: THE CENTRAL ORGANIZATION AND ITS CHAPTER SUBORDINATES ARE Activities & Governance DEDICATED TO PROMOTING TRAIL ADVOCACY THROUGH EDUCATION & YOUTH INVOLVEMENT, PLANNING, FUNDING, AND ESTABLISHING LANDOWNER RELATIONS 2 Check this box  $\Box$  if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) . . . . . . . . 11 4 Number of independent voting members of the governing body (Part VI, line 1b) . . . 11 54 5 5 Total number of individuals employed in calendar year 2024 (Part V, line 2a) 12 6 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. Net unrelated business taxable income from Form 990-T, Part I, line 11 0. **Current Year** 8 Contributions and grants (Part VIII, line 1h) . . . . . 1,271,470. 854,416 Revenue 60,639. 9 Program service revenue (Part VIII, line 2g) 75,478. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . . . 86. 110. 2,911. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 4,394. Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 934,398. 1,335,106. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . . 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 365,694. 310,288. Professional fundraising fees (Part IX, column (A), line 11e) . . . . . . 16a b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . . . 684,955. 994,512. 304,800. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,050,649. 19 Revenue less expenses. Subtract line 18 from line 12 . -116,251. 30,306. Assets or Balances **Beginning of Current Year End of Year** 20 232,561. 255,831. Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) . 1,909. 595. Net. Fund 22 230,652. 255,236. Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 05/05/2025 Sign Signature of officer Date Here NICK BENNETTE, EXECUTIVE DIRECTOR Type or print name and title Date PTIN Preparer's name Preparer's signature Check X if Paid self-employed JUSTIN J. BULL JUSTIN J. BULL 05/14/2025 P01267213 Preparer Firm's EIN DAVID L. CONNORS AND CO. P.C. Firm's name **Use Only** 

Phone no. (802)434-3030

May the IRS discuss this return with the preparer shown above? See instructions

PO BOX 1495, CONCORD, NH 03302