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Dej artment of the Treasury Internal Revenue Service

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 2008 Open to Public Inspection

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	_												
	<u>A</u> .	For the 2008 cal	endar ye	ear, or tax year beginning	, and e	nding							
	в (Check if applicable	Please	C Name of organization					D	Emplo	oyer identi	fication number	
	Π.	Address change	use IRS	BICYCLI	E TRANSPOR	TATION	ALLIA	NCE	: 1	•	-		
	二	-	iabel or	Doing Business As						03-	-1057	956	
	\sqcup	Name change	print or					1 _					
	\Box	Initial return	type. See	Number and street (or P O box if mail is not o	•			Room	/suite E		none numbe		
	\equiv		Specific	233 NW 5TH AVENU	<u>je</u>					503	3-226	-0676	
	\square	Termination	Instruc-	City or town, state or country, and ZIF	P + 4				Lo	Gross rece	erpts \$	1,423,536	
	X.	Amended return	tions	PORTLAND	OR	97209							
	云		F Name	e and address of principal officer					н	H(a) Is this a group return for			
	LJ.	Application pending	1	ISAN OTCENAS					"			□ 	
			1	3 NW 5TH AVE					l H	affiliat (b) Are al		m	
					07 070	00				included? Yes			
	_			PRTLAND	OR 972	09				If "No.	attach a list	(see instructions)	
	<u>.</u>	Tax-exempt statu		501(c) (3) ◄ (insert no)	4947(a)(1) or	527							
	<u>J</u>	Website: 🕨 🕏		BTA4BIKES.ORG					н	(c) Group	exemption nu	ımber 🕨	
	K	Type of organization	X Co	rporation Trust Association	Other •		L	Year of f	ormation 19	90	M State of	legal domicile OR	
			ummai	rv									
				the organization's mission or most sig	inificant activities:								
		1		TES HEALTHY, SUSTAINA	·	ידרפ פע ו	MAKTNG						
	8												
	an	BICA	CLIN	G SAFE, MORE CONVIENI	ENT AND MORE	ACCESS.	IBLE.						
	Activities & Governance												
	Š	2 Check th	ıs box	If the organization discontinu	ed its operations or	disposed of r	nore than 2	5% of	its assets.				
	Ŏ	3 Number	of votino	members of the governing body (Pa		·				3	17		
	ون در		_		•	46)				 	17		
	.ĕ	l	•	endent voting members of the govern	ning body (Part VI, II	ne 1b)				4			
	≅	5 Total nur	nber of e	employees (Part V, line 2a)						5	40		
	ĕ	6 Total nur	nber of v	volunteers (estimate if necessary)						6	457		
	•	7a Total gro	ss unrel	lated business revenue from Part VIII	I, line 12, column (C) 550				7a			
		1		siness taxable income from Form 99		RECE	EIVED		•	7b		0	
	—	D Not ame	latea ba	Siness taxable income nonit cim co	5 1, IIII 5 1 T			⊓ ∷	Prior Year	'''	С	urrent Year	
CO		8 Contribut	tions and	d grants (Part VIII, line 1h)	တ	0400 9	9 2040	181	1,102	734		,321,253	
	9	1			4	MAK 2	3 2010	H YI			=		
00	Revenue	_		revenue (Part VIII, line 2g)	A 3			HØ		,853		11,584	
=	ě	10 Investme	ent incon	me (Part VIII, column (A), lines 3, 4, a	ind 7d) L	222		1K		,254		5,337	
7	Œ	11 Other rev	venue (F	Part VIII, column (A), lines 5, 6d, 8c, 9	9c, 10c, and 11e)	OGDE	N. UT		24	, 633		<u>38,403</u>	
SCANNET		12 Total rev	enue—a	add lines 8 through 11 (must equal Pa	art VIII, column (A),				1,148	,474	1	,376,577	
ij	_	r		ar amounts paid (Part IX, column (A)		•			70	,493		72,983	
•		l .		or for members (Part IX, column (A),								· · · · · · · · · · · · · · · · · · ·	
100		l '	•	, , , , , ,	•	5 40V			710	476		060 122	
APR	S	1		ompensation, employee benefits (Pai		es 5–10)			118	,476		869,122	
	benses	16a Profession	nal fund	draising fees (Part IX, column (A), line	e 11e)								
"	a	b Total fun	draising	expenses (Part IX, column (D), line	25) 🕨	252,1	L83						
တ	Ä	17 Other ex	penses	(Part IX, column (A), lines 11a-11d, 1	l 1f-24f)				277	,830		526,981	
			•	Add lines 13-17 (must equal Part IX,					1,066		1	,469,086	
7 2010		1 '		· ·						, 675		-92,509	
	글	is Kevenue	iess ex	penses. Subtract line 18 from line 12	·	, , , , , _			Beginning of Y			nd of Year	
	ŝ	00 Tatalaaa	(D	+ V (inc. 40)						,216		361,349	
	SS	20 Total ass	-										
	Net Assets or	21 Total liab	ilities (P	Part X, line 26)						,317		41,959	
	ᅩ			id balances. Subtract line 21 from line	e 20				411	,899		319,390	
	F	art II Si	gnatu	re Block			_						
		Un	de penal	Ities of perjury, I declare that I have examin	ned this return, including	accompanying	g schedules a	nd state	ements, and to	the best of	of my knowle	edge	
				t is true, correct, and complete Declaration									
	Si	.n k	ΛH	1/4/1	Man					1			
			/ _}// !		70 1000								
	Hε	re • (. ,	ure of officer						Date	,	<i>1</i> .	
			\sim SU	ISAN OTCENAS			SECRE	TAF	KX		3/19/	110.	
	_		Type or	r print name and title	<u>.</u>						<u>'</u>		
	_				<u></u>		Date		Check if			r's identifying number	
	Pa	·A 1	eparer's nature	Jankstahn			1 4	1	self-	, _		tructions)	
		parer's	Halufe				3/11	110	employed	▶∟		-34-8626	
		· 1 _	m's name	JAMES E. R.						EIN	▶ 93	<u>-1309646</u>	
	Uŧ		elf-emplo		BIA, SUITE	400				Phone			
			dress, and		OR 97258					no 🕨	503-	295-3780	
	Ma	the IRS discus	s this re	eturn with the preparer shown above?						<u> </u>		Yes No	
	_					netructions						Form 990 (2008)	
	DA	For Privacy	ACT and	d Paperwork Reduction Act Notice,	, see me separate i	กรถ นับเบิกร์.						ronn 33U (2008)	

DA

Form 990 (2008) BICYCLE TRANSPORTA	TION ALLIANCE	93-1057956		Page 2
Part III Statement of Program Service	Accomplishments (see in	structions)		
 Briefly describe the organization's mission. 				
BTA CREATES HEALTHY, SUSTA				
BICYCLING SAFE, MORE CONVI	ENIENT AND MORE A	CCESSIBLE.		
2 Did the organization undertake any significant prog	ram services during the year which	were not listed on		
the prior Form 990 or 990-EZ?	_		∐ Yes	X No
If "Yes," describe these new services on Schedule				
Did the organization cease conducting, or make sign	philicant changes in how it conducts,	any program	С	
services?			Yes	X No
If "Yes," describe these changes on Schedule O	ob of the arrangement and there is a second			
4 Describe the exempt purpose achievements for ea	•			
Section 501(c)(3) and 501(c)(4) organizations and allocations to others, the total expenses, and rever				
allocations to others, the total expenses, and rever	ide, if arry, for each program service	reported.		
43 (Code:) (Expenses \$ 853 YOUTH AND OTHER EDUCATION:	3,828 including grants of \$	72,983) (Revenue \$)
	MUID DM1 TO MUID CO			
SAFER ROUTES TO SCHOOLS. CONTRACTOR FOR THE CITY OF	THE BTA IS THE SO			
SCHOOL PROGRAM. WORK INCI				
PEDESTRIAN SAFETY EDUCATION				
BICYCLING AND WALKING TO S	•			
TO 26 PORTLAND AREA SCHOOL		WAS INCVIDED		
BICYCLE SAFETY EDUCATION. WITH THE OREGON DEPARTMENT				
40 (Codo:) (Funosco 6 23°	7,809 including grants of \$) (Day 6		
40 (Code:) (Expenses \$ 23° ADVOCACY AND OUTREACH:	, COS including grants of \$) (Revenue \$,
THE BTA ADVOCATES IN THE C	CITY OF PORTLAND T	O INCREASE		
BICYCLING INFRASTRUCTURE A	AND PROGRAMS. THE	BTA WORKS TO		
PROTECT THE INTERESTS OF C	CYCLISTS IN ALL TR	ANSPORTATION		
PROJECTS. THE BTA WORKS WI				
EQUITABLE AND SAFE ENFORCE	EMENT OF ALL ROAD	USERS.		·
			-	
THE BTA SERVES AS THE BICY				
LEGISLATURE, WORKING TO PA				
PARTNERSHIP ELECTED OFFICE	ALS, OTHER LOBBYI	STS, AND		
		· · · · · · · · · · · · · · · · · · ·		
4 : (Code:) (Expenses \$	including grants of \$) (Revenue \$)
•				
				•
4 1 Other program services. (Describe in Schedule O.)		· 		
	ng grants of \$) (Revenue \$)	
4) Total program service expenses 🕨 \$	1,091,637 (Must equal Pa	art IX, Line 25, column (B))		
			Form 9 5	90 (2008)

Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2_	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete		**	
_	Schedule C, Part II	4	<u> </u>	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	_		
_	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			v
7	Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		<u> </u>
′	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	\vdash		
Ü	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part	- <u>°</u> -		
•	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		x
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
• •	Parts VI, VIII, IX, or X as applicable	11	x	
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14.	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
t:	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			_
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	_X_	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		_X_
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23		X
24.	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			37
	24b–24d and complete Schedule K If "No," go to question 25.	24a		X
ł.	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(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		_
(` 25:	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 ;	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	25-		x
h	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
h	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified	254		x
26	person from a prior year? If "Yes," complete Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	25b		
20	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, or	20		
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		x
	The state of the dispersion of the dispersion of the state of the stat	<u> </u>	990	_

ert IV Checklist of Required Schedules (continued)			
		Yes	No
During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
Have a direct business relationship with the organization (other than as an officer, director, trustee, or			Ė
employee), or an indirect business relationship through ownership of more than 35% in another entity			É
(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			Ė
Part IV	28a	X	
Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			ĺ
complete Schedule L, Part IV	28b		_X_
Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			l
professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	X	
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			l
conservation contributions? If "Yes," complete Schedule M	30		X
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			l
Part I	31		<u>X</u>
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			l
Schedule N, Part II	32		X
Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			ļ
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	ı	X
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			l
III, IV, and V, line 1	34		<u>X</u>
Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			l
Schedule R, Part V, line 2	35		_X_
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	j		l
organization? If "Yes," complete Schedule R, Part V, line 2	36		_X_
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			l
	During the tax year, did any person who is a current or former officer, director, trustee, or key employee: Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Esction 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Organization conduct more than 5% of its activities through an entity that is not a related organization	During the tax year, did any person who is a current or former officer, director, trustee, or key employee: Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV 28a Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV 28b Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 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 I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Is any related organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	During the tax year, did any person who is a current or former officer, director, trustee, or key employee: Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV 28c

Form 990 (2008)

VI

Pε	et V Statements Regarding Other IRS Filings and Tax Compliance				<u>-</u>	ugo .
			<u> </u>		Yes	No
1.	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1 1				
	U.S. Information Returns. Enter -0- if not applicable	1a	0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and report	table				
	gaming (gambling) winnings to prize winners?			1c	X	
2,	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	2a	40			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	•		2b	X	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see					
	instructions)					
3	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	У				ŧ
	this return?			3a		X
r	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4 ;	At any time during the calendar year, did the organization have an interest in, or a signature or other auth	•				
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	al				
	account)?			4a		X
ı	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bar	ık				
_	and Financial Accounts.			_		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_		5a	_	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	1?		_5b		Х
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity					
e.	Regarding Prohibited Tax Shelter Transaction?			5c		x
6≀ 1	Did the organization solicit any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contributions	or		6a		_^
•	gifts were not tax deductible?	O1		6b		
7	Organizations that may receive deductible contributions under section 170(c).			60		
	Did the organization provide goods or services in exchange for any quid pro quo contribution of more that	n				
٠.	\$75?			7a		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
1.	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			15		l
••	required to file Form 8282?			7c		x
(If "Yes," indicate the number of Forms 8282 filed during the year	7d				
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal state of the property of the p					ĺ
	benefit contract?			7e		X
8	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	>		7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as					
	required?			7h		х
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and secti	on				
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponso	ring				ĺ
	organization, have excess business holdings at any time during the year?			8		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.					
r	Did the organization make any taxable distributions under section 4966?			9a		X
ŧ,	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		X
10	Section 501(c)(7) organizations. Enter					ĺ
£	Initiation fees and capital contributions included on Part VIII, line 12	10a				ĺ
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		_		ĺ
11	Section 501(c)(12) organizations. Enter:	, ,				
Ð	Gross income from members or shareholders	11a		_		ĺ
t	Gross income from other sources (Do not net amounts due or paid to other sources against					ĺ
	amounts due or received from them)	11b		_		ĺ
12;	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	1 1		12a		
ļ.	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			L	Ł

Form 990 (2008) BICYCLE TRANSPORTATION ALLIANCE 93-1057956 Page 6 Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.) Section A. Governing Body and Management Yes No For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O See instructions Enter the number of voting members of the governing body 17 Enter the number of voting members that are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? Х 4 Did the organization become aware during the year of a material diversion of the organization's assets? 5 X 6 Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members X of the governing body? 7a Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7h Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b X Does the organization have local chapters, branches, or affiliates? If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 9b 10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations X must describe in Schedule O the process, if any, the organization uses to review the Form 990 10 11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies No Yes 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 X 12a Are officers, directors or trustees, and key employees required to disclose annually interests that could give X rise to conflicts? 12b Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe in Schedule O how this is done 12c 13 Does the organization have a written whistleblower policy? 13 14 Does the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? 15a Other officers or key employees of the organization? 15b Describe the process in Schedule O (see instructions) 16: Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X with a taxable entity during the year? 16a h If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure ▶ OR List the states with which a copy of this Form 990 is required to be filed 17 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

State the name, physical address, and telephone number of the person who possesses the books and records of the

233 NW 5TH AVE

OR 97209

503-226-0676 Form **990** (2008)

20

PORTLAND

organization: ▶ ROOPAL PATEL

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

Se. tlon A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers, key employees; highest compensated employees, and former such persons.

Check this box if the or	ganization did not compe	nsate	any (office	er, di	recto	r, tru	stee, or key employee		
(A)	(B)	Das	<i>(</i>		C)		-4-3	(D)	(E)	(F)
Name and Title	Average hours per week	or director	Institution	Officer	Key employee	R Highest compensated a employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
PAUL ADKINS		Ť								
D. RECTOR	1	X						0	0	0
TOHN BEASTON				}						
DERECTOR	1	X						0	0	0
''OMMY BROOKS										
DERECTOR	11	X		<u> </u>				0	0	0
FIUGH BYNUM										
DIRECTOR	1	X						0	0	0
DREW CORRIGA	1									·
TREASURER	1	X		X				0	0	0
HARY FETSCH										
D :RECTOR	1	X						0	0	0
STEPHEN GOME	Z	1								
VECE PRES	1	X		X				0	0	0
JEFF KNAPP										
DERECTOR	1	X						0	0	0
COM KNIPE										
DERECTOR	1	X						0	0	0
DANIEL MCGIN	NIS	-								
DERECTOR	1	X				_		0	0	0
JIM MEAKIN										
DERECTOR	1	X		<u> </u>		<u> </u>		0	0	0
TIM MIDDAUGH										
DERECTOR	1	X						0	0	0
SUSAN OTCENA	S									- -
SECRETARY	1	X						0	O	0
DOUG PARROW	 _									
DERECTOR	1	X	L	L.	L	L	L	0	0	0
MANCY PAUTSO	Н			_	_					
D::RECTOR	1	X					L	0	0	0
AUSTIN RAMSI	AND									·
DERECTOR	1	X	<u> </u>			L	L	0	0	0
MARY ROBERTS										· =
CHAIR	1	X		X			L	0	0	0

Pa	art VII Section A	. Officers, Directors, Trus	stees	, Ke	y En	nplo	yees	, an	d Highest Compensated E	mployees (continued)			
	' (A) Name and title	(B) Average hours per		_	check		natap		(D) Reportable compensation	(E) Reportable compensation		(F) Estimated amount of	
		week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)		other compensatio from the organization and related organization:	1
	COTT BRICKE				,,				70.000				
	EC. DIR. RETCHEN HOR	TON			X	 			70,000	0			359
F:	NANCE MGR	40	ļ		x				40,000	0	<u> </u>		359
				_	-	<u> </u>					├		
											-		
					<u></u>						├─		
- ·	un . • · ·						<u> </u>						
· 											<u> </u>		
				-	-						 		
						:							
<u>11</u> -	Total number of indiv	uduals (including those in 1		ho ro	CON	od m	oro t	han	\$100,000 in reportable com		L		718
	organization ▶ 0	viduals (including those in t	a) w	110 16	CEIV	eu III	iore t	Hall	Too,ooo in reportable com	pensation from the			
,	Did the ergenization	list any farmer officer due	nta			l.a.		مريما	a ar highest componented			Ye	s No
3	employee on line 1a	list any former officer, dire- ? If "Yes," complete Schedu	ıle J	for s	uch i	ndıvi	dual	•				3	<u> </u>
4									and other compensation fror complete Schedule J for su				
5	individual Did any person listed	d on line 1a receive or accru	ie co	mne	neat	ıon fi	om s	anv i	inrelated organization for			4	X
	services rendered to	the organization? If "Yes,"								· · · · · · · · · · · · · · · · · · ·		5	<u>x</u>
<u>Sc</u>	ction B. Independent Complete this table f		nsate	ed inc	depe	nder	t cor	ntrac	tors that received more than	1 \$100,000 of			
<u> </u>	compensation from t	he organization.						T					
—		(A) Name and business address							Descript	(B) on of services		(C) Compen	sation
		. <u> </u>											
 .								_					
						_							
	Total number of inde	pendent contractors (include	lina t	hose	in 1) wh	o rec	L	d more than \$100.000 in			-	
_	compensation from t					,,						0	
DA'												Form 99	0 (2008)

	rt V	III Statement of Revenue			33 1037330		Page 9
,-				(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	b	Federated campaigns Membership dues Fundraising events 1a 1b 1c	59,505	,	revenue		512, 513, or 514
s, gifts	d	Related organizations Government grants (contributions) 1e	553,694				‡ ‡ ‡
ibution		All other contributions, grits, grants, and similar amounts not included above	708,054				
Contr	_	Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f	107,997 ▶	1,321,253			
Revenue	2a b	PROGRAM FEES	Busn Code 611710	11,584	11,584		
Program Service Revenue	c d e						
Progra		All other program service revenue Total. Add lines 2a–2f	>	11,584			
	3	Investment income (including dividends, into other similar amounts)	•	5,337			5,337
	4 5	Income from investment of tax-exempt bon Royalties (i) Real	d proceeds				
		Gross Rents Less rental exps	(ii) i Gradital				# # # # #
	d	Rental inc or (loss) Net rental income or (loss) Gross amount from sales of assets (i) Secunties	(II) Other	*			
	b	other than inventory Less cost or other basis & sales exps		!		,	**************************************
	d	Gain or (loss) Net gain or (loss)	>				
Other Revenue	8a	Gross income from fundraising events (not including \$ 59,505 of contributions reported on line 1c) See Part IV, line 18 a	43,530				
Other I		Less direct expenses b Net income or (loss) from fundraising event	43,530	-			
		Gross income from gaming activities See Part IV, line 19					
	С	Less' direct expenses b Net income or (loss) from gaming activities	>				
		Gross sales of inventory, less returns and allowances a Less, cost of goods sold b	16,171 3,429	‡ ‡ ‡			¥ • • • • • • •
		Less. cost of goods sold b Net income or (loss) from sales of inventor Miscellaneous Revenue		12,742	12,742		<u> </u>
	11a b	BICYCLE SAFETY LIC PLATES	900099	25,661	25,661		-
	c	All other revenue					
	e 12	Total. Add lines 11a-11d Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6	d, 7d, 8c,	25,661			
!		9c, 10c, and 11e	<u> </u>	1,376,577	49,987		5,337 Form 990 (2008)

Form 990 (2008)

Fart IX **Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must of				<u> </u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and			gonolo coponoco	
•	organizations in the U.S. See Part IV, line 21	72,983	72,983	1	
:	Grants and other assistance to individuals in				
- ·	the U.S. See Part IV, line 22			#	
:	Grants and other assistance to governments,		<u> </u>		
	organizations, and individuals outside the			1	
	U.S. See Part IV, lines 15 and 16		į	1	
4	Benefits paid to or for members				······································
Ę	Compensation of current officers, directors,				
	trustees, and key employees	110,718	70,359	40,359	
E	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	619,085	465,990	23,486	129,609
ε	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	75,478	53,421	6,762	15,295
10	Payroll taxes	63,841	46,834	5,619	11,388
11	Fees for services (non-employees).				
а	Management				
' >	Legal	3,000		3,000	
:	Accounting	9,375		9,375	
1	Lobbying				
,	Professional fundraising services See Part IV, line 17				
41	Investment management fees				
-1	Other	98,333	68,022	13,004	17,307
12	Advertising and promotion	56,785	56,075	110	600
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	39,448	28,122	3,724	7,602
17	Travel	18,596	18,471	21	104
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	26,109	17,695	6,033	2,381
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	12,975	11,914	349	712
23	Insurance	4,076	1,743	1,862	471
		1		1	
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together	1			
	and labeled miscellaneous may not exceed	1			
	5% of total expenses shown on line 25 below)				
d	SUPPLIES	110,572	97,687	1,848	11,037
D	PRINTING AND PUBLICATIONS	71,330	43,500	25	27,805
c	OTHER COSTS	25,895	10,064	7,291	8,540
C	POSTAGE AND DELIVERY	22,246	5,785	102	16,359
•.•	SUBCONTRACTS	7,758	7,270	488	
	All other expenses	20,483	15,702	1,808	2,973
25	Total functional expenses. Add lines 1 through 24f	1,469,086	1,091,637	125,266	252,183
26					
	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs		į		
	from a combined educational campaign and				
	fundraising solicitation			<u> </u>	
DAA					Form 990 (2008)

<u></u>	art /	X Balance Sheet						
		•		(A) Beginning of year		(Bi End of	•	
_	1	Cash—non-interest bearing		123,152	1		31,	927
	2	Savings and temporary cash investments	F	133,546			23,	
	3	Pledges and grants receivable, net	ļ		3		,	
	4	Accounts receivable, net	Ţ	110,917	4	1	66,	468
	5	Receivables from current and former officers, directors,	trustees, key					
	-	employees, or other related parties. Complete Part II of	•		5			
	6	Receivables from other disqualified persons (as defined	F			 -		
		4958(f)(1)) and persons described in section 4958(c)(3)((B). Complete		1			
		Part II of Schedule L	, ,		6			
Ś	7	Notes and loans receivable, net			7			
Assets	8	Inventories for sale or use		15,600	8		1,	298
Asi	9	Prepaid expenses and deferred charges		6,364	9	,		283
•	10a		10a 109,614		1			
	Ь	Less accumulated depreciation. Complete						
		Part VI of Schedule D	10ы 78,891	58,637	10c		30,	723
	11	Investments—publicly traded securities			11			
	12	Investments—other securities See Part IV, line 11			12			
	13	Investments—program-related. See Part IV, line 11			13			
	14	Intangible assets			14			
	15	Other assets. See Part IV, line 11			15			
	16	Total assets. Add lines 1 through 15 (must equal line 34	4)	448,216		3	61,	349
	17	Accounts payable and accrued expenses		7,206	17		10,	206
	18	Grants payable			18			
	19	Deferred revenue			19			
	20	Tax-exempt bond liabilities			20	'		
ies	21	Escrow account liability Complete Part IV of Schedule D			21			
Liabilities	22	Payables to current and former officers, directors, truste	es, key		1			
ab		employees, highest compensated employees, and disqu	ualified					
⊐	ļ	persons Complete Part II of Schedule L	<u> </u>		22			
	23	Secured mortgages and notes payable to unrelated third	d parties		23			
	24	Unsecured notes and loans payable			24			
	25	Other liabilities. Complete Part X of Schedule D	<u> </u>	29,111	25		31,	
_	26	Total liabilities. Add lines 17 through 25		36,317	26		41,	<u>959</u>
nces		Organizations that follow SFAS 117, check here ▶	X and		1			
n		complete lines 27 through 29, and lines 33 and 34.			1			
ala	27	Unrestricted net assets	ļ-	386,009			76,	
m	28	Temporarily restricted net assets	-	25,890	28		42,	<u>709</u>
or Fund Bala	29	Permanently restricted net assets	<u></u>		29			
교		Organizations that do not follow SFAS 117, check he	ere ▶ ∐					
þ		and complete lines 30 through 34.			1			
ţ	30	Capital stock or trust principal, or current funds	-		30			
Se	31	Paid-in or capital surplus, or land, building, or equipment			31			
Ğ	32	Retained earnings, endowment, accumulated income, or	r other funds	411 000	32			
Net Assets	33	Total net assets or fund balances	}-	411,899	33		<u>19,</u>	
	34	Total liabilities and net assets/fund balances XI Financial Statements and Reporting		448,216	34	3	61,	349
	art 2	Ai Financial Statements and Reporting	· · · · · · · · · · · · · · · · · · ·				Yes	No
1	Ac	counting method used to prepare the Form 990	Cash X Accrual Oth	her			163	1.00
2:		ere the organization's financial statements compiled or rev				2a		x
٤		ere the organization's financial statements audited by an ir				2b	X	
	: If'	"Yes" to lines 2a or 2b, does the organization have a comm	nittee that assumes responsibility for	oversight of				
	th	e audit, review, or compilation of its financial statements a	ind selection of an independent accou	untant?		2c	X	L
3.	a As	s a result of a federal award, was the organization required	I to undergo an audit or audits as set	forth in				
		e Single Audıt Act and OMB Circular A-133?				3a		X
2) Ifi	"Yes." did the organization undergo the required audit or a	udits?			3b		

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No 1545-0047

Employer identification number

2008

Open to Public Inspection

Del artment of the Treasury Internal Revenue Service Name of the organization

			BICYCLE TRAN	SPORTATION ALLIA	ANCE					93	-1057956	
14	art I	Reas	on for Public Charity	Status (All organizations	must c	omplete	this p	art.) (s	see in	structi	ons)	
'n.	orgar	nization is not	a private foundation because	it is (Please check only one org	janization.	.)						
4		A church, cor	nvention of churches, or asso	ociation of churches described in	section 1	70(b)(1)(A)(i).					
2		A school desc	cribed in section 170(b)(1)(A	A)(ii). (Attach Schedule E)								
:		A hospital or	a cooperative hospital servic	e organization described in secti	on 170(b)	(1)(A)(iii)	. (Attach	Schedu	ıle H)			
4		A medical res	search organization operated	in conjunction with a hospital de-	scribed in	section '	170(b)(1)(A)(iii).	Enter th	ne hospi	ital's name,	
	_	city, and state	e:									
ţ.	Ш	An organization	on operated for the benefit of	f a college or university owned or	operated	by a gove	ernmenta	al unit de	escribed	l ın		
	_	section 170(b)(1)(A)(iv). (Complete Part	li)								
£		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7	X	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.)										
3	Ц	A community	trust described in section 17	70(b)(1)(A)(vi). (Complete Part II	.)							
ć.		An organization	on that normally receives (1)) more than 33 1/3 % of its suppo	ort from co	ntribution	s, memb	ership f	ees, and	gross		
		receipts from	activities related to its exemp	ot functionssubject to certain e	xceptions	, and (2) r	o more	than 33	1/3 % o	fıts		
		support from	gross investment income and	d unrelated business taxable inco	ome (less	section 5°	11 tax) fr	om busi	nesses			
			~	, 1975 See section 509(a)(2). (•							
10	Щ			xclusively to test for public safety								
11	\square	-	- ·	xclusively for the benefit of, to pe				•				
				d organizations described in sec	•			. , . ,		tion		
				e type of supporting organization		•		<u>`</u>				
	\Box	a Type	٠٠ سب	c Type III–Functiona			d		e III–Ot	her		
€	\Box	-	• -	inization is not controlled directly				•				
			_	and other than one or more public	cly suppor	ted organ	izations	describe	ed in se	ction		
			section 509(a)(2)		T 1 T	11 5						
f		-		mination from the IRS that it is a	rype i, i	/pe II, or I	ype III s	upportin	ıg			
		-	check this box	an accepted any self as acceptable at	6	-						
£				on accepted any gift or contributi	on from a	ny or the						
		following person		atrols, outhor along or together we	th norson	o docoribo	d in (ii)					· N-
				ntrols, either alone or together wi	in person	s describe	:u III (II)					es No
			pelow, the governing body of member of a person describe	• • •							11g(i)	
		` .	ontrolled entity of a person de	• •							11g(ii) 11g(iii)	
h		• •	• •	e organizations the organization	sunnorts						[119(11)]	
	Nama		1	Γ	,		(4) (2)		()			. ,
(1)		of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1–9	1	organization sted in your		ou notify	(VI) organizat	s the	(vii) Amour support	
	Ū			above or IRC section	1	document?		of your	_	zed in the		
				(see instructions))	L			oort?		S ?		
		-			Yes	No	Yes	No	Yes	No		
					-	····			 		<u></u>	
		-			ļ							_
				ŧ	1							

<u>Sche</u>	dule A (Form 990 or 990-EZ) 2008 BIC	YCLE TRAN	SPORTATIO	N ALLIANC	E 93	-1057956	Page 2
Pa	rt H Support Schedule for Or	ganizations De	scribed in Sec	ctions 170(b)(1)(A)(iv) and 17	0(b)(1)(A)(vi)	
	(Complete only if you che	ecked the box o	on line 5, 7, or	8 of Part I.)			
Scc	tion A. Public Support		_				
Çal	endar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	494,981	539,144	932,844	1,102,734	1,321,253	4,390,956
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 1-3	494,981	539,144	932,844	1,102,734	1,321,253	4,390,956
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)						84,811
6	Public support. Subtract line 5 from line 4		,				4,306,145
Sec	tion B. Total Support						
Cal	endar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	494,981	539,144	932,844	1,102,734	1,321,253	4,390,956
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		880	1,774	7,254	5,337	15,245
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10 11	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10		539		14,510	25,661	40,710 4,446,911
12	Gross receipts from related activities, etc. (L				12	262,265
13	First five years. If the Form 990 is for the c	•	second third fourth	or fifth tay year a	s a section 501(c)(<u> </u>	202,203
13	organization, check this box and stop here	=	secona, uma, iouru	i, or murtax year a	s a section son(c)(.) 	▶ □
Sec	tion C. Computation of Public Su		ae				
14	Public support percentage for 2008 (line 6,	· · · · · · · · · · · · · · · · · · ·		f))	·-·-··································	14	96.8345 %
15	Public support percentage from 2007 Scher			•77		15	95.5714 %
.ර 16ය	33 1/3 % support test—2008. If the organi			and line 14 is 33	1/3 % or more, che		30.0.1.1
. •	and stop here. The organization qualifies a			, 4.14		on and box	► X
į.	33 1/3 % support test—2007. If the organi		•	r 16a. and line 15 i	s 33 1/3 % or more	. check this	
~	box and stop here. The organization qualif				0 00 110 70 01 111010	, 5110011 4110	▶ □
1 7 (3	10%-facts-and-circumstances test—200				or 16h and line 14	ıs 10% or	, 0
• • • •	more, and if the organization meets the "fac	-					
	organization meets the "facts-and-circumsta			· ·	•		▶ □
b	10%-facts-and-circumstances test—200	_	•		-	e 15 is 10% or	٠ ـ ـ
-	more, and if the organization meets the "fac	-					
	organization meets the "facts-and-circumst				•	-	▶ 🗌
18	Private foundation. If the organization did	-	•		-	structions	▶ □

Schedule A (Form 990 or 990-EZ) 2008 BICYCLE TRANSPORTATION ALLIANCE

Schedule A (Form 990 or 990-EZ) 2008

93-1057956

Schedule A (Form 990 or 990-EZ) 2008 BICYCLE TRANSPORTATION ALLIANCE 93-1057956 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) St ction A. Public Support Calendar year (or fiscal year beginning in)▶ (a) 2004 (d) 2007 (b) 2005 (c) 2006 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1-5 7ci Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support (alendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 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 e 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 13 Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 14 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 17 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 33 1/3 % support tests—2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line

17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization in 33 1/3 % support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008 BICYCLE TRANSPORTATION ALLIANCE

93-1057956

Page 4

Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

PART II, LINE 10 - OTHER INCOME DETAIL

BIKE SAFETY LIC PLATE & OTHER

Ś

40,710

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

▶ To be completed by organizations described below.

▶ Attach to Form 990 or Form 990-EZ.

2008

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2008

Department of the Treasury
Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, 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), then

For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990.

Section 501	(c)(4), (5), or (6) organizations. Complete Part II	II.			
h'ame of organia	BICYCLE TRANSPORTAT	ION ALLIANCE		Employer identific 93-10579	
Fart I-A	To be completed by all organization See the instructions for Schedule C		501(c) and sec	ction 527 organizat	ions.
1 Provide	a description of the organization's direct and inc	direct political campaign activities is	n Part IV.		
	expenditures			▶ \$ _	
3 Volunte	er hours				
Part I-B	To be completed by all organization See the instructions for Schedule C	•	501(c)(3).		
1 Enter th	ne amount of any excise tax incurred by the orga				
	e amount of any excise tax incurred by the organization		;		
	ganization incurred a section 4955 tax, did it file		•		Yes No
	correction made?	Tom The for the your			Yes No
	' describe in Part IV.				
l art l-C	To be completed by all organization See the instructions for Schedule C		501(c), except	section 501(c)(3).	
1 Enter the	amount directly expended by the filing organizat	ion for section 527 exempt function	n		
activities				▶ \$ _	
2 Enter the	amount of the filing organization's funds contribu	uted to other organizations for sect	ion		
527 exem	pt function activities			▶ \$	
3 Total of d	rect and indirect exempt function expenditures	Add lines 1 and 2 and enter here a	ind		
on Form	1120-POL, line 17b			▶ \$ _	
4 Did the file	ing organization file Form 1120-POL for this yea	ır?			Yes No
5 State the	names, addresses and employer identification n	umber (EIN) of all section 527 poli	tical organizations	to which payments	
	le Enter the amount paid and indicate if the amo				
	ons received and promptly and directly delivered	· · · · ·	•	ate segregated fund	
or a politic	cal action committee (PAC). If additional space is	s needed, provide information in Pa	art IV.		<u> </u>
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds If none, enter -0-	contributions received and promptly and directly
				Tanas Tribile, effer 405	delivered to a separate
					political organization If
					none, enter -0-
				1	
					

Sc'	nedule C (Form 990 or 990-EZ) 2008 BIC	CYCLE TRANSPORTATION ALLIAN	CE 93-105795	6 Page 2
2		panizations exempt under section 501(c)(3 501(h)). See the instructions for Schedule		
	Check ▶ ☐ if the filing organizat	ion belongs to an affiliated group. ion checked box A and "limited control" pro		
	Limits on Lol (The term "expenditures" r	obying Expenditures neans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
 _t	a Total lobbying expenditures to influence pu	blic opinion (grass roots lobbying)		-
	5 Total lobbying expenditures to influence a l	egislative body (direct lobbying)		
	c Total lobbying expenditures (add lines 1a a	nd 1b)		
	d Other exempt purpose expenditures		1,469,086	
	e Total exempt purpose expenditures (add lir	es 1c and 1d)	1,469,086	
	f Lobbying nontaxable amount. Enter the am	ount from the following table in both		
	columns.		221,909	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		`
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
_	Over \$17,000,000	\$1,000,000		
	g Grassroots nontaxable amount (enter 25%	of line 1f)	55,477	
	h Subtract line 1g from line 1a Enter -0- if line	e g is more than line a	0	
	i Subtract line 1f from line 1c. Enter -0- if line	f is more than line c	0	
	j If there is an amount other than zero on eith section 4911 tax for this year?	ner line 1h or line 1i, did the organization file Form 4720 i	reporting	Yes No
	······································			

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

Lo	bbying Expenditures	During 4-Year A	veraging Period		
Calendar year (or fiscal year beginning in)	(a) 2005	(ь) 2006	(c) 2007	(d) 2008	(e) Total
2 Lobbying non-taxable amount	124,513	140,115	186,713	221,909	673,250
3 Lobbying ceiling amount (150% of line 2a, column(e))					1,009,875
Total lobbying expenditures	275	1,800	3,406		5,481
d Grassroots non-taxable amount	31,128	35,029	46,678	55,477	168,312
e Grassroots ceiling amount (150% of line 2d, column (e))					252,468
f Grassroots lobbying expenditures	275	1,800	3,406		5,481

Schedule C (Form 990 or 990-EZ) 2008

excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?

Supplemental Information

Conplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i.

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the

Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)

Also, complete this part for any additional information

h'art IV

2c

3

Sc redule C (Form 990 or 990-EZ) 2008 BICYCLE TRANSPORTATION ALLIANCE

Part IV Supplemental Information (continued)

93-1057956

Page 4

SCHEDULE D (Ferm 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12,

OMB No 1545-0047

Open to Public

Name of the organization Employer identification number 3ICYCLE TRANSPORTATION ALLIANCE 93-1057956 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 1 Aggregate contributions to (during year) Aggregate grants from (during year) 4 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-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 Year .1 Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c 1 Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 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 XIV, 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 Fart III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, 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 (ii) Assets included in Form 990, Part X 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 relating to these items: Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Sc ted	dule D (Form 990) 2008 B	ICYCLE	TRANSPORTATION	ALLIANCE	93-10	057956	Page 2
Iºa	rt III Organizations	Maintainin	g Collections of Art, H	istorical Treasu	ures, or Other S	imilar Assets	(continued)
3	Using the organization's accessitems (check all that apply):	ssion and othe	er records, check any of the fo	llowing that are a sig	inificant use of its co	llection	
а	Public exhibition		d 🗆 Loan o	r exchange program	ns		
i)	Scholarly research		e Other	i excitatige program			
•	Preservation for future ger	nerations	C Cliner				
4	Provide a description of the or Part XIV		ollections and explain how the	y further the organiz	ation's exempt purp	ose in	
ŧ	During the year, did the organi assets to be sold to raise fund					ĺ	Yes No
1.2			dial Arrangements. Co			ed "Yes" to Fo	
:_	Part IV, line 9,	or reported	an amount on Form 9	90, Part X, line	21.		
1 3	Is the organization an agent, to		lian or other intermediary for c	ontributions or other	assets not	1	п., п.,
	included on Form 990, Part X?					l	Yes No
ົງ	If "Yes," explain the arrangement	ent in Part XIV	and complete the following ta	able:			
	O						Amount
	Beginning balance					1c	
	Additions during the year					1d	
,	Distributions during the year					1e	
٠.	Ending balance	F	000 Dark V line 010			[<u>1f </u>	П
	Did the organization include a						Yes No
	If "Yes," explain the arrangement Fu		plete if organization an	ewored "Vee" to	Form 900 Par	t IV line 10	· · · · · · · · · · · · · · · · · · ·
	it v Endowment Fu	inus. Com	(a) Current year	(b) Pnor year	(c) Two years back	(d) Three years be	ack (e) Four years back
1.	Paginaina of year halance		(a) Current year	(b) Filor year	(C) TWO YEARS DACK	(u) Tillee years be	ack (e) Four years back
	Beginning of year balance						
	Contributions Investment earnings or losses						
	Grants or scholarships	•	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
	Other expenditures for facilitie	e.					
7	and programs	3					
r	Administrative expenses						
	End of year balance						
3	Provide the estimated percent	age of the ves	er end halance held as		<u> </u>	<u></u>	
٠,	Board designated or quasi-end	-	%				
	Permanent endowment		~ ~ ~ ~ %				
	Term endowment ▶		,,,				
	Are there endowment funds no		ession of the organization that	are held and admini	stered for the		
	organization by	o p 0000.					Yes No
	(i) unrelated organizations						3a(i)
	(ii) related organizations						3a(ii)
'n	If "Yes" to 3a(ii), are the relate	d organization	ns listed as required on Sched	ule R?			3b
4	Describe in Part XIV the intend	-					
-F`a			dings, and Equipment.), Part X, line 10).	
	Description of investme		(a) Cost or other basis (investment)	(b) Cost or other	her (c) Do	epreciation	(d) Book value
1.1	Land		-				
	Buildings			1			
	Leasehold improvements			1	,		****
	Equipment			1			
	Other			109	,614	78,891	30,723
	. Add lines 1a-1e. (Column (d)	should equal	Form 990, Part X, column (B)			>	30,723

Schedule D (F	orm 990) 2008	BICYCLE TRANSPO	RTATION	ALLIANCE	93-1057956	Page :
Tart VII	Investment	s—Other Securities. See	Form 990,	Part X, line 12.		
		ption of security or category		(b) Book value	(c) Method o	f valuation
	(inclu	uding name of security)			Cost or end-of-ye	ar market value
Fir ancial deriv	vatives and other f	inancial products				
Clc/sely-held e	equity interests					
Otl-er					.=	
				-		
	. – – – –					
		Form 990, Part X, col. (B) line 12				
Fart VIII		s—Program Related. Se	e Form 990	, Part X, line 13.		
	(a) Desc	cription of investment type		(b) Book value	(c) Method o	f valuation
					Cost or end-of-ye	ar market value
		Form 990, Part X, col. (B) line 13				
f art IX	Other Asse	ts. See Form 990, Part X	, line 15.			
		(a)	Description			(b) Book value
				·		
		Form 990, Part X, col (B) line 1			<u> </u>	
f art X		lities. See Form 990, Pai	t X, line 25			
	(a)	Description of liability		(b) Amount		
Fegeral incom						
	ED VACATI			31,753		
COCKE	R DEPOSIT	<u>s</u> _		-		
Total. (Colum	n (b) should equal	Form 990, Part X, col. (B) line 2	5) 🕨	31,753		
		ne footnote to the organization's f			zation's liability for	
	positions under FII				•	

3C.16	edule D (Form 990) 2008 BICYCLE TRANSPORTATION ALLIANCE	93-105/956		Page 4
14	art XI Reconciliation of Change in Net Assets from Form 990 to Financial	Statements		
•	Total revenue (Form 990, Part VIII, column (A), line 12)	1		1,376,577
:	Total expenses (Form 990, Part IX, column (A), line 25)	_2	2	1,469,086
:	Excess or (deficit) for the year. Subtract line 2 from line 1	3	3	-92,509
4	Net unrealized gains (losses) on investments	4	1	
ŧ	Donated services and use of facilities	5	5	<u> </u>
ŀ	Investment expenses	6	<u>ن</u> ز	_
7	Prior period adjustments	7	$\overline{}$	
٤.	Other (Describe in Part XIV)	8	3	
٤	Total adjustments (net). Add lines 4-8	9	•	
1¢	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		0	-92,509
1 3	art XII Reconciliation of Revenue per Audited Financial Statements With R	levenue per Return		
1	Total revenue, gains, and other support per audited financial statements	1	ī	1,376,577
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
,1	Net unrealized gains on investments 2a			
)	Donated services and use of facilities 2b			
;	Recoveries of prior year grants 2c			
	I Other (Describe in Part XIV)			
	Add lines 2a through 2d	26	أم	
3	Subtract line 2e from line 1	3		1,376,577
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		十	
4				
	Other (Describe in Part XIV)			
	Add lines 4a and 4b	40	- 1	
5,	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12.)	5	_	1,376,577
T i	art XIII Reconciliation of Expenses per Audited Financial Statements With			= / 5 / 5 / 5 / 7
1	Total expenses and losses per audited financial statements	xpoilodo por rectur	" T-	1,469,086
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		_	2,105,000
٠.	Donated services and use of facilities 2a			
•	Prior year adjustments 2b		1	
	Losses reported on Form 990, Part IX, line 25		1	
	I Other (Describe in Part XIV)		1	
	Add lines 2a through 2d		_	
3	Subtract line 2e from line 1	3		1,469,086
		-3	'	1,409,000
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIV)		1	
	Add lines 4a and 4b	_40		1,469,086
	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)		<u>, </u>	1,409,000
	art XIV Supplemental Information			
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F	Part IV, lines 1b		
anc'	2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b			
-				
_				
-				
			_	

Sciedule (Jem 990) 2008 BICYCLE TRANSFORTATION ALLIANCE 93-1057956 I art XV Supplemental Information (continued)	Page 5				5	956	579	.05	-1	93	9			Ξ	1CI	[A]	LL]	AJ	NC	ri(IA'	OR!	SP	AN:	r.	3	CLI	CY	BI	1	800	0) 20	n 99	Forn	D (edule	Sc.76
)	ued	ontin) (cc	ion	mat	for	l In	nta	me	ple	Sup		ΧIV	art)	Į a
		 _	_	_	-	_	_	_	_	 .		-	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_		· —	
		 _	_	_	-	_	_	_	_			_	_	_	_	-	_	-	_	_	_	_	_	_	_	_	_	_	_	_	_	-	_	_	_	-	
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		 _	_	_	_	_	_	_	_	_			_	_	_	_	_	-	_	_	-	_	_	_	_	_	-	_	_	_	_	_	_	_	_	. –	
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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

► Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

2008

Open To Public Inspection

	BICYCLE T	RANSPORTA	CION A	LLI	NC:	E		93-10579	
l'art I Fund	draising Activitie	s. Complete if	the orga	nizatio	n ar	iswe	red "Yes" to Forn	n 990, Part IV, line	e 17.
† Indicate whether	r the organization raise	ed funds through an	y of the follo	owing a	ctivitie	s Ch	eck all that apply.	· · · · · · · · · · · · · · · · · · ·	
a Mail solicitat	tions	•	e 🔲 Solid	citation	of nor	-gove	rnment grants		
5 Email solicit	ations	1	F 🗌 Solid	citation	of gov	ernme	ent grants		
c Phone solici	tations	,	g 📙 Spe	cial fund	fraisir	g eve	ents		
1 In-person so	olicitations								
	ition have a written or es listed in Form 990, F								Yes N
o If "Yes," list the to be compensate	en highest paid individ ted at least \$5,000 by	luals or entities (fun the organization Fo	draisers) pu orm 990-EZ	ırsuant filers aı	to agr e not	eeme requii	nts under which the fui red to complete this tat	ndraiser is ble.	
•	i) Name of individual		(ii) Activ	rity	(III) Did raiser		(iv) Gross receipts	(v) Amount paid to	(vi) Amount paid to
,	or entity (fundraiser)				custo contr	ol of	from activity	(or retained by) fundraiser listed in	(or retained by) organization
					contrib			col (i)	
					Yes	No			
		1							
								14	
_									
							<u>, </u>		
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·····								<u></u>	
									ļ
T otal				-		•			

Schedule G (Form 990 or 990-EZ) 2008

Page 2

Ė	art I	Fundraising E more than \$15											porte	d
 -		more than \$10		(a) Event	#1 COECLIP		(b) Event #2	. <u>g</u> 1000 1		c) Other Event		(d) Total		
Revenue	1	Gross receipts			103,035							1	.03,	035
Œ	2	Less. Charitable contributions			59,505		<u></u>		-	·			59,	<u>505</u>
_	3	Gross revenue (line 1 minus line 2)			43,530								43,	530
	4	Cash prizes												
ses	5	Non-cash prizes								7				
Direct Expenses	6	Rent/facility costs										<u>-</u>		
Direc	7	Other direct expenses			43,530					<u> </u>	\dashv		43,	530
	8	Direct expense summary Net income summary. Co		-)					> (43,	530 ₎
F	art I	Gaming . Com than \$15,000 c				wered '	'Yes" to Fo	rm 990, I	Part IV	', line 19, d	or repor	ted more		
- anue		man \$15,000 C	JII F	(a) Bing			b) Pull tabs/Insta go/progressive bi		(c	c) Other gaming	3	(d) Total ga		
Revenue	1	Gross revenue			i									
es	2	Cash prizes												
Direct Expenses	3	Non-cash prizes												
Direct	4	Rent/facility costs	_											
	5	Other direct expenses												
	6	Volunteer labor		Yes No	%	H	es o	%	H Y	es o	%			
	7	Direct expense summary	Add	lines 2 through	5 in column (d)					▶ <u>k</u>			
	8	Net gaming income sumr	mary	Combine lines	1 and 7 in colu	mn (d)					•			
9		ter the state(s) in which the	_				-12						Yes	No
ì.		the organization licensed to No," Explain	o oper	ate gaming act	ivilies in each o	or these st	ates?					9a		_
10a	We	 ere any of the organization	's gan	nıng licenses re	voked, suspen	ded or ten	minated during	the tax ye	ar?			10a		
t	lf "	Yes," Explain:												ľ
11	Do	es the organization operati	e gam	ning activities w	ith nonmember	·s?						11		
12 —		the organization a grantor, med to administer charitab		•	e of a trust or a	member o	of a partnership	o or other e	ntity	- 		12		
										Sched	iule G (Fo	orm 990 or 9	90-EZ)	2008

Sc edule G (Form 990 or 990-EZ) 2008	BICYCLE TRANSPORTATION ALLIANCE	93-105795	6	Р	age 3
•				Yes	No
Indicate the percentage of gaming active	vity operated in:				
ត The organization's facility		<u>1</u> 3a %			ĺ
An outside facility		13b %			
14 Provide the name and address of the p	erson who prepares the organization's gaming/special events books				į
and records.					
Name ▶					
Address ►					
Does the organization have a contract	with a third party from whom the organization receives gaming				
revenue?			15a		
If "Yes," enter the amount of gaming re		and the			İ
amount of gaming revenue retained by	the third party ► \$				Ė
If "Yes," enter name and address					İ
Name ▶					
Address ►					
6 Gaming manager information:					
Name ▶		:			
Gaming manager compensation ▶ \$					
Description of services provided ▶					
Director/officer Em	ployee Independent contractor				
7 Mandatory distributions:					
as Is the organization required under state	law to make charitable distributions from the gaming proceeds to				É
retain the state gaming license?			17a		
l> Enter the amount of distributions require	ed under state law distributed to other exempt organizations or spent				
in the organization's own exempt activity	ties during the tax year > \$				Ĺ

Schedule G (Form 990 or 990-EZ) 2008

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SCHEDULE: (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990.

Open to Public Inspection OMB No 1545-0047 2008

X

≗ □ Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Employer identification number non-cash assistance (g) Description of 93-1057956 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) (c) IRC (d) Amount of cash grant (e) Amount of non-cash section assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part IV and Schedule I-1 (Form 990) if additional space is needed BICYCLE TRANSPORTATION ALLIANCE General Information on Grants and Assistance (p) EIN Enter total number of section 501(c)(3) and government organizations the selection critena used to award the grants or assistance? (a) Name and address of organization 3 Enter total number of other organizations or government Name of the organization Part

Schedule I (Form 990) 2008

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

Page 2

•

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. 93-1057956 Schedule I (Form 990) 2008 BICYCLE TRANSPORTATION ALLIANCE Use Schedule I-1 (Form 990) if additional space is needed.

	coo concado i i (i cim coo) ii dadinorial obaco lo necada:	יי משמיים ואויים ואיים				
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	omplete this part to I	provide the informat	ion required in Part I,	, line 2, and any other addi	itional information.

THE PURPOSE OF ALL GRANTS IS PEDESTRIANS SAFETY ENFORCEMENT ACTIONS AND PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

THE MONITORING PROCESS FOLLOWS:

ASSOCIATED COMMUNITY OUTREACH.

- THEIR PLAN FOR SENDING STAFF TO TRAINING, AN ENFORCEMENT ACTION SCHEDULE, 1. WHEN AGENCIES APPLY FOR GRANTS THEY SUBMIT A WORKPLAN THAT INCLUDES THE NUMBER OF STAFF THAT WILL BE USED FOR EACH ACTION, AND THE BILLING RATES FOR STAFF.
- 2. THE BTA REVIEWS THE WORKPLANS AND AWARDS GRANTS AFTER BOTH THE BTA AND ENFORCEMENT AGENCIES SIGN A CONTRACT BASED ON THE WORKPLAN SUBMITTED

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. 93-1057956 Schedule I (Form 990) 2008 BICYCLE TRANSPORTATION ALLIANCE

٠. ١, :

Page 2

(f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) non-cash assistance (d) Amount of (c) Amount of cash grant Use Schedule I-1 (Form 990) if additional space is needed. (b) Number of recipients (a) Type of grant or assistance Part IV

3. THERE ARE TWO CLAIM PERIODS AT THE END OF WHICH ENFORCEMENT AGENCIES

SUBMIT A SIGNED CLAIM ACCOMPANIED BY AN ACTIVITY REPORT ON ACTIONS

CONDUCTED AS WELL AS PRESS RELEASES AND MEDIA RECEIVED.

Schedule I (Form 990) 2008

SCHEDULE L

(Farm 990 or 990-EZ)

De, artment of the Treasury Internal Revenue Service

Transactions With Interested Persons ▶ Attach to Form 990 or Form 990-EZ.

▶ To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. OMB No 1545-0047

Open To Public Inspection

BICYCLE TRANSPORTATION ALLIANCE

Name of the organization BICYCLE TRANSPORTATION ALLIANCE							Employer Identification number 93–1057956							
Part I	Excess Benefit Transactions (se)(4) orga	anizations only							
	To be completed by organizations that ans								, Part V	, line 4	ЮЬ			
1 (a) Name of disqualified person							(b) Description of transactio					(c) Corrected?		
						(a) occupion of datisactio						Yes	; <u> </u>	No
		 -						- ·						
													1	
					<u> </u>								4-	
under se	e amount of tax imposed on the organization ection 4958	•		,		during t	he year		▶ \$					
	e amount of tax, if any, on line 2, above, reim			ganization	1					<u>.</u>				
Part II	Loans to and/or From Interested			C 000	D-4 11/	/ luna 00	Farm 000	F7 D-+V	l 00-	_				
	To be completed by organizations that ans													
(a) Name of interested person and purpose	a) Name of interested person and purpose	or fro	oan to om the ozation?		(c) Original principal amount		(d) Balance due		(e) In	(f) Approved by board or committee?		(g) Written agreement?		
		То	From						Yes	No	Yes	No	Yes	No
				- · ·			 -			 				
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			LI						\perp	$oldsymbol{ol}}}}}}}}}}}}}}}}}$				
Part III	Create or Assistance Benefittin		-44	Davage			\$				<u> </u>			
F 311 111	Grants or Assistance Benefittin To be completed by organizations that ans					line 27	,							
(a) Name of interested person							erson and the	e (c) Amount of grant or type of						
						organization			assistance					
									 -				,	
				_										
D-4 () (_					
Part IV	Business Transactions Involvin To be completed by organizations that ans					, line 28	a, 28b, or 28c							
	(a) Name of interested person		(b) Relationship		1 , ,		Amount of nsaction	(d) Des	scription of transaction				of reve	Shanng org nues?
PFUL ADKINS		-		nization	\dashv		E 000	trepost-					Yes	No
FE OF ADK	TN2	BOA	ו שא	MEMBER	` +		5,000	WEBSIT	E DE	2 T GV			\vdash	X
		_			\dashv								\top	\vdash
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SCHEDULE M (Form 990)

NonCash Contributions

► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No 1545-0047

2008

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

BICYCLE TRANSPORTATION ALLIANCE

Employer identification number 93-1057956

-	Tymes of Bronorty		<u> </u>					. .					
	art I Types of Property	T		Τ	1	_							
		(a)	(b)	(c)					(d)				
		Check if	Number of Contributions	Revenues reported on	Method of determin			nining					
		applicable		Form 990, Part VIII, line 1g				re	venues				
1	Art—Works of art												
2	Art—Historical treasures												
3	Art—Fractional interests												
4	Books and publications												
5	Clothing and household	-	•					_				_	
	goods												
6	Cars and other vehicles												
7	Boats and planes												
8	Intellectual property												
9	Securities—Publicly traded												
10	Securities—Closely held stock		<u> </u>				-						
11	Securities—Partnership, LLC,											-	
	or trust interests												
12	Securities—Miscellaneous												
13	Qualified conservation												
	contribution (historic												
	structures)												
14	Qualified conservation								·				
•	contribution (other)												
15	Real estate—Residential							-					
16	Real estate—Commercial			 									
17	Real estate—Other												
18	Collectibles			 									
19	Food inventory												
	•												
20	Drugs and medical supplies												
21	Taxidermy												
22	Historical artifacts												
23	Scientific specimens												
24	Archeological artifacts	х	3	40.352	EX	TD	MAT) V P m	TINT	TTE			
25	Other ► (PRINTING)	X	34	40,352					VAL		-		
26	Other ► (SUPPLIES)			11,570									
27	Other ► (ADVERTISING)	X	2	56,075	FA	TK	MAL	KKET	VAL	OE			
28	Other ► (<u> </u>	L									
29	Number of Forms 8283 received by the	_	•										
	which the organization completed For	rm 8283, P	art IV, Donee Acknowled	gement	29				-				
											Yes	No	
30:		-	• • • •	•									
	it must hold for at least three years from	om the date	e of the initial contribution	, and which is not required t	to be								
	used for exempt purposes for the ent	-	period?							30a	ļ	X	
b	If "Yes," describe the arrangement in	Part II.											
31	Does the organization have a gift acc	eptance po	olicy that requires the revi	ew of any non-standard									
	contributions?									31		X	
32:	Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash												
	contributions?									32a		X_	
ŧ	If "Yes," describe in Part II									Į			
33	If the organization did not report reve	nues in col	umn (c) for a type of prop	erty for which column (a) is	check	ed,							
	describe in Part II											.	

Schedule M (Form 990) 2008 BICYCLE TRANSPORTATION ALLIANCE

93-1057956

Page 2

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Schedule M (Form 990) 2008

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047
2008

BICYCLE TRANSPORTATION ALLIANCE

Employer Identification number 93-1057956

AMENDED RETURN EXPLANATION

PART IV, SECTION A, OFFICERS DIRECTORS, TRUSTEES, KEY EMPLOYEES, AND HIGHEST COMPENSATED EMPLOYEES.

THE LIST OF INDIVIDUAL TRUSTEES OR DIRECTORS IS CORRECTED ON THIS AMENDED RETURN TO MATCH THE LIST OF DIRECTORS AT THE END OF THE TAX YEAR.

FORM 990, PART III, LINE 4A - FIRST ACHIEVEMENT

L'EACHES 51,000 CHILDREN EACH YEAR A COMPREHENSIVE BICYCLE

SAFETY PROGRAM IN CLASSES THROUGHOUT OREGON.

WALK & BIKE/SAFER ROUTES TO SCHOOL CURRICULIUM. UNDER A CONTRACTUAL AGREEMENT WITH THE OREGON DEPARTMENT OF "RANSPORTION, THE BTA PROVIDES CURRICULUM DEVELOPMENT SERVICES AND EXPERT MENTORING FOR COMMUNITIES THROUGHOUT OREGON.

PEDESTRIAN SAFETY EDUCATION & TRAINING. UNDER A CONTRACTUAL AGREEMENT WITH THE OREGON DEPARTMENT OF TRANSPORTATION, THE BTA DISTRIBUTES UP TO \$87,000 AS PART OF A MINI-GRANT PROGRAM TO POLICE DEPARTMENTS ACROSS OREGON TO SUPPORT PEDESTRIAN ENFORCEMENT ACTIONS.

FORM 990, PART III, LINE 4B - SECOND ACHIEVEMENT COMMUNITY MEMBERS AND BUSINESSES.

Page 2

BICYCLE TRANSPORTATION ALLIANCE

Employer identification number

93-1057956

THE BTA ADVOCATES AT THE METRO REGIONAL LEVEL FOR

SICYCLING FINANCING, HIGH QUALITY PLANNING GUIDELINES, AND

GROW THE BICYCLE TRAIL NETWORK.

THE BTA CONDUCTS A BICYCLE BOULEVARD CAMPAIGN TO INCREASE

THE NUMBER OF LOW-TRAFFIC BICYCLE FACILITIES IN THE CITY

OF PORTLAND AND TO WORK WITH COMMUNITIES STATEWIDE TO

DEVELOP BOULEVARD PROPOSALS.

"HE BTA WORKS WITH INSTITUTIONS AND AGENCIES TO DEVELOP ENNOVATIVE BICYCLE PROJECTS AND RESEARCH PROGRAMS.

FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS

HARY ROBERTS

BIKE GALLERY

BOARD CHAIR

DIRECTOR

BUSINESS RELATIONSHIP

MARY ROBERTS

ALTA PLANNING

BOARD CHAIR

DIRECTOR

BUSINESS RELATIONSHIP

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS

THE BICYCLE TRANSPORTATION ALLIANCE IS GOVERNED BY A VOLUNTEER BOARD OF

DIRECTORS, ELECTED BY OUR MEMBERS EACH OCTOBER. THE BOARD ESTABLISHES AND

HONITORS MAJOR POLICY DIRECTION, OVERSEES THE FINANCES AND HELPS SECURE

RESOURCES FOR THE ORGANIZATION, AND WORKS IN COOPERATION WITH THE STAFF TO

Naile of the organization

BICYCLE TRANSPORTATION ALLIANCE

Employer identification number 93-1057956

FULFILL THE BTA'S GOALS. ALL MEMBERSHIP DONATIONS ARE TAX DEDUCTIBLE, AS NO SIGNIFICANT SERVICES ARE RECEIVED IN EXCHANGE.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS
THE BICYCLE TRANSPORTATION ALLIANCE IS GOVERNED BY A VOLUNTEER BOARD OF
DIRECTORS, ELECTED BY OUR MEMBERS EACH OCTOBER. THE BOARD ESTABLISHES AND
MONITORS MAJOR POLICY DIRECTION, OVERSEES THE FINANCES AND HELPS SECURE
RESOURCES FOR THE ORGANIZATION, AND WORKS IN COOPERATION WITH THE STAFF TO
FULFILL THE BTA'S GOALS.

FORM 990, PART VI, LINE 10 - ORGANIZATION'S PROCESS USED TO REVIEW FORM 990
FINANCE, DEVELOPMENT AND EXECUTIVE DIRECTORS REVIEW THE COMPLETED DRAFT
LONG WITH THE EXECUTIVE AND FINANCIE COMMITTEES; COMMITTEE MEMBERS ALSO
PROVIDE FEEDBACK; DISCUSSIONS ARE ALSO HELD WITH VICE PRESIDENT.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

"HE CONFLICT OF INTEREST POLICY COVERS THE BOARD OF DIRECTORS. WHEN

ANY MEMBER OF THE BOARD PERCEIVES A CONFLICT OF INTEREST ARISING FROM

ANY MEMBER OF THE BOARD THE AFFECTED DIRECTOR EXCUSES HIM OR HERSELF FROM

PARTICIPATING IN THE BOARD'S DELIBERATIONS ON THE MATTER WHICH IS THE

COURCE OF THE REAL OR POTENTIAL CONFLICT OF INTEREST. WHEN IT IS

APPROPRIATE THE AFFECTED DIRECTOR WILL DECLARE PUBLICLY THAT THEY ARE NOT

REPRESENTING THE INTEREST OR PERSPECTIVES OF THE BICYCLE TRANSPORTATION

ALLIANCE IN THE MATTER IN WHICH THEY ARE REPRESENTING THEIR OWN, OR THEIR

CLIENT'S INTEREST.

IT IS MONITORED THROUGH SELF AWARENESS WHEN DISCUSSING ALL ISSUES AND

Page 2

Name of the organization

BICYCLE TRANSPORTATION ALLIANCE

Employer identification number 93-1057956

PROGRAMS.

THE BOARD OBTAINS A SALARY SURVEY. BOARD SETS THE EXECUTIVE DIRECTOR'S WAGES. EXECUTIVE DIRECTOR SETS THE MANAGEMENT SALARIES BASED ON PERFORMANCE REVIEW, SALARY SURVEY AND THE ORGANIZATION'S RELATION IN COMPARISON TO THE SALARY SURVEY.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

WHE BOARD OBTAINS A SALARY SURVEY. BOARD SETS THE EXECUTIVE DIRECTOR'S

WAGES WITHIN PARAMETERS OF SALARY SURVEY INFORMATION OBTAINED. EXECUTIVE

DIRECTOR SETS THE MANAGEMENT SALARIES BASED ON PERFORMANCE REVIEW, SALARY

SURVEY AND THE ORGANIZATION'S RELATION IN COMPARISON TO THE SALARY SURVEY.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION INNANCIAL STATEMENTS AND AVAILABLE THROUGH THE ORGANIZATION'S WEBSITE.

INNUAL REPORTS, CONFLICT OF INTEREST POLICY AND OTHER SPECIFIC DOCUMENTS ARE AVAILABLE THROUGH THE FINANCE OFFICE.