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Form	330	

Department 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.



AF	or the	e 2010 câlendar year, or tax year beginning	and ending										
	heck if pplicabl			D Employer identific	ation number								
	_Addre 	📽 🛛 Washington Area Bicyclist Associati	on										
	Name	e Doing Business As	23-73	305477									
	Initial return Termii ated	Number and street (or P.O. box if mail is not delivered to street address) 2599 Ontario Road, NW	E Telephone number 202-5	518-0524									
	Amen return			G Gross receipts \$	1,301,491.								
	Applic tion pendi	Washington, DC 20009		H(a) is this a group ret									
	pendi	F Name and address of principal officer: Shane Farthing		for affiliates?	Yes X No								
		same as C above empt status X 501(c)(3) 501(c)()◀ (insert no.) 4947(a		H(b) Are all affiliates inclu									
		empt status 🚺 501(c)(3) 🔄 501(c)()◀ (insert no.) 🔄 4947(a te: ► www.waba.org	ı)(1) or 🛄 52	H(c) Group exemption	Ist. (see instructions)								
		organization: X Corporation Trust Association Other	L Yea	r of formation: 1973 M									
<u>∰</u> Pa		Summary	12 / 12										
0 ZI	1	Briefly describe the organization's mission or most significant activities: $\underline{\mathtt{Pr}}$	omotion	of cycling a	and safety.								
ひしょ し () & Governance	2	Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets.											
		Number of voting members of the governing body (Part VI, line 1a)		3	13								
ט נ		Number of independent voting members of the governing body (Part VI, line	1b)	4	13								
sa	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5	18								
viti	6	Total number of volunteers (estimate if necessary)	-	6	1300								
Activities	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.								
Activities & Gov	b	Net unrelated business taxable income from Form 990-T, line 34		7ь	0.								
				Prior Year	Current Year								
		Contributions and grants (Part VIII, line 1h)		729,514.	660,996.								
Revenue		Program service revenue (Part VIII, line 2g)		327,856.	619,402.								
Re		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,311.	<u>8,361</u> <9,555.								
		Other revenue (Part VIII, column (A), Imes 5.60, 50, 90, 100 and 1 e)		1,068,831.	1,279,204.								
		Total revenue - add lines 8 through 11 (must equal Part VIII, columb (A), line - Grants and similar amounts pa战使art (Xrcolumn (A), lines 1-3) 公	12)	341,289.	351,351.								
		Benefits paid to or for members (Part IX, column (A), line 4)	F	0.	0.								
Ś		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5	-10)	492,549.	567,766.								
Expenses		Professional fundraising fees (Fart IX, Column At Ine 11P)	0.	0.									
xpe		Total fundraising expenses (Part IX, column (D), line 25) 40	<u>,103.</u>										
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		466,204.	484,560.								
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,300,042.	1,403,677.								
. 0		Revenue less expenses Subtract line 18 from line 12		<231,211.									
t Assets or d Balances			μ	Beginning of Current Year	End of Year								
Bal s	20	Total assets (Part X, line 16)		<u>587,631</u> . 83,349.	442,452. 62,643.								
Net / -und		Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20	-	504,282.	379,809.								
_	art II	Signature Block	I,	504,2021	575,005.								
		Ities of perjupy, I declare that I have examined this return, including accompanying sch	edules and state	ments, and to the best of my	knowledge and belief, it is								
true,	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information	of which prepar	er has any knowledge.									
		Signature of officer		A Sector	han 20/1								
Sig		Share Farthing, Executive Director		Dale									
Her	e	Type or print name and title											
		Print/Type preparer's name Preparer's signature		Date Check	PTIN								
Paid	t	James E. Marshall, Jr. Junes C Marshal	0/	08/31/11 self-emptoyed	P00841360								
Prep	arer	Firm's name SB & Company, LLO		Firm's EIN	20-2153727								
Use Only Firm's address 200 International Circle, Suite 5500													
		Hunt Valley, MD 21030		Phone no. (4	<u>410) 584-0060</u>								
		RS discuss this return with the preparer shown above? (see instructions)											
0320	01 02-2	2-11 LHA For Paperwork Reduction Act Notice, see the separate instr	uctions.	/	Form 990 (2010)								
				_	f(M)								
				C	í MU								

	Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission
	Promotion of cycling and safety.
	Tiomotion of cycling and barcey.
<u> </u>	Did the organization undertake any significant program services during the year which were not listed on
-	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
2	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
2	If "Yes," describe these changes on Schedule O
	-
•	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported. (Code) (Expenses \$ 548,504 · including grants of \$ 351,351 ·) (Revenue \$ 25,135
+d	Bikes for the World - Collected donated bicycles and shipped to done
	at various international sites.
4b	Pedestrian & Bicycle Safety Education - Educated the community on
4b	Pedestrian & Bicycle Safety Education - Educated the community on pedestrian and bicycle safety, increasing the percentage of children
4b	Pedestrian & Bicycle Safety Education - Educated the community on pedestrian and bicycle safety, increasing the percentage of children wearing bicycle helmets; reducing the number of police-reported crash
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tc tc	Pedestrian & Bicycle Safety Education - Educated the community on pedestrian and bicycle safety, increasing the percentage of children wearing bicycle helmets; reducing the number of police-reported crash involving pedestrians and bicyclists. (Code:)(Expenses § 122,080. including grants of §)(Revenue §6,50 Information/Outreach - Provided information services to members and E general public; promoted bicycling for transportation and recreation; provided information on and promoted safe bicycle routes and paths. (Other program services (Describe in Schedule O) (Expenses \$ 70,563. including grants of \$)(Revenue \$ 177,687.) Total program service expenses 1,223,829. Form 990(

Washington	Area	Bicyclist	Association
of Required Schedule	S		

Part M Checklist of Required Schedules 1 Is the organization described in section 501(x)3 or 4947(a)(1) (other than a private foundation)? If is the organization required to complete Schedule A 2 Is the organization required to complete Schedule A If is the organization required to complete Schedule A, Part I 3 Dot the organization required to complete Schedule C, Part II If is the organization action 501(c)(4) organization engage in lobbying activities, or have a section 501(t) election in effect during the twayer AP (*isc, complete Schedule C, Part II 4 If the organization actions a defined in Revue Proceedings 80170 (*isc, complete Schedule C, Part II 5 If the organization actions a defined in Revue Proceedings of admixer a subtick funds or accounts where donors have the right to provide advice on the distribution or investmere 80170 (*isc, complete Schedule D, Part II 6 X 7 X 8 The organization aces or thold a conservation asservation areasets? If *isc, complete Schedule D, Part II 9 Define organization aces or thold action action sub A (*isc, Complete Schedule D, Part II 9 Define organization report an amount for Harding ausetion serves? If *isc, complete Schedule D, Part II 9 Define organization report an amount for there and action action action action action action action action action aconon amount for there aconeaction report an aconon fore	Form	990 (2010) Washington Area Bicyclist Association 23-7305	477	P	age 3
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? I	Par	t IV Checklist of Required Schedules			
If "Yes," complete Schedule A 1 X 2 1s 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 D, Part II 3 X 2 Section SOI(2)(3) organizations. Dot the organization engage in lobbying activities, or have a section SOI(1) election in effect during the tax year? If "Yes," complete Schedule D, Part II 4 X 3 Is the organization ascent may doner advaced funds or any simular funds or accounts? If "Yes," complete Schedule D, Part II 6 X 5 Dot the organization maintain onlections or source structures? If "Yes," complete Schedule D, Part II 6 X 6 Dot the organization maintain collections of works of art, histonical treasures, or other simular assets? If "Yes," complete Schedule D, Part II 7 X 7 Did the organization maintain collections of works of art, histonical treasures, or other simular assets? If "Yes," complete Schedule D, Part II 8 X 9 Did the organization maintain collections of works of any shore assets? If "Yes," complete Schedule D, Part II 8 X 10 Did the organization maintain collections of works of any shore of a stolal assets in term, permanent. or quase-indownents? 7 X 11 H the organization mount in Part X, line 21, serve as a custodian for amount in Part X, line 10?				Yes	No
2 is the pregnazation required to complete Schedule B. Schedule of Contributors? 2 X 3 X 3 Do the organization required to complete Schedule C. Part I 3 X 4 Section 501(c)(3) organizations. Did the organization regage in lobbying activities, or have a section 501(c)(4) organizations. C. Part I 4 X 5 In the organization accounds the organization or advesed funds or any similar funds or accounts where donors have the right to provide done on the distribution or investment of amounts any chines as elected in the Perivse Part (NGR) or 501(c)(5) or 501(c)(5) or 501(c)(5) or 501(c)(5) organization thurds or accounts? If 'Nes, 'complete Schedule D, Part I 6 X 7 D d the organization meant any donor advesed funds or any similar funds or accounts? If 'Nes, 'complete Schedule D, Part I 6 X 9 D d the organization receive or hold a conservation easement, including easements to preserve open space, the environment, hatonic and areas, or hotone structures? If 'Nes, 'complete Schedule D, Part I (N) 7 X 9 D d the organization receive or hold a conservation reserve any single schedule D, Part I (N) 9 X 9 D d the organization receive any or deb folowing questions is 'Ves,' then complete Schedule D, Part I (N) 9 X 10 D d the organization report an amount for land, suidings, a	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Did the organization angage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public cilic? If "Yes," complete Schedule C, Part II 3 X 3 Section 501(e)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax yea? If "Yes," complete Schedule C, Part II 4 X 4 Is the organization ascend: how any donor advector 98.191 ("Yes," complete Schedule C, Part II 5 5 5 Dod the organization ascend: how any donor advector easement, including easements to preserve open space, the environment, hence India ease, not bactore structures? If "Yes," complete Schedule D, Part II 6 X 6 Dod the organization maintain collectors of works of an, hestone attructures? If "Yes," complete Schedule D, Part II 6 X 7 X 8 8 X 9 Dot the organization maintain collectors of works of an, hestone attructures? If "Yes," complete Schedule D, Part II 7 X 10 Dot the organization maintain collectors of works of an, hestone attructures? If "Yes," complete Schedule D, Part II 8 X 11 He organization maintain collectors of works of any hestone attructures? If "Yes," complete Schedule D, Part VI. 10 X 11 It the org		If "Yes," complete Schedule A	1		
public office? If "rest," complete Schedule C, Part I 3 X 4 Section 501(6)(3) organizations. Delth eorganization argage in lobbying activities, or have a section 501(6) election in effect during the tax year? If "Yes," complete Schedule C, Part II 4 X 5 Is the organization markan any domination of amounts in such funds or accounts where dones have the right to provide advice on the distribution or investment of amounts in such funds or accounts // Wes," <i>complete Schedule D, Part II</i> 6 X 7 Did the organization markan any domination or advised funds or any similar funds or accounts // Wes," <i>complete Schedule D, Part II</i> 7 X 8 Did the organization markan areas, or header stutcures? If "Yes," <i>complete Schedule D, Part II</i> 7 X 9 Did the organization discust in the following questions in "Yes," <i>complete Schedule D, Part II</i> 8 9 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," <i>complete Schedule D</i> , Part X 9 X 9 Did the organization report an amount for land, buildings, and equipment in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," <i>complete Schedule D</i> , Part X 10 X 9 Did the organization neport an amount for line tabilities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," <i>comp</i>	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year // 11*es, ' complete Schedule C, Part II I I I I X I X 5 Is the organization a section 501(h), election in effect animic announts as defined in Revenue Procedure 98-197 // Yes, ' complete Schedule C, Part II I X I X 5 Did the organization asset in any doner advection is event whole a consecution serve end ones have the right to provide advece on the distribution or investment of amounts in such funds or accounts where dones have the right to provide advece on the distribution or investment of amounts in such funds or accounts where dones have the right to provide advece on the distribution or investment of amounts in such funds or accounts where dones have the right to provide advece on the distribution or investment or anounts in such funds or accounts where dones have the right to provide advece on the distribution or investments or provide control to the advece on the distribution or investment or anount or investment or anount or investment or anount or investment or organization report an amount for investments - other securities in Part X, line 107 H ''Yes, ' complete Schedule D, Part X' I I X 10 Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 107 H ''Yes, ' complete Schedule D, Part X' I I X 11 Did the organization repo	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
during the tax year if Yes, * complete Schedule C, Part if 4 X 5 is the organization asceton 501(c)(4), 501(c)(5) or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98 197 if Yes,* complete Schedule C, Part II 6 X 10 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, haton charges, or historis structures? If Yes,* complete Schedule D, Part II 6 X 11 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, histon claid repart, or debt repart, or d		public office? If "Yes," complete Schedule C, Part I	3		X
5 is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 96-197 // Yes, "complete Schedule C, Part II is 5 Did the organization maintain any door advoced funds or any sumfar funds or accounts where dorins have the right to provide advice on the distribution or investment of amounts in such funds or accounts // Yes, "complete Schedule D, Part II is	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
 semilar amounts a defined in Revenue Procedure 99.197 // Yes, "complete Schedule C, Part III Did the organization maintain any donor advised funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts where donors have the right to provide advice on the distribution or investment of a mount in such funds or accounts where donors have the right to provide advice on the distribution or investment of a mounts in such funds or accounts where donors have the right to provide advice on the distribution or investment of a mount in press." Complete Schedule D, Part II Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit conseling, debt management, credit repart, or debt regotation serves? If 'Yes,' complete Schedule D, Part IV Did the organization, directly or through a related organization, including particular directly or through a related organization. Accounts in a mount for investments is other securities in Part X, line 10? If 'Yes,' complete Schedule D, Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part XI Did the organization report an amount for other assets in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part XI Did the organization obtain separate in consolicated financial statements for the tax year? If 'Yes,' complete Schedule D, Part XI Did the organization report on amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part XI Did the organization activation separate in amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X,		during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
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f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 111 X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 12a X 12a Was the organization included in consolidated, independent audited financial statements for the tax year? 12a X 13 Is the organization asking the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 12b X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garnts or assistance to any organization or entry located outside the United States? If "Yes," complete Schedule F, Parts II and IV 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts II and IV 16 X 17 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts II and IV 15	е				
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					<u> </u>
	J				

032003 12-21-10

10)				Association
hecklist of	Required Schedule	S (contin	ued)	

Part IV Checklist of Required Schedules (continued) 21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 21 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete 23	Yes	No X X X
United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the 23		x x x
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 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the 		x
column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the 23		x
 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the 		x
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete 23 Schedule J 24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the 23		x
Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the		x
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the		x
last day of the year, that was issued after becember 51, 2002 in 103, answer intes 240 through 240 and complete		
Schedule K If "No", go to line 25 24a		
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? 24b		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease		 x
		x
		x
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a		x
disqualified person during the year? If "Yes," complete Schedule L, Part I		
		<u> </u>
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and		ĺ
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		x
Schedule L, Part I		<u> </u>
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified		x
person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial 26		~
		ĺ
contributor, or a grant selection committee member, or to a person related to such an individual? <i>If</i> "Yes," <i>complete</i> Schedule L, Part III		x
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		
instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a		x
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		<u> </u>
director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c		x
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29	Х	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		
contributions? If "Yes," complete Schedule M 30		x
31 Did the organization liquidate, terminate, or dissolve and cease operations?		
If "Yes," complete Schedule N, Part I		x
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>		
Schedule N, Part II		x
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		
sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33		x
34 Was the organization related to any tax exempt or taxable entity?		
If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 34		x
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?		X
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of		
section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		ĺ
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?		ĺ
If "Yes," complete Schedule R, Part V, line 2		x
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization		
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37		x
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	_	[
Note. All Form 990 filers are required to complete Schedule O 38	Х	

Form **990** (2010)

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	990 (2010) Washington Area Bicyclist Association 23-7305	<u>477</u>	F	Page 5						
Pa				<u> </u>						
	Check if Schedule O contains a response to any question in this Part V			╷└─┘						
	14 I I I I I I I I I I I I I I I I I I I		Yes	No						
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 14									
Ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable									
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		x							
_	(gambling) winnings to prize winners?	10		──						
2a	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 18									
	, , , , , , , , , , , , , , , , , , ,		x	-						
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	<u> </u>	╂───						
0	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . (see instructions)	0-	- 1	Т. Х						
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3a 3b								
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	30								
44	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x						
h	If "Yes," enter the name of the foreign country:	48		<u> </u>						
U	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.									
50	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	-	X						
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X						
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	50 50		<u> </u>						
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			<u> </u>						
ψū	any contributions that were not tax deductible?	6a		x						
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			<u> </u>						
-	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).									
а										
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X							
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required									
	to file Form 8282?	7c		X						
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d									
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	_							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h								
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting		l _							
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8								
9	Sponsoring organizations maintaining donor advised funds.		_							
а	Did the organization make any taxable distributions under section 4966?	9a		ļ						
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter:			1						
a	Initiation fees and capital contributions included on Part VIII, line 12									
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			1						
11	Section 501(c)(12) organizations. Enter		Í	1						
a	Gross income from members or shareholders 11a									
b	Gross income from other sources (Do not net amounts due or paid to other sources against									
40-	amounts due or received from them.)	40-		ł						
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in fieu of Form 1041?	<u>12a</u>		╂────						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10-		╂						
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		 						
L.	Note. See the instructions for additional information the organization must report on Schedule O		1							
b										
-	organization is licensed to issue qualified health plans 13b Enter the amount of reserves on hand 13c	1								
	Enter the amount of reserves on hand 13c 1 Did the organization receive any payments for indoor tanning services during the tax year?	140		x						
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		+						
			990	(2010)						

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	990 (2010) Washington Area Bicyclist Association 23-7305 t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	_		age 6 se				
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions			[.]				
	Check if Schedule O contains a response to any question in this Part VI			X				
Sec	tion A. Governing Body and Management		Vee					
	Enter the number of voting members of the governing body at the end of the tax year 13		Yes	No				
	Enter the number of voting members of the governing body at the end of the tax year1a1aEnter the number of voting members included in line 1a, above, who are independent1b1a							
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1						
2	officer, director, trustee, or key employee?	2	-	x				
3	Did the organization delegate control over management duties customanly performed by or under the direct supervision			<u> </u>				
J	of officers, directors or trustees, or key employees to a management company or other person?	3		x				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	-	X				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		x				
6	Does the organization have members or stockholders?	6	X					
	Does the organization have members, stockholders, or other persons who may elect one or more members of the							
	governing body?	7a		X				
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year							
-	by the following:							
а	The governing body?	8a	X					
	Each committee with authority to act on behalf of the governing body?	8b	Х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)							
			Yes	No				
10a	Does the organization have local chapters, branches, or affiliates?	10a		X				
b	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?	10b						
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Х					
b	b Describe in Schedule O the process, if any, used by the organization to review this Form 990							
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х					
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise							
	to conflicts?	12b	Х	<u> </u>				
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			1				
	in Schedule O how this is done	12c	X	 				
13	Does the organization have a written whistleblower policy?	13	X					
14	Does the organization have a written document retention and destruction policy?	14	X	┝──				
15	Did the process for determining compensation of the following persons include a review and approval by independent			,				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	-	īv					
а	The organization's CEO, Executive Director, or top management official	15a	X	┝──				
b	Other officers or key employees of the organization	15b	Х	<u> </u>				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)			l				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	م ا		x				
	taxable entity during the year?	16a						
Б	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	16						
<u> </u>	exempt status with respect to such arrangements? tion C. Disclosure	16b						
<u>3ec</u> 17	List the states with which a copy of this Form 990 is required to be filed MD , VA							
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for						
18	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, a	ind fine	Incial					
	statements available to the public							
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the organization of the state of the organization of the organization of the state of	ation 🗎	•					
	Shane Farthing - 202-518-0524							
	2599 Ontario Road, NW, Washington, DC 20009							
		Form	990	(2010)				
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Washington Area Bicyclist Association Form 990 (2010) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (Ď), (E), and (F) if no compensation was paid

• List all of the organization's current key employees, if any See instructions for definition of "key employee "

 List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization. more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A)	(B)		(C)		(D)	(E)	(F)			
Name and Title	Average hours per	(c)		Pos all 1		app	ly)	Reportable compensation	Reportable compensation	Estimated amount of
	week (describe hours for related organizations in Schedule O)	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 compensation from the organization and related organizations
Barbara Klieforth										
President	1.00	X		Х				0.	0.	0.
Martin Moulton								_		_
Vice President	1.00	X		х				0.	0.	0.
Paul d'Eustachio						ŀ				
Treasurer	1.00	X		Х				0.	0.	0.
Randall Myers	1						 			
Secretary	1.00	X		Х				0.	0.	0.
Casey Anderson										
Board Member	1.00	X						0.	0.	0.
Kendall Dorman	Τ									
Board Member	1.00	X						0.	0.	0.
Eric Fingerhut										
Board Member	1.00	X						0.	0.	0.
Emily Littleton										
Board Member	1.00	X						0.	0.	0.
Phil Lyon										
Board Member	1.00	Х						0.	0.	0.
Elissa Parker			Ι							
Board Member	1.00	X						0.	0.	0.
Jim Titus										
Board Member	1.00	X						0.	0.	0.
Dana Wolfe					1					
Board Member	1.00	X						0.	0.	0.
Bruce Wright										
Board Member	1.00	X						0.	0.	0.
Shane Farthing										
Executive Director	40.00	-	\vdash	X	-		-	42,500.	0.	1,406.
							\vdash			

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									ssociation	23-73	8054	77	P	age 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) (C) (D) (E)										·= `				
	(A) Name and title	(B) Average hours per week		Pos	tion	app	ly)	(D) Reportable compensation from	(E) Reportable compensatior from related	e Estir on amo		(F) stimate nount other		
	、	(describe hours for related organizations in Schedule Mighest compensated employee O) (O) (O) (O) (O) (O) (O) (O) (O) (O)				Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		compensa from the organizati and relate organizatio			
	<u></u>													
													_	
	Sub-total								42,500.		0.		1,4	06.
С	Total from continuation sheets to Part VI Total (add lines 1b and 1c)	- <u>-</u>							0. 42,500.		0.		1,4	0.
2	Total number of individuals (including but n compensation from the organization	ot limited to th	iose	liste	ed al	bovi	e) wł	no r	eceived more than \$100	0,000 in reportable	Ð			0
											Г		Yes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s	uch individual				•						3		X
4	For any individual listed on line 1a, is the su and related organizations greater than \$150	0,000? If "Yes,	" со	mple	ete S	Sche	edule	e J I	for such individual	-		4		x
5 Sec	Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes," com tion B. Independent Contractors							elat	ed organization or indiv	idual for services		5		Ī
1	Complete this table for your five highest co the organization. NONE	mpensated ind	depe	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of com	pensa	tion	from	
	(A) Name and business	address							(B) Description of s	services	Co		C) Insatio	n
		_						_						
2	Total number of independent contractors (i \$100,000 in compensation from the organi	-	not li	mite	d to		ose lu O	stec	above) who received r	hore than			000	
											F	orm	aan (2010)

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Form	990	(2010))

Form 990 (2010) Washington Area Bicyclist Association 23-7305477 Page 9 Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c di e f	All other contributions, gifts, grants, and similar amounts not included above 1f	5,091. 655,905. 339,651.	660,996.			
Program Service (2 a b c d	Membership Dues Non-gov't Fees & Contr Bicycle Tours Bike Swaps/Bike Valets	900099 900099 900099	305,777. 177,687. 104,295. 25,138. 6,505.	305,777. 177,687. 104,295. 25,138. 6,505.		
_	t <u>g</u> 3 4	All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, inte other similar amounts) Income from investment of tax-exempt bond		619,402. 8,361.			8,361.
	5 6 a b c	Less rental expenses	(II) Personal				
		Net rental income or (loss) Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses	(II) Other				
r Revenue	d	Gain or (loss) Net gain or (loss) Gross income from fundraising events (not including \$ 5,091. of contributions reported on line 1c). See Part IV, line 18	▲ 4,307.				
Other Reve	с 9 а	Less direct expenses Net income or (loss) from fundraising events Gross income from gaming activities. See Part IV, line 19 Less: direct expenses	ь 22,287.	<17,980.	>		<17,980.
	10 a b	 Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances Less cost of goods sold Net income or (loss) from sales of inventory 	a				
	11 a b c d	·	Business Code 900099	8,425.	8,425.		
03200	e 12 9-10	Total. Add lines 11a-11d Total revenue. See instructions.	•	8,425. 1279204.	627,827.	0	• <9,619. Form 990 (2010)

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Form 990 (2010)

Washington Area Bicyclist Association Part IX Statement of Functional Expenses

	All other organizations must comp not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to governments and	· -	expenses	general expenses	expenses
•	organizations in the U.S. See Part IV, line 21	10,452.	10,452.		
2	Grants and other assistance to individuals in				
-	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16	340,899.	340,899.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	43,906.	26,344.	13,172.	4,390
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	439,231.	389,388.	37,143.	12,700
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	8,903.	7,596.	974.	333
9	Other employee benefits	34,908.	33,922.	221.	765
0	Payroll taxes	40,818.	35,359.	4,436.	1,023
1	Fees for services (non-employees)				
	Management				
ь	Legal		700	47 225	
	Accounting	47,925.	700.	47,225.	
	Lobbying				
_	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	33,349.	32,163.	986.	200
g	Other	78,652.	66,310.	805.	11,537
12	Advertising and promotion	148,478.	132,001.	9,982.	6,495
13	Office expenses	140,470.	152,001.	5,502.	0,400
14	Information technology				
15 16	Royalties	131,756.	113,065.	16,385.	2,306
16 17	Occupancy Travel	24,876.	22,632.	2,244.	2,500
18	Payments of travel or entertainment expenses				
0	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,798.	1,380.	418.	
20	Interest	277201			
21	Payments to affiliates				
21 22	Depreciation, depletion, and amortization	3,738.	3,264.	353.	121
23	Insurance	10,318.	6,727.	3,528.	63
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule 0.)				
а	Miscellaneous	3,670.	1,627.	1,873.	170
a b					<u> </u>
c			_		
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	1,403,677.	1,223,829.	139,745.	40,103
26	Joint costs. Check here Jif following SOP		,		
	98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising				

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Form **990** (2010)

Form 990 (2010) Part X Balance Sheet

Washington Area Bicyclist Association

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				(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing		31,824.	1	120,774.
	2	Savings and temporary cash investments	Ē	290,731.	2	198,119.
	3	Pledges and grants receivable, net	F	187,491.	3	17,351.
	4	Accounts receivable, net	F	37,197.	4	76,996.
	5	Receivables from current and former officers, di			i	
		employees, and highest compensated employe		;		
		of Schedule L			5	
	6	Receivables from other disgualified persons (as				
		4958(f)(1)), persons described in section 4958(c				
		employers and sponsoring organizations of sec	•			
		employees' beneficiary organizations (see instr.			6	
Assets	7	Notes and loans receivable, net			7	
SSI	8	Inventories for sale or use		19,500.	8	7,800.
٩	9	Prepaid expenses and deferred charges	F	4,089.	9	7,800. 2,572.
		Land, buildings, and equipment: cost or other				
		basis Complete Part VI of Schedule D	10a 46,577.			
	h	Less: accumulated depreciation	10b 32,767.	10,953.	10c	13.810.
	11	Investments - publicly traded securities		1,371.	11	<u> 13,810.</u> 555.
	12	Investments - other securities See Part IV, line 1	_,	12		
	13	Investments · program-related. See Part IV, line		13		
	14	Intangible assets		14	· · · · ·	
	15	Other assets. See Part IV, line 11	F	4,475.	15	4,475.
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	587,631.	16	442,452.
	17	Accounts payable and accrued expenses	83,349.	17	62,643.	
	18	Grants payable		18		
	19	Deferred revenue	F		19	
	20	Tax-exempt bond liabilities	F	· - ·	20	
s	21	Escrow or custodial account liability Complete	Part IV of Schedule D		21	
Liabilitıes	22	Payables to current and former officers, director	F			
lide		highest compensated employees, and disqualifi				
Ë	1	of Schedule L	F -		22	
	23	Secured mortgages and notes payable to unrela	ated third parties		23	
	24	Unsecured notes and loans payable to unrelate	· · -	· · · · · · · · · · · · · · · · · · ·	24	
	25	Other liabilities. Complete Part X of Schedule D	· · F		25	
	26	Total liabilities. Add lines 17 through 25	F	83,349.	26	62,643.
		Organizations that follow SFAS 117, check he	ere X and complete			
ŝ		lines 27 through 29, and lines 33 and 34.				
ő	27	Unrestricted net assets		218,726.	27	343,694.
lala	28	Temporarily restricted net assets	Γ	285,556.	28	36,115.
ЧB	29	Permanently restricted net assets	Γ		29	
E.		Organizations that do not follow SFAS 117, c	heck here 🕨 🗔 and 🛛			
٩.		complete lines 30 through 34.				
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds			30	
\SS(31	Paid in or capital surplus, or land, building, or ed	aupment fund		31	
et A	32	Retained earnings, endowment, accumulated in			32	
ž	33	Total net assets or fund balances	Ē	504,282.	33	379,809.
	34	Total liabilities and net assets/fund balances	F	587,631.	34	442,452.

Form 990 (2010)

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Form	form 990 (2010) Washington Area Bicyclist Association 23-730					
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					
1	Total revenuè (must equal Part VIII, column (A), line 12)	1	1,27			
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,403,677.			
3	Revenue less expenses Subtract line 2 from line 1	3			73.>	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	50	4,2	82.	
5	Other changes in net assets or fund balances (explain in Schedule O)	5			09.	
6	6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6					
Pa	rt XII Financial Statements and Reporting				_	
	Check if Schedule O contains a response to any question in this Part XII					
				Yes	No	
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				ł	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				l	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X	
b	Were the organization's financial statements audited by an independent accountant?		2b	X		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		_2c	X		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.		•		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a				
	separate basis, consolidated basis, or both					
	X Separate basis Consolidated basis Both consolidated and separate basis					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audr	t			
	Act and OMB Circular A-133?		3a		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit	t 🛛			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		Зb			

Form **990** (2010)

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SCHED (Form 99	DULE A 90 or 990-EZ)	Z) Public Charity Status and Public Support Complete of the organization is a section 501(c)(3) organization or a section								OMB No 1545-0047		
Department o Internal Reve	of the Treasury nue Service		te if the organization is 4947(a)(1) no tach to Form 990 or Fo	onexempt	charitable	e trust.				Open to Inspe	o Publi	ic
Name of t	the organizati						_	E		identificati		
	· <u> </u>		ton Area Bic						2	<u>3-7305</u>	477	
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	te this part	t.) See inst	tructions.				
The organ	ization is not a	private foundation	because it is: (For lines '	1 through "	11, check	only one b	iox.)					
1 [_]	A church, co	nvention of churches	s, or association of chur	ches desc	nbed in se	ction 170	(b)(1)(A)(i)					
2 🛄	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)											
з 🛄	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4 🗌	A medical res	earch organization of	operated in conjunction	with a hos	pital desci	nbed in se	ction 170	(b)(1)(A)(i	ii). Enter	the hospital	's nam	ie,
	city, and stat	<u> </u>										
5 📖	An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or op	perated by	a governi	mental un	it describ	bed in		
	section 170	(b)(1)(A)(iv). (Comple	ete Part II)									
6	A federal, sta	te, or local governm	ent or governmental uni	t described	d in sectio	n 170(b)(1	l)(A)(v).					
7 X	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	e general	public desc	nbed ı	n
	section 170(b)(1)(A)(vi). (Comple	te Part II)									
8 🔄	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II)							
9	An organizati	on that normally rec	eives: (1) more than 33 1	1/3% of its	support f	rom contri	butions, m	nembersh	ip fees, a	and gross re	ceipts	from
	activities rela	ted to its exempt fur	nctions - subject to certa	un excepti	ons, and (2	2) no more	than 33 1	/3% of rts	s suppor	t from gross	invest	.ment
	income and u	inrelated business ta	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	anization	after June 3	30, 197	'5
	See section	509(a)(2). (Complete	e Part III)									
10	An organizati	on organized and op	perated exclusively to te	st for publ	ic safety. S	See sectio	n 509(a)(4	4).				
11 📖	An organizati	on organized and op	perated exclusively for th	ne benefit (of, to perfo	orm the fur	nctions of,	or to car	γ out the	e purposes d	ofone	or
	more publicly	supported organiza	ations described in section	on 509(a)(⁻	1) or section	on 509(a)(2	2) See sec	ction 509	(a)(3). Ch	eck the box	that	
	describes the	e type of supporting	organization and compl	ete lines 1	1e through	n 11h.			_			
	a 🛄 Type I	ь	Type II c	: 🛄 Тур	e III - Func	tionally int	egrated		d 🗆	Type III - (Other	
e 🗀	By checking	this box, I certify tha	at the organization is not	controlled	directly o	r indirectly	by one o	r more dis	qualified	persons oth	her tha	n
	foundation m	anagers and other t	han one or more publicly	y supporte	ed organiza	tions des	cnbed in s	ection 50	9(a)(1) or	section 509)(a)(2)	
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	ре I, Туре	II, or Type	e III				
	supporting of	rganization, check th	ns box									
g	Since August	t 17, 2006, has the c	organization accepted ar	ny gift or c	ontribution	from any	of the foll	owing per	sons?			
	(i) A perso	n who directly or ind	irectly controls, either al	one or tog	ether with	persons c	lescribed	ın (II) and	(III) below	/,	Yes	No
	the gove	erning body of the su	upported organization?							11g(ı)		
	(ii) A family	member of a persor	n described in (i) above?							11g(ii)		
	(iii) A 35% d	controlled entity of a	person described in (i) o	or (II) above	e?					11g(iii)		
h	Provide the f	ollowing information	about the supported or	ganızation	(s).							
(i) Name	of supported	(ii) EIN	(iii) Type of	(iv) Is the c	organization	(v) Did you	I notify the	(vi) l	s the	(vii) An	nount o	f
	anization	(, בווי	organization (described on lines 1-9	in col. (i) lis	sted in your	organizat	ion in col.	organizati (i) organiz	on in col.		port	•
5			above or IRC section	governing	document?	(i) of you	support?	0.8	; ?		-	
			(see instructions))	Yes	No	Yes	No	Yes	No	1		

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

Schedule A (Form 990 or 990-EZ) 2010

032021 12-21-10

Total

Schedule A (Form 990 or 990 EZ) 2010 Washington Area Bicyclist Association 23-7305477 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support							
Cale	ndar year (or fiscal year beginning ın) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total	
1	Gifts, grants, contributions, and					Í		
	membership fees received (Do not							
	include any "unusual grants ")	934,562.	840,342.	1,188,908.	729,514.	660,996.	4,354,322.	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	934,562.	840,342.	1,188,908.	729,514.	660,996.	4,354,322.	
5	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)							
6	Public support. Subtract line 5 from line 4			· · · · ·			4,354,322.	
	tion B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total	
	Amounts from line 4	934,562.	(b) 2007 840,342.	1,188,908.	(d)2009 729,514.	660,996.	4,354,322.	
	Gross income from interest,	-						
_	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar sources	1,028.	2,064.	3,233.	1,311.	8,361.	15,997.	
9	Net income from unrelated business		······					
Ť	activities, whether or not the							
	business is regularly carried on							
10	Other income Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part IV.)					4,307.	4,307.	
11	Total support. Add lines 7 through 10					,	4,374,626.	
	Gross receipts from related activities,	etc. (see instructi	ons)	······································	l	12 1	,968,023.	
	First five years. If the Form 990 is for	· · ·		d. fourth, or fifth ta	ax vear as a sectio		<u> </u>	
	organization, check this box and stop	•		-,				
Sec	tion C. Computation of Publ		rcentage					
14	Public support percentage for 2010 (line 6, column (f) d	wided by line 11, c	olumn (f))		14	99.54 %	
	Public support percentage from 2009		-			15	99.82 %	
	33 1/3% support test - 2010.If the o			n line 13, and line 1	14 is 33 1/3% or m	ore, check this box		
	stop here. The organization qualifies	as a publicly supp	orted organization	n				
b	33 1/3% support test - 2009.If the o	rganization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check the	s box	
	and stop here. The organization qual	lifies as a publicly :	supported organization	ation				
17a	10% -facts-and-circumstances tes	t - 2010. If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	ind line 14 is 10% o	or more,	
	and if the organization meets the "fac	cts-and-circumstan	ces" test, check tl	his box and stop h	tere. Explain in Pa	rt IV how the organ	ization	
	meets the "facts-and-circumstances"	test The organiza	tion qualifies as a	publicly supported	d organization			
b	10% -facts-and-circumstances tes	t - 2009.If the orga	anization did not c	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is 1	0% or	
	more, and if the organization meets the	he "facts-and-circu	imstances" test, cl	heck this box and	stop here. Explair	n in Part IV how the		
	organization meets the "facts-and-cire	cumstances" test	The organization of	qualifies as a publi	cly supported orga	anızatıon	$\blacktriangleright \square$	
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a	and see instruction:	<u>s</u>	

Schedule A (Form 990 or 990-EZ) 2010

032022 12-21-10

Schedule A (Form 990 or 990-EZ) 2010

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-				Ì		· · · ·
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
b	3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b		-				·
	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support				l	I .	1
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 6		(0) 2007	(0) 2000	(0) 2003	(e) 2010	
-	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support (Add lines 9, 10c, 11, and 12)	l					
14	First five years. If the Form 990 is for	r the organization's	s first, second, thi	d, fourth, or fifth t	tax year as a secti	on 501(c)(3) organız	zation,
	check this box and stop here						
	ction C. Computation of Publ		-				
15	Public support percentage for 2010 (line 8, column (f) d	livided by line 13,	column (f))		15	%
	Public support percentage from 2009					16	%
Sec	ction D. Computation of Inve	stment Incom	e Percentage				
17	Investment income percentage for 20)10 (line 10c, colur	mn (f) divided by li	ne 13, column (f))		17	%
18	Investment income percentage from	2009 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2010. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a	nd stop here. The	e organization qua	lifies as a publicly	supported organi	zation	
b	33 1/3% support tests - 2009. If the	-					and
	line 18 is not more than 33 1/3%, che	-					
20	Private foundation. If the organization			•		-	►□
	23 12-21-10			· · ·		hedule A (Form 99	0 or 990-EZ) 2010

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Political Campaign and Lobbying Activities

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

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE C

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I A and B. Do not complete Part I C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only
- If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
 - Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B
 - Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A.
- If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), then

 Section 501(c)(4), (5), or (6) organizations Complete Part III Name of organization

Name of organization	1					Employer identification number
	Washington	Area	Bicyclist	Associat	ion	23-7305477
Part I-A Com	plete if the organization	ation is	exempt under s	section 501(c)	or is a section	527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures
- 3 Volunteer hours

line 17b

Part I-B Complete if the organization is exempt under section 501(c)(3).	
1 Enter the amount of any excise tax incurred by the organization under section 4955	▶\$
2 Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	Yes No
4a Was a correction made?	Yes No
b If "Yes," describe in Part IV	
Part I-C Complete if the organization is exempt under section 501(c), except se	ection 501(c)(3).
1 Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶\$
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527	
exempt function activities	▶ \$
3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,	

- 4 Did the filing organization file Form 1120-POL for this year?
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2010

_ Yes

No

032041 02-02-11

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OMB No 1545-0047

Open to Public

Inspection

▶ \$

Schedule C (Form 990 or 990 EZ) 2010 Wa	shington	Area Bicyc	list Associ	ation 23-7	305477 Page 2
Part II-A Complete if the organiz		mpt under sectio	n 501(c)(3) and th	ed Form 5768	
(election under section					
A Check I if the filing organization t	-	- ·			
B Check L if the filing organization of	hecked box A a	nd "limited control" pro	ovisions apply.		<u> </u>
. Limits on (The term "expenditure	Lobbying Expe s" means amou)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence	public opinion i	grass roots lobbying)			
b Total lobbying expenditures to influence					
c Total lobbying expenditures (add lines 1	a and 1b)				
d Other exempt purpose expenditures					
e Total exempt purpose expenditures (ad	d lines 1c and 1	d)			
f Lobbying nontaxable amount Enter the	amount from th	e following table in bot	h columns.		
If the amount on line 1e, column (a) or (b)	s: The lob	bying nontaxable am	ount is:		
Not over \$500,000					
Over \$500,000 but not over \$1,000,000	\$100,00	00 plus 15% of the exc	cess over \$500,000.		
Over \$1,000,000 but not over \$1,500,00	0 \$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,					
Over \$17,000,000					
	.=				
g Grassroots nontaxable amount (enter 2	-				
h Subtract line 1g from line 1a If zero or I	ess, enter -0-				
i Subtract line 1f from line 1c If zero or le	,				
J If there is an amount other than zero on	either line 1h or	line 1i, did the organiz	ation file Form 4720	r	
reporting section 4911 tax for this year					Yes LNo
	s that made a s	eraging Period Under section 501(h) election le instructions for line	n do not have to com		
		nditures During 4-Ye			
					T
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2010

__ __ _

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Schedule C (Form 990 or 990 EZ) 2010 Washington Area Bicyclist Association 23-7305477 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	· · · · · · · · · · · · · · · · · · ·	(4	(a) (b)				
		Yes	No	Amo	ount		
1	During the year, did the filing organization attempt to influence foreign, national, state or						
	local legislation, including any attempt to influence public opinion on a legislative matter						
	or referendum, through the use of:						
а	Volunteers?		Х				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X					
С	Media advertisements?		X				
d	Mailings to members, legislators, or the public?		X				
е	Publications, or published or broadcast statements?		X				
f	Grants to other organizations for lobbying purposes?		X				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		X				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X				
i	Other activities? If "Yes," describe in Part IV		X				
j	Total. Add lines 1c through 1i						
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X				
b	If "Yes," enter the amount of any tax incurred under section 4912						
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), or se	ction			
	501(c)(6).						
				Yes	No		
1	Were substantially all (90% or more) dues received nondeductible by members?		1				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		. 2				
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	504(-)	3				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section						
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Par "Yes."	τ III-Α, ΙΙ	ne 3 is ai	iswerea			
1	Dues, assessments and similar amounts from members		1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	al					
	expenses for which the section 527(f) tax was paid).						
а	Current year		2a				
ь	Carryover from last year		2b				
с	Total		2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess					
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical					
	expenditure next year?		4				
_5	Taxable amount of lobbying and political expenditures (see instructions)		5				
Par	t IV Supplemental Information						
Com	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, an	d Part II-B,	line 1) Also	, complete	this part		
	ny additional information.						
Pa	Part II-B, Line 1(i), Other Lobbying Activities:						
WAI	BA staff and volunteers worked with citizens and lo	cal go	overnm	ent			
of	ficials on bike-friendly legislation and on identif	ying 1	resour	ces fo	or		

improvements in bike infrastructure.

Schedule C (Form 990 or 990-EZ) 2010

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SCH	EDL	JLE	D
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Department of the Treasury

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(Form 990)

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12. Attach to Form 990 See senarate instructions



Interna	Revenue Service	1990. See separate instructions.			Inspec	uon
Nam	e of the organization Washington Area Bi	cyclist Association	1		er identificati 23–7305	
Pa			or Ac			
	organization answered "Yes" to Form 990, Part IV, lin				e e comprete m	
		(a) Donor advised funds	(b)	Funds ar	nd other acco	ounts
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	- ed funds			
	are the organization's property, subject to the organization's	•			🗌 Yes	🗔 No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be i	used onl	у		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose o	confernn	g		
	Impermissible private benefit?				Yes	No
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Pa	art IV, lın	e 7		
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)				
	Preservation of land for public use (e g , recreation or e	education)	torically i	mportant	t land area	
	Protection of natural habitat	Preservation of a certif	fied histo	oric struc	ture	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form o	of a cons	ervation	easement on	the last
	day of the tax year.		_			<u>.</u>
				Held	I at the End of I	the Tax Year
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easements		1	2Ь		
С	Number of conservation easements on a certified historic str			2c		
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structu				
_	listed in the National Register			2d		
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	organiza	ation duri	ng the tax	
	year					
4	Number of states where property subject to conservation ea					
5	Does the organization have a written policy regarding the pe				Yes	
e	violations, and enforcement of the conservation easements in Staff and volunteer hours devoted to monitoring, inspecting,		iring the	Voor	L Yes	L NO
6 7	Amount of expenses incurred in monitoring, inspecting, and	_	-	•		
8	Does each conservation easement reported on line 2(d) above					
0	and section 170(h)(4)(B)(II)?	ve satisfy the requirements of section 1700			Yes	
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expense	stateme	nt and h		-
Ĵ	include, if applicable, the text of the footnote to the organization	•				-
	conservation easements		ine ergui	inzation o	uccounting	
Pa	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or Ot	ther Si	milar A	ssets.	
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8				
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statem	nent and	balance	sheet works	of art.
	historical treasures, or other similar assets held for public exi					
	the text of the footnote to its financial statements that descr					
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement	and bala	ance she	et works of a	rt, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pub	olic servi	ce, provic	de the follow	ng amounts
	relating to these items			-		-
	(i) Revenues included in Form 990, Part VIII, line 1			▶ \$		
	(ii) Assets included in Form 990, Part X		I	▶ \$		
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial	gain, pr	ovide		
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items.				
а	Revenues included in Form 990, Part VIII, line 1		I	▶ \$		
b	Assets included in Form 990, Part X		I	▶ \$		
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.		Sche	dule D (Forn	n 990) 2010
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Sche	dule D (Form 990) 2010 Washing	ton Area B	icyc	list A	ssocia	tion		23-73	0547	7 Page 2
Par	t III Organizations Maintaining C						r Simil	ar Asse	ts (conti	nued)
3	Using the organization's acquisition, access									
	(check all that apply):				•		•			
а	Public exhibition	c	i 🗆 i	Loan or exc	hange progra	ams				
b	Scholarly research	e		Other	51.5					
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	in how th	nev further t	he oroanizati	on's exen	not ouro	ose in Par	t XIV	
5	During the year, did the organization solicit of				-					
· ·	to be sold to raise funds rather than to be m					01 0111114			Yes	
Par	t IV Escrow and Custodial Arran					"Yes" to F		. Part IV.		
	reported an amount on Form 990, Pa							,		
1a	Is the organization an agent, trustee, custod		diary for	contribution	is or other as	sets not i	ncluded			
	on Form 990, Part X?								Yes	
h	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table						
			, ioning	labio				<u> </u>	Amount	
с	Beginning balance						1c	<u> </u>	/ incum	
	Additions during the year						1d			
	Distributions during the year						10 1e			
f	Ending balance						16 1f			
	Did the organization include an amount on F	orm 990 Part X line	212						Yes	No
	If "Yes," explain the arrangement in Part XIV		,21,						1 169	
Par			neworod	"Ves" to Eo	m QQ0 Part	IV line 10	<u> </u>			
					(c) Two year	1		ears back	(a) Four	years back
4	Resumptions of year balance	(a) Current year	(0) P	rior year	(C) I WO year	S DACK	aj mee y	Cal S Dack	(e) i ui	years back
	Beginning of year balance									
	Contributions									
	Net investment earnings, gains, and losses									
d	Grants or scholarships							· · · · · ·		
е	Other expenditures for facilities									
	and programs				<u> </u>					
	Administrative expenses				1					
-	End of year balance									
2	Provide the estimated percentage of the year	ir end balance held a								
	Board designated or quasi endowment		_%							
	Permanent endowment	%								
		%								
3a	Are there endowment funds not in the posse	ession of the organiz	ation that	at are held a	ind administe	ered for th	e organiz	zation	r	
	by									Yes No
	(i) unrelated organizations								3a(ı)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organization	•							3b	
4	Describe in Part XIV the intended uses of the									
Par	t VI Land, Buildings, and Equipm				. 1			<u> </u>		
	Description of investment	(a) Cost or c			or other		cumulate		(d) Bool	< value
		basis (investi	ment)	Dasis	(other)	dep	reciation			
	Land									
	Buildings									
	Leasehold improvements						<u> </u>			
d	Equipment			4	6,577.		32,7	٥/٠	1.	3,810.
	Other						-		~	
<u>Tota</u>	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, colur	nn (B), line i	10(c))					3,810.
								Pahadula	D/Earm	0001 2010

Schedule D (Form 990) 2010

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Part VII Investments - Other Securities.	See Form 990, Part X, line 12	
 (a) Description of security or category (including name of security) 	(b) Book value	(c) Method of valuation Cost or end-of-year market value
) Financial derivatives		
) Closely-held equity interests		
) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
()		
tal. (Col (b) must equal Form 990, Part X, col (B) line 12.) 🕨		
Part VIII Investments - Program Related.	See Form 990, Part X, line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation
	(2) Book Value	Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		·
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
tal. (Col (b) must equal Form 990, Part X, col (B) line 13.)		
Part IX Other Assets. See Form 990, Part X, Iir	ie 15	
	a) Description	(b) Book value
(1)		
(2)		
(3)		

(7)

(8)	
(9)	
(10)	
	_

 Total. (Column (b) must equal Form 990, Part X, col (B) line 15)

 Part X
 Other Liabilities.
 See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 2 FIN 48 (ASC 740) Footnote in Part XIV provide the text of the footnote to the FIN 48 (ASC 740)	25) Plantation's inhancial statements that reports the organization's inability	tor uncertain tax positions

Schedule D (Form 990) 2010

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Sche	dule D (Form 990) 2010 Washington Area Bicyclist				7305477	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990	to Audited Fina	ancial State	emen		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	_	1,279,	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		1,403,	677.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		<124,4	473.
4	Net unrealized gains (losses) on investments		4			
5	Donated services and use of facilities		5			
6	Investment expenses		6		-	
7	Prior period adjustments		7	-		
8	Other (Describe in Part XIV.)		8			
9	Total adjustments (net). Add lines 4 through 8		9			0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a		10		<124,4	473.
Par	t XII Reconciliation of Revenue per Audited Financial Statem	nents With Rev	enue per R	etur		_
1	Total revenue, gains, and other support per audited financial statements			1	1,343,4	<u>491.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments	2a	_			
b	Donated services and use of facilities	2b	42,000.			
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIV)	2d				
е	Add lines 2a through 2d			2e	42,	
3	Subtract line 2e from line 1			3	1,301,4	491.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
ь	Other (Describe in Part XIV)	4b <	22,287.			
С	Add lines 4a and 4b			4c	<22,	287.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	1,279,	204.
Pa	t XIII Reconciliation of Expenses per Audited Financial State	ments With Ex	penses per	Retu		
1	Total expenses and losses per audited financial statements			1	1,467,9	964.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a	42,000.			
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIV)	2d	22,287.			
е	Add lines 2a through 2d			2e	64,2	287.
3	Subtract line 2e from line 1			3	1,403,0	677.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV)	4b				
с	Add lines 4a and 4b			4c		Ο.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	1,403,0	677.
Pa	t XIV Supplemental Information					
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part	t III, lines 1a and 4	Part IV lines 1	b and	2h Part V line 4	Part

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

Schedule D (Form 990) 2010

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SCHEDULE F	Stateme	nt of Acti	ivities Outside the Un	ited Sta	ites	OMB No 1545-0047
(Form 990)		Complete if the	organization answered "Yes" to For			2010
Department of the Treasury Internal Revenue Service			Part IV, lıne 14b, 15, or 16. orm 990. ▶ See separate instructio	ns.	ſ	Open to Public Inspection
Name of the organization	<u>.</u>				Employer id	entification number
Washington Area	a Bicycli	st Assoc	iation		23-730	5477
Part I General Info	ormation on A		tside the United States. Compl	ete if the orgai	nization answe	red "Yes"
to Form 990, Pa			ds to substantiate the amount of the g			
-	-		selection criteria used to award the gra			Yes X No
2 For grantmakers. Des	cribe in Part V the	e organızatıon's	procedures for monitoring the use of g	rant funds out	side the United	I States
3 Activities per Region. (The following Par	t I, line 3 table c	an be duplicated if additional space is r	needed.)		
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	is a pro describe	vity listed in (d) gram service, e specific type ce(s) in region) (f) Total expenditures for and investments in region
-						
 3 a Sub-total b Total from continuation 	<u>ו</u>	0				0.
sheets to Part I c Totals (add lines 3a		0				0.
and 3b)		0				0.

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

Schedule F (Form 990) 2010

_ . _ _ _ _ _

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1 (b) Name of organization an	Grams and Other Assistance to Organizations or En recipient who received more than \$5,000 Check this t Part II can be duplicated if additional space is needed	recipient who received more than \$5,000 Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed	o one recipient received more than \$5,000					
	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuatión (book, FMV, appraisal, other)
		Central America and the Caribbean	To assist individuals in holding jobs, performing work, attending school	0		193518.[193518, ponated bicycles	ßstimate
		Sub-Saharan Africa	To assist individuals, including ex-prisoners and			147381.1	Donated bicycles	B stimate
 Enter total number of recipient organizations listed above that are recog the IRS, or for which the grantee or counsel has provided a section 501 Enter total number of other organizations or entities 	cipient organization grantee or counse her organizations o	Is listed above that are all has provided a section or entities and the section of the section o	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities	foreign country,	, recognized as tax-e	xempt by		02
0-1	See Part IV for	V for Column (d)	(d) descriptions 28	su			Schedt	Schedule F (Form 990) 2010

-- -

Page 3		(h) Method of valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2010
	V, line 16	(g) Description of non-cash assistance					Schedu
23-7305477	to Form 990, Part I	(f) Amount of non-cash assistance					
	Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16 Part III can be duplicated if additional space is needed.	(e) Manner of cash disbursement					
list Asso	tes. Complete if	(d) Amount of cash grant					
ea Bicyc	e the United Sta d.	c) Number of recipients					
Washington Area Bicyclist Association	e to Individuals Outsid Iditional space is neede	(q)					
Schedule F (Form 990) 2010 W	Part III Grants and Other Assistance to Individuals Outside Part III can be duplicated if additional space is needed.	(a) Type of grant or assistance					

12-20-10

Schedule F (Form 990) 2010 Washington Area Bicyclist Association 23-Part IV Foreign Forms

_ - - - -

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2010

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Schedule F (Form 990) 2010 Washington Area Bicyclist Association 23-7305477 Page 5

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method), Part II, line 1 (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

Part II, Column (d):

Region: Central America and the Caribbean

(d) Purpose of Grant: To assist individuals in holding jobs, performing

work, attending school and/or having access to services.

Region: Sub-Saharan Africa

(d) Purpose of Grant: To assist individuals, including ex-prisoners and

their families, in holding jobs, performing work, attending school and/or

having access to services.

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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

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open To Public Inspection

Employer identification number

OMB No 1545-0047

Name of the	organization
-------------	--------------

Washington Area Bicyclist Association

23-7305477

Part	Fund
T ult I	require

1

b

С

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not ed to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply

а	Mail	solicitations

Internet and email solicitations Phone solicitations

e Solicitation of non-government grants f Solicitation of government grants

Special fundraising events gL

In-person solicitations d

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

No

Yes

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or con contrib	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total			►			
3 List all states in which the organization	on is registered or licensed to solicit	contrib	outions	s or has been notifie	d it is exempt from re	egistration

Schedule G (Form 990 or 990-EZ) 2010

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2010.04000 Washington Area Bicyclist A WAB001_1

Schedule G (Form 990 or 990 EZ) 2010 Washington Area Bicyclist Association 23-7305477 Page 2 Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000

		of fundraising event contributions and gro	(a) Event #1	(b) Event #2	(c) Other events	T Sigreater than \$5,000.	
			Gala &	(D) Event #2	None	(d) Total events	
			Benefit Auct		None	(add col. (a) through	
			(event type)	(event type)	(total number)	col. (c))	
anı			(event type)	(event type)			
Revenue	1	Gross receipts	9,398.			9,398.	
	2	Less: Charitable contributions	5,091.			5,091.	
	3	Gross income (line 1 minus line 2)	4,307.			4,307.	
	4	Cash prizes					
ses	5	Noncash prizes					
Direct Expenses	6	Rent/facility costs	750.			750.	
Direct	7	Food and beverages	14,299.			14,299.	
	8	Entertainment	2,600.			2,600.	
	9	Other direct expenses	2,600. 4,638.			2,600. 4,638.	
	10	•			•	(22,287,	
		Net income summary Combine line 3, colum			•	<17,980.	
Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than							
\$15,000 on Form 990-EZ, line 6a							
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col (c))	
Rev							
	1	Gross revenue					
ses	2	Cash prizes					
Direct Expenses	3	Noncash prizes					
Direct	4	Rent/facility costs					
	5	Other direct expenses					
	Ť		Yes %	Yes %	Yes %		
	6	Volunteer labor	□ No	□ No	No		
	7	Direct expense summary Add lines 2 through	n 5 in column (d)		►	()	
	8	Net gaming income summary. Combine line 1	, column d, and line 7		►		
			,		- F		
9	En	ter the state(s) in which the organization opera	tes gaming activities				
а	Ist	the organization licensed to operate gaming ac	tivities in each of these s			Yes No	
b) If "	No," explain [.]					
		ere any of the organization's gaming licenses re				└── Yes └── No	
b) If "	Yes," explain					
	_			····			
	_						
0320	82 0	1-13-11			Schedule G (Fo	rm 990 or 990-EZ) 2010	

Sch	edule G (Form 990 or 990 EZ) 2010 Washington Area Bicyclist Association 23-7305477 Page 3
11	
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed
	to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in.
	The organization's facility 13a %
	An outside facility 13b %
	Enter the name and address of the person who prepares the organization's gaming/special events books and records
	Name
	Address
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
t	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount
	of gaming revenue retained by the third party $ ightarrow$ \$
c	: If "Yes," enter name and address of the third party
	Name 🕨
	Address 🕨
16	Gaming manager information
	Name
	Gaming manager compensation 🕨 \$
	Description of services provided 🕨
	Director/officer Employee Independent contractor
17	Mandatory distributions
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
t	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the
	organization's own exempt activities during the tax year 🕨 💲
Pa	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III,
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also complete this part to provide any additional information (see instructions)
0320	083 01-13-11 Schedule G (Form 990 or 990-EZ) 2010
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								OMB No 1545-0047
SCHEDULE I (Form 990)			Grants and Governments	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	e to Organizations in the United Sta	s, tes		2010
Department of the Treasury Internal Revenue Scrvice		Compl	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.	n answered "Yes" to Fo Attach to Form 990.	' to Form 990, Par m 990.	t IV, line 21 or 22.		Öpen to Public Inspection
Name of the organization	tion Washington Area		Bicyclist Ass	Association				Employer identification number 23-7305477
Part I General Ir	General Information on Grants and Assistance	Ind Assistance						
1 Does the organ	Does the organization maintain records to substantiate the amount of th	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	y for the grants or ass	e grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	L ···› Å
2 Describe in Part	criteria used to award the grants or assistance ? Describe in Part IV the organization's procedures for monitoring the use	stance? ocedures for monit	oring the use of grant	of grant funds in the United States	d States			
=	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV. line 21, for any	Governments and	I Organizations in the	United States. C	omplete if the org	anization answered "Y	es" to Form 990, Part	
recipient t	that received more than \$	\$5,000 Check this	box if no one recipien	It received more th	ian \$5,000 Part II	can be duplicated if a	additional space is nee	
1 (a) Name and a or go	1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of section (e) Amount of valuation (book, non-cash or gook, non-cash assistance ot existance or government or government eash grant non-cash assistance ot existance eash assistance ot existance	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(t) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
	Enter total number of section 501(c)(3) and government organizations	ind government or	ganizations					
3 Enter total numb	Enter total number of other organizations	S						
LHA For Paperwork	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the Instructi	ons for Form 990.					Schedule I (Form 990) (2010)

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032101 01-13-11

Schedule I (Form 990) (2010) Washington Area	A Bicycli	Bicyclist Association	ition		23-7305477 Page 2
r Assist plicated	ited States. Con	plete if the organiz	ation answered "Yes"	to Form 990, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the	de the informatio	in required in Part I,	line 2, and any other	information required in Part I, line 2, and any other additional information	
Schedule I, Part I, Line 2: An inv	inventory o	of bicycles	is kept	on a regular	
basis.					
032102 01-13-11		36			Schedule I (Form 990) (2010)

i L

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

Open to Public

10

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form

990, Part IV, lines 29 or 30. Attach to Form 990.

Inspection Employer identification number 23-7305477

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Name of the organization

Washington Area Bicyclist Association

Tai	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 10	Method of noncash cont		•	s
1	Art - Works of art		items contributed		·			
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 -							
10	Historic structures							
14	Qualified conservation contribution - Other				T			
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							
25	Other (Used bicycles)	X	9,009	338,520.	Estimated	mrkt	va	lue
26	Other (Portable sewi)	X	29					lue
27	Other ► (<u> </u>						
28	Other ► (
29	Number of Forms 8283 received by the organ	zation durin	g the tax year for a	contributions	- -			
	for which the organization completed Form 82		-				0	
							Yes	No
30a	During the year, did the organization receive b	ov contributio	on any property re	oorted in Part L lines 1-28 t	nat it must hold for			
	at least three years from the date of the initial							l I
	the entire holding period?		,			30a		x
b	If "Yes," describe the arrangement in Part II							
31	Does the organization have a gift acceptance	policy that r	equires the review	of any non-standard contri	butions?	31		x
	Does the organization hire or use third parties		•	•				
	contributions?					32a	х	1
b	If "Yes," describe in Part II							
33	If the organization did not report an amount in	i column (c) f	for a type of prope	rty for which column (a) is a	hecked.			1
	describe in Part II			,				1
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	0.	Schedule	M (Form	990)	(2010)

032141 12-23-10

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Schedule M (Form 990) (2010) Washington Area Bicyclist Association 23-7305477 Page 2 Part II 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, Part I, Column (b): WABA is reporting the number of contributions received in the "Number of Contributors" column.

Schedule M, Line 32b: WABA receives the donated bicycles, bicycle

parts & accessories, and portable sewing machines from more than 100

faith communities, Boy Scouts, Rotary and other service clubs, bike

shops, solid waste departments of local jurisdictions, etc. This is

accomplished through events sponsored by these entities, or in the

course of their daily business (e.g., in the case of retailers).

Schedule M (Form 990) (2010)

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

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



Name of the organization

Washington Area Bicyclist Association

Employer identification number 23-7305477

Form 990, Part III, Line 4d, Other Program Services:

Membership Program & Services - Provided newsletter services, brochures

on various topics, and organized events for members.

Expenses \$ 70,563. including grants of \$ 0. Revenue \$ 177,687.

Form 990, Part VI, Section A, line 6: WABA has answered the question as

"Yes" per the Form 990 instructions because WABA is a "not-for-profit

corporation." WABA has one governing body, the Board of Directors, who is

responsible for the governance of the organization. The individuals who sit

on the board are elected by the "members" of the organization and their

only rights are to participate in the organization's governance and elect

individuals to sit on the board.

Form 990, Part VI, Section B, line 11: Prior to submitting the Form 990, a draft of the Form 990 is sent to the full Board for review.

Form 990, Part VI, Section B, Line 12c: The conflict of interest policy is applicable for all WABA officers and members of the Board of Directors. New directors are required to sign a conflict of interest policy. It is reviewed annually to offer officers and directors the opportunity for disclosure and remind existing directors of the policy and their responsibilities under it.

If an active or proposed transaction or project of WABA involves a conflict

of interest, whether real or apparent, by a member of the Board of

Schedule O (Form 990 or 990 EZ) (2010) Page 2					
Name of the organization Washington Area Bicyclist Association 23-7305477					
Directors, the Board shall approve of such project or transaction only if					
the Board has full knowledge of the economic benefit to the individual					
involved in the conflict of interest, that the affected individual has not					
participated in the vote approving the transaction of the project and was					
in fact absent both during the discussion of the transaction or project,					
and at the time the Board voted. In certain cases, the Board shall request					
that the affected individual resign or take a leave of absence from the					
Board of Directors.					

Form 990, Part VI, Section B, Line 15: The Executive Director's salary is set by the Executive Committee and approved by the full Board after review of comparable positions and salaries in the DC area and around the United States. This review took place in 2010.

FOLU 990	, Part	VI,	Section	С,	Line	19:	The	documents	listed	in	question	19
are avai	lable 1	upon	request.									

Schedule O (Form 990 or 990-EZ) (2010)

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