Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Α	For th	ie 2012 calen	dar year, or tax year beginning , 2012, and ending			070		
В	Check it	f applicable:	C	D En	nployer Identifi	cation Number		
	Ad	dress change	Pacific Crest Trail Association	I 3	3-00512	02		
	I Na	me change	1331 Garden Highway		lephone numbe			
	\vdash	tial return	Sacramento, CA 95833	١	16-285-	1846		
	\blacksquare			-	10 203	1040		
	\vdash	rminated		ا ا	ė	1 000	001	
	H	nended return		- (a) Is this a group	oss receipts \$		X No	
	∐ Ар	plication pending	ILZ BELGETOIL			F 1.03		
_	5		Same As C Above	(b) Are all affiliate If 'No,' attach a	s includea <i>:</i> a list. (see instri	uctions) Yes	∐ No	
L	Tax-e	exempt status	X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527					
J	Web	osite: 🕨 ww		(c) Group exempti	on number			
K		of organization:	X Corporation Trust Association Other L Year of Formation	on: 1977	M State of leg	gal domicile: CA		
Pa	ırtl	Summar	у					
74-1110	1	Briefly descri	be the organization's mission or most significant activities: To protect	t, preser	ve and	promote	<u>the</u>	
ά		Pacific .	Crest National Scenic Trail as an international	<u>lly signi</u>	<u>ficant</u> :	<u>resource</u>	<u>for</u>	
Governance		<u>the enjo</u>	yment of hikers and equestrians, and for the v	<u>alue that</u>	<u>wild</u> a	<u>nd sceni</u> c	2	
Ę		<u>lands pr</u>	<u>ovide to all people</u>		. -			
ŏ	2	Check this bo	if the organization discontinued its operations or disposed of more	re than 25% of	its net ass	ets.		
			eting members of the governing body (Part VI, line 1a)				13	
SS			dependent voting members of the governing body (Part VI, line 1b)				13	
ij			of individuals employed in calendar year 2012 (Part V, line 2a)				22	
Activities &			of volunteers (estimate if necessary)ed business revenue from Part VIII, column (C), line 12			-51	1,637	
⋖	and the second		I business taxable income from Form 990-T, line 34				0.	
12		ivet unrelated	Tousiness taxable income nomin of 1990-1, line 34	Prior Y		Current Y		
	8	Contributions	and grants (Part VIII, line 1h)		4,516.		, 058.	
ne			rice revenue (Part VIII, line 2g)		4,588.	1,003		
Revenue			come (Part VIII, column (A), lines 3, 4, and 7d)		5,329.		,489.	
æ			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,647.		,476.	
_			e — add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,080.	1,913		
_			milar amounts paid (Part IX, column (A), lines 1-3)		3,606.		,175.	
	ı		to or for members (Part IX, column (A), line 4)		3,000.	20	, 110.	
	ı	•	er compensation, employee benefits (Part IX, column (A), lines 5-10)		9,051.	1,148	217	
es	[fundraising fees (Part IX, column (A), line 11e)		3,193.		,420.	
Expenses	l				3,193.	ALEJSAINUS A	, 420.	
X			sing expenses (Part IX, column (D), line 25) > 370,311.				or p	
-			es (Part IX, column (A), lines 11a-11d, 11f-24e)		3,164.		<u>, 473.</u>	
		•	es. Add lines 13-17 (must equal Part IX, column (A), line 25)		9,014.	1,963		
		Revenue less	expenses. Subtract line 18 from line 12	829	9,066.	-50	,037.	
000				Beginning of Cu	ırrent Year	End of Ye		
Bala			(Part X, line 16)		5,636.	1,432		
Net Assets Fund Balan	21	Total liabilitie	s (Part X, line 26)	123	3,874.	124	<u>,758.</u>	
고급	22	Net assets or	fund balances. Subtract line 21 from line 20	1,30	1,762.	1,307	,525.	
Pa	rt II	Signatur	e Block	ZH	0 1000			
Unde	r penalti	es of perjury, I de	clare that I have examined this return, including accompanying schedules and statements, and to the rer (ether) than officer) is based on all information of which preparer has any knowledge.	ne best of my knowl	edge and belief	f, it is true, correct	, and	
Comp	piete. De	ciaration of prepar	refreshed than officer) is based on an information of which preparer has any knowledge.	1 01	11.2			
		Signatur	orgoten Bliger	Date	6/13			
Sig	ın	Signatur	_ //					
He	re		Department of the second	etary_				
			print name and title.			TIN		
		Print/Type pi	reparer's name Preparer's signature Cost Date Date	12 Check	if	1114		
Pai			McCardle Ask, C.P.A. Debbie McCardle Ask, C.P.A.	self-em	ployed P	00052634		
	pare		▶ John Waddell & Co., CPAs		3			
Us	e Onl	y Firm's addre	ss 3416 American River Drive, #A	Firm's EIN ► 94-2329070				
			Sacramento, CA 95864	Phone	no. (916)	488-2460		
May	the IF	RS discuss thi	is return with the preparer shown above? (see instructions)			X Yes	No	

	990 (2012) Pacific Crest Trail Association	33-00	51202	Page 2
Pai	t III Statement of Program Service Accomplishments			
74.20	Check if Schedule O contains a response to any question in this Part III			X
1	Briefly describe the organization's mission:			
	To protect, preserve and promote the Pacific Crest National Scen	ic Trai.	l as an	
	internationally significant resource for the enjoyment of hikers	and eq	uestria	ns, and
	for the value that wild and scenic lands provide to all people.			
2	Did the organization undertake any significant program services during the year which were not listed on the pr	ior		
_	Form 990 or 990-EZ?		Yes	X No
	If 'Yes,' describe these new services on Schedule O.			Δ
2	Did the organization cease conducting, or make significant changes in how it conducts, any program se	arvicas?	Yes	X No
3	If 'Yes,' describe these changes on Schedule O.	51 VICC3:	163	V NO
	·			
4	Describe the organization's program service accomplishments for each of its three largest program services Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of	vices, as me of grants and	asured by e	expenses.
	others, the total expenses, and revenue, if any, for each program service reported.	, granto ana	unocation is	.0
4 =	(Code:) (Expenses \$ 728,801. including grants of \$ 13,175.)	Revenue S	40	0,101.)
•	PRESERVE:	10101100 1		, , , , , , , ,
			mod the	hard
	In 2012, more than 1,600 citizen stewards and corps crew members			
	physical labor of annual maintenance and restoration of the PCT.			
	contributed 92,418 service hours in 2012, an in-kind value of \$2			
	hours included the completion of 1,172 miles of trail maintenance		iles of	<u>trail</u>
	reconstruction, 1 trail head kiosk, and 24 volunteer training ev	<u>ents. </u>		
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
4 h	(Code: ) (Expenses \$ 431,288. including grants of \$ ) (	Revenue S	24	2,499.)
7.	PROMOTE:	10101100 7		( <u>, 433.</u> )
	Through our print and electronic publications and personal outre			
	PCT, marshal volunteers and keep our members and elected leaders			
	and issues facing the trail. In 2012, promotional activities inc			
	four issues (38,000 copies) of the Pacific Crest Trail Communica			
	distributing it to members, partners and elected officials; publ			<u>al</u>
	calendar; publishing four regular issues of Trail Dirt, the PCTA	<u>'s elec</u>	tronic_	
	newsletter. The PCTA received 704 calls to the toll-free Trail	Informa	tion te	lephone
	line; issued 1,497 wilderness permits; and monitored 561,438 web	<u>site vi</u>	sits and	d
	14,000 Facebook likes.			
40	(Code:) (Expenses \$ 210,486. including grants of \$ 15,000.)	Revenue S	12	ያ ያበበ ነ
70	PROTECT:	10101140 4		.0,000.
			fodoral	
	In 2012, the PCTA partnered with private foundations, land trust			
	agencies to purchase tracts of land from private land owners on			
	PCT including the following: Southern California - PCTA partner			
	Borrego Foundation to purchase a 40-acre parcel adjacent to the			
	Borrego Desert State Park.			
	Program service accomplishments continued on Schedule O.			
4 d	Other program services. (Describe in Schedule O.)  See Schedule O			
. •	(Expenses \$ including grants of \$ ) (Revenue \$			)
4 -	Total program service expenses ► 1,370,575.			
40				

Form **990** (2012)

Form 990 (2012) Pacific Crest Trail Association
Part IV | Checklist of Required Schedules

==35			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III.	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
	b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b		Х
	c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII.	12a	Х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
-	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		L

Form 990 (2012) Pacific Crest Trail Association

Part IV Checklist of Required Schedules (continued)

(I g/CII	Circuited Schedules (Communication		V	NI-
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and IL	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23		Х
24 8	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		x
i	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		6
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
•	any tax-exempt bonds?	24c		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
ŀ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		х
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
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
ď	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	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	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
	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 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
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 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form 990 (2012) Pacific Crest Trail Association 33-0051202 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V..... Yes No 10 1 b 0 **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . . . . . c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?..... X 1 c 2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . . Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . . 2 b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) X 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?...... 3 a b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O...... 3 h 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4 a **b** If 'Yes,' enter the name of the foreign country: > See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5 a X X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?..... c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?..... 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization X solicit any contributions that were not tax deductible as charitable contributions?..... 6 a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?.... Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and 7 a X services provided to the payor?..... **b** If 'Yes,' did the organization notify the donor of the value of the goods or services provided? . . . . . . . . 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Х 7с d If 'Yes,' indicate the number of Forms 8282 filed during the year..... X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?... 7 e X 7 f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?..... g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?..... h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7 h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business Ω holdings at any time during the year?..... Sponsoring organizations maintaining donor advised funds. 9 a b Did the organization make a distribution to a donor, donor advisor, or related person?..... 10 Section 501(c)(7) organizations. Enter: **b** Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities..... 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders..... 11 a **b** Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)..... 12a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?.... 12a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year...... 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in c Enter the amount of reserves on hand .....

14a Did the organization receive any payments for indoor tanning services during the tax year?.....

X

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year. . . . . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad 13 1 a authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent . . 13 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee or key employee?..... 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors or trustees, or key employees to a management company or other person?...... 3 Did the organization make any significant changes to its governing documents Х since the prior Form 990 was filed?..... Did the organization become aware during the year of a significant diversion of the organization's assets?..... Х 5 Did the organization have members or stockholders?.... See. Schedule. 0.......... Х 6 X 7 a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?..... 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body?..... 8 a X 8 b **b** Each committee with authority to act on behalf of the governing body?..... Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... Х (This Section B requests information about policies not required by the Internal Revenue Code. No Yes X 10 a 10 a Did the organization have local chapters, branches, or affiliates?..... b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?......... 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise X 12b to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Х Schedule O how this is done ...... 120 X 13 13 Did the organization have a written whistleblower policy?..... X Did the organization have a written document retention and destruction policy?..... 14 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? 15 X 15 a a The organization's CEO, Executive Director, or top management official.. See . Schedule.. O..... Х b Other officers of key employees of the organization...See.Schedule.0..... 15 b If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... Х 16a b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?.. 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ See Schedule O 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 public inspection. Indicate how you make these available. Check all that apply. Own website Another's website Other (explain in Schedule O) X X Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

_3	3	_	n	n	5	1	2	በ	2
_	•		v	•	_	_	-	•	_

#### 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......

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- · List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

		(C)								
(A) Name and Title	(B) Average hours per week (list	one bo	ox, ùn	less	perso	k more t n is bot or/truste	h an i	(D)  Reportable compensation from	(E)  Reportable compensation from	<b>(F)</b> Estimated amount of other compensation
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) David E. Allen	2.5									
Director	0	Х		X				0.	0.	0.
(2) John Crawford	2.5							_	_	_
Director	0	Х	Щ					0.	0.	0.
(3) Christy Corzine	2.5									
Sec/Treasurer	0	X	Ш	X				0.	0.	0.
_(4) David Hanna	2.5								_	_
Director	0	Х	Щ					0.	0.	0.
_(5) Denise Gilbert	2.5									
Director	0	X						0.	0.	0.
(6) Barney Mann	2.5	ļ								
Chairman	0	X		X				0.	0.	0.
<pre>_Ø John Hoffnagle</pre>	2.5									
Director	0	Х						0.	0.	0.
(8) Eric Ryback	2.5									
Director	0	Х			Ш			0.	0.	0.
(9) Terri Shettle	2.5									
Vice Chair	0	Х		X				0.	0.	0.
(10) Scott Jacobsmeyer	2.5									
Director	0	Х						0.	0.	0.
(11) Rick Thalhammer	2.5	.								
Director	0	X						0.	0.	0.
(12) Peggy Willis	2.5							:		
Director	0	_X_						0.	0.	0.
(13) Sky George	2.5									
Director	0	Х						0.	0.	0.
(14) Liz Bergeron	40_									
Executive Direc	0			X				120,101.	0.	11,117.

Part VII Section A. Officers, Directors, Trus	stees, l	Key	Em	ıplo	oye	es,	and	d Highest Com	pensated Emp	loyees (cont)
	(B)			•	C)					
(A) Name and title	Average hours per	box,	, unle	ess pe	erson direct	than is both or/trus	h an tee)	(D)  Reportable compensation from	<b>(E)</b> Reportable compensation from	<b>(F)</b> Estimated amount of other
	week (list any hours for related organiza - tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15)										
<u>(16)</u>										
(17)										· · · · · · · · · · · · · · · · · · ·
(18)										1
(19)										
(20)										
(21)										,
(22)										
(23)										
(24)										
(25)										
1 b Sub-total							<b>&gt;</b>	120,101.	0.	11,117.
c Total from continuation sheets to Part VII, Section	1 A					• • •	<b>&gt;</b>	0.	0.	0.
d Total (add lines 1b and 1c).  2 Total number of individuals (including but not limited to						• • •	<b>►</b> ved	120,101. more than \$100,00	0.0 of reportable comp	11,117. pensation
from the organization 1										1,, 1,,
3 Did the organization list any former officer, directo on line 1a? If 'Yes,' complete Schedule J for such										Yes No
4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater such individual.	than \$1	50,00	0?	lf 'Υ	'es'	com	olet	e Schedule J for	from	. 4 X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,'	compen	satio	n fro	om a	anv	unre	late	d organization or	individual	
Section B. Independent Contractors										34 00 50
Complete this table for your five highest compensation from the organization. Report compensation.	tion for t	pend he ca	dent	cor dar y	ntrad year	tors endi	tha ng v	vith or within the or	ganization's tax year	
Name and business addres	ss							Description of		(C) Compensation
										1000
2 Total number of independent contractors (including but \$100,000 in compensation from the organization ▶		ted to	tho	se li	isted	abov	ve)	who received more	than	
\$100,000 in compensation from the organization	U								2156	到2000年1000年1000年1000年1000年1000年1000年1000

Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII ..... (C) Unrelated (A) Total revenue (B) Related or Revenue excluded from tax exempt business under sections function revenue 512, 513, or 514 revenue CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS 1 a Federated campaigns . . . . . . . . . 1 a 11,936 **b** Membership dues..... 1 b c Fundraising events..... 1 c d Related organizations...... 1 d e Government grants (contributions) . . . . 1 e f All other contributions, gifts, grants, and similar amounts not included above . . . 1 f 874,122 Q Noncash contributions included in Ins 1a-1f: 57,181 886,058 PROGRAM SERVICE REVENUE **Business Code** 2a Government Grants 900099 953,788 953,788 b Program income 900099 30,000 30,000 900099 19,437 19,437 c <u>Trail Fest</u> f All other program service revenue. . . g Total. Add lines 2a-2f ..... 003,225 Investment income (including dividends, interest and other similar amounts)..... 19,489 19,489 Income from investment of tax-exempt bond proceeds. . Royalties..... (i) Real (ii) Personal 6a Gross rents..... b Less: rental expenses c Rental income or (loss) . . . (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory. **b** Less: cost or other basis and sales expenses . . . . . . c Gain or (loss)..... d Net gain or (loss) ..... 8 a Gross income from fundraising events (not including. \$ of contributions reported on line 1c). See Part IV, line 18..... a **b** Less: direct expenses . . . . . . b c Net income or (loss) from fundraising events...... ▶ 9 a Gross income from gaming activities. See Part IV, line 19..... a **b** Less: direct expenses..... **b** c Net income or (loss) from gaming activities...... ▶ 10a Gross sales of inventory, less returns and allowances..... 14,073 **b** Less: cost of goods sold..... **b** c Net income or (loss) from sales of inventory....... 3,420 3,420 Miscellaneous Revenue **Business Code** 11a Other Income 900099 1,056 1,056 d All other revenue...... e Total. Add lines 11a-11d...... 1,056 Total revenue. See instructions..... 0

1,913,248.

1,006,645

PartIX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX...... (D) (C) Do not include amounts reported on lines 6b, Total expenses Fundraising Program service Management and 7b, 8b, 9b, and 10b of Part VIII. <u>general expenses</u> expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 28,175 28,175 Grants and other assistance to individuals in the United States. See Part IV, line 22..... Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16. Benefits paid to or for members ..... Compensation of current officers, directors, trustees, and key employees ...... 131,219 60,492 41,780 28,947. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)..... 0 0 113,644 103,991. 777,788. 560,153. Pension plan accruals and contributions (include section 401(k) and section 403(b) 67,047 46,707 10,645 9,695. 96,879 69,464 13,910 13,505. 75,284 52,403. 12,020. 10,861. Fees for services (non-employees): 2,416. 16,618 11,576 2,626 2,094. c Accounting..... 14,400 10,031 2,275 e Professional fundraising services. See Part IV, line 17... 67,420 67,420. f Investment management fees ...... g Other. (If line 11g amt exceeds 10% of line 25, col-2,103. 54,320 56,423 umn (A) amt, list line 11g expenses on Sch 0)...... Advertising and promotion..... 956 71,542. 13 231,683 159,185 14 Information technology..... 20,765 14,454 2,470 3,841. 15 Royalties..... 83,179 11,745 11,586. 16 Occupancy..... 106,510 17 1,124 151.511 135,456 14,931 Payments of travel or entertainment expenses for any federal, state, or local public officials..... Conferences, conventions, and meetings.... 19 51.872 45,584 996 5,292. Payments to affiliates..... 21 Depreciation, depletion, and amortization.... 18,702 2,955 2,719. 13,028 23 Insurance ..... 1,038 956 6,572 4,578 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.).... 4,215 18,412 44,417 21,790 a Miscellaneous d e All other expenses..... 370,575 222,399 370,311 Total functional expenses. Add lines 1 through 24e. . . . 963,285 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. X if following Check here ► SOP 98-2 (ASC 958-720).....

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X...... (B) (A) End of year Beginning of year 1 234,083. Cash - non-interest-bearing..... 159,771 2 2 Savings and temporary cash investments..... Pledges and grants receivable, net..... 3 147,241. 3 501,895 4 79.178. Accounts receivable, net ...... 134,180 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L..... 6 7 Notes and loans receivable, net..... Inventories for sale or use..... 8,128 8 7,806. 9 Prepaid expenses and deferred charges..... 30,820. 24,497 10a 165,309 10b 10 c **b** Less: accumulated depreciation..... 32,879 28,929. 11 904, 226. Investments - publicly traded securities..... 564,286 12 Investments - other securities. See Part IV, line 11..... 13 13 Investments -- program-related. See Part IV, line 11...... 14 Intangible assets..... 15 Other assets. See Part IV, line 11..... 15 16 1,432,283. Total assets. Add lines 1 through 15 (must equal line 34)..... 1,425,636 16 Accounts payable and accrued expenses ..... 17 123,078. 17 123,874 Grants payable ...... 18 18 19 Deferred revenue ..... 19 1,680. 20 Tax-exempt bond liabilities ..... 21 Escrow or custodial account liability. Complete Part IV of Schedule D..... Loans and other payables to current and former officers, directors, trustees, 22 23 24 Unsecured notes and loans payable to unrelated third parties..... Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 26 124,758 26 Total liabilities. Add lines 17 through 25..... 123,874 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34. 27 276, 126. Unrestricted net assets..... 341,170 28 Temporarily restricted net assets..... 86,802 113,369. 29 873,790 Permanently restricted net assets..... 918,030. R Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds..... 31 Paid-in or capital surplus, or land, building, or equipment fund......

> 1,432,283. Form **990** (2012)

1,307,525.

32

33

34

1,301,762

1,425,636

33

34

Retained earnings, endowment, accumulated income, or other funds.....

Total liabilities and net assets/fund balances.....

		33-00	51202		Page <b>12</b>
Pai	t XI Reconciliation of Net Assets				
H-000	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)		1	1,913	,248.
2	Total expenses (must equal Part IX, column (A), line 25)		2	1,963	,285.
3	Revenue less expenses. Subtract line 2 from line 1		3	-50	,037.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		4	1,301	,762.
5	Net unrealized gains (losses) on investments		5	55	,800.
6	Donated services and use of facilities		6		
7	Investment expenses		7		
8	Prior period adjustments		8		
9	Other changes in net assets or fund balances (explain in Schedule O)	L	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
1	column (B))	1	0	1,307	<u>,525.</u>
Par	t XII Financial Statements and Reporting				-
	Check if Schedule O contains a response to any question in this Part XII				
				Ye	s No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or rev separate basis, consolidated basis, or both:	iewed (	on a		A NOT
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?			2b 2	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a se basis, consolidated basis, or both:	parate			
	X Separate basis Consolidated basis Both consolidated and separate basis				
c	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a review, or compilation of its financial statements and selection of an independent accountant?	udit,		2c :	х
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing Audit Act and OMB Circular A-133?			3 a	Х
b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits	audit	<u></u>	3 b	
BAA				Form 99	(2012)

#### **SCHEDULE A** (Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Name	of the	e organization							Employe	dentificat	tion number		
Pac	ifi	ic Crest Trai:	l Association						33-00	051202	2		
Par	H	Reason for Pub	lic Charity Status	(All organizations	must o	comple	ete this	part.)	See ii	nstruct	ions.		
The o	orgai	nization is not a priva	ate foundation becaus	se it is: (For lines 1 thro	ugh 11,	check c	nly one	box.)					
1		A church, convention	n of churches or asso	ciation of churches des	cribed ir	section	n 1 <mark>70(</mark> b)	(1)(A)(i)					
2	П	A school described i	n section 170(b)(1)(A	)(ii). (Attach Schedule E	Ξ.)								
3	П	A hospital or a coop	erative hospital service	ce organization describe	ed in <b>se</b> d	ction 17	0(b)(1)(A	<b>4)(iii)</b> .					
4	П	A medical research	organization operated	l in conjunction with a h	nospital (	describe	ed in sec	ction 17	0(b)(1)(A	<b>1)(iii)</b> . Er	nter the hos	pital's	5
	-	name, city, and state	e:										
5		170(b)(1)(A)(iv). (Co	mplete Part II.)	college or university own	•	•			l unit des	scribed in	section		
6	ш			overnmental unit descri							700		
7	X	in section 170(b)(1)(	A)(vi). (Complete Pa			•	iental un	it or fron	n the ger	neral pub	lic described	i	
8	Ш	A community trust d	escribed in <b>section 1</b> 3	<b>70(b)(1)(A)(vi).</b> (Comple	te Part I	l.)							
9	_	An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)											
10			· ·	exclusively to test for pu		-							
11	Ц	An organization organi supported organization supporting organizat	zed and operated exclus ns described in section ion and complete line	sively for the benefit of, to 509(a)(1) or section 509 s 11e through 11h.	perform (a)(2). So	the func ee <b>sectio</b>	tions of, on 509(a)	or carry <b>(3).</b> Che	out the p ck the bo	urposes on that de	of one or mo escribes the	re pub type o	licly f
		a ∏Type I b	Type II <b>c</b>	Type III - Function	nally inte	grated	(	а □ Т	Type III	– Non-f	unctionally	integr	ated
е	Ш	other than foundation section 509(a)(2).	managers and other th	anization is not control an one or more publicly s	supported	d órganiz	ations d	escribed	in section	on 509(a)	)(1) or	ıs	
f		check this box		nation from the IRS that									
g		Since August 17, 20	06, has the organizati	on accepted any gift o	r contrib	ution fr	om any	of the f	ollowing	persons	s?		
		(i) A nargan who	directive or indirective o	antrala sithar alama ar	tonotho	رم طائنین		laaariba	d in (ii)	and (iii)		Yes	No
				ontrols, either alone or pported organization?.									
		(ii) A family memb	er of a person descri	bed in (i) above?							11 g (ii)		
		(iii) A 35% controlle	ed entity of a person	described in (i) or (ii) a	bove?						11 g (iii)		
h		Provide the following	information about th	e supported organization	on(s).								<u> </u>
		(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiz column ( your go	s the ation in listed in werning ment?	(v) Did yo the organ column ( supp	ou notify ization in i) of your port?	organiz colur organize	s the ation in mn (i) ed in the S.?	(vii) Amount	of mor	etary
					Yes	No	Yes	No	Yes	No			
-													
(A)	-								ļ				
<u>(B)</u>													
(C)													
1											12.1		
(D)							-	ļ <u>.</u>			<del></del>		
<u>(E)</u>		Carrie Carrier States			CHARGO	10 G-2	4016 (000 000		Silving	80000000000000000000000000000000000000			
Total													

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

Schedule A (Form 990 or 990-EZ) 2012

Partill 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	tion A. Public Support						
Cale beg	endar year (or fiscal year inning in) ►	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	<b>(e)</b> 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.)	1,561,244.	1,667,948.	2,102,750.	2,897,396.	1,839,846.	10,069,184.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			1			0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	1,561,244.	1,667,948.	2,102,750.	2,897,396.	1,839,846.	10,069,184.
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)						688,039.
6	Public support. Subtract line 5 from line 4						9,381,145.
Sec	tion B. Total Support						
Cale beg	endar year (or fiscal year inning in) ►	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	<b>(e)</b> 2012	(f) Total
7	Amounts from line 4	1,561,244.	1,667,948.	2,102,750.	2,897,396.	1,839,846.	10,069,184.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8,687.	3,355.	3,502.	19,162.	19,489.	54,195.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
11	Total support. Add lines 7 through 10						10,123,379.
12	Gross receipts from related activ	ities, etc (see ins	tructions)				322,580.
13	First five years. If the Form 990 is organization, check this box and						▶
	tion C. Computation of Pul	blic Support P	ercentage	-			
	Public support percentage for 20	•	• •				92.67%
15	Public support percentage from 2	2011 Schedule A,	Part II, line 14			15	90.54%
16 a	33-1/3% support test — 2012. If and stop here. The organization	the organization of qualifies as a pub	did not check the plicly supported o	box on line 13, a rganization	nd the line 14 is 3	33-1/3% or more,	check this box ► X
ŀ	33-1/3% support test — 2011. If t and stop here. The organization	the organization d qualifies as a pul	id not check a bo blicly supported o	x on line 13 or 16 organization	a, and line 15 is	33-1/3% or more,	check this box
1 <b>7</b> a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	est — 2012. If the omeets the 'facts-as-and-circumstanc	organization did nand-circumstances es' test. The orga	ot check a box or s' test, check this inization qualifies	n line 13, 16a, or box and <b>stop he</b> as a publicly sup	16b, and line 14 i re. Explain in Par ported organization	s 10% t IV how on▶
	o 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances' t	and-circumstances test. The organiza	s' test, check this ation qualifies as	box and <b>stop he</b> a publicly support	r <b>e.</b> Explain in Par ted organization	t IV how the
18	Private foundation. If the organiz	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see in	structions

33-0051202

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.)

	tion A. Public Support					341	
Caler	dar year (or fiscal yr beginning in) >	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	<b>(e)</b> 2012	(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 performed, or facilities furnished in any activity that is related to the organization's				****		
3	tax-exempt purpose						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					1.55	
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5						~
ŀ	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						
c	Add lines 7a and 7b						*
8	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support				·····		
Calen	dar year (or fiscal yr beginning in) 🕨	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	<b>(e)</b> 2012	(f) Total
10 a	Amounts from line 6						
-	Add lines 10a and 10b						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
	Total support. (Add Ins 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 organization, check this box and	is for the organiza	ation's first, secor	nd, third, fourth, o	r fifth tax year as	a section 501(c)(	3)
	tion C. Computation of Pul						
	Public support percentage for 20			ne 13, column (f)).		15	%
	Public support percentage from 2	• •	• •			<del></del>	8
	tion D. Computation of Inv						
17	Investment income percentage for				mn (f))	17	%
18	Investment income percentage fr	om <b>2011</b> Schedu	le A, Part III, line	17			્રે
19 a	<b>33-1/3% support tests</b> — <b>2012.</b> If is not more than 33-1/3%, check	the organization this box and <b>sto</b>	did not check the p here. The organ	box on line 14, a nization qualifies a	nd line 15 is mo s a publicly supp	re than 33-1/3%, a ported organization	1
	<b>33-1/3% support tests</b> — <b>2011.</b> If line 18 is not more than 33-1/3%						
20	Private foundation. If the organiz	zation did not che	ck a box on line	14, 19a, or 19b, cl	neck this box and	d see instructions.	▶ 🗍

Schedule	A (Form 990 or 990-EZ) 29	012 Pacifi	c Crest	Trail	Association	33-0051202	Page 4
Part IV	Supplemental Inf Part II, line 17a o (See instructions)	formation. Com	plete this III, line 1	s part to 2. Also	provide the explar complete this part	nations required by Part II, line for any additional information.	10;
	.=						
					··		

BAA

Schedule A (Form 990 or 990-EZ) 2012

#### SCHEDULE C (Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

Open to Public Inspection

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

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

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

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

• 5	Section 501(c)(4), (5), or (6) c	organizations: Complete Part III.			
Name	of organization	1 55 AW (#4.00)		Employer identifica	ation number
Pac	cific Crest Trail A	ssociation	-	33-005120	
Pai	rt I-A Complete if the o	rganization is exempt under section	on 501(c) or is a s	section 527 organiz	zation.
1	Provide a description of the	organization's direct and indirect political of	ampaign activities in	Part IV.	-
2	Political expenditures			▶\$	
3	Volunteer hours				
Pai	rt I-B Complete if the o	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any exc	cise tax incurred by the organization under	section 4955	▶\$	0.
2	Enter the amount of any exc	cise tax incurred by organization managers	under section 4955.	▶\$	0.
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 2	a Was a correction made?				☐Yes ☐No
	f 'Yes,' describe in Part IV.				
Pai	rt I-C Complete if the o	rganization is exempt under section	on 501(c), except	section 501(c)(3).	-
		pended by the filing organization for section			
2	Enter the amount of the filing of	organization's funds contributed to other organ	izations for section 527	7 evemnt	
_		· · · · · · · · · · · · · · · · · · ·			
3	Total exempt function expen	ditures. Add lines 1 and 2. Enter here and	on Form 1120-POL.		•
-	line 17b			▶\$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5	Enter the names, addresses	and employer identification number (EIN) s. For each organization listed, enter the ar	of all section 527 poli	tical organizations to w	hich the filing
	organization made payments	s. For each organization listed, enter the ar	mount paid from the f ivered to a separate po	iling organization's fund	ds. Also enter the
	segregated fund or a political	ns received that were promptly and directly del al action committee (PAC). If additional spa	ice is needed, provide	information in Part IV	
			4150		(2) A
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If	(e) Amount of political contributions received and
				none, enter-0	promptly and directly delivered to a separate
					political organization. If none, enter -0
/1\					
(1)					
(2)	<del></del>				
(2)				••	
(3)					
`-,				· · · · · · · · · · · · · · · · · · ·	
(4)		<b></b>			
(5)					
					<u>.                                    </u>
(6)		L			[

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

Schedule C (Form 990 or 990-EZ) 2012

Part II-A Complete if section 501(	the organization (h)).	is exempt under sec	ction 501(c)(3) and	filed Form 5768 (ele	ection under
		to an affiliated group (and	list in Part IV each affilia	ted group member's name	
address,	, EIN, expenses, and	share of excess lobbying	expenditures).		
B Check ► if the fili	ng organization check	ked box A and 'limited cor	ntrol' provisions apply.		
(The term	Limits on Lobbyii 'expenditures' mean	ng Expenditures is amounts paid or incurr	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendit	ures to influence pub	lic opinion (grass roots lo	bbying)		
		gislative body (direct lobb	·	24,995.	
		d 1b)	- I-	24,995.	0.
	'	es 1c and 1d)	L	1,938,290.	
			T T	1,963,285.	0.
both columns	nount. Enter the amo	unt from the following tab	le in	248,164.	
If the amount on line 1e, col	umn (a) or (b) is:	he lobbying nontaxable a	amount is:		
Not over \$500,000	2	0% of the amount on line 1e.			
Over \$500,000 but not over \$1		100,000 plus 15% of the excess			
Over \$1,000,000 but not over \$		175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$		225,000 plus 5% of the excess of	ver \$1,500,000.		
over \$17,000,000  g Grassroots nontaxable a		1,000,000.	1	62 041	
_	•	enter -0		62,041.	0.
i Subtract line 1f from lin				0.	0.
i If there is an amount other	er than zero on either li		ء anization file Form 4720 ا	eporting	
	4	-Year Averaging Period U	Inder Section 501(h)		
(Som		made a section 501(h) ele below. See the instruction			
1-14	Lobby	ing Expenditures During	4-Year Averaging Perio	od	
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	<b>(c)</b> 2011	(d) 2012	(e) Total
2 a Lobbying non-taxable amount	235,250	. 260,254.	255,451.	248,164.	999,119.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))	Gr. S.				1,498,679.
<b>c</b> Total lobbying expenditures	20,710	. 26,212.	15,462.	24,995.	87,379.
d Grassroots nontaxable amount	58,813	. 65,064.	63,863.	62,041.	249,781.
e Grassroots ceiling amount (150% of line 2d, column (e))					374,672.
f Grassroots lobbying expenditures	16,658	19,806.	11,182.		47,646.
BAA				Schedule C (Form 9	90 or 990-EZ) 2012

Part II-B Complete if the organization is exempt under section 501(c)(3) and has N	OT file	d For	m 5768
(election under section 501(h)).	(	a)	(b)
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?.  d Mailings to members, legislators, or the public?.  e Publications, or published or broadcast statements?.  f Grants to other organizations for lobbying purposes?.  g Direct contact with legislators, their staffs, government officials, or a legislative body?.  h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?.  i Other activities?  j Total. Add lines 1c through 1i.  2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?.  b If 'Yes,' enter the amount of any tax incurred under section 4912.  c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912.			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		, or	
<ul> <li>Were substantially all (90% or more) dues received nondeductible by members?</li></ul>			2
<ul> <li>Dues, assessments and similar amounts from members.</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year.</li> <li>b Carryover from last year.</li> <li>c Total.</li> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> </ul>	al	1 2 a 2 b 2 c 3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4	
5 Taxable amount of lobbying and political expenditures (see instructions)		5	
Part IV Supplemental Information  complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5 art II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.	Part II-A	\ (affil	iated group list);

# SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

## **Supplemental Financial Statements**

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Pa	cific Crest Trail Association	33-0051202
-	Organizations Maintaining Donor Advised Funds or Other Similar Fund	
	the organization answered 'Yes' to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in don are the organization's property, subject to the organization's exclusive legal control?	nor advised funds
6	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other primpermissible private benefit?	Yes No
Pa	rt II Conservation Easements. Complete if the organization answered 'Yes'	to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education)	an historically important land area
	Protection of natural habitat Preservation of	a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form last day of the tax year.	of a conservation easement on the
		Held at the End of the Tax Year
	a Total number of conservation easements	. 2a
	<b>b</b> Total acreage restricted by conservation easements	. 2b
	c Number of conservation easements on a certified historic structure included in (a)	2c
	d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register.	2 d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the tax year ►	e organization during the
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, hand and enforcement of the conservation easements it holds?	dling of violations, Yes No
6		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during	the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of sect and section 170(h)(4)(B)(ii)?	tion 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense include, if applicable, the text of the footnote to the organization's financial statements that deconservation easements.	scribes the organization's accounting for
Pa	Organizations Maintaining Collections of Art, Historical Treasures, or Complete if the organization answered 'Yes' to Form 990, Part IV, line 8	Other Similar Assets.
1	a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenuant, historical treasures, or other similar assets held for public exhibition, education, or research in furting Part XIII, the text of the footnote to its financial statements that describes these items.	ue statement and balance sheet works of therance of public service, provide,
	b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue si historical treasures, or other similar assets held for public exhibition, education, or research in further following amounts relating to these items:	ance of public service, provide the
	(i) Revenues included in Form 990, Part VIII, line 1	
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar assets for financiamounts required to be reported under SFAS 116 (ASC 958) relating to these items:	ial gain, provide the following
;	a Revenues included in Form 990, Part VIII, line 1	
	<b>b</b> Assets included in Form 990, Part X	

12,161.

28,929

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): Public exhibition Loan or exchange programs Scholarly research Other h Preservation for future generations C Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?..... No Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included No on Form 990, Part X?..... Yes **b** If 'Yes,' explain the arrangement in Part XIII and complete the following table: Amount 1 c d Additions during the year..... 1 d e Distributions during the year..... 1 e f Ending balance..... 1f 2a Did the organization include an amount on Form 990, Part X, line 21?..... No b If 'Yes,' explain the arrangement in Part XIII. Check here if the explantion has been provided in Part XIII...... Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. (e) Four years (a) Current (b) Prior year (c) Two years (d) Three years 79,294 1 a Beginning of year balance..... 398,099 96,959 87,178. 73,126 **b** Contributions..... 403,930. 281,976. 6,309. 4,500. 2,198. c Net investment earnings, gains, 75,256. 19,164. 3,472 3,384 1,890. and losses ..... d Grants or scholarships . . . . . . . e Other expenditures for facilities 0. and programs ...... f Administrative expenses . . . . . . g End of year balance ..... 87,178. 77,214 877,285. 398,099. 96,959. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 2.24 % **b** Permanent endowment **c** Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c should equal 100%. 3 a Are there endowment funds not in the possession of the organization that are held and administered for the Yes No organization by: 3a(i) Х (i) unrelated organizations..... (ii) related organizations..... b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?..... 4 Describe in Part XIII the intended uses of the organization's endowment funds. See Part XIII Land, Buildings, and Equipment. See Form 990, Part X, line 10. (d) Book value (a) Cost or other basis (b) Cost or other Description of property (c) Accumulated basis (other) depreciation (investment) **1 a** Land..... **b** Buildings..... c Leasehold improvements..... 153,148. 136,380. 16,768 

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)..... Schedule D (Form 990) 2012 **BAA** 

12,161

Schedule D (1 offin 990) 2012 Pattille Clest II		U 10 N/B	33-0031202 1 age 3
Part VII Investments — Other Securities. Se	(b) Book value		valuation: Cost or
(a) Description of security or category (including name of security)	(b) Book value	end-of-yea	ar market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			TABLE TO SERVICE TO SE
(A)			
(B)			
(C)			
(D) (E)			3.00 10.00003.02
		in .	
(F)			and the second of the second
(G)			
(H)	-		6-
(l)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)		U 10 N/A	
Part VIII Investments - Program Related. Se			valuation: Cost or
(a) Description of investment type	(b) Book value		ar market value
(1)			107 ANNE 010 100
(2)			
(3)			
(4)		70	
(5)		100 to 10	
(6)			
(7)			
(8)			
(9)		7.654	
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)			DESCRIPTION OF THE PROPERTY OF THE PARTY OF
Part IX Other Assets. See Form 990, Part X		V/	1 455
	Description		(b) Book value
(1)			
(2)			
(3) (4)	14 15 15 15 15 15 15 15 15 15 15 15 15 15		
(5)		3-1-	
(6)		44 1000	
(7)	· Daniel Andrews	7826	
(8)		- Wester	
(9)	***************************************		
(10)		Defendance of the second of th	
Total. (Column (b) must equal Form 990, Part X, column	(R) line 15 )		<b>•</b>
Part X Other Liabilities. See Form 990, Par			
(a) Description of liability	(b) Book value		ave to Minter the State
(1) Federal income taxes			<b>民华世级第二次系统</b> 第一
(2)			
(3)		<b>自编制的 到路景景</b>	<b>是是一种自己的自己的</b>
(4)			<b>加速性的</b>
(5)			15年7月1日 安全市
(6)		<b>发展数据是对抗线型</b> 设	<b>发展,全国的人的</b>
(7)			
(8)			
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	▶		
2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote.	te to the organization's financial	statements that reports the organizati	ion's liability for uncertain tax positions
under FIN 48 (ASC 740). Check here if the text of the footnote has been p	provided in Part XIII		

	3-0051202	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R		
1 Total revenue, gains, and other support per audited financial statements	1 :	2,299,346.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.) . See Part XIII		
e Add lines 2a through 2d	2 e	386,098.
3 Subtract line 2e from line 1	3	1,913,248.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b.	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,913,248.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per		
1 Total expenses and losses per audited financial statements		2,293,583.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	ba Sala	
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.) . See .Part. XIII		
e Add lines 2a through 2d.	2 e	330,298.
3 Subtract line 2e from line 1		1,963,285.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	90.00	273007200.
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,963,285.
Part XIII Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an	/, lines 1b and	l 2b; Part V,
line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an	y additional in	formation.
Part V, Line 4 - Intended Uses Of Endowment Fund		
- 1 dit V, Ellio 4º intended Oses Of Endownient I dita		
To defray normal operating expenses of the PCTA incurred in the furt	herance c	of its
objectives of protecting, preserving, and promoting the PCT, to defr	av exnens	3 <b>6</b> 9
	ay_cxbcii	22
<u>incurred</u> by the PCTA in maintaining or improving the PCT, and to def	rau evner	266
	Tay exper	1262
incurred by the PCTA in promoting use of the PCT, membership in the	DCTT እ	
incurred by the FCIA in promoting use of the FCI, membership in the	PCIA,	
contributions on sifts to the DCMA and disset sects is succeed in the		
<u>contributions or gifts to the PCTA, and direct costs incurred in the</u>	manageme	int and
administration of the enderment for a		
administration of the endowment fund.		
BAA	Cohodula P 4	Form 000\ 0010
DAA	Schedule D (I	Form 990) 2012

2012	Schedule D, Part XIII - Supplemental Information	Page 5
Client 57175	Pacific Crest Trail Association	33-0051202
8/01/13		02:18PM
Schedule D, Part Other Revenue I	t XI, Line 2d ncluded In F/S But Not Included On Form 990	
Cost of Sales	Total	\$ 10,653. \$ 10,653.
Schedule D, Part Other Expenses	t XII, Line 2d And Losses Per Audited F/S	
Cost of Sales	Total	\$ 10,653. \$ 10,653.
		3

#### **SCHEDULE G** (Form 990 or 990-EZ)

# Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2012

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

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization Pacific Crest Trail Association 33-0051202 Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. a X Mail solicitations e X Solicitation of non-government grants Internet and email solicitations X Solicitation of government grants f С Phone solicitations Special fundraising events In-person solicitations 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?..... X Yes No **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. (vi) Amount paid to (or retained by) (i) Name and address of individual (v) Amount paid to (ii) Activity (iv) Gross receipts (iii) Did fundraiser or entity (fundraiser) have custody or control of contributions? (or retained by) from activity fundraiser listed in organization column (i) Yes No See Part Majorgiving.com Х 700,064 39,798 660,266. 2 3 4 5 6 7 8 9 10 39,798. 700,064. 660,266. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. CA OR WA AK AL AZ AR CO CT FL HI IL KS KY LA MA MD ME MI MN MS MO NH NJ NM NY NC OH OK PA RI TN UT VA WI

Schedule (	3 (Form 90	00 or 990-F71	2012	Dagific	Crost	Trail	Association
Schledule (	3 (201111 22	プレーレー ララロ・ベムノ	2012	Pacific	trest	iraii	ASSOCIATION

33-0051202

Page 2

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 gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add column (a) None through column (c)) REVENUE (event type) (event type) (total number) Gross receipts..... 2 Less: Charitable contributions...... Gross income (line 1 minus line 2)..... Cash prizes..... DIRECT 6 Rent/facility costs..... 7 Food and beverages ..... EXPENSES Entertainment ..... Other direct expenses..... 10 Direct expense summary. Add lines 4 through 9 in column (d)..... Net income summary. Combine line 3, column (d), and line 10.....▶ **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. (b) Pull tabs/instant (d) Total gaming (add column (a) through column (c)) (a) Bingo (c) Other gaming REVENUE bingo/progressive bingo Gross revenue..... 2 Cash prizes..... EXPENSE 4 Rent/facility costs..... Other direct expenses..... Yes Yes Yes No No Direct expense summary. Add lines 2 through 5 in column (d). Net gaming income summary. Combine lines 1, column (d) and line 7......▶ 9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states?.... **b** If 'No,' explain: 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?..... No b If 'Yes,' explain:

Sche	edule <b>G</b> (Form 990 or 990-EZ) 2012 Pacific Crest Trail Association 3:	3-0051202	Page 3
11	Does the organization operate gaming activities with nonmembers?	·····Yes	No
12	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?	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	☐ No
13	Indicate the percentage of gaming activity operated in:		
	a The organization's facility		<u> </u>
	an outside facility		<del></del>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	:	
	Name ►		
	Address ►		
15.	a Does the organization have a contact with a third party from whom the organization receives gaming revenue	2	No
	of If 'Yes,' enter the amount of gaming revenue received by the organization ▶ \$ and the	لسننا	
	of gaming revenue retained by the third party > \$ and to	ic amount	
	: If 'Yes,' enter name and address of the third party:		
	,,		
	Name •		1
	Address >		
16	Gaming manager information:		
	Name •		
	Gaming manager compensation ► \$		
	Description of services provided		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
	Mandatory distributions		
	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	Yes	No
D	organization's own exempt activities during the tax year > \$	u ie	
Par	Supplemental Information. Complete this part to provide the explanations required columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applications part to provide any additional information (see instructions).	by Part I, line a able. Also comp	2b, olete
	Part I, Line 2b - Fundraiser Additional Information		
	Majorgiving.com advises staff on fundraising strategies with the sol	icitation,	
	administrative work, and gift acceptance performed by PCTA staff.		
	The state of the s		
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	Country Meals		
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# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

2012

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Pacific Crest Trail Association	33-0051202	
Part I General Information on Grants and Assistance		
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	X	2
2 Decreibs in Bort IV the exemplasticals accordence for manifosing the consistency of manual finals in the 11-in all 11-in all 11-in		<u>:</u>

XXes	İ	es' to	•
	See Part IV	Complete if the organization answered 'Y	be duplicated if additional space is needed
	Z Describe in Fail 19 use organization s procedures for mornibiling the use of grant funds in the United States.	Part II 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 recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

			•				
1 (a) Name and address of organization or government	(b) EiN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) <u>Anza-Borrego_Foundation</u>	33-0334338 501 (c) (3	501 (c) (3)	15,000.	0			Purchase of parcel in State park
(2) Washington Conservation Corps.  P.O. Box 47611 Olympia, WA 98504	91-6001063		13,175.	.0			Maintain the Pacific Crest Trail.
(3)	:						
(4)							
(5)							
(8)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government o	rganizations listed	in the line 1 table				2
3 Enter total number of other organizations listed in the line 1 table	ons listed in the line					<b>A</b>	0

Schedule I (Form 990) (2012)

TEEA3901L 11/30/12

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

Page 2

Schedule I (Form 990) (2012) Pacific Crest Trail Association

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

ok, (f) Description of non-cash assistance								column (b), and any other							   1   1   1   1   1   1   1   1   1 			!                 
(e) Method of valuation (book, FMV, appraisal, other)								art I, line 2, Part III, o		nizations to	that are not	provides	nud	PCTA also	ports are	nt names,	reimbursable	           
(d) Amount of non-cash assistance								ation required in Pa		h_various_organ	of the trail 1	of funds, PCTA	and on the gro	2 project plans	ffProject_re	slude participa	sa_funding_for	           
(c) Amount of cash grant								provide the inform	ts Funds in U.S.	agreements wit	to cover parts	onitor the use	_specifications	ent_of_specific	ct by PCTA stai	place that inc	PCTA_provide	t occurs.
(b) Number of recipients								nplete this part to	oring Use of Gran	ion_(PCTA)_has	workforce_and	rograms. To m	ient including	s_and_developm	ring the proje	project takes	work performed	ter the projec
(a) Type of grant or assistance	-	2	8	4	S	9	7	Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.	Pacific Crest Trail Association (PCTA) has agreements with various organizations to	promote_the_diversity_of_our_workforce_and_to_cover_parts_of_the_trail_that_are_not	covered_by_other_volunteer_programsTo_monitor_the_use_of_funds,_PCTA_provides	oversight to the grant recipient including specifications and on the ground_	delineation_of_trail_projects_and_development_of_specific_project_plansPCTA_also	provides_technical_advice_during_the_project_by_PCTA_staffProject_reports_are	submitted to PCTA after each project takes place that include participant names.	number_of_hours_worked, and work performedPCTA provides_funding_for_reimbursable	

Schedule I (Form 990) (2012)

# SCHEDULE M (Form 990)

#### **Noncash Contributions**

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No. 1545-0047

2012

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Pacific Crest Trail Association
Part | Types of Property

Employer identification number

33-0051202

EPS Digit	DEPARTMENT OF THE PARTMENT OF								
		(a) Check if applicable	(b)  Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts				
1	Art – Works of art								
2	Art — Historical treasures								
3	Art — Fractional interests				graff6/9				
4	Books and publications	X		188.					
5	Clothing and household goods			43,217.					
6	Cars and other vehicles			10/2211					
7	Boats and planes								
8	Intellectual property				01.24				
9	Securities - Publicly traded	Х	8	13,357.					
10	Securities - Closely held stock			23,00					
11	Securities - Partnership, LLC, or trust interests.				10.7				
12	Securities - Miscellaneous								
	Qualified conservation contribution — Historic structures								
14	Qualified conservation contribution — Other								
15	Real estate – Residential								
16	Real estate — Commercial								
17	Real estate — Other.								
18	Collectibles.								
19	Food inventory	X	2	419.					
20	Drugs and medical supplies								
21	Taxidermy			·					
22	Historical artifacts				122 - 71-101 - 2				
23	Scientific specimens	<u></u>							
24	Archeological artifacts								
25	Other ► ()		***************************************						
26	Other ► ()				723				
27	Other • ()								
28	Other ► ( )				907/1959/09010-0				
29	Number of Forms 8283 received by the organization d	uring the tax	vear for contributions for	r which the					
	organization completed Form 8283, Part IV, Done	e Acknowled	gement		29				
					Yes No				
302	During the year, did the organization receive by co	ontribution a	ny property reported in	Part I lines 1-28 that	it must				
<b>30</b> a	hold for at least three years from the date of the initia	l contribution	, and which is not require	ed to be used for exempt					
					30 a X				
b	<b>b</b> If 'Yes,' describe the arrangement in Part II.								
31	1 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?								
32a	32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?								
b	If 'Yes,' describe in Part II.								
33	If the organization did not report an amount in column	(c) for a typ	e of property for which co	olumn (a) is checked,	<b>常是是国际</b>				
	describe in Part II.								

Schedule M (Form 990) 2012 Pacific Crest Trail Association	33-0051202	Page 2
<b>Partil</b> Supplemental Information. Complete this part to provide the information required and 33, and whether the organization is reporting in Part I, column (b), the number of items received, or a combination of both. Also complete this part for an article of the part	by Part I, lines 30b, er of contributions, th ny additional informa	32b, ie tion.
Sahadula M. Additional Information		<u>-</u>
Schedule M - Additional Information		
Column (b) represents number of contributions		

#### **SCHEDULE O** (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047 2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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 Employer identification number Pacific Crest Trail Association 33-0051202 **Program Service Accomplishments Continued: Protect** PCTA advocated for Land and Water Conservation funding which was used by the US Forest Service and the Bureau of Land Management for the following successful acquisitions to benefit the PCT: Northern California - 640-acre section of land on Mount Eddy containing more than a mile of the PCT tread; Oregon - 6,280 acres within the Cascade Siskiyou National Monument containing sections of the PCT (about 1.5 miles); Washington - two tracts of more than 800 acres containing 1.5 miles of the PCT tread. PCTA also monitored or responded to ongoing threats to the trail including the following: California - Wind Development, Solar Installation, Sunrise Powerlink, California High Speed Train, Bankruptcy/Selling of Warner Springs Ranch, Rim Reforestation, Sugarloaf Fuels Reduction, Bucks Project, Invasive Plant Eradication, Marine Corps Mountain Warfare Base Expansion, State Route 89 Realignment at Burney Falls State Park, and Castle Crags State Park Closure. Oregon - Cascade Crossing

power line, Pacific Connector Natural Gas Pipeline, and Palomar Pipeline.

Road Relocation. In 2012, PCTA staff conducted a total of 541 meetings with

Washington - Ski Area Expansion, Suiattle River Road Repairs, and Stehekin Valley

government agency partners. About half of these meetings included discussion of

protection activities. Our 2012 protection activities also included an annual trip

to Washington, D.C. in February to advocate for federal trail management, operations

and land acquisition funding for the PCT. Volunteers - including youth - and PCTA

staff members attended this "Hike the Hill" event, visiting with federal agency

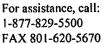
leaders and Congressional representatives and their staff.

Executive Director's salary.

objectives and other factors. In addition, in 2012 the Board of Directors obtained

comparable salary information and input from an independent CPA regarding the

______

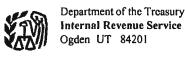


Notice Number: CP211A Date: July 15, 2013

Taxpayer Identification Number:

33-0051202 Tax Form: 990

Tax Period: December 31, 2012



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PACIFIC CREST TRAIL ASSOCIATION 1331 GARDEN HIGHWAY 95833-9755 SACRAMENTO CA



033090

## APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT ORGANIZATION RETURN - APPROVED

We received and approved your Form 8868, Application for Extension of Time to File an Exempt Organization Return, for the return (form) and tax period identified above. Your extended due date to file your return is August 15, 2013.

When it's time to file your Form 990, 990-EZ, 990-PF or 1120-POL, you should consider filing electronically. Electronic filing is the fastest, easiest and most accurate way to file your return. For more information, visit the Charities and Nonprofit web at www.irs.gov/eo. This site will provide information about:

- The type of returns that can be filed electronically,
- approved e-File providers, and
- if you are required to file electronically.

If you have any questions, please call us at the number shown above, or you may write us at the address shown at the top of this letter.

(Rev January 2013)

# Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Internal Revenue Service			arate applic	cation for each return.								
-	-		-	Part I and check this box		► X						
-	-	· · · · · · · · · · · · · · · · · · ·		n, complete only Part II (on page 2 of thi								
	•	-		atic 3-month extention on a previously fi								
corporation request an ex	required to file xtension of time With Certain Po	Form 990-T), or an additional (not to file any of the forms listed in Part	automatic) I or Part II w ust be sent	d a 3-month automatic extension of time 3-month extension of time. You can ele ith the exception of Form 8870, Information to the IRS in paper format (see instructi Charities & Nonprofits.	ctronically file Form Return for Transfers	8868 to						
Part I	Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).											
A corporatio	on required to f	ile Form 990-T and requesting an a	utomatic 6	month extension - check this box and	complete Part I only	▶ □						
All other cor	rporations (incl	uding 1120-C filers), partnerships,	REMICs, ar	nd trusts must use Form 7004 to request	an extension of tim	e to file						
income tax	returns.			Enter filer's identit	ying number, see ir	estructions						
	Name of exempt	organization or other filer, see instructions.		Enter mer 3 factor	Employer identification n							
Type or												
print File by the	Pacific Number, street, a	33-0051202 Social security number (SSN)										
due date for filing your	1331 Gar											
return. See instructions.	City, town or pos											
	Sacramen	Sacramento, CA 95833										
Enter the Re	eturn code for	the return that this application is fo	r (file a sep	parate application for each return)		. 01						
Application Is For			Return Code	Application Is For		Return Code						
Form 990 or	Form 990-EZ		01	Form 990-T (corporation)		07						
Form 990-Bl			02	Form 1041-A		08						
Form 4720 (ii			03	Form 4720		09						
Form 990-Pl			04	Form 5227		10						
		) or 408(a) trust)	05	Form 6069 Form 8870		11						
Form 990-1	(trust other tha	an above)	06	Porm 8870		12						
Telephon  If the org  If this is check th	for a Group Reis box ► nsion is for.	-285-1848 s not have an office or place of bus	siness in the digit Group heck this bo	D. ► 916-285-1865  Even United States, check this box	this is for the whole	group,						
until The ex ► X  ► 1  2 If the t	8/15_ ktension is for t calendar year tax year begi	, 20 <u>13</u> , to file the exempt organication's return for: 20 <u>12</u> or , 20 , 20 , 20 , 20 , 20 , 20 , 20 , 2	nization ret	g , 20	al return							
3 a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions												
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit												
EFTPS	(Electronic Fe		instructions		3 c \$	0.						
Caution. If yo payment ins		nake an electronic fund withdrawal wi	th this Form	8868, see Form 8453-EO and Form 8879-I	EO for							