

Form **990** 

Department of the Treasury Internal Revenue Service **Return of Organization Exempt From Income Tax** 

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

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

► Information about Form 990 and its instructions is at www.irs.gov/form990

Tax year beginning SEP 1, 2016 and ending AUG 31, 2017

OMB No 1545-0047

2016
Open to Public Inspection

A	F	or the	e 2016 calendar year, or tax year beginning	SEP_1, 2016 and	d ending	AUG 3	1, 2	017			
В	CH	heck if	C Name of organization			D Emp	loyer ı	dentificati	ion number		
	ар	plicabl	THE STREET TRUST (FOME		E)	1					
_		Addre	• TRANSPORTATION ALLIANC	E)							
	X	Name chang	Doing business as				93-1057956				
		initial return	Number and street (or P 0 box if mail is not di	elivered to street address)	Room/suite	E Tele	phone r	number			
		Final return	618 NW GLISAN		401		5	03 - 22	6-0676		
		termin	City or town, state or province, country, and	ZIP or foreign postal code		G Gross	receipts	5	1,071,306.		
		Amen- return	PORTLAND, OR 97209			H(a) Is	this a g	roup retur			
		Application	I F Name and address of principal officer U 11	LIAN DETWEILER		for	suboro	dinates?	Yes X No		
		pendi	SAME AS C ABOVE			H(b) Are	all subor	dinates includ	ed? Yes No		
I Tax-exempt status X 501(c)(3) 501(c) ( ) ◀ (insert no ) 4947(a)(1) or 527 If "No," attach a list (see instru											
J	W	/ebsi	te. > WWW.THESTREETTRUST.ORG					emption n			
<u>K</u> _	Fo	orm of	organization X Corporation Trust A	ssociation Other >	L Yea	r of formati	on 19	90 M S	tate of legal domicile OR		
P	a	rt I	Summary						·		
,	أم		Briefly describe the organization's mission or mos			ROVE	PUBLIC				
Organization of the contraction	<u> </u>		TRANSIT, WALKING AND BICY	S IN O	REGON	•					
Ì	֓֞֜֞֜֞֜֞֡֓֓֡֓֜֡֡֓֡֓֓֡֓֡֡֡֜֜֡֓֡֓֡	2	Check this box If the organization disco	entinued its operations or dispo	osed of more	e than 25%	6 of its	net assets			
,	<u> </u>	3	Number of voting members of the governing body	(Part VI, line 1a)				3	11		
	2	4	Number of independent voting members of the go	verning body (Part VI, line 1b)				4	11		
1 8	S	5	Total number of individuals employed in calendar	year 2016 (Part V, line 2a)				5	29		
	┋	6	Total number of volunteers (estimate if necessary)					6	650		
· 3	5	7 a	Total unrelated business revenue from Part VIII, co	olumn (C), line 12		(CD)		7a	0.		
	1	b	Net unrelated business taxable income from Form	990-T, line 34		155	<u> 727</u>	7b	0.		
	- [				でした	Prior	. AFOU	\	Current Year		
9	او	8	Contributions and grants (Part VIII, line 1h)				24		888,883.		
		9	Program service revenue (Part VIII, line 2g)		. 4	d r		40.	66,392.		
Š	افِ	10	Investment income (Part VIII, column (A), lines 3, 4	, and 7d) c, 9c, 10c, and 11e)	11/		<del> </del>	0.73.	1,529.		
	-	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8d	c, 9c, 10c, and 11e)	≥ل ``		_	89.	14,940.		
	+	12	Total revenue - add lines 8 through 11 (must equa	Part VIII, column (A), line	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		[2,0]		971,744.		
	-		Grants and similar amounts paid (Part IX, column	· · · · · · · · · · · · · · · · · · ·	<b>Y</b>			0.	0.		
	ı		Benefits paid to or for members (Part IX, column (						712 120		
9	3		Salaries, other compensation, employee benefits (	, , , , , , , , , , , , , , , , , , , ,	· –	9	712,139.				
T voos	[		Professional fundraising fees (Part IX, column (A),	056.0	H		_	0.	0.		
5	Ž.		Total fundraising expenses (Part IX, column (D), lin	·	194.		-0 1	<del>-</del> -	247 471		
μ	"		Other expenses (Part IX, column (A), lines 11a-11d	•	ļ		52,1		347,471.		
	i		Total expenses Add lines 13-17 (must equal Part I				54,2		1,059,610.		
_	+		Revenue less expenses Subtract line 18 from line	12			12,2		-87,866.		
ets or	롈		T		Ļ <u>B</u>	eginning of			End of Year		
Asset	쯽		Total assets (Part X, line 16)		<u> </u>		52,7		398,301.		
et A	ď		Total liabilities (Part X, line 26)		<u> </u>		$\frac{94}{69}$		117,907.		
Ē	_		Net assets or fund balances Subtract line 21 from Signature Block	line 20		31	58,2	60.	280,394.		
		rt II	<u> </u>	<del></del>							
			lities of perjury, I declare that I have examined this return	· · ·				•	owledge and belief, it is		
tru	e, t	correc	t, and complete Declaration of preparer (other than offic	er) is based on all information of v	vnich prepare	r nas any ki	<del></del>	<u> </u>	7.16		
_			Signature of officer	<del> </del>			Date	27	118		
Sıg			,	CIIMILUE DIDECMOD			Date				
He	re	•	JILLIAN DETWEILER, EXE  Type or print name and title	CUTIVE DIRECTOR				<b>-</b>			
_				<u> </u>	—— <sub>Y</sub>	Date			PTIN		
			Print/Type preparer's name	Preparer's signature			ı	theck	I FEIN		
Pai			Lundana	L		6/27/2018		elf employed	L		
		arer	Firm's name		<del></del>		Firm's E	IN 🕨			
US	c	nly	Firm's address 🕨				Dh.				
_		+h = 15	20 dispusa this ration with the same at the	wo? (eee instruction )	<del></del>		Phone r	10			
	_		RS discuss this return with the preparer shown abo						Yes No		
632	·00	1 11-1	1-16 LHA For Paperwork Reduction Act Notice	e, see ine separate instructi	ons				Form <b>990</b> (2016)		

# THE STREET TRUST (FOMERLY, THE BICYCLE TRANSPORTATION ALLIANCE)

	990 (2016) TRANSPORTATION ALLIANCE)	93-1057956	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission		
	THE STREET TRUST IS A NON-PROFIT MEMBERSHIP ORGANIZATION	WORKING TO	
	PROMOTE AND IMPROVE PUBLIC TRANSIT, WALKING AND BICYCLING		
	IN OREGON		
2	Did the organization undertake any significant program services during the year which were not listed on the		
_	prior Form 990 or 990-EZ?		X No
	·	1es	140
_	If "Yes," describe these new services on Schedule O		ਓ
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	L Yes	X No
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, as n		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others	s, the total expenses, ar	nd
	revenue, if any, for each program service reported	<del></del>	
4a	(Code) (Expenses \$	es <u>6,</u>	<b>240.</b> )
	EDUCATION:		
	THE STREET TRUST EDUCATES CHILDREN, YOUTH, AND FAMILIES T		
	ACTIVE TRANSPORTATION TO GET TO AND FROM SCHOOL AND WORK,	, AND	
	THROUGHOUT THEIR COMMUNITIES.		
	THE SAFE ROUTES TO SCHOOL BIKE & PEDESTRIAN EDUCATION PRO	GRAM IS	
	COORDINATED BY THE STREET TRUST TO ENCOURAGE CHILDREN, YO		
	FAMILIES TO USE SAFE & ACTIVE TRANSPORTATION TO GET TO AN		ΩT.
	AND THROUGHOUT THEIR COMMUNITIES. THIS PROGRAM REACHED 60		
	5000 STUDENTS.	DCHOOLD AN	
	JOUU BIODENIE.		
	COMMINITED ON COMPINE O	<del></del>	
	CONTINUED ON SCHEDULE O	<del></del>	ECA.
4b	/\/\/\\\\\\\\\\\\\\\\\\\\\	e\$	<b>564.</b> )
	ADVOCACY:	DIIDI TO	
	THE STREET TRUST ADVOCATES FOR BICYCLING, PEDESTRIAN, AND		
	TRANSIT INFRASTRUCTURE AND PROGRAMS AT THE LOCAL AND STAT		
	ENGAGES COMMUNITY MEMBERS IN OUR ADVOCACY ACTIVITIES. THE		
	WORKS WITH LOCAL GOVERNMENTS AND TRANSPORTATION AGENCIES		<u>r                                     </u>
	MORE AND BETTER BIKE, PEDESTRIAN, AND PUBLIC TRANSIT INFE	ASTRUCTURE.	
	THE STREET TRUST WORKS WITH TRANSPORTATION DEPARTMENTS, E		
	AGENCIES, AND OTHER COMMUNITY LEADERS TO IDENTIFY STRATEG		
	INCREASING SAFETY FOR ALL ROAD USERS IN AN EFFORT TO ELIM		
	FATALITIES AND SERIOUS INJURIES ON OUR COMMUNITY'S STREET	rs.	
	CONTINUED ON SCHEDULE O		
4c	(Code) (Expenses \$129,947. including grants of \$ ) (Revenue	17,	619.)
	ENCOURAGEMENT:		
	THE STREET TRUST ENGAGES MEMBERS AND THE COMMUNITY IN OUR	ADVOCACY.	
	EDUCATION, AND VOLUNTEER PROGRAMS THROUGHOUT THE YEAR. TH		UST
	COORDINATES THE STATEWIDE BIKE MORE CHALLENGE, AN ANNUAL		
	AMONG WORKPLACES TO SEE WHICH BUSINESSES CAN GET THE LARG		
	EMPLOYEES BICYCLING TO WORK DURING THE MONTH OF MAY. THE		
	TEACHES BIKE COMMUTE WORKSHOPS AT WORKPLACES THROUGHOUT		<u>-</u>
		TE FORTUNAD	
	METRO AREA.		
	AT THE ANNUAL ALICE AWARDS AND AUCTION, THE STREET TRUST		
	INDIVIDUALS, BUSINESSES, AGENCIES, AND ELECTED OFFICIALS		
	A SIGNIFICANT CONTRIBUTION TO ACTIVE TRANSPORTATION (CONT	'D ON SCH O	)
4d	Other program services (Describe in Schedule O )		
	(Expenses \$ including grants of \$ ) (Revenue \$	. )	_
4e	Total program service expenses ► 642,936.		
			90 (004.0)

# THE STREET TRUST (FOMERLY, THE BICYCLE Form 990 (2016) TRANSPORTATION ALLIANCE) Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	1		
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	<u>X</u>	
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	_	_X_
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		<u> </u>
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		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8_		<u> </u>
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?			77
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			v
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			. 1
	as applicable			-
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	44	X	
	Part VI	11a		
Þ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11b		х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
ч	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	-110		
ŭ	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X	11e		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	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	<u></u>
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
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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			<u>.</u> _
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			ų,
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<u> </u>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		<sub>v</sub> ,	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	├─
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? // "Yes,"	4.		<sub>v</sub>
	complete Schedule G. Part III	19		X

Form **990** (2016)

Form		03/930	P	age •
Pa	rt IV Checklist of Required Schedules (continued)		V	N.
-	Dulitha auranimatica accepta one ou mous bacertal facilities? If the district of the first of th	20a	Yes	No X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		<del></del>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
~	Part IX, column (A), line 2 <sup>7</sup> If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			İ
	Schedule J	23		X_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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	<u> </u>	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	ł		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	ļ	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	į		l
	Schedule L, Part I	25b	ļ	X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"		ł	٠,
	complete Schedule L, Part II	26	-	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			l
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			x
	of any of these persons? If "Yes," complete Schedule L, Part III	27	+-	┝≏
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			1
	instructions for applicable filing thresholds, conditions, and exceptions)	28a	+	x
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an office	<u> </u>		<del> </del>
G	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
•	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?		1	1
•	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	_32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			I
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		1	
	Part V, line 1	34	↓	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	↓	X
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	<u> </u>	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization	n?		
	If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	<b> </b>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		1	1

Note. All Form 990 filers are required to complete Schedule O

TRANSPORTATION ALLIANCE) 93-1057956 Form 990 (2016) Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes Nο 25 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0 **b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 29 filed for the calendar year ending with or within the year covered by this return X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2h Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За **b** If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). 7 X a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? Х 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year 7d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? R 9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) 11b 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. a is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13c

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

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

X

14a

Form 990 (2016) TRANSPORTATION ALLIANCE) 93-1057956 Pag

[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

	to line ba, bb, or rob below, describe the circumstances, processes, or changes in schedule of See instructions			T					
Car	Check if Schedule O contains a response or note to any line in this Part VI			X					
Sec	tion A. Governing Body and Management		<del>,</del> 7						
	Enter the number of voting members of the governing body at the end of the tax year 11		Yes	NO					
1a									
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.  Enter the number of voting members included in line 1a, above, who are independent 11								
	•								
2	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							
3	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		X					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X					
5									
6	Did the organization have members or stockholders?	6		X					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	7-	X						
_	more members of the governing body?	_7a_	- AL						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7b		х					
_	persons other than the governing body?								
8									
a	The governing body?	8a 8b	X						
	b Each committee with authority to act on behalf of the governing body?								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O								
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9		Х					
	to the internal revenue code.		Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		X					
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100							
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a									
b									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe								
	in Schedule O how this was done	12c	Х						
13	Did the organization have a written whistleblower policy?	13	X						
14	Did the organization have a written document retention and destruction policy?	14	X						
15	Did the process for determining compensation of the following persons include a review and approval by independent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a	Х						
b	Other officers or key employees of the organization	15b	X						
	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?	16a		X					
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 take steps to safeguard the organization's								
	exempt status with respect to such arrangements?	16b							
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ▶OR			_					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) as	allable	e						
	for public inspection Indicate how you made these available Check all that apply								
	Own website Another's website X Upon request Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	fınanc	ıal						
	statements available to the public during the tax year								
20	State the name, address, and telephone number of the person who possesses the organization's books and records								
	GREG SUTLIFF - 503-226-0676								
	618 NW GLISAN. SUITE 401. PORTLAND. OR 97209								

TRANSPORTATION ALLIANCE)

93-1057956

Form 990 (2016) Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors** 

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (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

(A) Name and Title	(B) Average hours per week	box	not cl unles	s per	nore son i	than o s both or/trus	an	( <b>D)</b> Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) JUSTIN YUEN	4.00									_
CHAIR		X	$\Box$	X		<u> </u>		0.	0.	0.
(2) DAVID FORMAN	2.00	]				ļ				
SECRETARY		Х	L_	X		<u> </u>		0.	0.	0.
(3) SUSAN MARKS	3.00					1				
TREASURER		Х		X		Ь		0.	0.	0.
(4) RANDY MILLER	2.00	.,		7.		ĺ		1	0	^
VICE CHAIR (5) LESLIE CARLSON	2.00	X	$\vdash$	X		┝	_	0.	0.	0.
VICE CHAIR	2.00	x		x				0.	0.	0.
(6) CHRIS ACHTERMAN	1.00	^	├─	Δ_		┢╌	-			<u> </u>
DIRECTOR	1.00	x				ł	l	0.	0.	0.
(7) VAL HOYLE	1.00	-			$\vdash$		┢	<del></del>	<u>~.</u>	
DIRECTOR		x						0.	0.	0.
(8) ADNAN KADIR	1.00	-	$\vdash$			Ĺ	T			
DIRECTOR		х				1		0.	0.	0.
(9) NICK EHLEN	1.00									
DIRECTOR		X					l	0.	0.	0.
(10) JUDE GERACE	1.00									
DIRECTOR		Х					L	0.	0.	0.
(11) BEN MCKINLEY	1.00									
DIRECTOR		X					匚	0.	0.	0.
(12) HAU HAGEDORN	1.00						l			
DIRECTOR		X					$ldsymbol{ldsymbol{ldsymbol{eta}}}$	0.	0.	0.
(13) PETER KOONCE	1.00	1					l	}	_	_
DIRECTOR		X	<u> </u>			<u> </u>	_	0.	0.	0.
(14) DIANE GOODWIN	1.00									
DIRECTOR		Х	<u> </u>			<u> </u>	<u> </u>	0.	0.	0.
(15) STEPHEN GOMEZ	1.00						l		_	_
DIRECTOR	40-00	X	<b> </b>			ļ	$\vdash$	0.	0.	0.
(16) ROBERT SADOWSKY	40.00	ł		<b>.</b>			l	00.000	_	2 702
EXECUTIVE DIRECTOR	40.00	$\vdash$	$\vdash$	X		$\vdash$	-	92,000.	0.	2,783.
(17) GREG SUTIFF FINANCE DIRECTOR	40.00	ł		х		1		26,347.	0.	3,613.

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Page 8

Form **990** (2016)

TRANSPORTATION ALLIANCE)

\$100,000 of compensation from the organization

Form 990 (2016)

		Check if Schedule O conti	ains a response	or note to any lin	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
হ হ	1 a	Federated campaigns	1a	22,471.				
ran En	ь	Membership dues	1b	131,826.		İ		
2 8	c	Fundraising events	1c	119,102.				
ifts ar	d	Related organizations	1d					
2.E	е	Government grants (contribut	<del></del>	412,041.				
ÖÖ	f	All other contributions, gifts, gran	· —	-				
per jet		similar amounts not included abo	· ·	203,443.				
ξō	a	Noncash contributions included in lines		40 100				1
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f			888,883.			
				Business Code				
	2 a	PROGRAM FEES		900099	66,392.	66,392.		
Program Service Revenue	ь							
8 8	c							
a a	d							
Pa	е							
Ţ	f	All other program service reve	enue					
	_ g	Total. Add lines 2a-2f			66,392.			
	3	Investment income (including	dividends, intere	est, and				
		other sımılar amounts)		<b>&gt;</b>	1,529.			1,529.
	4	Income from investment of tax	x-exempt bond p	roceeds			· ·	
	5	Royalties						
			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less rental expenses						
	C	: Rental income or (loss)	L					
	d	Net rental income or (loss)		<b>&gt;</b>				
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory						
	b	Less cost or other basis						
		and sales expenses						
		: Gain or (loss)	L	<u> </u>				<del>                                     </del>
		Net gain or (loss)						
venue	8 a	Gross income from fundraising \$ 119,1	.02. of					
<b>a</b>		contributions reported on line	1c) See	BC 244				
Other Re		Part IV, line 18	а					
₽.		Less direct expenses	. <b>b</b>	92,011.	15 607			15 607
-		Net income or (loss) from fund	-		-15,697.		<u>-</u>	-15,697.
	9 a	Gross income from garning ac						
		Part IV, line 19	a					
		Less direct expenses	<b>b</b>					<del> </del>
		Net income or (loss) from gam	-					
	10 a	Gross sales of inventory, less		8,717.				ł
		and allowances	a	7 551				
		Less cost of goods sold	b o of inventors	1,331.	1,166.	1,166.		<del> </del>
		<ul> <li>Net income or (loss) from sale</li> <li>Miscellaneous Revenu</li> </ul>		Business Code	1,100.			<del>                                     </del>
	11 -	LICENSE PLATE P		900099	14,865.	14,865.		<del> </del>
		OTHER REVENUE		900099	14,606.			14,606.
		· · · · · · · · · · · · · · · · · · ·						†
	d		<del> </del>					
		Total, Add lines 11a-11d			29,471.			
	12	Total revenue. See instructions.		•	971,744.	82,423.	0.	438.

Form 990 (2016) TRANSPORTATION ALLIANCE )
Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons			nplete column (A).	
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	İ	1		Ì
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	456 500	- 4 1		07.004
	trustees, and key employees	156,520.	54,174.	74,522.	27,824.
6	Compensation not included above, to disqualified	Į.			
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	455 634			100.00
7	Other salaries and wages	455,034.	312,154.	20,874.	122,006.
8	Pension plan accruals and contributions (include	7 064	4 055	200	4 040
	section 401(k) and 403(b) employer contributions)	7,061.	4,855.	288.	1,918. 7,673.
9	Other employee benefits	42,128.	18,546.	15,909.	1,6/3.
10	Payroll taxes	51,396.	32,444.	6,294.	12,658.
11	Fees for services (non-employees)	28,098.	16 000	4 500	C 701
a	Management	740.	16,809.	4,508.	6,781.
b	Legal	11,659.		11,659.	
	Accounting	11,039.		11,039.	
	Lobbying  Professional fundamental converse. See Part IV. June 17.			<del></del>	
e	Professional fundraising services. See Part IV, line 17 Investment management fees				
f	Other (If line 11g amount exceeds 10% of line 25,	<del></del>		<del></del>	<del></del>
g	column (A) amount, list line 11g expenses on Sch O.)	72,007.	36,052.	12,730.	23 225.
12	Advertising and promotion	1,731.	400.	8.	23,225. 1,323.
13	Office expenses	49,735.	29,388.	3,669.	16,678.
14	Information technology	29,315.	21,945.	2,547.	4,823.
15	Royalties				
16	Occupancy	66,463.	44,481.	3,863.	18,119.
17	Travel	16,119.	15,259.	317.	543.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	Į			
19	Conferences, conventions, and meetings	32,868.	31,404.		1,464.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,736.	5,409.	1,124.	2,203.
23	Insurance	4,734.	2,931.	609.	1,194.
24	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.)				
а	PROGRAM SUPPLIES	16,618.	16,618.		
ь	MISCELLANEOUS	8,648.	67.	19.	8,562.
c					
d					
е	All other expenses				
25	Total functional expenses Add lines 1 through 24e	1,059,610.	642,936.	159,680.	256,994.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined	-			
	educational campaign and fundraising solicitation.				
	Check here fifted if following SOP 98-2 (ASC 958-720)				F 990 (2016)

Form 990 (2016)
Part X Balance Sheet

TRANSPORTATION ALLIANCE)

	( X )	Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
Т	1	Cash - non-interest-bearing	<u> </u>		166,344.	1	96,129.
-	2	Savings and temporary cash investments		Ĺ	191,720.	_2	198,911
	3	Pledges and grants receivable, net			16,150.	3	40,000
- {	4	Accounts receivable, net			34,213.	4	12,491
	5	Loans and other receivables from current and fo	rmer o	fficers, directors,			
Ì		trustees, key employees, and highest compensa			i		
ı		Part II of Schedule L				5	
- [	6	Loans and other receivables from other disqualit					
- 1		section 4958(f)(1)), persons described in section	4958(	c)(3)(B), and contributing			
		employers and sponsoring organizations of sect	ion 50	1(c)(9) voluntary			l
y I		employees' beneficiary organizations (see instr)	Comp	lete Part II of Sch L		6	
ASSets	7	Notes and loans receivable, net	<b></b>		7		
٤	8	Inventories for sale or use		4,491.	8	10,081	
1	9	Prepaid expenses and deferred charges	Ţ	25,178.	9	24,738	
- 1	10a	Land, buildings, and equipment cost or other	]	Ī			
Ì		basis Complete Part VI of Schedule D	10a	149,016.			
ı	ь	Less accumulated depreciation	10b	133,065.	24,688.	10c	15,951
	11	Investments - publicly traded securities		11			
ı	12	Investments - other securities See Part IV, line 1		12			
ļ	13	Investments - program-related See Part IV, line		13			
1	14	Intangible assets		14			
Į	15	Other assets See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equ	al line :	34)	462,784.	16	398,301
7	17	Accounts payable and accrued expenses		78,990.	17	45,107	
	18	Grants payable		18			
- 1	19	Deferred revenue	15,534.	19	72,800		
-	20	Tax-exempt bond liabilities		ľ		20	
- [	21	Escrow or custodial account liability Complete I	Part IV	of Schedule D		21	
- 1	22	Loans and other payables to current and former		F			
		key employees, highest compensated employee		· · · · · · · · · · · · · · · · · · ·			
Liabilities		Complete Part II of Schedule L	-,			22	
ן בּ	23	Secured mortgages and notes payable to unrela	ited thi	rd parties		23	
- 1	24	Unsecured notes and loans payable to unrelated		· .		24	
- 1	25	Other liabilities (including federal income tax, pa		· F	<del></del>		
		parties, and other liabilities not included on lines	-				
- 1		Schedule D		, semplete ( 2/17/6)		25	İ
- {	26	Total liabilities. Add lines 17 through 25			94,524.	26	117,907
ヿ		Organizations that follow SFAS 117 (ASC 958	), chec	k here X and			
_		complete lines 27 through 29, and lines 33 an					
ő	27	Unrestricted net assets		ľ	329,610.	27	221,764
	28	Temporarily restricted net assets		ľ	38,650.	28	58,630
2	29	Permanently restricted net assets		ţ	337333.	29	
		Organizations that do not follow SFAS 117 (A	SC 958	3) check here		2.0	
5 }		and complete lines 30 through 34.	JQ JJ	oj, check here			1
ָבָּאַ   מ	30	Capital stock or trust principal, or current funds		ŀ		30	
1 Se	30	Paid-in or capital surplus, or land, building, or ed		nt fund		31	<del></del>
2	31	-				32	<del></del>
2	32	Retained earnings, endowment, accumulated in	come,	or other fulfus	368,260.	33	280,394
1	33	Total net assets or fund balances		}	462,784.		398,301
للہ	<u>34</u>	Total liabilities and net assets/fund balances		<del></del>	404,704.	34	Form <b>990</b> (20

# THE STREET TRUST (FOMERLY, THE BICYCLE TRANSPORTATION ALLIANCE)

Form	990 (2016) TRANSPORTATION ALLIANCE)	93-105	7956	Pag	e 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1 -		. , 74	
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,059		
3	Revenue less expenses Subtract line 2 from line 1	3		7,86	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	368	3,26	0.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	280	39	<u>₹4.</u>
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			Yes	No
_	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule (	,	2a	$\rightarrow$	$\overline{\mathbf{x}}$
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<del>Za</del>	-	<del>^</del>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	OH a			
	separate basis, consolidated basis, or both		1 1		
	Separate basis Consolidated basis Both consolidated and separate basis		2b	х	
b	Were the organization's financial statements audited by an independent accountant?	haara	<del>20</del>	<del>^</del>	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	Dasis,	<u> </u>		
	consolidated basis, or both  X Separate basis  Consolidated basis  Both consolidated and separate basis		1 1		
		oudst.			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	auuit,	2c	х	
	review, or compilation of its financial statements and selection of an independent accountant?	dula O	20		
٠.	If the organization changed either its oversight process or selection process during the tax year, explain in Sche				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	yı <del>c</del> Audit	3a	$\dashv$	$\overline{\mathbf{x}}$
	Act and OMB Circular A-133?	ed audit	38		
a	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits	eu auun	3b	1	
	or addits, explain why in Schedule O and describe any steps taken to undergo such addits	·		990	2016)

### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

**Public Charity Status and Public Support** 

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. ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at | www irs gov/form990 OMB No 1545-0047 16

Open to Public Inspection

Name of the organization

THE STREET TRUST (FOMERLY, THE BICYCLE TRANSPORTATION ALLIANCE)

Employer identification number 93-1057956

Pa	rt T	Reason for Public C	harity Status (A	II organizations must co	mplete this	s part ) Se	e instructions					
The	organ	zation is not a private founda	ation because it is (F	or lines 1 through 12, ch	eck only o	one box )						
1	Ŏ.	A church, convention of chu	ırches, or association	n of churches described	ın sectio	n 170(b)(1	XA)(i).	2				
2	一	A school described in secti					NN-7-	') '				
_		A hospital or a cooperative l					1					
3	H		,				•	the beental's name				
4	ш	A medical research organiza	ation operated in con	junction with a nospital	described	in section	n 170(b)(1)(A)(III). Enter	ule nospital s name,				
		city, and state										
5	Ш	An organization operated fo		ege or university owned	or operate	ed by a go	vernmental unit describe	d in				
		section 170(b)(1)(A)(iv). (C	omplete Part II)									
6		A federal, state, or local gov	emment or governm	ental unit described in s	ection 17	O(b)(1)(A)(	v).					
7	X	An organization that normal	ly receives a substar	itial part of its support fro	om a gove	mmental ı	ınıt or from the general p	oublic described in				
		section 170(b)(1)(A)(vi). (Complete Part II)										
8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II )										
9	一	An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college										
•												
		or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or										
40		university										
10												
		activities related to its exem										
		income and unrelated busin	iess taxable income i	(less section 511 tax) fro	m busines	ses acquii	ed by the organization a	πer June 30, 1975				
		See <b>section 509(a)(2).</b> (Cor	•									
11	$\square$	An organization organized a										
12	Ш	An organization organized a										
		more publicly supported org	ganizations described	d in section 509(a)(1) or	r section (	509(a)(2)	See <b>section 509(a)(3)</b> . C	Check the box in				
		lines 12a through 12d that of	describes the type of	supporting organization	and comp	plete lines	12e, 12f, and 12g					
а		Type I. A supporting orga	ınızatıon operated, sı	upervised, or controlled t	y its supp	orted orga	anization(s), typically by	giving				
		the supported organization										
		organization You must c										
h		Type II. A supporting orga			on with its	s supporte	d organization(s), by hav	'ina				
-		control or management of										
		organization(s) You mus			po.co.	no unat con	ino. or manage are eapp					
_		Type III functionally inte			n connoct	uon with is	and functionally integrate	d with				
C								ou willi,				
		its supported organization						4:(-)				
d	_	Type III non-functionally										
		that is not functionally int	egrated The organiz	ation generally must sati	sfy a distri	ibution rec	juirement and an attentiv	/eness				
	_	requirement (see instructi	•	•								
е		Check this box if the orga	anization received a v	vritten determination froi	m the IRS	that it is a	Type I, Type II, Type III					
		functionally integrated, or	Type III non-function	nally integrated supportir	ng organiz	ation						
f	Ente	er the number of supported o	organizations									
9	Pro	vide the following information										
	1	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your govern	nization listed ng document?	(v) Amount of monetary	(vi) Amount of other				
		organization		(described on lines 1 10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)				
		· ::-		,								
			-	. —		<del> </del>		<del></del>				

Schedule A (Form 990 or 990-EZ) 2016 TRANSPORTATION ALLIANCE)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	1079900.	1075775.	1093868.	1024607.	888,883.	5163033.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1079900.	1075775.	1093868.	1024607.	888,883.	5163033.
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,	1					
	column (f)						26,335.
6	Public support. Subtract line 5 from line 4						5136698.
Sec	tion B. Total Support		•				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	1079900.	1075775.	1093868.	1024607.	888,883.	5163033.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	630.	636.	786.	2,007.	1,529.	5,588.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)	:				14,606.	14,606.
11	Total support. Add lines 7 through 10						5183227.
12	Gross receipts from related activities,	etc (see instruction	ons)			12	492,214.
13	First five years. If the Form 990 is for	r the organization's	first, second, thire	d, fourth, or fifth ta	x year as a section	1 501(c)(3)	
<del>-</del>	organization, check this box and stor	here					
	ction C. Computation of Publi						
	Public support percentage for 2016 (I		*	olumn (f))		14	99.10 %
	Public support percentage from 2015	•				15	99.91 <u>%</u>
16a	33 1/3% support test - 2016. If the o	organization did no	t check the box or	n line 13, and line	14 is 33 1/3% or m	ore, check this box	
	stop here. The organization qualifies		_				$\triangleright X$
b	33 1/3% support test - 2015. If the c	. <del>-</del>			line 15 is 33 1/3%	or more, check the	s box
	and stop here. The organization qual	· ·	• •				
17a	10% -facts-and-circumstances test	•					
	and if the organization meets the "fac			•	•	rt VI how the organ	nization
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances test	-					
	more, and if the organization meets the				•		,
	organization meets the "facts-and-circ		•	•	•		
<u> 18</u>	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	a, 16b, 1/a, or 17b		nd see instructions	

Schedule A (Form 990 or 990-EZ) 2016 TRANSPORTATION ALLIANCE)

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Pa	rt III   Support Schedule for C	organizations	Described in S	Section 509(a)	• •		7330 Page 3
	(Complete only if you checked			organization failed	to qualify under P	art If the organiz	ation fails to
500	qualify under the tests listed better A. Public Support	elow, please comp	lete Part II)			/	<del> </del>
_	<del></del>			T	10000	T () ====	1
	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")			<del></del>	<del>  /</del>	<u> </u>	
2	Gross receipts from admissions, merchandises sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that			1			
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-				1		1
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities		,		1	<u> </u>	<u> </u>
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5		!				
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons		<i>, , , ,</i>				
b	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	j					
8	Public support. (Subtract line 7c from line 6)	į.					
	ction B. Total Support			-	<del></del>		
Cale	ndar year (or fiscal year beginning in)	(a) 2012 <sup>//</sup>	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income	<i>,</i>				1	
	(less section 511 taxes) from businesses		1				
	acquired after June 30, 1975						
	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is	/					
	regularly carried on				<u> </u>	ļ ————	<del>                                       </del>
	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
	Total support (Add lines 9, 10c, 11, and 1/2)	L	L	L		<u> </u>	L
14	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3) organız	ation,
Sai	check this box and stop here / ction C. Computation of/Publi	o Support Por	roontage	<del> </del>	_		
_	<del></del>			actions (6)		145	
	Public support percentage for 2016 (I		-	column (t))		15	%
16 Sec	Public support percentage from 2015 ction D. Computation of Inves			······		16	%
	Investment income percentage for 20			ne 13 column (A)		17	
	Investment income percentage for 20			ie 13, column (I))		18	%
18	33 1/3% support tests - 2016. If the			on line 14 and lin	a 15 is mara than 1		
ısa	more than 33 1/3%, check this box as						, is ling
b	33 1/3% support tests 2015. If the	•	•				and
	line 18 is not more than 33 1/3%, che	ck this box and s	top here. The org	anızatıon qualifies	as a publicly supp	orted organization	▶□
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in:	structions	▶□

Schedule A (Form 990 or 990 EZ) 2016 TRANSPORTATION ALLIANCE)

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# Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

<u>S</u>

	tion A. All Supporting Organizations			
_	And all of the annual state of the state of		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
_	class or purpose, describe the designation of historic and continuing relationship, explain	1	<b>-</b> -	
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
٥.	organization was described in section 509(a)(1) or (2)	2	_	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
D	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
_	organization made the determination	3b		
· C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
4.	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If	4-		
L	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
U	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion	4b	<del>                                     </del>	
_	despite being controlled or supervised by or in connection with its supported organizations  Did the organization support any foreign supported organization that does not have an IRS determination	40		
·	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
		4c		
52	purposes  Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	70		
~-	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action			
	was accomplished (such as by amendment to the organizing document)	5a		
h	Type I or Type II only. Was any added or substituted supported organization part of a class already			
_	designated in the organization's organizing document?	5b	<u> </u>	
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (III) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			<u> </u>
	supporting organizations)? If "Yes," answer 10b below	10a	L	<u> </u>

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

determine whether the organization had excess business holdings.)

10b

# THE STREET TRUST (FOMERLY, THE BICYCLE Schedule A (Form 990 or 990-EZ) 2016 TRANSPORTATION ALLIANCE)

	dule A (Form 990 or 990-EZ) 2016 TRANSPORTATION ALLIANCE) 9:	3-105795	6 <sub>Ра</sub>	<u> 1ge 5</u>
Par	t IV   Supporting Organizations <sub>(continued)</sub>			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	İ		
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a	L	
	A family member of a person described in (a) above?	11b_	ļ	
<u>C</u>	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	ļ		
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	İ		
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	i		
	controlled the organization's activities If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
_	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1_1_		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated,	<u> </u>		
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations		L	
000	tion 6. Type in oupporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		162	NO
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations		L	
	7,		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		1.00	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	1		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	1		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's	1		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		<u> </u>
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruc	ctions)		
а	The organization satisfied the Activities Test Complete line 2 below			
Ь	The organization is the parent of each of its supported organizations. Complete line 3 below			
C	The organization supported a governmental entity Describe in Part VI how you supported a government entity (s	ee instructions)		T-:
2	Activities Test Answer (a) and (b) below		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	<u> </u>		
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	j		
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	ł		
	reasons for the organization's position that its supported organization(s) would have engaged in these		<del>                                     </del>	
_	activities but for the organization's involvement	2b	-	
3	Parent of Supported Organizations Answer (a) and (b) below	1		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	<u> </u>	-	
	trustees of each of the supported organizations? Provide details in Part VI	3a		<u> </u>
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	- <u></u>	-	
	of its supported organizations? If "Yes," describe in Part VI, the role played by the organization in this regard.	3b		

	rt V   Type III Non-Functionally Integrated 509(a)(3) Supportin			93-105/956 Page 6
1	Check here if the organization satisfied the Integral Part Test as a qualifying			Part VI ) See instructions Al
•	other Type III non-functionally integrated supporting organizations must c	•	, , ,	art vi) See insudedons. A
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other		<del>-</del> -	
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2	-	
3	Subtract line 2 from line 1d	3	100	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
-	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ally integrat	ed Type III supporting org	anization (see
-	instructions)		5 5	•

Schedule A (Form 990 or 990-EZ) 2016

# THE STREET TRUST (FOMERLY, THE BICYCLE adule A (Form 990 or 990-FZ) 2016 TRANSPORTATION ALLIANCE)

Schee Par	tule A (Form 990 or 990 EZ) 2016 TRANSPORTATION		·	3-1057956 Page 7
	on D - Distributions	a)(o) oupporting orga	nizations (continued)	Current Year
<u> </u>	Amounts paid to supported organizations to accomplish exer	mnt nurnoses		Current Year
_ <u>-</u>	Amounts paid to supported organizations to accomplish exert			
-	organizations, in excess of income from activity	t purposes or supported		
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	<del></del>	
4	Amounts paid to acquire exempt-use assets	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which th	e organization is responsive		
	(provide details in Part VI) See instructions	· · <b>g</b> · - · · · ,		
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
_1_	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2016			
a				
b				
c	From 2013			
<u>d</u>	From 2014			
e	From 2015			
<u>_f</u>	Total of lines 3a through e			
	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2016 distributable amount			
i_	Carryover from 2011 not applied (see instructions)			
	Remainder Subtract lines 3g, 3h, and 3i from 3f			<del></del>
4	Distributions for 2016 from Section D,			
	line 7 \$			
	Applied to underdistributions of prior years		<del></del>	
	Applied to 2016 distributable amount  Remainder Subtract lines 4a and 4b from 4			<del></del>
<u></u>	Remaining underdistributions for years prior to 2016, if		<u> </u>	
5	any Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI See instructions			
_ <u></u>	Remaining underdistributions for 2016 Subtract lines 3h			
Ū	and 4b from line 1. For result greater than zero, explain in			
	Part VI See instructions			
7	Excess distributions carryover to 2017. Add lines 3		<del></del>	
•	and 4c			
	Breakdown of line 7		<del> </del>	
_ <del></del>			N.E.	
	Excess from 2013		<del></del>	
	Excess from 2014			
	Excess from 2015			
	F 0040			

Schedule A (Form 990 or 990-EZ) 2016

Schedule A	(Form 990 or 990-EZ) 2016 TRANSPORTATION ALLIANCE)	93-1057956 Page 8
Part VI	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10, Part II, line 1 Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, I line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any ac (See instructions.)	7a or 17b, Part III, line 12, ines 1 and 2, Part IV, Section C, Part V, Section B, line 1e, Part V,
		<del></del>
		<del></del>
·		
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<del></del>		
		<u> </u>
	· · · · · · · · · · · · · · · · · · ·	

### **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Political Campaign and Lobbying Activities**

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Information about Schedule C (Form 990 or 990-EZ) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>

2016

Open to Public Inspection

If the organization answered "Yes," on 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," on 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," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

•	Section 501(c)(4), (5), or (6) organiza	tions Complete Part III				
Nam	ne of organization THE STR	EET TRUST (FOMER	LY, THE BICY	CLE	Emplo	yer identification number
	TRANSPO	RTATION ALLIANCE				<u>93-1057956</u>
Pa	art I-A Complete if the org	ganization is exempt und	ler section 501(c)	or is a section 527	7 org	anization.
2	Provide a description of the organize Political campaign activity expendit Volunteer hours for political campa	tures	cal campaign activities ii	n Part IV	<b>&gt;</b> \$_	
Pa	art I-B Complete if the ord	ganization is exempt und	ler section 501(c)(	3).		
$\overline{}$	Enter the amount of any excise tax				▶\$_	
	Enter the amount of any excise tax	• •				
3	If the organization incurred a section	on 4955 tax, did it file Form 4720	for this year?		_	Yes No
4a	Was a correction made?					Yes No
	olf "Yes," describe in Part IV					
Pa	art I-C Complete if the org	ganization is exempt und	ler section 501(c),	except section 50	D1(c)(	(3).
1	Enter the amount directly expende	d by the filing organization for se	ection 527 exempt funct	ion activities	▶\$_	
2	Enter the amount of the filing organ	nization's funds contributed to o	ther organizations for se	ection 527		
	exempt function activities				▶\$_	
3	Total exempt function expenditures	s Add lines 1 and 2 Enter here a	and on Form 1120-POL,			
_	line 17b				▶ \$ _	Yes No
	Did the filing organization file Form Enter the names, addresses and er made payments For each organiza contributions received that were pr political action committee (PAC) If	nployer identification number (El ition listed, enter the amount par omptly and directly delivered to	id from the filing organiz a separate political orga	litical organizations to v ation's funds. Also ent anization, such as a sep	which t er the a	the filing organization amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fr filing organization funds If none, ente	n's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
	· · · · · · · · · · · · · · · · · · ·			<u> </u>		<del>-</del>

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

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990-EZ) 2016  Part II-A   Complete if the org section 501(h)).	TRANSI anizatio	ORTAT n is exen	ION ALLIANCE opt under section	3) 501(c)(3) and file	93-1 d Form 5768 (ele	057956 Page 2 ction under
A Check Inf the filing organiza expenses, and share	e of exces	s lobbying e	lated group (and list in expenditures)		group member's name	, address, EIN,
Limi	ts on Lobb	ying Exper		visions apply	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence publ	ic opinion (c	arass roots lobbying)		2,953.	
<b>b</b> Total lobbying expenditures to influ	ience a leg	slative bod	y (direct lobbying)			
c Total lobbying expenditures (add li	nes 1a and	1b)		[	2,953.	
d Other exempt purpose expenditure	es				799,663.	
e Total exempt purpose expenditure	s (add line:	1c and 1d)	)		802,616.	
f Lobbying nontaxable amount Enter	r the amo	unt from the	following table in both	columns	145,392.	
If the amount on line 1e, column (a) o	r (b) is:	The lob	bying nontaxable amo	ount is:		
Not over \$500,000		20% of 1	the amount on line 1e			
Over \$500,000 but not over \$1,000	0,000	\$100,00	0 plus 15% of the exce	ss over \$500,000		
Over \$1,000,000 but not over \$1,5	00,000	\$175,00	0 plus 10% of the exce	ss over \$1,000,000		
Over \$1,500,000 but not over \$17,	000,000	\$225,00	0 plus 5% of the exces	s over \$1,500,000		
Over \$17,000,000		\$1,000,0	000			
					26 240	
g Grassroots nontaxable amount (en		•			36,348.	
h Subtract line 1g from line 1a If zero				-	0.	
i Subtract line 1f from line 1c If zero				L	0.	
j If there is an amount other than zer		r line 1h or l	ine 1i, did the organiza	tion file Form 4720	Г	¬.,
reporting section 4911 tax for this  (Some organizations the	nat made a	section 50	eraging Period Under 01(h) election do not h ate instructions for lin	ave to complete all o	f the five columns be	Yes No
	Lobb	ying Exper	ditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2	2013	<b>(b)</b> 2014	<b>(c)</b> 2015	( <b>d)</b> 2016	(e) Total
2a Lobbying nontaxable amount	160	934.	184,927.	177,764.	145,392.	669,017.
b Lobbying ceiling amount (150% of line 2a, column(e))						1,003,526.
c Total lobbying expenditures	;	8,859.	28,293.	21,341.	2,953.	56,446.
d Grassroots nontaxable amount	4(	),234.	46,232.	44,441.	36,348.	167,255.
e Grassroots ceiling amount (150% of line 2d, column (e))		,		,	, = = = = =	250,883.
f Grassroots lobbying expenditures		3,859.	28,293.	21,341.	2,953.	56,446.

2,953. 56,446. Schedule C (Form 990 or 990-EZ) 2016

THE STREET TRUST (FOMERLY, THE BICYCLE Schedule C (Form 990 or 990-EZ) 2016 TRANSPORTATION ALLIANCE) 93-1057956 Page 3 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (a) (b) For each "Yes," response on 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 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? i 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? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 2a Carryover from last year 2h 2c Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 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?

# **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

THE STREET TRUST (FOMERLY, THE BICYCLE TRANSPORTATION ALLIANCE)

**Employer identification number** 93-1057956

Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accoun	ts. Complete if the
	organization answered "Yes" on Form 990, Part IV, Iin	ne 6		
		(a) Donor advised funds	( <b>b</b> ) Fund	ds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (dunng year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds	
	are the organization's property, subject to the organization's			Yes No
6	Did the organization inform all grantees, donors, and donor a	<del>-</del>	used only	
	for charitable purposes and not for the benefit of the donor of		-	
	impermissible private benefit?			Yes No
Pa	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, I	Part IV, line 7	
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply)		
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a hist	orically import	tant land area
	Protection of natural habitat	Preservation of a cert	tified historic s	structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservat	tion easement on the last
	day of the tax year			Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c	. <u> </u>
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic structu	ıre	
	listed in the National Register		2d	
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by the	organization	during the tax
	year ▶			
4	Number of states where property subject to conservation ear	sement is located >		
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements r	t holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	servation ease	ments during the year
	<b>&gt;</b>			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	tion easement	s during the year
	<b>&gt;</b> \$			
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 1700	h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement, an	d balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	the organization	on's accounting for
_	conservation easements			<del></del>
Pa	t III Organizations Maintaining Collections o		ner Similai	r Assets.
	Complete if the organization answered "Yes" on Form			<del></del>
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statem	nent and balar	nce sheet works of art,
	historical treasures, or other similar assets held for public ext	hibition, education, or research in furthera	nce of public :	service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ibes these items		
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement	and balance	sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pul	blic service, pi	ovide the following amounts
	relating to these items			
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b>	\$ \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b>	\$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financia	l gain, provide	)
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items		
а	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> :	\$
h	Assets included in Form 990, Part X			¢ .

# THE STREET TRUST (FOMERLY, THE BICYCLE TRANSPORTATION ALLIANCE)

Sched	dule D (Form 990) 2016 TRANSPO	RTATION ALI	JIANC	E)			9	3-10	57956	Pag	e 2
	t III   Organizations Maintaining C	ollections of Ar	t, Histo	rical Tre	asures, or	Other S	Similar	Assets	(continu	ed)	
3	Using the organization's acquisition, accession	on, and other records	s, check	any of the fo	ollowing that	are a sign	ificant us	se of its c	ollection it	ems	
	(check all that apply)										
а	Public exhibition	d	ı 🗀 ı	Loan or excl	hange progra	ıms					
b	Scholarly research	е		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explain	how the	ey further th	e organizatio	n's exemp	t purpos	se in Part	XIII		
5	During the year, did the organization solicit o										
	to be sold to raise funds rather than to be ma	untained as part of the	he organ	ization's col	lection?				Yes		No
Par	t IV Escrow and Custodial Arrang	gements. Comple	ete if the	organizatio	n answered "	'Yes" on F	orm 990	, Part IV, I	ıne 9, or	_	
	reported an amount on Form 990, Par	t X, line 21									
1a	Is the organization an agent, trustee, custodia	an or other intermed	ary for c	ontributions	s or other ass	sets not inc	cluded		_		
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing ta	able							
									Amount		
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f		_		
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for e	scrow or cu	istodial acco	unt liability	?		Yes		No
<u>b</u>	If "Yes," explain the arrangement in Part XIII	Check here if the ex	planatio	n has been	provided on I	Part XIII					
Par	t V Endowment Funds. Complete	f the organization an	swered	"Yes" on Fo	rm 990, Part	IV, line 10					
		(a) Current year	(b) P	rior year	(c) Two year	rs back (c	1) Three y	ears back	(e) Four	ea <u>rs</u> ba	ack_
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses								<u></u>		
d	Grants or scholarships					_			<u></u>		
е	Other expenditures for facilities		}								
	and programs		ļ						<u> </u>		
f	Administrative expenses				,,,						
g	End of year balance		<u> </u>						<u> </u>		—
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1g	j, column (a)	)) held as						
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
С	Temporarily restricted endowment	%									
	The percentages on lines 2a, 2b, and 2c sho	•									
3a	Are there endowment funds not in the posse	ssion of the organiza	ation tha	t are held ar	nd administei	red for the	organiza	ation	Г.		<del></del>
	by									Yes	NO
	(i) unrelated organizations			•					3a(i)	-+	—
	(ii) related organizations								3a(ii)	<del>-  </del>	
b	If "Yes" on line 3a(ii), are the related organiza								3b	L.	
4	Describe in Part XIII the intended uses of the		wment f	unds .							
Pai	t VI Land, Buildings, and Equipm		D - 4 N			N David V III	10				
	Complete if the organization answere								(d) Deel		
	Description of property	(a) Cost or o		, ,	or other		cumulate		(d) Book	value	
	<del></del>	basis (investr	nem)	Dasis	(other)	uepi	reciation				
_	Land										
b	Buildings			<del></del> -	6,482.		6,4	82			0.
С	Leasehold improvements			1 /	2,534.	1	$\frac{6,4}{26,5}$		1 5	, 95	
d	Equipment			14	4,334.	<del>-</del>	20,0	0.3.6		,,,,	<u>+•</u>
_	Other	<u></u>				l <u>.                                    </u>		<del>-  </del>	1.5	, 95	<del>1</del>
Tota	I. Add lines 1a through 1e (Column (d) must e	gual Form 990. Part	x. colun	nn (B). line 1	UC.)					,, ,,	<u> </u>

Schedule D (Form 990) 2016

Part VIII   Investments - Other Securities.	ON ALLIANC	ь)	93	-103/936 Page 3
Complete if the organization answered "Yes" o	on Form 990 Part IV	line 11h See Form 990	Part Y line 12	
(a) Description of security or category (including name of security)	(b) Book value			l-of-year market value
(1) Financial derivatives		(-,		
(2) Closely-held equity interests				
(3) Other				
(A)	- "			
(B)			_	
(C)				
(D)				
(E)				
(F)				
(G)				
(H)			-	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" of	on Form 990, Part IV,	line 11c See Form 990,	Part X, line 13	
(a) Description of investment	(b) Book value	(c) Method of v	aluation Cost or end	l-of-year market value
(1)			_	
(2)				
(3)				
(4)				
(5)				· · · · · · · · · · · · · · · · · · ·
(6)			_ <u></u>	
			<del></del> -	
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
	- F 000 D-+ IV	lm = 11 d Caa Farm 000	Don't V. Ivon 15	
Complete if the organization answered "Yes" o	Description	line 110 See Form 990,	Part X, line 15	(b) Book value
	occompact.			(5) 55511 14.45
<u>(1)</u> (2)				
(3)		· -		
(4)		·		
(5)				
(6)				
				-
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)	•	<b>&gt;</b>	
Part X Other Liabilities.				
Complete if the organization answered "Yes" of	on Form 990, Part IV,	line 11e or 11f See Form	n 990, Part X, line 25	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes			ļ	
(2)		=		
(3)			1	
(4)			1	
(5)			1	
(6)	ŀ		1	
(7)	<del></del>		1	
(8)				

# THE STREET TRUST (FOMERLY, THE BICYCLE TRANSPORTATION ALLIANCE)

	dule D (Form 990) 2016 TRANSPORTATION ALLIANCE)		93-1057956 Page 4
	t XI Reconciliation of Revenue per Audited Financial State	ments With Revenu	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a	•
1	Total revenue, gains, and other support per audited financial statements		1 971,744.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII )	2d	
е	Add lines 2a through 2d	<u>-</u>	2e 0.
3	Subtract line 2e from line 1		3 971,744.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII )	4b	
С	Add lines 4a and 4b		4c 0.
_5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5 971,744.
Pa	rt XII Reconciliation of Expenses per Audited Financial State	ements With Exper	nses per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a	
1	Total expenses and losses per audited financial statements		1 1,059,610.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		i
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII)	_2d	
е	Add lines 2a through 2d		2e 0.
3	Subtract line 2e from line 1		3 1,059,610.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII )	4b	
С	Add lines 4a and 4b		4c   0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5 1,059,610.
Pa	Total expenses Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.) rt XIII Supplemental Information.		5 1,059,610.
<b>Pa</b> Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	Part IV, lines 1b and 2b,	5 1,059,610.
<b>Pa</b> Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, I	Part IV, lines 1b and 2b,	5 1,059,610.
<b>Pa</b> Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, I	Part IV, lines 1b and 2b,	5 1,059,610.
<b>Pa</b> Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, I	Part IV, lines 1b and 2b,	5 1,059,610.
<b>Pa</b> Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, I	Part IV, lines 1b and 2b,	5 1,059,610.
<b>Pa</b> Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, I	Part IV, lines 1b and 2b,	5 1,059,610.
<b>Pa</b> Prov	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, I	Part IV, lines 1b and 2b,	5 1,059,610.

632054 08-29-16

Schedule D (Form 990) 2016

### **SCHEDULE G**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 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.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 THE STREET TRUST (FOMERLY, THE BICYCLE

**Employer identification number** 

TRANSPO	RTATION ALLIANCE)				93-1057	956		
Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17 Form 990-EZ filers are not required to complete this part								
Indicate whether the organization rais	e Solicitat f Solicitat g Special  or oral agreement with any individual art VII) or entity in connection with providuals or entities (fundraisers) pursua	tion of tion of fundra (includ	non-g gover using ling of onal fi	overnment grants nment grants events ficers, directors, trus undraising services?	Yes			
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		or control of		I Irom activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No					
						-		
			-					
·								
		<u> </u>	L					
Total  3 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								
		,			<del></del>	<u> </u>		

# THE STREET TRUST (FOMERLY, THE BICYCLE Schedule G (Form 990 or 990-EZ) 2016 TRANSPORTATION ALLIANCE)

Sche	Schedule G (Form 990 or 990-EZ) 2016 TRANSPORTATION ALLIANCE) 93-1057956 Page 2					
Pa	Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000					
		of fundraising event contributions and gro				s greater than \$5,000
ı			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
Į				ALICE		(add col (a) through
			CHALLENGE	AUCTION	1	col (c))
			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	24,759.	141,320.	21,632.	187,711.
	2	Less Contributions	18,825.	85,043.	10,650.	114,518.
$\dashv$	3	Gross income (line 1 minus line 2)	5,934.	56,277.	10,982.	73,193.
	4	Cash prizes				
S	5	Noncash prizes	5,494.		5,138.	10,632.
pense	6	Rent/facility costs	987.	27,073.	1,515.	29,575.
Direct Expenses	7	Food and beverages	566.	15,528.	350.	16,444.
	8	Entertainment				
l	9	Other direct expenses	1,045.	32,578.	526.	34,149.
ď	10	Direct expense summary Add lines 4 through			<b>&gt;</b>	90,800.
	11		ne 3, column (d)			-17,607.
Pa	rt I	<b>II Gaming.</b> Complete if the organization	answered "Yes" on Form	n 990, Part IV, line 19, or i	eported more than	
		\$15,000 on Form 990-EZ, line 6a	<del>,</del>			
976			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue						
ď	1	Gross revenue				
ses	2	Cash prizes				
Expen	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				<u> </u>
	5	Other direct expenses				
		Volunteer labor	Yes % No	Yes % No	Yes % No	
7 Direct expense summary Add lines 2 through 5 in column (d)						
	8	Net gaming income summary Subtract line 7	from line 1, column (d)			
						-
9 Enter the state(s) in which the organization conducts gaming activities  a Is the organization licensed to conduct gaming activities in each of these states?  b If "No," explain						
_						
		ere any of the organization's gaming licenses re	•		/ear?	Yes No
	_					

# THE STREET TRUST (FOMERLY, THE BICYCLE Schedule G (Form 990 or 990-EZ) 2016 TRANSPORTATION ALLIANCE) 93-1057956 Page 3 11 Does the organization conduct gaming activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed Yes No to administer charitable gaming? 13 Indicate the percentage of gaming activity conducted in a The organization's facility **b** An outside facility 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records Address > Yes No 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? b If "Yes," enter the amount of gaming revenue received by the organization > \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party > \$ c If "Yes," enter name and address of the third party Address > 16 Gaming manager information Name > Gaming manager compensation ▶ \$ Description of services provided Director/officer Employee Independent contractor 17 Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to Yes No retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$ Supplemental Information. Provide the explanations required by Part I, line 2b, columns (III) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also provide any additional information. See instructions

s Sahadula G	/Form 200 or 200 F7	THE STREET TRUST (FOMERLY, THE BICYCLE TRANSPORTATION ALLIANCE)	93-1057956 Page 4
Part IV	(Form 990 or 990-EZ) <b>Supplemental Infor</b>	mation (	33 1037330 Fage 4
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### SCHEDULE M (Form 990)

# **Noncash Contributions**

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

OMB No 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990 THE STREET TRUST (FOMERLY, THE BICYCLE

Inspection **Employer identification number** 

93-1057956 TRANSPORTATION ALLIANCE) Part I Types of Property (c) (d) (a) (b) Check if Number of Noncash contribution Method of determining amounts reported on contributions or applicable noncash contribution amounts Form 990, Part VIII, line 1g tems contributed Art - Works of art Art - Historical treasures Art - Fractional interests Books and publications Clothing and household goods 5 Cars and other vehicles Boats and planes Intellectual property 8 Securities - Publicly traded 10 Securities - Closely held stock Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 Qualified conservation contribution -13 Historic structures 14 Qualified conservation contribution - Other 15 Real estate - Residential 16 Real estate - Commercial Real estate - Other 17 18 Collectibles 19 Food inventory Drugs and medical supplies 20 Taxidermy 21 Historical artifacts 22 23 Scientific specimens Archeological artifacts 24 31,564. FAIR MARKET VALUE 100 ( AUCTION ITEMS ) X 25 Other 10,632. FAIR MARKET VALUE EVENT PRIZES X 50 Other 26 Other 27 Other 28 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Ye<u>s</u> No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for 30a exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a b If "Yes," describe in Part II If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

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

Schedule M (Form 990) (2016)

Schedule M	(Form 990) (2016) TRANSPORTATION ALLIANCE)	<u>93-1057956</u>	Page 2
Part II	<b>Supplemental Information.</b> Provide the information required by Part I, lines 30b, is reporting in Part I, column (b), the number of contributions, the number of items received this part for any additional information	32b, and 33, and whether the organizated, or a combination of both Also comp	tion olete
	This part for any additional information		
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# **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

Open to Public

Inspection

OMB No 1545-0047

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>

THE STREET TRUST (FOMERLY, THE BICYCLE Emplo

TRANSPORTATION ALLIANCE)

**Employer identification number** 93-1057956

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
STREET TRUST BIKE SAFETY EDUCATION INSTRUCTORS TEACH COURSES IN 4TH-7TH
GRADE CLASSROOMS, MEETING NUMEROUS CURRICULUM BENCHMARKS MANDATED BY
THE STATE OF OREGON. THE BICYCLE SAFETY EDUCATION PROGRAM BRINGS
RESOURCES INTO SCHOOLS INCLUDING A TRAINED INSTRUCTOR, A FLEET OF 30
BIKES, HELMETS, BROCHURES AND PAMPHLETS, SAFETY VESTS, VIDEOS, AND
OTHER EQUIPMENT. THE STREET TRUST ALSO TRAINS INSTRUCTORS, COORDINATES
PROGRAM LOGISTICS, AND ASSISTS WITH FUNDRAISING AND VOLUNTEER
COORDINATION.
THE STREET TRUST HELPS IMPLEMENT AND TEACH THE SHARE THE ROAD SAFETY
CLASS, WHICH FOCUSES ON TRAFFIC LAW AND SAFETY ISSUES AS THEY RELATE TO
BICYCLISTS, PEDESTRIANS AND MOTORISTS NEEDING TO SHARE THE PUBLIC
RIGHT-OF-WAY IN A SAFE AND LAWFUL MANNER.
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
THE STREET TRUST PARTNERS WITH PUBLIC AGENCIES, NONPROFITS, PUBLIC
HEALTH PROFESSIONALS, AND BUSINESS COMMUNITIES THROUGHOUT OREGON TO
BUILD HIGH-LEVEL SUPPORT FOR INCREASING FUNDING FOR ACTIVE
TRANSPORTATION INITIATIVES.
THE STREET TRUST ADVOCATES AT THE STATE LEGISLATURE FOR LAWS THAT
PROTECT SAFETY OF ALL ROADWAY USERS, EXPAND DRIVER AND BICYCLIST
EDUCATION, INSTITUTE POLICIES THAT FACILITATE WALKING AND BIKING TO  LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2016)

632212 08-25-16

Schedule O (Form 990 or 990-EZ) (2016)

Schedule O (Form 990 or 9	90-EZ) (2016)	Page 2
Name of the organization	THE STREET TRUST (FOMERLY, THE BICYCLE TRANSPORTATION ALLIANCE)	Employer identification number 93-1057956
FULFILL THE GO	DALS OF THE BTA.	
FORM 990, PAR	T VI, SECTION B, LINE 11B:	
FINANCE COMMI	TTEE REVIEWS DRAFT AND RECOMMENDS APPROVAL BY	BOARD WHICH
APPROVES 990.		
FORM 990, PAR	r VI, SECTION B, LINE 12C:	
WE HAVE FORMS	ON FILE FOR EACH OFFICER, DIRECTOR, AND KEY	EMPLOYEE.
POTENTIAL CON	FLICTS OF INTEREST ARE ADDRESSED AT MEETINGS	OF THE BOARD AND
DISCLOSED IF		
DIDCHOOLD II 1	HINOINIMI.	
EODY 000 DAR	D. U.T. GEOMETON D. J. TANE 1.5	
	r VI, SECTION B, LINE 15:	
BOARD REVIEWED	SALARY SURVEY FOR EXECUTIVE DIRECTOR TO DET	ERMINE
COMPENSATION.		
		<del></del>
FORM 990, PAR	r VI, SECTION C, LINE 19:	
FINANCIAL STA	TEMENTS ARE AVAILABLE THROUGH THE ORGANIZATIO	N'S WEBSITE
ANNUAL REPORTS	S, CONFLICT OF INTEREST POLICY AND OTHER SPEC	IFIC DOCUMENTS
ARE AVAILABLE	THROUGH THE FINANCE OFFICE.	
990 PART XII,	LINE 2C	<u>-</u>
	OR OVERSEEING THE AUDIT AND THE SELECTION OF	тиг
INDEPENDENT A	CCOUNTANT HAS NOT CHANGED FROM THE PRIOR YEAR	