990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2024

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

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

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

Open to Public Inspection

Α	For the	2024 calend	dar year, or tax year beginning	01/01/2024	and ending		12/31/2	024			
В	Check if a	applicable:	C Name of organization BICYCLE	ADVENTURE CLUB				D Emplo	yer identification number		
	Address of	change	Doing business as						95-3867148		
	Name cha	ange	Number and street (or P.O. box if	mail is not delivered to stre	et address)	Room/	suite	E Teleph	one number		
	Initial retu	rn	PO Box 23998			858-715-9510					
	Final retur	n/terminated	City or town, state or province, co	untry, and ZIP or foreign po	ostal code						
	Amended	return	San Diego, CA 92193					G Gross	receipts \$ 196,123		
	Application	n pending	F Name and address of principal offi	cer: Ernest Coose		I	H(a) Is this a gro	up return fo	r subordinates? 🔲 Yes 🔽 No		
		5801 Harbor Town Drive, Garland, TX 75044 H(b) Are all sub						bordinate	es included? Yes No		
<u> </u>	Tax-exem	pt status:	501(c)(3) 501(c) (7) (insert no.) 4	947(a)(1) or 527	' I	f "No," attach a	a list. See instructions.			
J	Website:	https://w	ww.bicycleadventureclub.org			ı	H(c) Group ex	emption	number		
K	Form of or	rganization: 🗸	Corporation Trust Associat	ion Other	L Year of for	mation:	1982	M State	of legal domicile: CA		
Р	art I	Summa	ry								
	1	Briefly des	cribe the organization's missi	on or most significan	t activities: To co	nnect	members s	ocially	through volunteer led		
a)	_	bicycle tou	rs, domestically and internatio	nally.		2)					
Activities & Governance	_				<u>O</u>						
ĩ	_										
ŏ	2 (Check this	box \square if the organization di	scontinued its operat	ions o <mark>r dispos</mark> ed	of mo	ore than 25	% of its	s net assets.		
<u>ფ</u>	3 1	Number of	voting members of the gover	ning body (Part VI, Iir	ne 1a)			3	7		
es	4 1	Number of	independent voting member	s of the governing bo	dy (Part VI, line 1	lb) .		4	7		
Ϋ́	5	Total numb	per of individuals employed in	calendar year 2024 (Part V, line 2a)			5	2		
∫ cti	6	Total numb	per of volunteers (estimate if r	necessary) 💢				6	50		
٩	7a -	Total unrel	ated business revenue from F	Part VIII, column (C), l	ne 12			7a	83,928		
	b I	Net unrelat	ted business taxable income	from Form 99 <mark>0-T, Pa</mark> i	t I, line 11			7b	83,928		
							Prior Year		Current Year		
a)	8 (Contributio	ons and grants (Part VIII, line	1h)				0	0		
ğ	9 1	Program se	ervice revenue (Part VIII, line 2	2g)			12	27,740	112,195		
Revenue			t income (Part VIII, column (A)	(58,315	83,928					
Œ	I		nue (Part VIII, column (A), line					0	0		
	12	2 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)							196,123		
	13 (Grants and	similar amounts paid (Part I)	(, column (A), lines 1-	3)			0	0		
	14	Benefits pa	paid to or for members (Part IX, column (A), line 4)						0		
S		-	her compensation, employee b					53,378	64,471		
Expenses			al fundraising fees (Part IX, co	· ·				0	0		
e d	1		raising expenses (Part IX, colu		0						
й	I		enses (Part IX, column (A), line				(93,595	104,046		
	1		nses. Add lines 13-17 (must e		(A). line 25) .			56,973	168,517		
	19		ess expenses. Subtract line 18	•				39,082	27,606		
Net Assets or Fund Balances						Begir	nning of Curre		End of Year		
ets	20	Total asset	ts (Part X, line 16)					20,435	1,687,077		
Ass I Ba	21		ties (Part X, line 26)					27,670	1,366,706		
E Ret	22		or fund balances. Subtract li	ne 21 from line 20				92,765	320,371		
_	art II		re Block					,2,,00	020/071		
			, I declare that I have examined this r	eturn, including accompany	ving schedules and s	tatemen	ts. and to the	best of r	my knowledge and belief, it is		
			e. Declaration of preparer (other than						,		
	1										
Sig	gn	Signature	of officer				Date)			
	ere	Ernest Co	oose, Treasurer								
			rint name and title								
_		Preparer's		Preparer's signature		Date		Check [T if PTIN		
Paid Self-en					self-emp	- 」"					
	eparer	Lives's see	ma .			<u> </u>			•		
Us	se Only	Firm's nan									
<u> </u>	v the IP	Firm's add	oress this return with the preparer s	hown above? See inc	structions		Phone	IIO.	. Yes No		
ivid	ᇄᇄᇋᇚ	. u.auuaa l	ans recurr with the Diebaiel S						.		

Part								
1	Check if Schedule O contains a response or note to any line in this Part III							
	internationally.							
2	Did the organization undertake any significant program services during the year which were not listed on the							
	prior Form 990 or 990-EZ?							
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?							
	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 measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.							
4a	(Code:) (Expenses \$ 168,517 including grants of \$ 0) (Revenue \$ 112,195)							
	During 2024, we ran 16 tours in the USA and 25 tours elsewhere in the world. We ran a virtual training course for 21 potential new tour leaders.							
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)							
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)							
74	Other program services (Describe on Schedule O.)							
4d	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)							
4e	Total program service expenses 168,517							

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	90 (2024)		- 1	Page
Part	IV Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		\ \ \ \
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		,
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? <i>If "Yes," complete Schedule C, Part II</i>	4		
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		,
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		,
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		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		,
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? <i>If "Yes," complete Schedule D, Part IV </i>	9	V	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in 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, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		,
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		~
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		,
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		,
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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	11e	<i>'</i>	,
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		,
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		,
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a b	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
J	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		,
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		,
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? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		,
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		,
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		·
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		,
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Part I	Checklist of Required Schedules (continued)		-	
			Yes	No
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? If "Yes," complete Schedule I, Parts I and III	22		_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		~
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the 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		,
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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 Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		~
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member 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 the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		~
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		~
29 30	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		ν ν
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
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		~
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		~
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
D	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		~
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	~	
Part		•		
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	-	162	IAO
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1.	.,	

Part '	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 2			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	~	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on 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 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).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			~
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit 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		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .			
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	on Form W-3, Transmittal of Wage and Tax gray organization file all required federal employment tax returns? 3 gross income of \$1,000 or more during the year? 3 gross income of \$1,000 or more during the year? 3 gross income of \$1,000 or more during the year? 3 gross income of \$1,000 or more during the year? 3 gross income of \$1,000 or more during the year? 3 gross income of \$1,000 or more during the year? 3 gross income of \$1,000 or more during the year? 4 gross income of \$1,000 or more during the year? 5 gross income of \$1,000 or more during the year? 5 gross income of \$1,000 or more during the year? 5 gross income of \$1,000 or more during the year? 5 gross income of \$1,000 or more during the year? 5 gross income of \$1,000 or more during the year? 5 gross income of \$1,000 or more during the year? 5 gross income of \$1,000 or more during the year? 5 gross income of \$1,000 or more during the year? 5 gross income of \$1,000 or more during the year? 5 gross income of \$1,000 or more during the year? 5 gross income of \$1,000 or more during the year? 5 gross income of \$1,000 or more during the year? 5 gross income of \$1,000 or more during the year? 5 gross income of \$1,000 or more during the year? 5 gross income of \$1,000 or more during the year? 7 gross income of \$1,000 or more during the year? 7 gross income of \$1,000 or more during the year? 7 gross income of \$1,000 or more during the year? 1 gross income of \$1,000 or more during the year? 1 gross income of \$1,000 or more during the year? 1 gross income or year income year year year year year year year yea		
	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			
•		8		
	Sponsoring organizations maintaining donor advised funds.	0-		
b 10	Section 501(c)(7) organizations. Enter:	90		
11	Section 501(c)(12) organizations. Enter:			
	Gross income from other sources. (Do not net amounts due or paid to other sources			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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.			
	Enter the amount of reserves the organization is required to maintain by the states in which			
	1 100			
	Did the organization receive any payments for indoor tanning services during the tax year?			~
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	, , , , , , , , , , , , , , , , , , , ,	15		~
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
17	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	47		
	If "Yes," complete Form 6069.	17		
	ii i es, complete roitii ooos.			

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 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 on Schedule O. Enter the number of voting members included on line 1a, above, who are independent . 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?. 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 ~ Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a Each committee with authority to act on behalf of the governing body? 8b 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 on Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 1 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Other (explain on Schedule O) Own website Another's website ☐ Upon request Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial 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. Ernest Coose, (469)520-7615

Part VI

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

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

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization no	any relate	d org	aniz	atio	n c	ompe	nsa	ted any current	officer, director,	or trustee.	
		(C)									
(A)	(B)			Pos				(D)	(E)	(F)	
Name and title	Average		do not check more than					Reportable	Reportable	Estimated amount	
	hours	box, unless person is both an officer and a director/trustee)						compensation	compensation	of other	
	per week (list any	오코	_		_		_	from the organization (W-2/	from related organizations (W-2/	compensation from the	
	hours for	di vi	stit	Officer	ey e	ghe ghe	Former	1099-MISC/	1099-MISC/	organization and	
	related	dual	iti or	٦	a d	st c	9	1099-NEC)	1099-NEC)	related organizations	
	organizations below	֓֞֞֞֞֝֟֞֝֟֝֟ <u>֚</u>	nal t	!	Key employee	om p					
	dotted line)	Individual trustee or director	Institutional trustee		Ф	ens					
			ee			Highest compensated employee					
Ernest Coose	15.00										
Treasurer	0.00	V		~				0	0	0	
Tom Leever	10.00										
Ride Management Committee Chair	0.00	V						0	0	0	
Barbara Rudolph	15.00										
Chair	0.00	~		~				0	0	0	
Susan Bunten	10.00										
Secretary	0.00	~		~				0	0	0	
Grant McAlister	10.00										
Website Committee Chair	0.00	~						0	0	0	
Kate Faulkner	10.00										
Policy Committee Chair	0.00	~						0	0	0	
Joan Feerick	10.00										
Ride Leader Training and Development Chair	0.00	~						0	0	0	
		-									
		-									

Part	VII Section A. Officers, Directors, 1	rustees,	Key I	Emı	plo	yee	s, an	ld F	lighest Compe	nsated I	Emplo	yees (continued)
					(0	C)						
	(A)	(B)	(da n			ition			(D)	(E)		(F)
	Name and title	Average	١,				e than o is both		Reportable	Reporta		Estimated amount
		hours per week					or/trus		compensation from the	compens from rel		of other compensation
		(list any	Indi or c	Inst	Officer	Şe Ş	Hig	For	organization (W-2/	organizatio		from the
		hours for	Individual trustee or director	titut	icer	Key employee	hes	Former	1099-MISC/	1099-M		organization and
		related organizations	ual t	ione		old	ee co	,	1099-NEC)	1099-N	IEC)	related organizations
		below	trust	 		yee	mpe					
		dotted line)	lee	Institutional trustee			Highest compensated employee					
				Φ			ted					
										•		
									7			
					×							
			. (7								
		(
1b	Subtotal								0		0	0
С	Total from continuation sheets to Part	VII, Sectio	n A									
d	Total (add lines 1b and 1c)								0		0	0
2	Total number of individuals (including		limite	ed t	o t	hos	se lis	ted	above) who re	eceived r	nore t	han \$100,000 of
	reportable compensation from the organi	zation							0			
												Yes No
3	Did the organization list any former of							mpl	oyee, or highes	st compe	nsated	
	employee on line 1a? If "Yes," complete S											3 🗸
4	For any individual listed on line 1a, is the											
	organization and related organizations	greater that	an \$1	150,	000)? [f "Ye	s, "	complete Sched	dule J fo	r such	
	individual											4 🗸
5	Did any person listed on line 1a receive of									tion or inc	lividual	
	for services rendered to the organization	? If "Yes," c	compl	ete	Sch	nedi	ule J t	for s	such person .			5 🗸
Secti	on B. Independent Contractors											
1	Complete this table for your five high											
	compensation from the organization. Repo	ort compen	satior	1 for	r the	ca	lenda	r ye	ar ending with or	within the	e orgar	nization's tax year.
	(A)								(B)	.		(C)
	Name and business add	ress						_	Description of serv	rices		Compensation
None												
								_				
								_				
		<i>/</i> · · · ··						<u> </u>		<u>,</u>		
2	Total number of independent contractor						ed to	o th		e) who		
	received more than \$100,000 of compens	alion from 1	me or	yan	ızat	เบท			0	- 1		

Part VIII Statement of Revenue

		Check if Schedule O contains a respons	se or note to ar	ny line in this Pa	ırt VIII		🗆
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts,	1a	Federated campaigns 1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues 1b					
, Gi	С	Fundraising events 1c					
ifts ır A	d	Related organizations 1d					
, Gi nila	е	Government grants (contributions) 1e					
Sir	f	All other contributions, gifts, grants,					
utic her		and similar amounts not included above					
irib Otl	g	Noncash contributions included in					
on		lines 1a–1f	\$				
O @	h	Total. Add lines 1a-1f		0			
ө	0-		Business Code				
vic	2a						
Program Service Revenue	b						
	c d						
	e f	All other program service revenue		112,195	112,195	0	0
п	g	Total. Add lines 2a–2f		112,195	112,173	U	<u> </u>
	3	Investment income (including dividends		112,173			
		other similar amounts)		83,928	0	83,928	0
	4	Income from investment of tax-exempt bo	nd proceeds	0	0	0	0
	5	Royalties		0	0	0	0
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c 0	0				
	d	Net rental income or (loss)	. (7/1)				
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a					
Revenue	b	Less: cost or other basis					
ven	_	and sales expenses . 7b					
		Gain or (loss) 7c 0	0				
Other	d	Net gain or (loss)					
o t	8a	Gross income from fundraising events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18 8a					
	b	Less: direct expenses 8b					
	C	Net income or (loss) from fundraising ever	nts				
	9a	Gross income from gaming					
		activities. See Part IV, line 19 . 9a					
	b	Less: direct expenses 9b					
		Net income or (loss) from gaming activitie	s				
	10a	Gross sales of inventory, less					
		returns and allowances 10a					
		Less: cost of goods sold 10b					
	С	Net income or (loss) from sales of invento	<u>-</u>				
Sn			Business Code				
eo Iue	11a						
scellaneo Revenue	b						
Miscellaneous Revenue	c d	All other revenue					
Ξ̈́		Total. Add lines 11a–11d		0			
	12	Total revenue. See instructions	· · · · · ·	196.123	112.195	83.928	0

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All	other organizations	must complete colu	ımn (A).
	Check if Schedule O contains a respons				
	t include amounts reported on lines 6b, 7b, , 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		314 211 22 2	general enpena	
	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 individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
^					
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and			•	
	persons described in section 4958(c)(3)(B)				
7		50.075	- CA		
7 8	Other salaries and wages	58,975			
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	5,496			
11	Fees for services (nonemployees):	3,170			
а	Management				
b	Legal	8			
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A), amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses	12,163			
14 15	Information technology	9,195			
15 16	Occupancy				
17	Travel	2,808			
18	Payments of travel or entertainment expenses	2,000			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	3,415			
20	Interest	·			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance	51,162			
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
_		47.700			
a	Federal Income Taxes	17,792			
b C	California State Income Tax				
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	168,517	0	0	0
26	Joint costs. Complete this line only if the	100,017	· ·		
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here \square if				
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	art X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	191,619	1	128,962
	2	Savings and temporary cash investments	1,357,666	2	1,492,167
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	44,321	4	36,588
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			
	•		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0
S	7	Notes and loans receivable, net	0	7	0
Assets	8	Inventories for sale or use	168	8	0
As	9	Prepaid expenses and deferred charges	26,661	9	29,360
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a	20,000		
	b	Less: accumulated depreciation 10b	9)	10c	
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,620,435	16	1,687,077
	17	Accounts payable and accrued expenses	7,445	17	8,087
	18	Grants payable	0	18	0
	19	Deferred revenue	60,150	19	76,815
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	1,256,877	21	1,278,256
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
abi		controlled entity or family member of any of these persons	0	22	
Ξ	23	Secured mortgages and notes payable to unrelated third parties	0	23	
	24	Unsecured notes and loans payable to unrelated third parties	0	24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	3,198	25	3,548
	26	Total liabilities. Add lines 17 through 25	1,327,670	26	1,366,706
ces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			
ılar	27	Net assets without donor restrictions	292,765	27	320,371
Be	28	Net assets with donor restrictions	0		0
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
o	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SSI	31	Retained earnings, endowment, accumulated income, or other funds.		31	
λA	32	Total net assets or fund balances	292,765		320,371
ž	33	Total liabilities and net assets/fund balances	1,620,435		1,687,077

Part	ΧI	Reconciliation of Net Assets				
		Check if Schedule O contains a response or note to any line in this Part XI				
1	Tota	al revenue (must equal Part VIII, column (A), line 12)	1		19	6,123
2	Tota	al expenses (must equal Part IX, column (A), line 25)	2		16	8,517
3	Rev	enue less expenses. Subtract line 2 from line 1	3		2	7,606
4	Net	assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		29	2,765
5	Net	unrealized gains (losses) on investments	5			0
6	Don	ated services and use of facilities	6			0
7	Inve	stment expenses	7			0
8	Prio	r period adjustments	8			0
9		er changes in net assets or fund balances (explain on Schedule O)	9			0
10		assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
		column (B))	10		32	0,371
Part	XII	Financial Statements and Reporting				
		Check if Schedule O contains a response or note to any line in this Part XII				
					Yes	No
1		ounting method used to prepare the Form 990: Cash Accrual Other		_		
		ne organization changed its method of accounting from a prior year or checked "Other," ex	plain o	n		
		edule O.				
2a		e the organization's financial statements compiled or reviewed by an independent accountant?		2a		~
		res," check a box below to indicate whether the financial statements for the year were con	npiled o	r		
		ewed on a separate basis, consolidated basis, or both.				
	_	eparate basis				
b		e the organization's financial statements audited by an independent accountant?		2b		~
		Yes," check a box below to indicate whether the financial statements for the year were audit	ted on a	a		
		arate basis, consolidated basis, or both.				
	_	eparate basis				
С		es" to line 2a or 2b, does the organization have a committee that assumes responsibility for over				
		audit, review, or compilation of its financial statements and selection of an independent accounts		2c		
		e organization changed either its oversight process or selection process during the tax year, execute O.	cpiain oi	n		
20		a result of a federal award, was the organization required to undergo an audit or audits as set fo	uth in th			
Sa		orm Guidance, 2 C.F.R. Part 200, Subpart F?				
b		es," did the organization undergo the required audit or audits? If the organization did not undergo		3a		
b		ired audit or audits, explain why on Schedule O and describe any steps taken to undergo such a		3b		
					n 990	(2024)
				FOII	1990	(2024)
		▼ · · · · · · · · · · · · · · · · · · ·				

SCHEDULE D (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047

Open to Public Inspection

Name o	f the organization	Em	ployer identification number
BICYC	CLE ADVENTURE CLUB		95-3867148
Par	t I Organizations Maintaining Donor Advi	sed Funds or Other Similar Funds o	or Accounts
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 6.	
	·	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor a	dvisors in writing that the assets held in	donor advised
	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, and	d donor advisors in writing that grant fund	
	only for charitable purposes and not for the benefit	of the donor or donor advisor, or for any	other purpose
	conferring impermissible private benefit?		· · · · · 🗌 Yes 🗌 No
Par	Conservation Easements		
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the o		 -
	☐ Preservation of land for public use (for example, recreations)	1137	nistorically important land area
	☐ Protection of natural habitat	· · · · · · · · · · · · · · · · · · ·	certified historic structure
	☐ Preservation of open space	4	
2	Complete lines 2a through 2d if the organization hel	d a qualified conservation contribution in	the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified hi		2c
d	Number of conservation easements included on line		-
	on a historic structure listed in the National Register		2d
3	Number of conservation easements modified, tran	sferred, released, extinguished, or termi	
	the organization during the tax year		
4	Number of states where property subject to conserv	vation easement is located	
5	Does the organization have a written policy rega		
	violations, and enforcement of the conservation eas	ements it holds?	· · · · · 🗌 Yes 🗌 No
6	Staff and volunteer hours devoted to monitoring,	inspecting, handling of violations, and	enforcing
	conservation easements during the year		
7	Amount of expenses incurred in monitoring, in	specting, handling of violations, and	enforcing
	conservation easements during the year		\$
8	Does each conservation easement reported on line	2d above satisfy the requirements of secti	ion 170(h)(4)(B)
	(i) and section 170(h)(4)(B)(ii)?		· · · · · 🗌 Yes 🗌 No
9	In Part XIII, describe how the organization reports co		•
	sheet, and include, if applicable, the text of the footi		ents that describes the
	organization's accounting for conservation easemer		
Part			er Similar Assets
	Complete if the organization answered "		
1a	If the organization elected, as permitted under FAS	•	
	of art, historical treasures, or other similar assets		•
	service, provide in Part XIII the text of the footnote to		
b	If the organization elected, as permitted under FAS		
	art, historical treasures, or other similar assets held		ch in furtherance of public service,
	provide the following amounts relating to these item		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art,		ets for financial gain, provide the
	following amounts required to be reported under FA		
а	Revenue included on Form 990, Part VIII, line 1 .		\$
b	Assets included in Form 990, Part X		\$

Part	Organizations Maintaining	Collections of	Art Hiet	orical T	ragelirae	or Ot	her Similar /	Accate /	continu	ied)
3	Using the organization's acquisition,									
3	collection items (check all that apply).		iller record	is, crieck	ally Of the	5 IOIIOV	villy that make	signine	iii use	OI ILS
			_	- .						
а	Public exhibition		d L		r exchange					
b	☐ Scholarly research		e	Other						
С	☐ Preservation for future generations	}								
4	Provide a description of the organization	tion's collections	and explai	n how th	ey further	the org	ganization's ex	empt pu	rpose in	ı Parl
	XIII.		•						•	
5	During the year, did the organization	solicit or receive of	donations	of art. his	storical trea	asures.	or other similar	ar		
_	assets to be sold to raise funds rather								ae 🗆 '	No
Dow								. 🗆 1		140
Part			. –	000 5		•			_	
	Complete if the organization	ı answered "Yes	on Forn	n 990, P	art IV, Ilne	9, or	reported an a	amount	on Forr	n
	990, Part X, line 21.									
1a	Is the organization an agent, trustee,	custodian, or oth	er interme	diary for	contribution	ons or	other assets n	ot		
	included on Form 990, Part X?							. 🗌 Y	es 🔽 I	No
b										
				· · · · · · · · · · · · · · · · · · ·				Amount		
•	Beginning balance					10	+	7 11110 01110		
C	= =				ON					
d	Additions during the year					10				
е	Distributions during the year				U) .	16				
f	Ending balance					1f				
2a	Did the organization include an amount									No
b	If "Yes," explain the arrangement in P	art XIII. Check her	e if the ex	olanation	has been	provid	ed in Part XIII]
Par	t V Endowment Funds									
	Complete if the organization	answered "Yes	" on Forn	n 990, P	art IV, line	10.				
		(a) Current year	(b) Prior		(c) Two year		(d) Three years ba	ack (e) F	our years l	back
1a	Beginning of year balance	(1)		,	(1)		(1)	(,,	, , , , , , , , , , , , , , , , , , ,	
_										
b			W							
С	Net investment earnings, gains,									
	and losses									
d	Grants or scholarships		*							
е	Other expenditures for facilities and									
	programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of t	the current year or	d balance	lino 1a	column (a)	N hold	00:			
				; (iiile ig,	Columni (a))) Held	as.			
a	Board designated or quasi-endowmen		%							
b	Permanent endowment	%								
С	Term endowment%									
	The percentages on lines 2a, 2b, and	2c should equal 1	00%.							
3a	Are there endowment funds not in the	e possession of th	ne organiz	ation that	t are held a	and ad	ministered for	the		
	organization by:								Yes	No
	(i) Unrelated organizations?							. 3a	(i)	
	· · · · · · · · · · · · · · · · · · ·							. 3a(
L	If "Yes" on line 3a(ii), are the related o									
b								. 3t		
4	Describe in Part XIII the intended uses		on's endol	vment tu	nas.					
Part				000						
-	Complete if the organization	answered "Yes	" on Forn	n 990, P	art IV, line	11a.	See Form 99	0, Part)	, line 1	0.
	Description of property	(a) Cost or o	ther basis	(b) Cost or	other basis	(c)	Accumulated	(d) E	Book value	;
		(investm	nent)	(oth	her)	d	epreciation			
1a	Land									
b	Buildings	-								
		•	+							
C	Leasehold improvements	•	+							
d	Equipment									
e	Other									
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90, Part X,	line 10c,	, column (E	3)) .	<u>.</u>			

Part VII	Investments – Other Securities			
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11b. See F	orm 990, Part X, line	12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market	
(1) Financial	derivatives			
(2) Closely h	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)	(1) / / / / / / / / / / / / / / / / / / /			
	mn (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII	Investments—Program Related	V line 11 a Con F	aura 000 Davit V lina	. 10
	Complete if the organization answered "Yes" on Form 990, Part			
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market	
(4)				
(1)				
(2)				
(3) (4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX	Other Assets	!		
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11d. See F	orm 990, Part X, line	15.
	(a) Description		(b) Book va	alue
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	and (b) moved a great Forms 2000. Point V. line 15, and (D))			
	mn (b) must equal Form 990, Part X, line 15, col. (B))	· · · · · · ·		
Part X	Complete if the organization answered "Yes" on Form 990, Part I	V line 11e or 11f	Soo Form 000 Part	V
	line 25.	v, line rie or rii.	See Form 990, Part	Λ,
1.	(a) Description of liability		(b) Book vo	aluo
(1) Federal in			(b) Book va	
	iconie taxes			3,548
(2)				
(3)				
(4)				
(5) (6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, line 25, col. (B))			3,548
	uncertain tax positions. In Part XIII, provide the text of the footnote to the organ		tements that reports the	-,0.0

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII .

Part	• • • • • • • • • • • • • • • • • • •	=	Returr	1
	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	196,123
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a 0		
b	Donated services and use of facilities	2b 0		
С	Recoveries of prior year grants	2c 0		
d	Other (Describe in Part XIII.)	2d 0		
е	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	196,123
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 0		
b	Other (Describe in Part XIII.)	4b 0		
c	Add lines 4a and 4b	10)	4c	0
5 Dort	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5 Dot:	196,123
Part	XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990,		er Kell	ırrı
-	Total expenses and losses per audited financial statements	Part IV, lifte 12a.	4	4/0 547
1 2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1	168,517
a	Donated services and use of facilities	2a 0		
a b	Prior year adjustments	2b 0	-	
C	Other losses	2c 0	1	
d	Other (Describe in Part XIII.)	2d 0	-	
e	Add lines 2a through 2d	20 0	2e	0
3	Subtract line 2e from line 1		3	168,517
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			100/01/
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a 0		
b	Other (Describe in Part XIII.)	4b 0	1	
С	Add lines 4a and 4b		4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 18.)	5	168,517
Part				
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an			
2; Parl	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to provide any additional in	formati	on.
	ule D, Part IV, Line 2b - The organization holds deposits paid by members on			
on dir	ection from volunteer tour leaders, the funds are disbursed as required to cov	er the costs for tours and/or i	reimbur	sement to tour
partici	pants.			
				

SCHEDULE O (Form 990)

(Rev. December 2024)

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.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

BICYCLE ADVENTURE CLUB	95-3867148				
Form 990, Part VI, Section A, Line 6 - The organization has approximately 1785 members as of 12/31/2024.					
Form 990, Part VI, Section A, Line 7a - On an annual basis, the membership elects new board members or initial term has come to an end. Board members who have not completed the term to which they were elected an annual basis.					
Form 990, Part VI, Section B, Line 11b - Forms 990 and 990T were circulated to all board members. They were circulated to all board members.	ere given two weeks to review				
the form and provide comments.					
Form 990, Part VI, Section B, Line 12c - Board members leading tours didn't participate in the approval propotential conflicts are addressed if/when they arise.	ocess for their tour. Other				
Form 990, Part VI, Section C, Line 19 - The documents can be accessed through the organization website	or by request to our office.				