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PUBLIC DISCLOSURE COPY

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** PUBLIC DISCLOSURE COPY **

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.

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



Department of the Treasury Internal Revenue Service

ΑF	or the	e 2017 calendar year, or tax year beginning and	ending		
B C a	Check if pplicabl	e: C Name of organization		D Employer identific	cation number
	Addre chang Name			F1 0	011000
	chang	e Doing business as			211993
	return Final return	8605 SECOND AVE	Room/suite	E Telephone number 301-	, 565-6704
	termin ated			G Gross receipts \$	1,417,540.
	Amen			H(a) Is this a group re	eturn
	Applic tion			for subordinates	
	pendi	¹⁹ SAME AS C ABOVE		H(b) Are all subordinates in	
IT	Tax-ex	empt status: 🚺 501(c)(3) 🛄 501(c) () ◀ (insert no.) 🛄 4947(a)(1)	or 🔄 527	1	list. (see instructions)
		te: WWW.AMERICANHIKING.ORG		H(c) Group exemption	
κF	orm of	organization: X Corporation Trust Association Other	L Year		State of legal domicile: VA
	art I	Summary			
-	1	Briefly describe the organization's mission or most significant activities: AMER	ICAN H	IKING SOCIE	TY PROMOTES
Governance		AND PROTECTS FOOT TRAILS AND THE HIKING	EXPERI	ENCE. AS A	
rna	2	Check this box 🕨 🛄 if the organization discontinued its operations or dispos	sed of more	than 25% of its net as	sets.
ove		Number of voting members of the governing body (Part VI, line 1a)			16
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)			16
8 8		Total number of individuals employed in calendar year 2017 (Part V, line 2a)			8
ìŤi		Total number of volunteers (estimate if necessary)			474
Activities &		Total unrelated business revenue from Part VIII, column (C), line 12			0.
◄		Net unrelated business taxable income from Form 990-T, line 34			0.
		,		Prior Year	Current Year
¢,	8	Contributions and grants (Part VIII, line 1h)		739,060.	1,058,361.
nu		Program service revenue (Part VIII, line 2g)		407,652.	332,932.
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		957.	978.
č		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		21,372.	12,843.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,169,041.	1,405,114.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		150,622.	159,540.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
s		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		496,992.	441,066.
JSe		Professional fundraising fees (Part IX, column (A), line 11e)		400.	0.
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) ►94,7	73.		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		362,882.	648,245.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,010,896.	1,248,851.
	19	Revenue less expenses. Subtract line 18 from line 12		158,145.	156,263.
Net Assets or Fund Balances		······································		ginning of Current Year	End of Year
lanc	20	Total assets (Part X, line 16)		200,746.	325,832.
Ass J Ba	21	Total liabilities (Part X, line 26)		138,384.	107,265.
-Unc	22	Net assets or fund balances. Subtract line 21 from line 20		62,362.	218,567.
Pa	art II	Signature Block		· · · ·	
		Ities of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the best of my	/ knowledge and belief, it is
	-	t, and complete. Declaration of preparer (other than officer) is based on all information of wh			c ,
,		K E Van Wars		11/13/1	8
Sigr	n	Signature of officer		Date	
Her		KATHRYN VAN WAES, EXECUTIVE DIRECTOR			
	-	Type or print name and title			

	Print/Type preparer's name	Preparer's signature	Date	Check PTIN
Paid	DAVID JONES			self-employed P01361002
Preparer	Firm's name 🖕 JONES, MARESCA &	MCQUADE, P.A.		Firm's EIN 52-1853933
Use Only	Firm's address 📘 10500 LITTLE PAT	UXENT PARKWAY, SUITE	770	
	COLUMBIA, MD 210	44		Phone no.410-884-0220
May the IF	RS discuss this return with the preparer shown abo	ove? (see instructions)		X Yes No
732001 11-2	28-17 LHA For Paperwork Reduction Act Notic	ce, see the separate instructions.		Form 990 (2017)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

orm **990** (2017)

Form	990 (2017) AMERICAN	HIKING	SOCIET	Y		51-0211	L993	Page 2
Par								
			o any line in t	his Part III			<u></u>	. X
1			RECIATI	ON, PRES	SERVATION,	AND EXPANS	SION C)F
	ENCOURAGING VOLUNTEER	ISM AND	STEWAR	DSHIP DE	ESIGNED TO	PROTECT HI	IKING	
	TRAILS AND OUTDOOR RE	CREATION	Ν.					
2	Did the organization undertake any signific	ant program se	ervices during	g the year which	n were not listed on	the		
							Yes [XN
3		-	nt changes in	how it conduct	ts, any program ser	vices?	Yes	XN
	-							
4						-	-	
		=	r to report the	amount of gra	nts and anocations	to others, the total ex	cpenses, ai	nu
4a			including grants	of \$	159,540.)	(Bevenue \$	15,7	/13.
ти							v 1998	
) DESI	GN,
	BUILD, AND MAINTAIN F	OOT TRA	ILS THR	OUGHOUT	THE COUNT	RY. THE PRO	OGRAM	
Part III] Statement of Program Service Accomplishments Check if Schedule Contains a response or note to any line in this Part III. 1 Bieliky describe the organization's mission: TO ENCOURAGE PUBLIC USE, APPRECIATION, PRESERVATION, HIKKING TRAILS AND OUTPOOR RECREATION. 2 Dot the organization undersite any significant program services during the year which were not listed on the prof m 980 or 900 E27 If Y'ss,' describe these new services on Schedule 0. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program service section 501(c)(4) organizations are required to report the amount of grants and allocations to revenue, flax), for each program service accomplishments for each of its three largest program service Section 501(c)(4) organizations are required to report the organization to grants and allocations to revenue, flax), for each program service reported. 40 (one) (secrets		NT AND)					
	INNOVATION IN CONSERV.	ATION AN	ND PRES	ERVING H	HIKING TRA	ILS.		
	fart III Statement of Program Service Accomplishments Dately idencifies the organization's mession: TO ENCORRAGE PUBLIC USE, APPRECIATION, PRESERVATION, AND EXPANSION HIKING TRAILS THROUGHOUT THE UNITED STATES OF AMERICA BY EDUCATING ENCORRAGE TRANSMITHET AND STEWARDSHIP DESIGNED TO PROTECT HIKIN TRAILS AND OUTDOOR RECREATION. Did the organization undertake any significant program services during the year which were not listed on the proform 500 or 906C2? UV Did the organization cause conducting, or make significant changes in how it conducts, any program services? UV U T*%, 'describe these new services complishments for each of its three largest program services, as measured by expenses of Stick(3) and SDIck(4) organizations are organized in sprogram service report. UV I Conce:) (prevents) 366, 208. 159, 540.) (newset) 17 A GRASSROOTS CONSERVATION EFFORT TO PRESERVE TRAIL LANDS AND LONGER FUND AND NATIONAL TRAILS DAY WAS ESTABLISHED IN 13 A GRASSROOTS CONSERVATION AND PRESERVING BEKONSTRATING COMMITMENT 2 INNOVATION IN CONSERVATION AND PRESERVING HIKING TRAILS. UNDS GRANTS TO DESERVING ORGANIZATIONS DEMONSTRATING COMMITMENT 2 INNOVATION IN CONSERVATION AND MATTERS IMPACTING FOOT TRAILS AND HIKING TRAILS. UVOLUNTEER VACATIONS PROGRAM POSTERS PUBLIC LAND STEWARDSHIP AND PROVIDES VOLUNTEERS, WHO DONATE THEIR TIME, MONEY, AND ENERGY, TO DESIGN, BUILD, AND MAINTAIN HIKING TRAILS THROUGHOUT THE COUNTRY. DECODE (Landregandes) 10,055,286. 10,025,286.							
Part III Statement of Program Service Accomplishm Check if Schedule 0 contains a response or note to any line 1 Briefly describe the organization's mission: TO ENCOURAGING VOLUNTEERISM AND STEW TRAILS AND OUTDOOR RECREATION. 2 Did the organization undertake any significant program services of prior Form 990 or 990-E2? If "Yes," describe these new services on Schedule 0. 3 Did the organization cease conducting, or make significant chang if "Yes," describe these changes on Schedule 0. 4 Describe the organization's program service accomplishments for Section 501(c)(3) and 501(c)(4) organizations are required to repor revenue, if any, for each program service reported. 4a (Code:) (Expenses 1 286, 208 . including NATIONAL TRAILS FUND AND NATIONAL A GRASSROOTS CONSERVATION EFFORT BUILD, AND MAINTAIN FOOT TRAILS T FUNDS GRANTS TO DESERVING ORGANIZ INNOVATION IN CONSERVATION AND PF 								
4b	(Code:) (Expenses \$ 2	66,752.	including grants	of \$)	(Bevenue \$	206,5	504.
		ESIGNED						
) ON	
	CONSERVATION ISSUES A	ND MATTI	ERS IMP	ACTING H	FOOT TRAIL	S.		
4c				of \$			110,7	/15.
	VOLUNTEER VACATIONS P		FOSTERS	PUBLIC	LAND STEW	ARDSHIP ANI		
								ELP
	DESIGN, BUILD, AND MA	INTAIN H	HIKING	TRAILS 7	THROUGHOUT	THE COUNTE	RY.	
4d	Other program services (Describe in Sched	dule O.)						
	(Expenses \$ 243,806. in	cluding grants of \$) (Revenue \$	12,256	•)	
4e		1,095	5,286.					
							Form 99	0 (201
′32002	2 11-28-17			2				
L <u>/</u> 1	107 793927 17622	2017	.05000	_	N HIKING	SOCTETV	1762	2 1
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 Form 990 (2017)
 AMERICAN HIKING SOCIETY

 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		x
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		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i>	11b		x
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		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
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	
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		X
	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			
	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			77
	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			v
	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,	47		x
10	column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	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? <i>If</i> "Yes," <i>complete Schedule G, Part II</i>	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes,"</i>	40		x
	complete Schedule G. Part III	19		i 43

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AMERICAN HIKING SOCIETY

Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	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	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			37
	Part IX, column (A), line 2? 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			x
04-	Schedule J	23		<u>л</u>
248	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? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete</i>			
		24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	2.10		
•	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		Х
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		Х
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," 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	20		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		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			37
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			x
20	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		- 11
32	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	02		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
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		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			77
o-	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			x
20	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		
38	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		1 00		

Form **990** (2017)

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Form	990 (2017) AMERICAN HIKING SOCIETY 51-0211	993	Р	age 5
Pa	t 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	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	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,			
	filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
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			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
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		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
с	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			
	any contributions that were not tax deductible as charitable contributions?	6a		X
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		X
b	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		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	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?	8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
a h	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
ь 10	Section 501(c)(7) organizations. Enter:	30		
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders 11a			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	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.			
	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			
с	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
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Form **990** (2017)

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AMERICAN HIKING SOCIETY

Form 990	(2017)
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AMERICAN HIKING SOCIETY

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.

	Check if Schedule O contains a response or note to any line in this Part VI		<u></u> .		
Sec	tion A. Governing Body and Management				_
				Yes	1
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	16		
	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.				
b	Enter the number of voting members included in line 1a, above, who are independent		16		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	hip with any other			
	officer, director, trustee, or key employee?		2		
3	Did the organization delegate control over management duties customarily performed by or under	the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person? \dots		3		
4	Did the organization make any significant changes to its governing documents since the prior Form	n 990 was filed?	4		
5	Did the organization become aware during the year of a significant diversion of the organization's a	issets?	5		
6	Did the organization have members or stockholders?		6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or	appoint one or			
	more members of the governing body?		7a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,				
	persons other than the governing body?		7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y	vear by the following:			Τ
а	The governing body?		8a	X	I
b	Each committee with authority to act on behalf of the governing body?		8b	X	t
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re				t
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		
ec	tion B. Policies (This Section B requests information about policies not required by the Internal				
				Yes	Ι
0a	Did the organization have local chapters, branches, or affiliates?		10a		Ī
	If "Yes," did the organization have written policies and procedures governing the activities of such				T
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing bo			X	t
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	, 3			t
			12a	X	I
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			X	t
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If				t
Ũ	in Schedule O how this was done		12c	x	
3	Did the organization have a written whistleblower policy?			X	t
4	Did the organization have a written document retention and destruction policy?			X	t
5	Did the process for determining compensation of the following persons include a review and appro				t
5	persons, comparability data, and contemporaneous substantiation of the deliberation and decision				
_			150	x	ł
	The organization's CEO, Executive Director, or top management official			X	╉
ά	Other officers or key employees of the organization		15b		╉
.	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				1
oa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang				1
	taxable entity during the year?		<u>16a</u>		┦
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org	janization's			ł
	exempt status with respect to such arrangements?		16b		1
	tion C. Disclosure				
7	List the states with which a copy of this Form 990 is required to be filed MD				
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	5-1 (Section 501(c)(3)S	oniy) availai	bie	
	for public inspection. Indicate how you made these available. Check all that apply.				
~		in in Schedule O)			
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, o	conflict of interest polic	y, and finar	ncial	
_	statements available to the public during the tax year.				
0	State the name, address, and telephone number of the person who possesses the organization's to	books and records:			
	THE ORGANIZATION - 301-565-6704				
	8605 SECOND AVE., SILVER SPRING, MD 20910			000	
2006	5 11-28-17		Forr	n 990	(;
	6 107 702027 17622 2017 05000 MERTON UTUT		4 🗖	<	
4 L	107 793927 17622 2017.05000 AMERICAN HIKIN	NG SOCIETY	17	622	_

Part VII	Compensation of Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensat	ed
	Employees, and Independe	ent Contrac	ctors					

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 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)	(B)	(C)					(D)	(E)	(F)	
Name and Title	Average	Position (do not check more than one				one	Reportable	Reportable	Estimated	
	hours per	box	box, unless person is both an officer and a director/trustee)		h an	compensation	compensation	amount of		
	week		cer an	id a d	irecto	or/trus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC)	from the
	related organizations	ustee	trust		ee	npens		(W-2/1099-MISC)		organization and related
	below	ual tr	ional		vold	t con /ee				organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizationo
(1) JACK HESS	1.00			0	×	노ㅎ	ш.			
CHAIR		x		х				0.	Ο.	0.
(2) BRADLEY ELLIS	1.00									
VICE CHAIR		x		х				0.	0.	0.
(3) KEVIN THOMSON	1.00									
TREASURER		x		х				0.	Ο.	0.
(4) JEFF SENTERMAN	1.00									
SECRETARY		X		Х				0.	0.	0.
(5) MARIA BETTANCOURT	1.00									
AT-LARGE		Х						0.	0.	0.
(6) MELISSA AVERY	1.00									
BOARD MEMBER		Х						0.	0.	0.
(7) JANE DANIELS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(8) DENNIS CROWLEY	1.00									
BOARD MEMBER		Х						0.	0.	0.
(9) KATHLEEN FITZPATRICK	1.00									
BOARD MEMBER		Х						0.	0.	0.
(10) SALLY KIDD	1.00									
BOARD MEMBER		х						0.	0.	0.
(11) RYAN KING	1.00									_
BOARD MEMBER		х						0.	0.	0.
(12) DENNIS LEWON	1.00									
BOARD MEMBER		х						0.	0.	0.
(13) BRUCE MATTHEWS	1.00									•
BOARD MEMBER		Х						0.	0.	0.
(14) SARAH BAKER MORGAN	1.00									•
BOARD MEMBER		х						0.	0.	0.
(15) SAVERIA TILDEN	1.00									•
BOARD MEMBER		х						0.	0.	0.
(16) LARRY LUXENBERG	1.00								•	~
BOARD MEMBER		X						0.	0.	0.
(17) KATHRYN VAN WAES	40.00								<u> </u>	<u>^</u>
EXECUTIVE DIRECTOR				Х				52,708.	0.	0.
732007 11-28-17										Form 990 (2017)

732007 11-28-17

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7 2017.05000 AMERICAN HIKING SOCIETY Form 990 (2017)

	OO (2017) AMERICAN	HIKING	S	DCI	ΓEΊ	Y.				51-02	<u>211</u>	<u>993</u>	Pa	age 8
Part V	II Section A. Officers, Directors, Trus	stees, Key Em	ploy	vees	, anc	i Hi	ghe	st C	Compensated Employe	es (continued)				
	(A) Name and title	(B) Average hours per week	Average hours per week Position (do not check more than one box, unless person is both an officer and a director/trustee)					one h an	(D) Reportable compensation from	(E) Reportable compensation from related		am	(F) timate iount o other	of
		(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)	organization (W-2/1099-MIS		fro orga anc	oensat om the anizati I relate nizatio	e ion ed
	PETER OLSON, VP OF PROGRAMS/	40.00							F (100					•
	M EXECUTIVE DIR.				X				54,122.		0.			0.
									100 020					
c T d T	ub-total otal from continuation sheets to Part V otal (add lines 1b and 1c)	II, Section A	·····						106,830. 0. 106,830.		0.0.0.			0. 0. 0.
	otal number of individuals (including but nompensation from the organization	not limited to tr	lose	liste	ed ab	DOVe	e) wr	סר no r	eceived more than \$100	1,000 of reportab	e		Vec	0
	id the organization list any former officer, ne 1a? If "Yes," complete Schedule J for s								•			3	Yes	No X
4 F a	or any individual listed on line 1a, is the sund related organizations greater than \$15	um of reportab 0,000? <i>If</i> "Yes,	le co " <i>co</i>	omp mple	ensa ete S	itior Sche	n and edule	d ot e J i	her compensation from for such individual	the organization		4		x
	id any person listed on line 1a receive or a endered to the organization? If "Yes," com	=				-			-			5		х
	n B. Independent Contractors			0/ 00		00/0						0		
	omplete this table for your five highest co e organization. Report compensation for										Ipens	ation fi	rom	
	(A) Name and business			ONE					(B) Description of s		С	(C omper		ı
	otal number of independent contractors (i 100,000 of compensation from the organi	-	iot lii	mite	d to		se li: 0	stec	d above) who received n	nore than				
¥												Form S	990 (2	2017)

732008 11-28-17

					(A)	(B)	(C)	(D) Revenue exclud
					Total revenue	Related or exempt function revenue	Unrelated business revenue	from tax unde sections 512 - 514
1 a	1	Federated campaigns	1a	6,897.				
		Membership dues						
		Fundraising events						
		Related organizations						
e	;	Government grants (contribut	ions) 1e	105,928.				
f		All other contributions, gifts, gran	ts, and					
		similar amounts not included abo	ve 1f	945,536.				
-		Noncash contributions included in lines		323,596.				
h	<u>ا</u>	Total. Add lines 1a-1f			1,058,361.			
				Business Code		006 504		
2 a		MEMBERSHIP DUES		900099	206,504.	206,504.		
b	-	VOLUNTEER VACAT	'ION	900099	110,715.	110,715.		
c	;	HIKE THE HILL		900099	15,713.	15,713.		
d	1							
e								
		All other program service reve			332,932.			
3		Total. Add lines 2a-2f			552,552.			
		other similar amounts)			1,024.			1,02
4		Income from investment of tax			_/ • •			
5		Royalties						
			(i) Real	(ii) Personal				
6 a		Gross rents	()	(
		Less: rental expenses						
		Rental income or (loss)						
d	ł	Net rental income or (loss)		►				
7 a	1	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	475.	,				
b)	Less: cost or other basis						
		and sales expenses	521.					
c	;	Gain or (loss)	-46.	,				
		Net gain or (loss)		►	-46.			-4
8 a	1	Gross income from fundraising	g events (not					
		including \$						
		contributions reported on line	-					
		Part IV, line 18						
		Less: direct expenses						
		Net income or (loss) from func	•	····· ►				
9 a		Gross income from gaming ac						
h		Part IV, line 19						
		Less: direct expenses						
		Net income or (loss) from gam Gross sales of inventory, less	-					
'' '		and allowances		24,161.				
h		Less: cost of goods sold		11,905.				
		Net income or (loss) from sale			12,256.	12,256.		
		Miscellaneous Revenu		Business Code		,		
11 a	1	MISC REVENUE		900099	587.			58
b								
c								
d	1	All other revenue						
		Total. Add lines 11a-11d		►	587.			
		Total revenue. See instructions.			1,405,114.	345,188.	0	. 1,56

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Form 990 (2017) AMERICA AMERICAN HIKING SOCIETY Part IX Statement of Functional Expenses

AMERICAN HIKING SOCIETY

	Check if Schedule O contains a respons				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	159,540.	159,540.		
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	106,830.	92,498.	9,022.	5,310
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	272,784.	236,190.	3,662.	32,932
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	32,445.	25,697.	3,397.	3,351
10	Payroll taxes	29,007.	24,627.	1,276.	3,351 3,104
11	Fees for services (non-employees):				
а	Management				
b	Legal				
с	Accounting	11,428.		11,428.	
d					
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 Sch 0.)	62,854.	55,759.	3,045.	4,050
12	Advertising and promotion	6,899.	4,369.	90.	<u>4,050</u> 2,440
13	Office expenses	104,493.	88,892.	5,466.	10,135
14	Information technology	16,279.	14,386.	383.	1,510
15	Royalties				
16	Occupancy	44,467.	38,668.	1,065.	4,734
17	Travel	31,532.	21,512.	8,060.	1,960
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	25,675.	24,578.	850.	247
20		5,368.		5,368.	/
20 21	Payments to affiliates	5,5001			
21	Depreciation, depletion, and amortization	1,130.		1,130.	
22 23		7,963.	6,705.	350.	908
23 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 0.)				
а	PROGRAM MATERIAL	323,596.	300,946.	3,235.	19,415
b	DUES AND SUBSCRIPTIONS	4,291.	919.	965.	2,407
с	FUNDRAISING EXPENSES	2,270.			2,270
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,248,851.	1,095,286.	58,792.	94,773
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

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Check here

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if following SOP 98-2 (ASC 958-720)

10 2017.05000 AMERICAN HIKING SOCIETY Form **990** (2017)

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AMERICAN HIKING SOCIETY

	נא	Balalice Sileet					
		Check if Schedule O contains a response or not	e to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	29,621.
	2	Savings and temporary cash investments			86,118.	2	280,061.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			100,000.	4	10,101.
	5	Loans and other receivables from current and fo	ormer offi	cers, directors,			
		trustees, key employees, and highest compensation	ated emp	loyees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqualit					
		section 4958(f)(1)), persons described in section	4958(c)	(3)(B), and contributing			
		employers and sponsoring organizations of sect					
		employees' beneficiary organizations (see instr).	Complet	te Part II of Sch L		6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use		·····	5,353.	8	935.
	9			L	3,031.	9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		9,120. 8,006.	0.044		1 114
	b	Less: accumulated depreciation			2,244.	10c	1,114.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets			4 000	14	4 000
	15	Other assets. See Part IV, line 11			4,000.	15	4,000.
	16	Total assets. Add lines 1 through 15 (must equa			200,746.	16	325,832.
	17	Accounts payable and accrued expenses			35,367.	17	51,757.
	18	Grants payable			51,287.	18	55,508.
	19 00	Deferred revenue			JI,207.	19	55,500.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F				21	
	22	Loans and other payables to current and former					
		key employees, highest compensated employee				00	
	23	Complete Part II of Schedule L Secured mortgages and notes payable to unrela			51,730.	22 23	
	23 24	Unsecured notes and loans payable to unrelated			51,150.	23 24	
	2 4 25	Other liabilities (including federal income tax, pay				24	
	20	parties, and other liabilities not included on lines					
		Schedule D				25	
	26				138,384.	26	107,265.
		Organizations that follow SFAS 117 (ASC 958					,
		complete lines 27 through 29, and lines 33 an					
	27	Unrestricted net assets			-213,150.	27	176,058.
	28	Temporarily restricted net assets			233,463.	28	460.
	29	Democratic methods and set of a set		_	42,049.	29	42,049.
		Organizations that do not follow SFAS 117 (A					
;		and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building, or eq				31	
	32	Retained earnings, endowment, accumulated in				32	
	33	Total net assets or fund balances			62,362.	33	218,567.
	34	Total liabilities and net assets/fund balances			200,746.	34	325,832.

Form 990 (2017)

Form 990 (2017)

Assets

Liabilities

Net Assets or Fund Balances

Part X Balance Sheet

Form	AMERICAN HIKING SOCIETY	51-	0211993	Pa	ge 12
Pa	rt 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	1,405		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,248		
3	Revenue less expenses. Subtract line 2 from line 1	3			63.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	62		62.
5	Net unrealized gains (losses) on investments	5		-	58.
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	218	3,5	67.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	,		
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	,		
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit		
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				1
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2017)

732012 11-28-17

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form	990	or	990-	·EZ)
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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.

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

OMB No. 1545-0047
2017
Open to Public Inspection

Name of the o	rganization
---------------	-------------

Nan	ne of t	the organization							identification number	
			ICAN HIKIN						1-0211993	
Pa	nrt I	Reason for Public (Charity Status (/	All organizations must co	omplete th	is part.) Se	ee instruction	S.		
The	organ	ization is not a private found	lation because it is: ((For lines 1 through 12, o	check only	one box.)				
1		A church, convention of ch	urches, or associatio	on of churches describe	d in sectio	on 170(b)(1	1)(A)(i).			
2		A school described in section	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	n 990 or 9	90-EZ).)				
3		A hospital or a cooperative	hospital service orga	anization described in s e	ection 170)(b)(1)(A)(i i	ii).			
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,								
		city, and state:								
5		An organization operated for	or the benefit of a co	llege or university owne	d or opera	ted by a g	overnmental	unit descrik	bed in	
		section 170(b)(1)(A)(iv). (Complete Part II.)								
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).								
7	X	An organization that norma	lly receives a substa	Intial part of its support f	from a gov	ernmental	unit or from	the general	public described in	
		section 170(b)(1)(A)(vi). (C	omplete Part II.)							
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)					
9		An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	unction with a	land-grant	college	
		or university or a non-land-g	grant college of agric	ulture (see instructions).	. Enter the	name, city	y, and state o	of the colleg	e or	
		university:								
10		An organization that norma	Ily receives: (1) more	e than 33 1/3% of its sup	port from	contributi	ons, member	ship fees, a	Ind gross receipts from	
		activities related to its exen								
		income and unrelated busir		-					-	
		See section 509(a)(2). (Cor		. ,		•	-	•	·	
11		An organization organized a	• •	ively to test for public sa	afety. See	section 50	09(a)(4).			
12		An organization organized a	and operated exclus	ively for the benefit of, to	o perform	the functio	ons of, or to c	arry out the	e purposes of one or	
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section	509(a)(3). (Check the box in	
		lines 12a through 12d that								
а		Type I. A supporting orga	anization operated, s	supervised, or controlled	by its sup	ported or	ganization(s),	typically by	giving	
		the supported organization		-	•			• • •		
		organization. You must c								
b		Type II. A supporting org	-		tion with it	ts support	ed organizatio	on(s), by ha	iving	
		control or management o	-				•		-	
		organization(s). You mus			•					
с		Type III functionally inte	-		in connec	tion with. a	and functiona	ally integrate	ed with.	
		its supported organization						, 0	,	
d		Type III non-functionally						orted organi	zation(s)	
		that is not functionally int						-		
		requirement (see instruct		• •	•		-			
е		Check this box if the orga	,	•	-			e II. Type III		
		functionally integrated, or					51 <i>)</i> 51	, ,,		
f	Ente	er the number of supported of		, , , , , , , , , , , , , , , , , , , ,	5 5					
c		vide the following informatior	0						· .	
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	inization listed ing document?	(v) Amount o	f monetary	(vi) Amount of other	
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ii	nstructions)	support (see instructions)	
Tota	al									
		Paperwork Reduction Act N	lotice, see the Instr	ructions for Form 990 o	or 990-EZ.	732021 10-	06-17 Sche	dule A (For	m 990 or 990-EZ) 2017	

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Schedule A (Form 990 or 990-EZ) 2017 AMERICAN HIKING SOCIETY Part II Support Schedule for Organizations Described in Section

51-0211993 Page 2

rt 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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	883,993.	702,032.	883,550.	1202764.	1058361.	4730700.
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	883,993.	702,032.	883,550.	1202764.	1058361.	4730700.
5	The portion of total contributions	,	,	,			
Ŭ	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						665,158.
~							4065542.
	Public support. Subtract line 5 from line 4.						4005542.
		(-) 0010	(1-) 001 ((-) 0015	(-1) 0010	(-) 0017	(6) T = + = 1
	ndar year (or fiscal year beginning in)	(a) 2013 883,993.	(b) 2014 702,032.	(c) 2015 883,550.	(d) 2016 1202764.	(e)2017 1058361.	(f) Total 4730700.
	Amounts from line 4	005,995.	102,052.	005,550.	1202704.	1030301.	4/30/00.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	1 1 2 0	1 4 2 0	1 000	1 014	1 0 0 4	
	and income from similar sources \dots	1,139.	1,438.	1,090.	1,014.	1,024.	5,705.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on \dots						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	3,858.	9,855.	500.	992.	587.	15,792.
11	Total support. Add lines 7 through 10						4752197.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	954,839.
13	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
_	organization, check this box and stop	here	······				>
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2017 (I					14	85.55 %
15	Public support percentage from 2016	Schedule A, Part	II, line 14			15	93.09 %
16 a	33 1/3% support test - 2017. If the c	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization				► X
b	33 1/3% support test - 2016. If the c	organization did no	t check a box on l	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	iis box
	and stop here. The organization qual	ifies as a publicly s	supported organization	ation			▶□
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check tł	nis box and stop h	ere. Explain in Pa	rt VI how the organ	ization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization	-	▶□
b	10% -facts-and-circumstances tes						
	more, and if the organization meets th						
	organization meets the "facts-and-circ						
18	Private foundation. If the organizatio						s
			,,	, ,,			

Schedule A (Form 990 or 990-EZ) 2017

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Schedule A (Form 990 or 990-EZ) 2017 AMERICAN HIKING SOCIETY

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 20	017 (f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in							
	any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that							
	are not an unrelated trade or bus-							
	iness under section 513							
4	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and							
	3 received from disqualified persons							
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							
	Public support. (Subtract line 7c from line 6.)							
Sec	ction B. Total Support				•			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 20)17 (f) Total	
9	Amounts from line 6							
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	Add lines 10a and 10b							-
	Net income from unrelated business activities not included in line 10b, whether or not the business is							
12	regularly carried on 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 12.)							
14	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a sectio	on 501(c)(3)	organization,	_
						<u></u>	▶∟	_
	ction C. Computation of Publi							
	Public support percentage for 2017 (li					15		%
	Public support percentage from 2016					16		%
	ction D. Computation of Inves							
17	Investment income percentage for 20	17 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17		%
	Investment income percentage from 2					18		%
19a	33 1/3% support tests - 2017. If the	organization did I	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, ar	nd line 17 is not	_
	more than 33 1/3%, check this box ar	nd stop here. The	e organization qua	lifies as a publicly	supported organiz	ation	▶∟	
b	33 1/3% support tests - 2016. If the	organization did I	not check a box o	n line 14 or line 19a	a, and line 16 is m	ore than 33	1/3%, and	_
	line 18 is not more than 33 1/3%, che	ck this box and s	t op here. The orga	anization qualifies a	as a publicly supp	orted organ	ization ►	
20	Private foundation. If the organization	n did not check a	box on line 14, 19	9a, or 19b, check t				
320	23 10-06-17				Sch	edule A (Fo	orm 990 or 990-EZ) 20)17
				15				
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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

Yes

No

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.)

Section A. All Supporting Organizations

- 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. If historic and continuing relationship, explain.
- 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 organization was described in section 509(a)(1) or (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.
- b 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.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** 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 despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination 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) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," 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).
- b 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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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.
- 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).
- 8 Did the organization make a loan to a disgualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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.
- 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.
- c 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.
- 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 supporting organizations)? If "Yes," answer 10b below.
 - **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.)

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10a 10b Schedule A (Form 990 or 990-EZ) 2017

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Schedule A (Form 990 or 990-EZ) 2017 AMERICAN HIKING SOCIETY Part IV Supporting Organizations (continued)

			×	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
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		
b	A family member of a person described in (a) above?	11b		
	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			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	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		
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 carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
•	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			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
-	Did the examination provide to each of its supported examinations, by the last day of the fifth month of the		162	NU
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
-	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			
	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		
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 yea(see instructions)).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below</i> .			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions	s).	
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			
	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			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
73202	5 10-06-17 Schedule A (Form 9		0-EZ	2017
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Schedule A (Form 990 or 990-EZ) 2017 AMERICAN HIKING SOCIETY

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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		
Sect	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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	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			
	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		
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	v integrate	d Type III supporting or	nanization (see

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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Schedule A (Form 990 or 990-EZ) 2017 AMERICAN HIKING SOCIETY

	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
	ion D - Distributions		(00//////00/	Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	IS	
4	Amounts paid to acquire exempt-use assets			
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 the	ne organization is responsive	Э	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
		(i)	(ii)	(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
с	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
с	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2013			
b	Excess from 2014			
с	Excess from 2015			
d	Excess from 2016			
е	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

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Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, 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; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MISCELLANEOUS							
2013 AMOUNT:	\$	3,858.					
2014 AMOUNT:	\$	9,855.					
2015 AMOUNT:	\$	500.					
2016 AMOUNT:	\$	992.					
2017 AMOUNT:	\$	587.					
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Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one)

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Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Employer identification number

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Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

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2017.05000	AMERICAN	HIKING	SOCIETY	17622_	_1

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Employer identification number

51 - 0211993

Part I	Contributors (see instructions). Use duplicate copies of Part I	IT additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$30,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$140,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$65,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

51-0211993

AMERICAN HIKING SOCIETY

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	990, 990-EZ, or 990-PF) (

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2017.05000 AMERICAN HIKING SOCIETY

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ame of orga	Inization		Employer identification number			
MERIC	AN HIKING SOCIETY		51-0211993			
art III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete (ributions to organizations described	in section 501(c)(7), (8), or (10) that total more than \$1,000 fo			
	completing Part III, enter the total of exclusively religiou	s, charitable, etc., contributions of \$1,000 or	less for the year. (Enter this info. once.) \$			
No.	Use duplicate copies of Part III if addition	al space is needed.				
i) No. rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift	t			
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
· ·						
a) No.						
ríom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
· ·						
	(e) Transfer of gift					
	T					
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
) No.						
rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
·						
	(e) Transfer of gift					
	Transferee's name, address, a	Relationship of transferor to transferee				
			· · · · · · · · · · · · · · · · · · ·			
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I	(~) · … Pooo o g	(0) 000 01 g	(,			
- - -						
	(a) Transfor of sitt					
		(e) Transfer of gift				
	Transferee's name, address, a	Relationship of transferor to transferee				
23454 11-01-	17		Schedule B (Form 990, 990-EZ, or 99			

2017.05000 AMERICAN HIKING SOCIETY 17622_1

SCHEDULE C (Form 990 or 990-EZ) Department of the Treasury	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.	OMB No. 1545-0047
Internal Revenue Service	➡ Go to www.irs.gov/Form990 for instructions and the latest information. vered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activ	Inspection
-	anizations: Complete Parts I-A and B. Do not complete Part I-C.	nicoj, ilen
 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 organiza 	tions: Complete Part I-A only.	
If the organization answ	vered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), the	en
 Section 501(c)(3) org 	anizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not comple	ete Part II-B.
 Section 501(c)(3) org 	anizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not co	omplete Part II-A.
If the organization answ Tax) (see separate inst	vered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, I uctions), then	Part V, line 35c (Proxy

 Section 501(c)(4), (5), or (6) organizations: Complete Part III.
--

Name of organization				Emplo	oyer identification number		
	AMERICAN HIKING SOCIETY					51-0211993	
Par	t I-A	Complete if the org	anization is exempt unde	er section 501(c)	or is a section 5	527 or	ganization.
2 F	Political	campaign activity expendit	ration's direct and indirect politica ures gn activities	-			
	t I-B		anization is exempt unde				
1 6	Enter the	amount of any excise tax	incurred by the organization unde	er section 4955		►\$	
2 E	Enter the	amount of any excise tax	incurred by organization manage	rs under section 4955	5	►\$_	
3	If the org	anization incurred a sectio	n 4955 tax, did it file Form 4720 f	or this year?			Yes
4a ∖	Was a co	prrection made?					Ves No
		describe in Part IV.					
	t I-C	· · ·	janization is exempt unde	. ,	-		
			d by the filing organization for sec			.►\$_	
2 E	Enter the	amount of the filing organ	ization's funds contributed to oth	er organizations for s	ection 527		
						►\$	
			. Add lines 1 and 2. Enter here ar				
	line 17b \$						
			1120-POL for this year?				
r	made pa contribut	yments. For each organiza ions received that were pr	nployer identification number (EIN tion listed, enter the amount paid omptly and directly delivered to a additional space is needed, provi	from the filing organi separate political org	zation's funds. Also e janization, such as a s	nter the	e amount of political
		(a) Name	(b) Address	(c) EIN	(d) Amount paid t filing organizatio funds. If none, ent	n's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

For Paperwork Reduction Act Notice,	see the Instructions for Form 99	0 or 990-EZ.	Schedule C
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Schedule C (Form 990 or 990-EZ) 2017

732041 11-09-17

Pa		plete if the organizatio ion 501(h)).	on is exempt under section 501(c)(3) and fil	ed Form 5768 (el	ection under
A C		expenses, and share of exces		group member's name	e, address, EIN,
BC	Check 🕨 📖	if the filing organization check	ed box A and "limited control" provisions apply.		
			oying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying	expenditures to influence pub	lic opinion (grass roots lobbying)		
b	Total lobbying	expenditures to influence a le	gislative body (direct lobbying)	3,750.	
с	Total lobbying	expenditures (add lines 1a an	d 1b)	3,750.	
d				1,154,078.	
е	Total exempt p		s 1c and 1d)	1,157,828.	
f			unt from the following table in both columns.	190,783.	
	If the amount on	line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,	000	20% of the amount on line 1e.		
	Over \$500,000	but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,00	00 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,00	00 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,0	000	\$1,000,000.		
			f line 1f)	47,696.	
h		g from line 1a. If zero or less, e		0.	
i	Subtract line 1f	f from line 1c. If zero or less, e	nter -0-	0.	
j		nount other than zero on eithe on 4911 tax for this vear?	er line 1h or line 1i, did the organization file Form 4720	Г	Yes No

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period						
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total	
2a Lobbying nontaxable amount	167,990.	177,413.	186,482.	190,783.	722,668.	
 b Lobbying ceiling amount (150% of line 2a, column(e)) 					1,084,002.	
c Total lobbying expenditures	22,654.	19,714.	13,263.	3,750.	59,381.	
d Grassroots nontaxable amount	41,998.	44,353.	46,621.	47,696.	180,668.	
e Grassroots ceiling amount (150% of line 2d, column (e))					271,002.	
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2017

732042 11-09-17

Schedule C (Form 990 or 990-EZ) 2017 AMERICAN HIKING SOCIETY

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Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of the	obbying activity.	Yes	No	Amo	ount
1 a	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)? Media advertisements?				
d	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	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?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5), or se	ction	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No," OR	(b) Par	t III-A, lir	ne 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
	Total		-		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
	expenditure next year?				
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	t IV Supplemental Information				
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-/	A, lines 1 a	and 2 (see	

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990 or 990-EZ) 2017

732043 11-09-17

2017.05000 AMERICAN HIKING SOCIETY

SCHEDULE D

(Form	990)
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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.



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Department of the Treasury Internal Revenue Service Name of the organization

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	AMERICAN HIKING SOCIETY	51-02119
Part I Organizat	tions Maintaining Donor Advised Funds or Other Similar Funds o	r Accounts, Complete if the

Employer identification number 51-0211993

(a) Donor advised funds (b) Funds and other accounts 2 Aggregate value of contributions to (during year)	I U	organization answered "Yes" on Form 990, Part IV, lin			
2 Aggregate value of contributions to (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all granteses, chones, and donor advisors in writing that grant funds can be used only for charable purposes and not for the banefit of the donor or donor advisors in writing that grant funds can be used only for charable purposes and not for the banefit of the donor or donor advisor, for any other purposes conferring impermissible private banefit? Part II Conservation assements held by the organization (check all that apply). Preservation of a find for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of open space Compiled in the 2 through 21 the organization in answerd 'Vest' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization constribution in the form of a conservation assement in the last Preservation of open space Compiled into a bistorically important land area Preservation of open space Compiled into a conservation easements Compiled into acceleration easements Compiled into a conservation easements Compiled into acceleration easements Compiled into acceleration easements Compiled into acceleration easements Compiled into acceleration easements included in (c) acquired after 72506, and not on a historically inportant and area Compiled into assements molified, intrasfered, released, extinguished, or terminated by the organization' during the tax year Composition assements molified in (c) acquired after 72506, and not on a historical preservation easements during the year Comparison assements molified in (c) acquired after 72506, and not on a historical preservation easements included in (c)				(b) Fur	nds and other accounts
2 Aggregate value of contributions to (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all granteses, chones, and donor advisors in writing that grant funds can be used only for charable purposes and not for the banefit of the donor or donor advisors in writing that grant funds can be used only for charable purposes and not for the banefit of the donor or donor advisor, for any other purposes conferring impermissible private banefit? Part II Conservation assements held by the organization (check all that apply). Preservation of a find for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of open space Compiled in the 2 through 21 the organization in answerd 'Vest' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization constribution in the form of a conservation assement in the last Preservation of open space Compiled into a bistorically important land area Preservation of open space Compiled into a conservation easements Compiled into acceleration easements Compiled into a conservation easements Compiled into acceleration easements Compiled into acceleration easements Compiled into acceleration easements Compiled into acceleration easements included in (c) acquired after 72506, and not on a historically inportant and area Compiled into assements molified, intrasfered, released, extinguished, or terminated by the organization' during the tax year Composition assements molified in (c) acquired after 72506, and not on a historical preservation easements during the year Comparison assements molified in (c) acquired after 72506, and not on a historical preservation easements included in (c)	1	Total number at end of year			
Aggregate value at end of year Did the organization inform all denore and values in writing that the assets held in donar advised funds are the organization inform all grantees, donors, and donor advisors in writing that the assets held in donar advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charable purposes and not for the benefit more advisor, or or any other purposes conterning moprimisable private benefit? Partill Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Protection of natural habitat Protection of public use (e.g., recreation or education) Preservation of a conservation easement in the last day of the tax year. Total number of conservation easements Total annote of conservation easements in cluded in (c) acquired after 7/25/06, and not on a historic structure lead of the Tax Year Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure lead in the National Begater Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year / Number of osservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year / Number of easervation easements modified, transferred, released, extinguished, or terminated by the organization during the year Nore organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing to second the ourservation easements thotels Number of easervation easements models Number of easervation easements models Number of acceservation easements models Number of acceservation easements modified, transfered, released, extinguished, or	2				
Aggregate value at end of year Did the organization inform all denore and values in writing that the assets held in donar advised funds are the organization inform all grantees, donors, and donor advisors in writing that the assets held in donar advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charable purposes and not for the benefit more advisor, or or any other purposes conterning moprimisable private benefit? Partill Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Protection of natural habitat Protection of public use (e.g., recreation or education) Preservation of a conservation easement in the last day of the tax year. Total number of conservation easements Total annote of conservation easements in cluded in (c) acquired after 7/25/06, and not on a historic structure lead of the Tax Year Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure lead in the National Begater Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year / Number of osservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year / Number of easervation easements modified, transferred, released, extinguished, or terminated by the organization during the year Nore organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing to second the ourservation easements thotels Number of easervation easements models Number of easervation easements models Number of acceservation easements models Number of acceservation easements modified, transfered, released, extinguished, or	3	Aggregate value of grants from (during year)			
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor ad donor or ducation or any other purposes conferring impermissible private benefit? 7 Preservation of and for public use (e.g., recreation or education) Preservation of a certified historic structure Preservation of and tor public use (e.g., recreation or education) Preservation of a certified historic structure Preservation easements Preservation easemen	4				
Bid the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purposes confirming impermisely of conservation teasements. Complete if the organization answered "Yes' on Form 990, Part IV, line 7. Part II Conservation Easements held by the organization (cleck all that apply). Preservation of and for public use (e.g., recreation or education) Preservation of a certified historic structure Preservation of and the public use (e.g., recreation or education) Preservation of a certified historic structure Preservation of a certified historic structure Preservation of a certified historic structure at Total number of conservation easements E A undber of conservation easeme	5			sed funds	
for charitable purposes and not for the benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(8) of conservation easements held by the organization (check all that app), Preservation of and for public use (e.g., recreation or education) Protection of natural habitat Protection of natural habitat at the organization held a qualified conservation of a conservation easement on the last day of the tax year. a Total number of conservation easements a Total annumber of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year. a Total number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year. 4 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year. 4 Number of states where property subject to conservation easements in located > 5 Staff and volumter hours devided to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 5 Staff and volumter hours devided to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(0) and section 170(h)(4)(B)(0) 7 Amount of expenses incurred in monitoring, inspecting, handli		are the organization's property, subject to the organization's	exclusive legal control?		Yes No
Impermissible private benefit? Yes No. Part II Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Impermissible private benefit? Preservation of land for public use (e.g., recreation or education) Preservation of a cartified historic structure Preservation of a correly and indexic structure Preservation of a correly and indexic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements included in (a) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d 3 Number of conservation easements included in (a) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d 4 Number of states where property subject to conservation easement is located >	6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	e used only	
Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(8) of conservation easements held by the organization (check all that apply). Preservation of a for public use (a, recreation or education) Preservation of a for public use (b, recreation or education) Preservation of a conservation easement on the last day of the tax year. 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Preservation of applet to the avent of a conservation easements and to the form of a conservation easement on the last day of the tax year. 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements and to conservation easements and the day of the fax year. 3 Total annexinge restricted by conservation easements and the day of the fax year. 4 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year locates under conservation easements tholds? 5 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 5 S 6 Does ach conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)() 7 Arnount of expenses incurred in monitoring, inspecting, handling of violations, and e		for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring	
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2017.05000 AMERICAN HIKING SOCIETY

Part IIII Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets@continued] 3 Using the organization acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): a a Public exhibition d Loan or exchange programs b Scholarly research o Other c Provide accipition of the organization scluctions and explain how they further the organization second the organization accilection? Yes No Part VI Descholarly research o Other Other Yes No Part VI Descholarly research o Other Other Yes No Part VI Descholarly research o Other Other Similar Assets@continued] Other Similar Assets@continued] c Descholarly research o Other Similar Assets@continued] Other Similar Assets@continued] d Is the organization include at the not burn intermediaty for contributions or other assets not included on form 900, Part X, line 21. Yes No b If Yes, explain the arrangement in Part XIII. Check here If the explanation has been provided on Part XIII. Yes No D	Sche	dule D (Form 990) 2017 AMERICA	N HIKING S	OCIETY		51	L-021	.199	3 Ра	age 2	
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b Scholarly research e Other c Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to te solicit on's sevent assets 1 Become an amount on Form 990, Part X, Ine 21. Yes' on Form 990, Part IV, Ine 9, or responded an amount on Form 990, Part X, Ine 21. 1 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, Ine 21. Yes' on Form 990, Part X 0 If Yes' explain the arrangement in Part XIII and complete the following table: Amount 1 Ending balance Interview Interview 2 Beginning balance Interview Interview Interview 2 But the organization include an amount on Form 990, Part X, Ine 21, for secret or or custodial account tablity? Yes No 1 Yes' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part Yes' con Form 990, Part X, Ine 21, for secret or or custodial account tablity? Yes No 1 Hordex Interview Interview Interview Interview Interview <td< th=""><th></th><th></th><th></th><th></th><th>C</th><th>C</th><th></th><th></th><th></th><th></th></td<>					C	C					
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The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (ii) related organizations (ii) related organizations (iii) related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (c) Accumulated depreciation (d) Book value (d) Book value (iii) buildings (c) Leasehold improvements (c) Leasehold improve											
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes No (i) unrelated organizations 3a(i) X (ii) related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3c 4 Describe in Part XIII the intended uses of the organization's endowment funds. Buildings, and Equipment. 3b 3c Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value 4 Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land	с	· · · · ·									
by: (i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment 9,120, 8,006, 1,1114.	0-		-	- 4 / 4	un al an alum in interne al fam	41					
(i) unrelated organizations 3a(i) X (ii) related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b 3b Part VI Land, Buildings, and Equipment. 3b 3b Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value Description of property (a) Cost or other basis (other) (c) Accumulated depreciation 1a Land 4 4 b Buildings 4 c Leasehold improvements 4 d Equipment 9,120, 8,006, 1,114.	3a		ession of the organiza	ation that are held a	ind administered for	the organizat	ion	1	Vee	Na	
(ii) related organizations 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b 3b Part VI Land, Buildings, and Equipment. 3b 3b Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value Description of property (a) Cost or other (b) Cost or other (c) Accumulated b Buildings 5 5 5 5 c Leasehold improvements 9,120. 8,006. 1,114.		-						20(1)	res		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment 9,120. 8,006.								<u> </u>			
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings (d) Book value c Leasehold improvements 9,120.8,006.1,114.	h	If "Vos" on line 32(ii) are the related organize	tions listed as requir	od on Schodulo P2						- 23	
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land	4							30			
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land	Pa			wither it fullus.							
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land). Part IV. line 11a. S	See Form 990, Part)	Cline 10.					
Ia Land basis (investment) basis (other) depreciation b Buildings		· · ·			1				k valu	e	
1a Land		becomption of property		• •				u) Doo	it valu	0	
b Buildings	1a	Land	· · · ·	,		•					
c Leasehold improvements 9,120.8,006.1,114.											
d Equipment 9,120. 8,006. 1,114.											
					9,120.	8,006	5.		1,1	14.	
					• •				, _		
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				X, column (B). line 1	10c.)		•		1,1	14.	
Schedule D (Form 990) 2017			,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	/	Sc	hedule I				

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Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.									
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value							
(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" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.) 🕨	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D	(Form 99	90) 2017

732053 10-09-17

Sche	dule D (Form 990) 2017 AMERICAN HIKING SOCIETY			51-	0211993 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statem	ents With			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ı.			
1	Total revenue, gains, and other support per audited financial statements			1	1,416,961.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-58.		
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)		11,905.		
е	Add lines 2a through 2d			2e	11,847.
3	Subtract line 2e from line 1			3	1,405,114.
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	1,405,114.
Pa	t XII Reconciliation of Expenses per Audited Financial Staten		h Expenses per	Retu	irn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	i .			
1					
2	Total expenses and losses per audited financial statements			1	1,260,756.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			1	1,260,756.
2 a				1	1,260,756.
_	Amounts included on line 1 but not on Form 990, Part IX, line 25:	2a		1	1,260,756.
а	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2b		1	1,260,756.
a b	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2b 2c	11,905.	1	
a b c d	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	11,905.	1 2e	11,905.
a b c d	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	11,905.	-	
a b c d e	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	11,905.	2e	11,905.
a b c d e 3 4 a	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 2d	11,905.	2e	11,905.
a b c d e 3 4 a	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d 2d	11,905.	2e	11,905.
a b c 3 4 a b	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 2d 4a 4b	11,905.	2e	11,905. 1,248,851. 0.
a b c e 3 4 a b c 5	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 2d 4a 4b	11,905.	2e 3	11,905. 1,248,851.

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

PART V, LINE 4:

THE SOCIETY'S ENDOWMENTS WERE ESTABLISHED TO PROVIDE FINANCIAL STABILITY

AND SUPPORT FOR NATIONAL TRAILS INITIATIVES.

PART X, LINE 2:

THE SOCIETY BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS

TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE

MATERIAL TO THE FINANCIAL STATEMENTS OR THAT WOULD HAVE AN EFFECT ON ITS

TAX-EXEMPT STATUS. THERE ARE NO UNRECOGNIZED TAX BENEFITS OR LIABILITIES

THAT NEED TO BE RECORDED.

	PART	XI,	LINE	2D	-	OTHER	ADJUSTMENTS:				
	732054 10-	09-17						31		Sche	edule D (Form 990) 2017
13	44110	779	3927	176	22	1	2017.05000	AMERICAN	HIKING	SOCIETY	176221

AMERICAN HIKING SOCIETY

Part XIII Supplemental Information (continued)

COST OF GOODS SOLD

11,905.

11,905.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD

Schedule D (Form 990) 2017

732055 10-09-17

SCHEDULE I (Form 990)	Go	Grants and Oth overnments, and lete if the organization	nd Individual	ls in the Ŭni	ted States		OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	Open to Public Inspection						
Name of the organization AMERICAN	HIKING SC	DCIETY					Employer identification number 51-0211993
Part I General Information on Grants	and Assistance						
 Does the organization maintain records criteria used to award the grants or ass Describe in Part IV the organization's pr 	istance?						ction X Yes No
Part II Grants and Other Assistance to					anization answered "	Yes" on Form 990, Par	t IV, line 21, for any
recipient that received more than	-						· · · ·
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
SANTA MONICA MOUNTAINS TRAILS COUNCIL – PO BOX 345 – AGOURA HILLS, CA 91376	95-3911604	501(C)(3)	16,800.	0.			TRAIL STEWARDSHIP
THE FLORIDA TRAIL ASSOCIATION 5415 SW 13TH STREET GAINESVILLE, FL 32605	23-7079720	501(C)(3)	7,000.	0.			TRAIL STEWARDSHIP
BUCKEYE TRAIL ASSOCIATION P.O. BOX 5 SHAWNEE, OH 43782	31-1408723	501(C)(3)	7,000.	0.			TRAIL STEWARDSHIP
VOLUNTEERS FOR OUTDOOR COLORADO 600 S. MARION PKWY DENVER, CO 80209	74-2357211	501(C)(3)	14,000.	0.			TRAIL STEWARDSHIP
FRIENDS OF GOVERNMENT CANYON 12861 GALM RD. SAN ANTONIO, TX 78254	74-2807867	501(C)(3)	5,600.	0.			TRAIL STEWARDSHIP
OZARK TRAIL ASSOCIATION 406 WEST HIGH ST. POTOSI, MO 63664	76-0721119	501(C)(3)	21,000.	0.			TRAIL STEWARDSHIP
2 Enter total number of section 501(c)(3)	and government o	rganizations listed in t	he line 1 table				▶ <u>11.</u>
3 Enter total number of other organization							
LHA For Paperwork Reduction Act Notice	e, see the Instruc	tions for Form 990.					Schedule I (Form 990) (2017)

Schedule I (Form 990) AMERICAN HIKING SOCIETY Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RIENDS OF VAN CORTLANDT PARK							
0 VAN CORTLANDT PARK SOUTH							
BRONX, NY 10463	13-3843182	501(C)(3)	9,800.	0.			TRAIL STEWARDSHIP
NOODLANDS CONSERVANCY PO BOX 7028							
BELLE CHASSE, LA 70037	72-1506708	501(C)(3)	8,400.	0.			TRAIL STEWARDSHIP
RAILS FOR ILLINOIS .639 BURR OAK RD.							
IOMEWOOD, IL 60430	37-1383712	501(C)(3)	19,600.	0.			TRAIL STEWARDSHIP
PHE SAN DIEGO RIVER PARK POUNDATION - PO BOX 80126 - SAN							
DIEGO, CA 92138	01-0565671	501(C)(3)	18,200.	0.			TRAIL STEWARDSHIP
BAYOU LAND CONSERVANCY .0330 LAKE RD. BLDG. J							
IOUSTON, TX 77070	76-0557498	501(C)(3)	12,600.	0.			TRAIL STEWARDSHIP

Schedule I (Form 990)

AMERICAN HIKING SOCIETY

Schedule I (Form 990) (2017) Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

35

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

ASSISTANCE CONSISTS OF GRANTS TO FOSTER AND PROMOTE FOOT TRAILS AND HIKING

AMONG THE SOCIETY'S MEMBERS AND TO KEEP MEMBERS INFORMED ABOUT CONSERVATION

ISSUES AND MATTERS IMPACTING FOOT TRAILS. MINIMAL MONITORING IS NECESSARY.

Page 2

SCHEDULE	Μ
(Form 990)	

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury	
Internal Revenue Service	

28

Other

►

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

Open To Public Inspection

Employer identification number

Name of the organiz

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

ation			
	AMERICAN	HTKING	SO

	AMERICAN HIK	ING SO	CIETY		51-0211993
Pa	rt I Types of Property				
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods	X		34,005.	FMV
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded				
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or				
	trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution -				
	Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory	Х	50,552	83,823.	FMV
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other (ADVERTISING)	Х	7	199,354.	
26	Other ► (SEATS)	Х	500	,	
27	Other (HIKING MATERI)	Х	1	988.	COST

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

(SHIPPING

Х

Yes 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 Х exempt purposes for the entire holding period? 30a **b** If "Yes," describe the arrangement in Part II. Х Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash х 32a contributions? b If "Yes," describe in Part II. 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2017

438.COST

29

732141 09-07-17

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Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

Part II

THE ORGANIZATION REPORTS NUMBER OF CONTRIBUTIONS.

Schedule M (Form 990) 2017

732142 09-07-17

SCHEDULE O

(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. Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Employer identification number 51 - 0211993

AMERICAN HIKING SOCIETY

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

RECREATION-BASED NON-PROFIT ORGANIZATION, AMERICAN HIKING SOCIETY

CHAMPIONS CONSERVATION ISSUES, BUILDS PARTNERSHIPS BETWEEN PUBLIC AND

PRIVATE STAKEHOLDERS, AND DEVELOPS FOOT TRAILS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OUTREACH PROGRAMS, HIKER MAGAZINE, LEGISLATIVE POLICY, AND OTHER

ALLIANCE MEMBER PROGRAMS ARE DESIGNED TO INCREASE PUBLIC AWARENESS ON

CONSERVATION AND ISSUES IMPACTING OPEN SPACES AND HIKING TRAILS, AND

ARE ALSO DESIGNED TO EDUCATE THE PUBLIC ON SAFETY AND OTHER

ENVIRONMENTAL ISSUES, AND TO INSPIRE INDIVIDUALS TO ENJOY THE GREAT

OUTDOORS.

EXPENSES \$ 243,806. INCLUDING GRANTS OF \$ 0. REVENUE \$ 12,256.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS REVIEWED BY THE ENTIRE BOARD PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE BOARD OF DIRECTORS AND THE PRESIDENT REGULARLY REVIEW THE CONFLICT OF

INTEREST POLICY. EACH DIRECTOR HAS A DUTY TO PLACE THE INTEREST OF THE

ORGANIZATION FOREMOST IN ANY DEALINGS INVOLVING THE ORGANIZATION AND HAS A

CONTINUING RESPONSIBILITY TO COMPLY WITH THE REQUIREMENTS OF THIS POLICY.

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD OF DIRECTORS ANNUALLY REVIEWS THE PRESIDENT'S AND OTHER KEY

EMPLOYEES' COMPENSATION AND BENEFITS USING COMPARABLE AND OTHER DATA.

 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2017)

 732211 09-07-17
 Schedule O (Form 990 or 990-EZ) (2017)

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Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization
AMERICAN HIKING SOCIETY