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Form 990

HTA

Return of Organization Exempt From Income Tax

OMB No 1545-0047
2013

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

benefit trust or private foundation)

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

<u>A</u>	For the	2012 ca	<u>lendar year, or tax y</u>		//1/201	<u> </u>	anu e	naing		0/20 14		
B	Check if a	pplicable	C Name of organization	Windmill Hill I	Pinnacle Associa	tion			D Employe	r identifi	cation number	
╝	Address c	hange	Doing Business As	The Pinnacle					03-033436			
ı []	Name cha	inge	Number and street (c	or PO box if mail is not o	lelivered to street add	ress) Room/s	urte	ı	E Telephone	e number	r	
י⊒	nıtıal retu	rn	1915 Patch Road						(802) 387-5	711		
	Terminate	d	City, town or post offi	ice, state, and ZIP code								
	Amended	return	Westminster West		<u>V</u>	Γ <u> </u>	346	لــــــــــــــــــــــــــــــــــــــ	G Gross rec	eipts \$		<u> 176,736</u>
	Application	n pending	F Name and address o	of principal officer				H(a) is i	this a group reti	urn for af	filiates?	es X No
			Camilla Roberts 35	5 Sleepy Hollow Ro	i, Athens, VT 05	143		H(b) Are	e all affiliates in	cluded?		res No
ı T	ax-exem	ot status	X 501(c)(3) 5	501(c) () ◀	(insert no) 49	947(a)(1) or	527	If '	"No," attach a li	st (see ii	nstructions)	
			w.windmillhillpinnac	le ora				H(c) Gr	oup exemption	number	>	
		ganization	X Corporation	Trust Associati	tion Other >		I Vas	r of forma		\neg	state of legal domi	cile \/T
		, -	=		Culei P		100		ation 1993		Take of legal dollar	cile VT
	art l		mmary	intropio minoron on r	nost organisant o	estrutios	To 20		conserve, a	nd/or n	nako	
	1		lescribe the organiz ble a portion of the s							nu/or i	liane	
ģ	1		of natural & wilderr									
and	1		to the land thru recr						20119			
/er		33							o than 25%	of ito n	ot accote	
ξįξ	2		his box ▶ if th				osea	or mor	e man 25%	3	et assets	17
€.a	3		of voting members of independent vot				16)			4		<u>17</u>
e ije	5		mber of individuals				10)			5		
F 5	6		mber of volunteers			art v, into za,				6		
آچ	7a		related business re			ne 12				7a		0
MAR 1 9 2015 Activities & Governance	b		elated business tax							7b		0
	 								Prior Year		Current	Year
CANINE!	8	Contrib	utions and grants (F	Part VIII, line (h)	FCEIVE	K, CE			3	0,057		45,226
Z Š	9	Dragrar	n caniica favaniia ()	Part VIII IInation -		701				0		0
₹	10	Investm	ent income (Part VI	III, column (Al∭ine	s გ.ტეიცძ <i>გ</i> ძ) ე	15 191			1	1,576		8,917
	11	Other re	nent income (Part Vient income (Part Viii) evenue (Part VIII, co renue—add lines 8 th	olumn (A), line😽 (3d, 8c, 9c, 10c, a	ind 11 2		L		550	 	233
<u> </u>	12	Total rev	enue—add lines 8 th	rough 11 (must equa	al Part All colum	1 (4), line (2)		<u> </u>	4	2,183		54,376
	13	Grants	and similar amounts	s paid (Part IX) colu	ingi (A) lines 1	39		<u> </u>		0		0
	14		s paid to or for mem			A) 1 5 40)		}		0		0
ŝ	15		, other compensation		•	A), lines 5–10)		 -		0		0
Expenses	16a		ional fundraising fe	•			a aaz	 	0			0
Exp	b		ndraising expenses	•			3,337	 `		0.004		22.202
	17		expenses (Part IX, co openses Add lines 1			(A) line (25)		 		0,084 0,084		32,393 32,393
	18 19		le less expenses S	•		A), line 20)		 		2,099		21,983
- 5 8		Kevent	ie iess expenses o	dutact line to hon	1 11116 12			Begin	ning of Curren		End of	
Assets or	20	Total as	ssets (Part X, line 16	6) .						1,537		2,381,164
Ass	21		ibilities (Part X, line	•	•					1,850		2,500
Net A	22		sets or fund balance	-	from line 20				2,34	9,687		2,378,664
P	art II		gnature Block									
			ry, I declare that I have ex								e	
and	belief, it i	is true, com	ect, and complete Declar	ration of preparer (other	than officer) is based	on all information	of whic	h prepare	er has any knov	vledge	/	
Sig	gn		uson	MODE	maur					14	15	
He			Signature of officer				Troo	surer	Dat é	•		
			Alison M Latham Type or print name and	Ltitle			1162	isurei				
		Pn	nt/Type preparer's name	i due	Preparer's signature			Da	te		PTIN	
Pa	id				. roperor e digitation					Check		
	eparei	r				self-emp	loyed					
	e Only		m's name		Firm's EIN	·						
		- 1	m's address 🕨						Phone no			
Ma	y the IF	RS discu	ss this return with th	ne preparer shown	above? (see inst	ructions)					X Yes	s No
_				see the separate in								990 (2011)

•	_	•	٠	•	•	•	_	_	٠,	_	_	•	_	- 4
						-							-	,
		۰	•	٠				-	П	н				

Pa	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III	
1	Briefly describe the organization's mission	<u></u>
	To extend & maintain a conservation corridor that connects the Pinnacle lands to other	
	sites along the 16 mile Windmill Ridge located in or near 6 towns & to conserve lands in	.
	nearby areas To encourage a deeper understanding of our landscape & the wild plants &	
	animals it supports, & to preserve its ecological & historial integrity	
2	Did the organization undertake any significant program services during the year which were not listed on	7
	the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O	j No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
3	services?	No
	If "Yes," describe these changes on Schedule O	_
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	
	the total expenses, and revenue, if any, for each program service reported	
4-	/Code \//Evnences \$ 1.904 including groups of \$ \//Povenue \$	
4a	(Code) (Expenses \$ 1,894 including grants of \$) (Revenue \$ Programs - a series of guided walks on Pinnacle lands were held on the second weekend of every	.)
	month from May through November Led by Trustees, the purpose of these "Weekend Strolls" is to	
	acquaint the public with new or rarely used trails, point out special features of the area, and	
	reinforce environmental values Accessibility Day is held on the last weekend of September This	
	annual event provides rides to people who are unable to walk to the peaks	
4b	(Code) (Expenses \$ 2,054 including grants of \$) (Revenue \$	_)
	Education - many local schools use the Pinnacle and the ridgeline for field trips, environmental	
	studies and the place where students perform community service work projects such as improving trails and removing invasive species. We sponsor an education program in the 3rd and 4th grades in	
	the Westminster schools (2) For this purpose we hired a Naturalist to work with the school(s) to	
	develop a curriculum and to lead the field trips	
		-
		
		
4c	(Code) (Expenses \$ 12,484 including grants of \$) (Revenue \$	_)
	Stewardship of 1851 93 acres and 22+ miles of trails Expeses are property taxes, liability	-
	insurance, trail and access road maintenance, and trail maps, brochures and other kiosk	
	materials Volunteers worked 1,500 hours on trail development and maintenance. The average value is \$15/hour (\$22,500) bit it is not included on the tax return or in financial statements. Trail	
	brochures in kiosks show trails, inform the public of rules for usage and give information about	
	our organization	
	Other program services (Describe in Schedule O)	
74	(Expenses \$ 0 including grants of \$0) (Revenue \$ 0)	
4e	Total program service expenses ► 16,432	

art	V Checklist of Required Schedules			
_	1		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	<u> </u>
	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	<u> </u>	
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		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 98-197 If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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		X
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	ł		
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt		ļ	
40	negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted	9		X
10	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,	1		
• •	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	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	445		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
	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		x
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	444		X
•	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e		x
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1	 	 ^
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	}	X
12a	Did the organization obtain separate, independent-audited-financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII revieweb.	12a	X	
þ	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	ļ	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
a	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	- }		ł
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Ì	x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	1.12		1
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15]	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	<u>L</u> _	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services]	_
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	<u> </u>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
4-	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	×
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	1.0		
20-	If "Yes," complete Schedule G, Part III. Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19	-	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a	 	X

Form 9	990 (201 3) Windmill Hill Pinnacle Association	03-0334367	•	age 4
Par				
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization	,		
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	<u>21</u>		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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 Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	i '		
	24b through 24d and complete Schedule K If "No," go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		ļ
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c	ļ	ļ
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	ļ		
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			١
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee,			١
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part	// 26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			l
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			نا
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete</i>			١.,
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	000		,
20	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? <i>If "Yes," complete Schedule M</i>	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	20		
31	conservation contributions? <i>If "Yes," complete Schedule M</i> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N</i> ,	30		X
31	Part I	34		×
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	31		┼^
JŁ	If "Ves " complete Schedule N. Part II	32		l v

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I

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

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

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

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O

33

34

35a

35b

36

37

Pai	Windmill Hill Pinnacle Association **TV	03-03343			age 5
	Check if Schedule O contains a response to any question in this Part V.			[
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	4			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	- 1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		- 1		
	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	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	L	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				-
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<u> </u>	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O .	<u> </u>	3ь		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		1		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial				
	account)?	<u> </u> -	<u>4a</u>		X
b	If "Yes," enter the name of the foreign country				
E.	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	-	F.		
5a b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	_	5a 5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	⊢	5c		 ^-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	-	-		
ou	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		х
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?	Ĺ	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	L	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	required to file Form 8282?	<u> </u>	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
T	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	_	7f	-	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 109.	_	7g 7h		X
h 8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	°-C′ -	/n		X
0	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				
	organization, have excess business holdings at any time during the year?		8		x
9	Sponsoring organizations maintaining donor advised funds.	F			<u> </u>
а	Did the organization make any taxable distributions under section 4966?	~	9a		Х
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		Х
10	Section 501(c)(7) organizations. Enter	F			
а	Initiation fees and capital contributions included on Part VIII, line 12			!	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
11	Section 501(c)(12) organizations. Enter				
2	Gross income from members or shareholders	i			l

Gross income from other sources (Do not net amounts due or paid to other sources

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Is the organization licensed to issue qualified health plans in more than one state?

Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which

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

Section 501(c)(29) qualified nonprofit health insurance issuers.

the organization is licensed to issue qualified health plans

Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

against amounts due or received from them)

Enter the amount of reserves on hand

12a

13

12b

12a

13a

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 to any question in this Part VI

	Check it Schedule O Contains a response to any question in this Fart Vi			실_
<u>Sect</u>	ion A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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 O	^,	res	
ь	Enter the number of voting members included in line 1a, above, who are independent 1b 17	ŧ		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	х	
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?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
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	х	l
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	<u> </u>	~~	
D	stockholders, or persons other than the governing body?	7b	j	×
		70		-^-
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		1	
	the year by the following			
a	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Χ.	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		_X_
<u>Sect</u>	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	<u>code</u>	<u>) </u>	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Χ_	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			İ
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	<u>X</u>	L
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?.	11a	Χ	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		بره د خسر درسد	<u></u>
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Χ	ļ
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done .	12c	Χ	{
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	1 1	,	*
а	The organization's CEO, Executive Director, or top management official .	15a		
b	Other officers or key employees of the organization	15b		\vdash
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	1.00		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		Ş	1
IVA	with a taxable entity during the year?	460		- J
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	16a		- <u>X</u> -
b]]		
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard	401		
04	the organization's exempt status with respect to such arrangements?	16b		L
	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed Section 6104 requires on experiention to make its Forms 1033 (or 1034 if explicable), 200, and 200 T (Section 504(s)/3)			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)	is only	')	
	available for public inspection. Indicate how you made these available. Check all that apply			
	X Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest			
	policy, and financial statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ► Alison M Latham (802) 387-57	11		
	1915 Patch Road, Westminster West, VT 05346-9291			

Part VII Con

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

~		 es, and Highest Compensated En	
Section A.			

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

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

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

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

(A) Name and Title	(B) Average hours per	box,	unles	Pos eck s pe d a d	rson	than o	an ee)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Tony Coven	4 00									
Trustee	0 00	X					L	<u> </u>		
(2) Alison M Latham	12 00			}]]]		
Treasurer, Registered Agent	0 00	X		Х	_		L	L	<u> </u>	l
(3) Michael LaRoss	4 00]	}					
Trustee	0 00	X					<u> </u>			
(4) Beverly B Major	6 00									
Secretary, Archivist	0 00	X	<u>L.</u>	Х		<u> </u>				
(5) Randolph T Major	5 00									
Liason w/Bald Hill & DNRTC	0.00	X	L		_		_	<u> </u>	<u> </u>	<u> </u>
(6) Susan Roman	12 00	Ţ		j	Ì]]		Ì
Chairperson	0 00	X	L	X	L	<u> </u>	L	<u> </u>		l
(7) Molly Wilson	3 00			ļ	ļ	ļ			}	
Trustee	0 00	X	<u> </u>	<u> </u>		<u> </u>		<u> </u>	<u> </u>	<u> </u>
(8) Rick Cowan	3 00			1	1	l	ì]		ļ
Trustee	0 00	X	<u> </u>			<u> </u>	_	<u> </u>	<u> </u>	<u> </u>
(9) Kath Martin	5 00	1			ļ	l	ļ			
Assistant Treasurer	0 00	X		X	<u> </u>	<u> </u>	\perp	<u> </u>	<u> </u>	<u> </u>
(10) James Jordan	4 00	. 1]	•]]
Trustee	0 00			X	L	<u> </u>		<u> </u>	<u> </u>	
(11) James (Silos) Roberts	8 00				[
Vice Chairperson	0 00	X		<u> </u>	L	<u> </u>	L			
(12) Timothy Young	1 00				1					
Trustee	0.00	X		L	<u>L</u>					
(13) Andrew L Toepfer	8.00	1			[
Trustee	0 00	X		L		<u> </u>	L		<u> </u>	
(14) Catherine Cooper-Ellis	4.00	1								ļ — — -
Corresponding Secretary	0 00	X		L						

	(A) Name and title	(B) Average	box,	unles	Pos eck s pe	rson	than o	an	(D) Reportable compensation	(E) Reportable compensation		Estir	F) mated unt of	
		hours per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	o Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MIS	.	oti compe fron organ and r	her	n
	Sarah Waldo	10 00 0 00	1											
<u>Trust</u> (16)	David Buchdahl	1 00		-							+			
Trust	ee	0 00		_	_	<u> </u>	ļ	<u> </u>			\dashv			
(17) Trust	Elaine Gordon	4 00 0 00									Ì			
	56		 ^	_	-	\vdash	-	 		<u> </u>	\dashv			
		<u> </u>		<u> </u>		┡		_			\dashv			
(19)						Ì		}						
(20)														
(21)														
(22)				_										
(23)			-											
(24)			-		 -									
(25)														
1b	Sub-total	<u> </u>	<u> </u>					>	0	 	0			0
C	Total from continuation sheets to Part VII, S	ection A						>	0	 	0			<u>0</u>
<u>d</u> 2	Total (add lines 1b and 1c) Total number of individuals (including but not liii	mited to those lis	sted a	abov	/e) v	who	rece	ived						
	reportable compensation from the organization				0					·				
3	Did the organization list any former officer, dire employee on line 1a? If "Yes," complete Sched		-	_	loye	e, c	or hig	hes	t compensated			- Y	es	No X
4	For any individual listed on line 1a, is the sum of the organization and related organizations great individual											4		X
5	Did any person listed on line 1a receive or acci	•								vidual				
900	for services rendered to the organization? If "Y tion B. Independent Contractors	es," complete S	chedu	ıle .	l for	suc	ch pe	rsor	1			5	1	<u>X</u>
1	Complete this table for your five highest compe compensation from the organization. Report of year										n's t	ax		
	(A) Name and business add	Iress							(B) Description of se	rvices		(C)	ition	
		_ 						\vdash				,		0
						_					_			0
								╀						0
								₩						0

Total number of independent contractors (including but not limited to those listed above) who received

0

more than \$100,000 of compensation from the organization

Form 990 (2012) Windmill Hill Pinnacle Association Part VIII Statement of Revenue Check of Schedule O contains a response to any question in this Part VIII

		Check & Schedule O Contains	a response	10 01	ly question in an	3 1 alt VIII	· · · · · · · · · · · · · · · · · · ·		
	- "					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
	40	Fodosetod composano		10	0		Tevende		012,010,01014
है है	1a	Federated campaigns	į	1a 1b		1			
la u	b	Membership dues	560		{				
اغ ي	С	Fundraising events	0	1					
Contributions, Giffs, Grants and Other Similar Amounts	d	Related organizations		1d	0		ì		
S, E	е	Government grants (contributions	2,639	ł	Ì				
o S	f	All other contributions, gifts, gran							
the Et	•	similar amounts not included above 1f			42,027		ļ		1
들임	~	Noncash contributions included in li		\$	0				
ರಿ ಕ	g	Total. Add lines 1a–1f	1105 10 11.	Ψ.		45,226			
	<u>h</u>	Total. Add lifes Ta-11			Business Code	70,220			
Program Service Revenue	_			}	Business code				}-
Į Š	2a			. }		0			
&	b			.)		0			
<u> </u>	С			.]		0			
ě	d					0			<u> </u>
Ë	е			[ol			<u> </u>
gra	f	All other program service revenu	e			0			
윤	q	Total. Add lines 2a–2f			•	Ö			
	3	Investment income (including div	idends inter	rest	and				
ſ		other similar amounts) .				7,588	7,588		
	A	Income from investment of tax-ex	vomnt hand	proc	ands	0	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Í	4		kempi bond	prou	5603	0			
1	5	Royalties	(i) Real		(ii) Personal				
1		_	(I) Real		(II) Fersonal				1
	6a	Gross rents	<u> </u>						
- 1	b	Less rental expenses	<u> </u>				 		1
	С	Rental income or (loss)	L	0	0	_			
	d	Net rental income or (loss)			•	0		L	<u> </u>
	7a	Gross amount from sales of	(i) Securitie	es	(II) Other			ĺ	1
		assets other than inventory	123	,650	0				1
	ь	Less cost or other basis					•	}	}
	~	and sales expenses	122	,321	0		1	}	1
		Gain or (loss)		329	0				
	C	• •	<u> </u>	,523		1,329	1,329		
	d	Net gain or (loss)				1,329	1,329		
a)] _)	ļ
Ž	8a	Gross income from fundraising				,)	}
ě	}	events (not including \$	0]	}
è)	of contributions reported on line	1c)	'		į			j
_		See Part IV, line 18		а	0	ļ		j	}
Other Revenu	b	Less direct expenses		b	0				}
0			ising events	i .		Ō			
	ι	Gross income from gaming activ	-						
		See Part IV, line 19		а	ĺ	{	1	Į.	
	١ .	Less direct expenses		b	0	1	į	{	İ
				D	<u>_</u>	0	1	1	
		Net income or (loss) from gamin	g activities		<u>_</u>	<u> </u>		 	
	10a	Gross sales of inventory, less				1	İ	1	
	ì	returns and allowances .		а	272		•		
	b	Less cost of goods sold	•	b	39	• -			-
	С	Net income or (loss) from sales	of inventory		>	233	233	il	
		Miscellaneous Revenue			Business Code				
	11a					0	1	1	
	Ь			••		0			T
	c					0		 	
	ď	All other revenue		••		Ö		 	
] -	Total. Add lines 11a–11d				0		 	 -
	e			•				}	
	12	Total revenue. See instructions			_	54,376	9,150	9	oo

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must complete all Check if Schedule O contains a response to any			omplete column (A)	
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	, (D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and	<u> </u>			,
	organizations in the United States See Part IV, line 21	0			* *
2	Grants and other assistance to individuals in the				3 ,
	United States See Part IV, line 22	0		***	
3	Grants and other assistance to governments,			* * * * * * * * * * * * * * * * * * *	*
	organizations, and individuals outside the		!		5*
	United States See Part IV, lines 15 and 16	0		* ***	· · ·
4	Benefits paid to or for members	0		(\$45) But	K [®] X.
5	Compensation of current officers, directors,				
_	trustees, and key employees	0			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	0		ļ	ļ
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include			,	
_	section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees)	7 200	0.050	0.500	4 00
a	Management	7,389	2,250	3,539	1,600
b	Legal	4 250	 -	4 050	
C	Accounting	1,250		1,250	 _
d	Lobbying Professional fundraising consists. See Bort IV line 17		<i>i</i>		
e	Professional fundraising services See Part IV, line 17	0	1 × × × ×	*. *	
١ -	Investment management fees	<u>-</u>			
g	Other (If line 11g amount exceeds 10% of line 25, column	0			
12	(A) amount, list line 11g expenses on Schedule O) Advertising and promotion	1,750	1,750	 	
13	Office expenses	51	1,730	51	
14	Information technology	1,723		1,723	
15	Royalties	7,723	<u> </u>	1,723	
16	Occupancy	5		 _	
17	Travel	<u> </u>			
18	Payments of travel or entertainment expenses	<u> </u>			
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	456		456	
20	Interest	0			
21	Payments to affiliates	660		660	
22	Depreciation, depletion, and amortization	0	0	0	
23	Insurance	4,792	2,688	2,104	
24	Other expenses Itemize expenses not covered	20 12 3 X 2 6 9 5 1		, <u></u>	
	above (List miscellaneous expenses in line 24e If		· , , , , , , , , , , , , , , , , , , ,	* *	
	line 24e amount exceeds 10% of line 25, column		}* **	,	
	(A) amount, list line 24e expenses on Schedule O)		×	\ \cdot\''_\'' ;	
a	Property Taxes	6,266	6,266		
b	Road, Kiosk & Trail Maintenance & Repair	2,759			
С	Mailing Services and Postage & Program Supplies (\$99	3,489	99	1,886	1,504
ď	Copying	814	254	327	233
е	All other expenses Misc (\$568) & Fees (\$426)	994	366	628	
25	Total functional expenses. Add lines 1 through 24e	32,393	16,432	12,624	3,33
26	Joint costs. Complete this line only if the				5,50
	organization reported in column (B) joint costs				
	from a combined educational campaign and	ļ			
	fundraising solicitation Check here ► if]			
	following SOP 98-2 (ASC 958-720)				

Part-X Balance Sheet

		Check if Schedule O contains a response to any question in this Pa	art X		
			(A)		(B)
		•	Beginning of year		End of year
	1	Cash—non-interest-bearing	24,047	1	11,688
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors	s,		
		trustees, key employees, and highest compensated employees			
		Complete Part II of Schedule L .		5	
	6	Loans and other receivables from other disqualified persons (as defined under section	on		
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers	and		
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
ets		organizations (see instructions) Complete Part II of Schedule L .		6	
Assets	7	Notes and loans receivable, net .	0	7	0
A	8	Inventories for sale or use .		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or	, , ,		•
		other basis Complete Part VI of Schedule D 2,0	72,526		
	b	Less accumulated depreciation 10b	0 2,020,003	10c	2,072,526
	11	Investments—publicly traded securities	307,277	11	296,740
	12	Investments—other securities See Part IV, line 11	0	12	0
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	210	15	210
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,351,537	16	2,381,164
	17	Accounts payable and accrued expenses	1,850	17	2,500
	18	Grants payable	.,	18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities .		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
es	22	Loans and other payables to current and former officers, directors,	₹		*
Liabilities		trustees, key employees, highest compensated employees, and			
api		disqualified persons Complete Part II of Schedule L		22	
⊐	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third	l		
		parties, and other liabilities not included on lines 17-24) Complete		1	
		Part X of Schedule D	0	25	0
	26	Total liabilities. Add lines 17 through 25	1,850	26	2,500
		Organizations that follow SFAS 117 (ASC 958), check here ► X	and		
Ses		complete lines 27 through 29, and lines 33 and 34.	-	ļ	
aŭ	27	Unrestricted net assets	312,514	27	305,049
3a	28	Temporarily restricted net assets	16,960	_	879
ᅙ	29	Permanently restricted net assets	2,020,213		2,072,736
Ē		<u>-</u>	–		
7		Organizations that do not follow SFAS 117 (ASC958), check here	_] and		
ţŞ		complete lines 30 through 34.			
se	30	Capital stock or trust principal, or current funds		30	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
det.	32	Retained earnings, endowment, accumulated income, or other funds		32	
~	33	Total net assets or fund balances	2,349,687	33	2,378,664
	34	Total liabilities and net assets/fund balances	2,351,537	34	2,381,164

		, ,	, ,
Part	90 (2013) Windmill Hill Pinnacle Association XI Reconciliation of Net Assets	03-0334	4367 <u>Page</u> 12
rait	Check if Schedule O contains a response to any question in this Part XI.		X
		, , - · ·	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	54,376
2	Total expenses (must equal Part IX, column (A), line 25)	2	32,393
3	Revenue less expenses. Subtract line 2 from line 1	3	21,983
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments	5	2,349,687
5 6	Donated services and use of facilities	6	6,993
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	 	
	column (B))	10	2,378,664
Part		1 10 1	2,0,0,001
	Check if Schedule O contains a response to any question in this Part XII		
			Yes No
1	Accounting method used to prepare the Form 990		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both		2a X
	X Separate basis		
b	Were the organization's financial statements audited by an independent accountant?		2b X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both 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 audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c X
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b
			Form 990 (2013)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

▶ Attach to Form 990 or Form 990-EZ.

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

naritable trust.
► See separate instructions.

OMB No 1545-0047
2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

		organization)	Employer	OO OO		31	
		Hill Pinnacle As		** 6			1 - 4 -	46.5	1) 0 :-		334367		
Par				arity Status (All org						ISTRUCTIO	ns.		
he o	orgar			ion because it is (For thes, or association of o									
2		A school desc	cribed in section	170(b)(1)(A)(ii). (Atta	ch Schedu	ule E)							
3	$\overline{\Box}$	A hospital or	a cooperative ho	spital service organiza	ition descr	nbed in se	ction 170	(b)(1)(A)	(iii).				
4		A medical res		on operated in conjunc						1)(A)(iii).	. Enter ti	ne	
5		An organizati	on operated for t	the benefit of a college	or univer	sity owned	or opera	ted by a g	jovernmei	ntal unit d	lescribe	d	
6				Complete Part II) rnment or governmenta	al unit des	cribed in s	section 17	70(b)(1)(A	ω(ν).				
7	岗	-		receives a substantial						om the ge	eneral p	ublic	
	_	described in	section 170(b)(1	I)(A)(vi). (Complete Pa	art II)								
8		=		n section 170(b)(1)(A)									
9		receipts from support from	activities related gross investmen	receives (1) more than to its exempt function at income and unrelated after June 30, 1975. See	s—subjec d busines	ct to certai s taxable i	n exception	ons, and (2) no mor n 511 tax)	e than 33	3 1/3% o	fits	3
10			-	d operated exclusively									
11	厂	_	-	d operated exclusively						to carry o	out the		
		purposes of c	one or more publiced the box that	licly supported organized describes the type of	ations des	scribed in a g organiza	section 50 tion and c	09(a)(1) oi com <u>ple</u> te l	r section 5 ines 11e t	509(a)(2) hrough 1	See se 1h		.
е		By checking	this box, I certify	that the organization is managers and other	s not cont	rolled dire	ctly or ind	rectly by	one or mo	ore disqua	alified	_	4
		•	section 509(a)(2	_				•					
f		-		written determination	from the II	RS that it	s a Type	I, Type II,	or Type II	l supporti	ing		
g			, check this box t 17. 2006, has t	he organization accept	ed any qu	ft or contri	bution froi	m any of t	he				لــا
3		following per			, ,			,					
				or indirectly controls, ei	ther alone	or togeth	er with pe	rsons des	scribed in	(II)		Yes	No
		•	,	erning body of the sup		ganızatıon'	?				11g(ı)		
		· ·	•	person described in (i)		\					11g(n)	<u> </u>	
		• ,		of a person described							11g(iii)		
<u>h</u>				tion about the supporte			64 D.d.:		()		(100) 4 00		
V,		e of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) lis	organization sted in your document?	the organ	ou notify nzation in of your port?	organiza (i) organi	Is the tion in col ized in the S ?	(***)	ount of mo support	лешу
					Yes	No	Yes	No	Yes	No]		
(A)]				j	,			
(B)													
(C)											 -		
(D)											-		
(E)			 			-	<u> </u>				-	_	
_											-	-	
Tota	<u></u>			L	<u></u>	l	L			<u> </u>			0

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 I f the organization fails to qualify under the tests listed below, please complete Part III)

Secti	on A. Public Support					· · · ·	
Calen	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")	29,597	380,313	37,283	30,337	45,226	522,756
2	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						0
3	its behalf The value of services or facilities						
•	furnished by a governmental unit to the						
	organization without charge				_ [0
4	Total. Add lines 1 through 3	29,597	380,313	37,283	30,337	45,226	522,756
5	The portion of total contributions by each		1 34	**	۸,		
	person (other than a governmental unit			.`			
	or publicly supported organization)	`	,	. *	;	*	
	included on line 1 that exceeds 2%		*	,	#	3	
	of the amount shown on line 11,	* (ļ	i	
	column (f)	-	*	•			47,872
6	Public support. Subtract line 5 from line 4						474,884
	ion B. Total Support	1 1 2 2 2 2 2	41.0000	() 2040	()) 0044	(1) 0040	/D. T-+-1
Caler	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	29,597	380,313	37,283	30,337	45,226	522,756
8	Gross income from interest, dividends,			1			
	payments received on securities loans,						
	rents, royalties and income from similar	0.007	44.005	40.040	44.004	7 500	EE 444
_	sources	9,827	14,025	12,910	11,094	7,588	55,444
9	Net income from unrelated business						
	activities, whether or not the business is						0
10	regularly carried on Other income Do not include gain or						
10	loss from the sale of capital assets						
	(Explain in Part IV)						0
11	Total support. Add lines 7 through 10			<i>₹</i> ,		ì	578,200
12	Gross receipts from related activities, etc. (se	L				12	3,243
13	First five years. If the Form 990 is for the or	ganızatıon's firs	t, second, third	, fourth, or fifth	tax year as a se	ection 501(c)(3)	
	organization, check this box and stop here					<u></u>	▶ ∐
Sect	tion C. Computation of Public Support	t Percentage					
14	Public support percentage for 2012 (line 6, c	olumn (f) divide		lumn (f))		14	82 13%
15	Public support percentage from 2011 Schedu					15	92 60%
16a	33 1/3% support test—2012. If the organization				14 is 33 1/3%	or more, check	this box
	and stop here. The organization qualifies as						► X
b	33 1/3% support test—2011. If the organization and stop here. The organization qualifies				d line 15 is 33 1	/3% or more, cl	neck this
17a	10%-facts-and-circumstances test—2012.						
	is 10% or more, and if the organization meet						
	Part IV how the organization meets the "fact	s-and-circumsta	inces" test. The	e organization q	ualifies as a pu	blicly supported	l
	organization .					•	▶
b	10%-facts-and-circumstances test—2011.						
	15 is 10% or more, and if the organization m						ain in
	Part IV how the organization meets the "fact	s-and-circumsta	ances" test. The	organization q	ualifies as a pu	blicly	
	supported organization .				•		
18	Private foundation. If the organization did n	ot check a box	on line 13, 16a	, 16b, 17a, or 1	7b, check this t	oox and see	
	instructions						▶
_							

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name o	of the organization		ı	Employer Identification number
Windr	nill Hill Pinnacle Association			03-0334367
Part		or Advised Funds or Other Sir	nilar Fund	s or Accounts. Complete if
	the organization answered "Yes"			•
		(a) Donor advised funds		(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
	Aggregate value at end of year	<u> </u>		
4		and advisors in writing that the asset	ts held in do	nor advisod
5	Did the organization inform all donors and do			
•	funds are the organization's property, subject			Yes No
6	Did the organization inform all grantees, don			
	used only for charitable purposes and not fo		ivisor, or tor	. — —
	purpose conferring impermissible private be			Yes No
Part	Conservation Easements. Com	plete if the organization answere	ed "Yes" to	Form 990, Part IV, line 7
1	Purpose(s) of conservation easements held	by the organization (check all that ap	(vlac	
•	Preservation of land for public use (e.g., rec	· · · · · · · · · · · · · · · · · · ·		in historically important land area
	=	· =		
	Protection of natural habitat	Pres	ervation of a	certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organiza	tion held a qualified conservation cor	ntribution in 1	the form of a conservation
	easement on the last day of the tax year			
				Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation eas	ements		2b
С	Number of conservation easements on a ce	rtified historic structure included in (a) .	2c
d	Number of conservation easements included	d in (c) acquired after 8/17/06, and no	ot on a	
	historic structure listed in the National Regis			2d
3	Number of conservation easements modifie		d, or terminat	ted by the organization
	during the tax year			
4	Number of states where property subject to	conservation easement is located	>	
5	Does the organization have a written policy		spection, har	ndling of
-	violations, and enforcement of the conserva		•	Yes No
6	Staff and volunteer hours devoted to monito		rvation ease	ements during the year
-	>	3. 1 3.		,
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation	on easemen	ts during the year
•	▶ \$,
8	Does each conservation easement reported	on line 2(d) above satisfy the require	ements of se	ection
•	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?			Yes No
9	In Part XIII, describe how the organization re	eports conservation easements in its	revenue and	
•	balance sheet, and include, if applicable, the	- -		
	the organization's accounting for conservation	-		Jiasinono nat godinoo
Pari			Other Simil	ar Assets.
	Complete if the organization answere			
				
1a	If the organization elected, as permitted und	•		
	works of art, historical treasures, or other su			
	of public service, provide, in Part XIII, the te			
b	If the organization elected, as permitted und			
	works of art, historical treasures, or other sil	milar assets held for public exhibition,	, education,	or research in furtherance
	of public service, provide the following amou	unts relating to these items		
	(i) Revenues included in Form 990, Part VI	I, line 1		> \$
	(ii) Assets included in Form 990, Part X			► \$ ► \$
2	If the organization received or held works of	art, historical treasures, or other sim	ıılar assets fo	
	following amounts required to be reported u			
а	Revenues included in Form 990, Part VIII, II	,		▶ \$
b	Assets included in Form 990, Part X			\$
~				₹

Schedu	ile D (Form 990) 2013 Windmill Hill Pinnacle As	sociation					03-0334	, , , , , , , , , , , , , , , , , , , ,	'F	Page 2
Part			rt, Histo	orical Tr	easures, or	Othe	r Similar Asse	ts (con	tınuec	d)
3	Using the organization's acquisition, access									
	use of its collection items (check all that app	ıly)						•		
а	Public exhibition		d 📋	Loan	or exchange p	orogran	ns			
b	Scholarly research		е 🗌	Other					.	
С	Preservation for future generations									
4	Provide a description of the organization's c	ollections and e	explain h	ow they fu	rther the oras	anızatıo	n's exempt purp	se in		
•	Part XIII		жран				o exempt parp			
5	During the year, did the organization solicit of	or receive dona	tions of a	art, historic	al treasures,	or othe	er sımılar			
	assets to be sold to raise funds rather than t							Ye	es 🔲	No
Part	IV Escrow and Custodial Arrange	ments. Com	olete if t	he organ	ızation ansv	vered	"Yes" to Form	990, Pa	irt	
	IV, line 9, or reported an amount									
1a	Is the organization an agent, trustee, custod	lian or other int	ermediar	y for contr	ibutions or ot	her ass	sets not			
	included on Form 990, Part X?							Ye	es 🔙	No
b	If "Yes," explain the arrangement in Part XIII	and complete	the follow	ving table						
						<u> </u>		Amount		
С	Beginning balance					10				0
d	Additions during the year					10			-	
e	Distributions during the year					16				
f	Ending balance				•		<u></u>			0
2a	Did the organization include an amount on f	Form 990, Part	X, fine 2	17				Ye	s 🔼	No
b	If "Yes," explain the arrangement in Part XIII	Check here if	the expl	anation ha	s been provi	ded in l	Part XIII			
Part	V Endowment Funds. Complete it	f the organiza	tion ans	wered "	Yes" to Forn	n 990,	Part IV, line 10	<u> </u>		
	(a)	Current year	(b) Pri	or year	(c) Two years	back	(d) Three years back	(e) Fo	ur years	back
1a	Beginning of year balance	231,700		231,000	20	4,000	204,00	0	19	9,000
b	Contributions	6,000		700	2	7,000				5,000
С	Net investment earnings, gains,									
	and losses									
d	Grants or scholarships							 		
е	Other expenditures for facilities							ŀ		
	and programs									
1	Administrative expenses End of year balance	237,700		231,700	23	1,000	204,00		20	04,000
g 2	Provide the estimated percentage of the cui		palance (204,00	<u> </u>		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
a	Board designated or quasi-endowment	•	100%	c .rg, oc	namin (a)) nei	u 43				
b	Permanent endowment	%								
c	Temporarily restricted endowment	%								
_	The percentages in lines 2a, 2b, and 2c sho		6							
3a	Are there endowment funds not in the posse			on that are	held and adı	ministe	red for the			
	organization by		•						Yes	No
	(i) unrelated organizations .							3a(i)		Х
	(ii) related organizations .							3a(ii)		Х
b	If "Yes" to 3a(ii), are the related organization	ns listed as req	uired on	Schedule	R?.			3b	L	
4	Describe in Part XIII the intended uses of the	e organization'	s endow	ment fund	s					
Part	VI Land, Buildings, and Equipme	nt. See Form	990, P	art X, line	e 10.					
	Description of property	(a) Cost or oth	er basis	(b) Co	st or other	(c)	Accumulated	(d) B	ook valu	e

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land .	0	2,072,526		2,072,526
b	Buildings	0	0	0	0
С	Leasehold improvements	0	0	0	0
d	Equipment	0	0	0	0
е	Other	0	0	0	0
Tota	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part X,	column (B), line 10(c)) >	2,072,526

Schedule D (Form 990) 2013

Investments—Other Secu	rities. See Form 990, Part X	, line 12.	
Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year r	
	0		
	0		
		 	
			· · · · · · · · · · · · · · · · · · ·
must equal Form 990, Part X, col (B) line 12)			<u> </u>
a) Description of investment type	(b) Book value	Cost or end-of-year r	
	_ 		
	- 		
			
		 	
			
Other Assets. See Form 9		_ -	(h) Baak value
	(a) Description		(b) Book value
			
	 		
			ļ
			
			
nn (b) must equal Form 990, Part	X, col (B) line 15) .	<u> </u>	, , , , , , , , , , , , , , , , , , , ,
			
(a) Description of liability	(b) Book value		
income taxes		<u>가</u>	
		4	
		-{	
		-{	
	<u> </u>	1	
]	
	1	1	
		_	
must equal Form 990, Part X, col (B) line 25)	> 0	-	
	Description of security or category (including name of security) derivatives seld equity interests must equal Form 990, Part X, col. (B) line 12) Investments—Program Real Description of investment type must equal Form 990, Part X, col. (B) line 13) Other Assets. See Form 9 Other Assets. See Form 9 Other Liabilities. See Form (a) Description of liability	Description of security or category (including name of security) derivatives old equity interests. onusi equal Form 990, Part X, col (B) line 12) Investments—Program Related. See Form 990, Part X, a) Description of investment type (b) Book value onusit equal Form 990, Part X, col (B) line 13) Other Assets. See Form 990, Part X, line 15. (a) Description onusit equal Form 990, Part X, col (B) line 15) Other Liabilities. See Form 990, Part X, line 25. (a) Description of liability (b) Book value	(including name of security) Gentvatives Ide equity interests O Investments—Program Related. See Form 990, Part X, line 13 Description of investment type (b) Book value Cost or end-of-year interests (c) Method of various form 990, Part X, col (B) line 12) The program Related interests (c) Method of various form 990, Part X, col (B) line 13) Other Assets. See Form 990, Part X, line 15. (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. See Form 990, Part X, line 25. (a) Description of liability (b) Book value

chedu	ule D (Form 990) 2013 Windmill Hill Pinnacle Association	03-0334367	Page 4
	Reconciliation of Revenue per Audited Financial Statements With Revenu	e per Return	
,	Total revenue, gains, and other support per audited financial statements	1	61,369
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments	6,993	
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
е	Add lines 2a through 2d	2e	6,993
3	Subtract line 2e from line 1	3	54,376
1	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		
b	Other (Describe in Part XIII)		_
C	Add lines 4a and 4b	4c	0
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	54,376
	t XII Reconciliation of Expenses per Audited Financial Statements With Expen	ses per Return	
	Total expenses and losses per audited financial statements	1	32,393
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
þ	Prior year adjustments 2b		
C	Other losses . 2c		
d	Other (Describe in Part XIII)		^
е	Add lines 2a through 2d	2e	32,393
3	Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1 :	3 \$2700	32,393
4	Investment expenses not included on Form 990, Part VIII, line 7b		
a b	Other (Describe in Part XIII) . 4b		
C	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	32,393
	t XIII Supplemental Information		02,000
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	Part IV. lines 1b and 2	
	V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part		-,
	tional information	,	
-		Schedule D (Fo	m 990) 201 3

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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization 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.

Employer identification number

03-0334367 Windmill Hill Pinnacle Association Form 990, Part III, Line 4d Program Service Expenses 0, Grants and allocations 0, Revenue O Monitoring Program - this program, which asks volunteers to monitor vernal pools and deeryards, was inactive this year WHPA plans to resume monitoring in the future Form 990 Part VI Section B Line 11b The 990 is reviewed and every question answered by the Finance Committee The final return is sent out to the board by PDF prior to its being submitted Form 990 Part VI Section B Line 12c Every year, each trustee has to sign a conflict of interest form. If anyone suspects that a conflict of interest may exist, they are to bring there concerns to the chairperson's attention. No problems in current year Form 990 Part VI Section C Line 19 Some of the documents are on our website. They are available to anyone by request to the chair person Form 990 Part VI Section A Line 2 There was one married couple on the Board, Beverly and Randolph Major Form 990 Part XI Line 9 rounding adjustment

Part VIII, Lines 1a-h (990) - Contributions, Gifts, Grants, and Other Amounts

			Cash	Noncash
1	Federated Campaigns	1		
2	Membership dues	2	560	
3	Fundraising events .	3		
4	Related organizations	4		
5	Government grants (contributions)	5	2,639	
6	All other contributions, gifts, grants, and similar amounts not included above			
	Misc Grant			
	Donations WHPA (\$43075-2000 from Athens Dome)		41,075	
	Donations Athens Dome		355	
	Donations Bald Hill		597	
	Jane Krochmanly's courtesy discount none this year			
	Other contributions total	6	42,027	0
7	Total	7	45,226	0

Part X, Lines 11 and 12 (990) - Investments - Securities

			,		Total:	0	307,277	296,740
		Check if	ı	Check If			Beginning	Ending
		Publicly	Check If	Closely-Held	Number	Value		Balance
		Traded		Equity	of Shares/	at Time of		Book Value
	Description	Securities?		Interests	Face Value	Donation		FMV
-	Vanguard Total Stock Market	×			1,065 97	00	0	52,797
7	Vanguard GNMA	×			14,045 51	0	218,182	150,849
ო	Vanguard IPS	×			3,484 06	0	960'68	93,094
4					00 0	0	0	0
2					00 0	0	0	0
9					00 0	0	0	0
7					000	0	0	0
ω					00 0	0	0	0
6					00 0	0	0	0
9					00 0	0	0	0
F	The state of the s				000	0	0	0
12					00 0	0	0	0
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14					00 0	0	0	0
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18					000	0	0	0
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								Total:	2 072 526	0	0	0	2,020,003	2,072,526
								,		Dairent	Fodino			:
				Leasehold			Check If Check If	E Xecx		6		, along a co	Boding	ביילים
				0,000			Investment	Asset	Cost/Other	Accumulated	Accumulated	Cisposais	Similar Bod	
					-	1		pasousid	Racio	Depreciation	Depreciation	Adjustments	Balance	Balance
	Category or Item	Land	Buildings	ments	Equipment	Omer	\neg	Disposed	1 677 481				1,630,474	1,677,48
-	It and and Development Rights	×							1,01,0				27 081	27.08
		>						_	1,00,72					147 744
7	Options	<							115 515				115,515	115,511
m	Vermont Land Trust Easements	×							960 30				90,685	95,096
4	Legal Expenses	×							92,030				10.875	11,98(
- 4	Appraisals	×							006,11				36 18G	36 18
9	Cupitalsals	×							36,189				200	13 07
و	Surveys / Studies	{ !							13.073				13,073	10,01
7	Road and Site Improvements	×							12 335				12,335	12,33
∞	Mapping	×							76 273				76,273	76,27.
တ	Kiosk / Signage / Trail	×							7 503				7,503	7,500
2	Cabin Renovations	×							000,				0	
÷														

Part VIII, Line 7 (990) - Gain/Loss from Sale of Assets Other than Inventory

							Description of	Basis Method							
								Depreciation							
Cost, other	122,321	0	0	Expense	of sale and	ost of	ımprove-	ments							
Cost					Cost or other basis	(Enter one field only)	Donated	value						:	
SS	123,650	0	0		Cost or o	(Enter one		Cost	1,985	13,425	49,723	4,963	5,889	44,127	2,209
Gross							Gross sales	рпсе	2,000	13,500	20,000	5,000	000'9	45,000	2,150
	Total Public Securities	lic Securities	Total Other Sales				Date	sold	11/14/2013	11/26/2013	3/24/2014	4/17/2014	6/6/2014	6/23/2014	5/2/2014
	Total Pub	Total Non-Public Securities	Total				Acquisition	method	cash	cash	cash	cash	cash	cash	donation
		•					Date	acdnired							
					-			Purchaser	check writing WHPA	check writing WHPA	check writing WHPA	check writing WHPA	check writing WHPA	check writing WHPA	sold on stock marke
					Check if	purchaser	ısa	pusiness							
				Check if	gain/loss is gain/loss is	from sale from sale of	of public non public	securities							
				Check #	gain/loss is	from sale	of public	secruties	×	×	×	×	×	×	×
								CUSIP#							
5	1							Description	1 189 215 shs Vanguard GNMA	2 1,279 621shs Vanguard GNM	3 4,739 336 shs Vanguard GNM	4 473 037 shs Vanguard GNMA	5 561 272 shs Vanguard GNMA	6 4,205 607 shs Vanguard GNIM	7 22 shs Exxon Mobil Corp