

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2001

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

A For the 2001 calendar year, or tax year beginning 07/01, 2001, and ending 06/30/2002

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization NATIONAL PARK TRUST, INC		D Employer identification number 52-1691924
		Number and street (or P O box if mail is not delivered to street address) Room/suite		E Telephone number
		415 SECOND ST, NE 210		(202) 548-0500
		City or town, state or country, and ZIP + 4		F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶
		WASHINGTON, DC 20002		

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) If "Yes" enter number of affiliates ▶

H(c) Are all affiliates included? (If "No," attach a list. See instructions.) ☐ Yes ☒ NoH(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No

I Enter 4-digit GEN ▶

M Check ☐ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

G Web site ▶

J Organization type (check only one) ☒ 501(c) (3) (insert no) ☐ 4947(a)(1) or ☐ 527K Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **2,174,693**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16)

Expenses	1	Contributions, gifts, grants, and similar amounts received	STMT 1	1a	1,117,831	1d	1,153,997
		a Direct public support		1b	36,166		
		b Indirect public support		1c			
		c Government contributions (grants)					
		d Total (add lines 1a through 1c) (cash)					
		2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	
		3	Membership dues and assessments			3	
		4	Interest on temporary cash investments			4	
		5	Dividends and interest from securities			5	128,915
		6a	Gross rents		33,770		
		b Less rental expenses		152,205			
		c Net rental income or (loss) (subtract line 6b from line 6a)			6c	-118,435	
		7	Other investment income (describe ▶)			7	
		8a	Gross amount from sales of assets other than inventory	(A) Securities	786,033	8a	
		b Less cost or other basis and sales expenses		782,948	8b		
		c Gain or (loss) (attach schedule)		3,085	8c		
		d Net gain or (loss) (combine line 8c, columns (A) and (B))			8d	3,085	
	9	Special events and activities (attach schedule)					
	a	Gross revenue (not including \$ of contributions reported on line 1a)		9a			
	b	Less direct expenses other than fundraising expenses		9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)			9c		
	10a	Gross sales of inventory, less returns and allowances	STMT 3	52,336			
	b	Less cost of goods sold	STMT 4	31,626			
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c	20,710	
	11	Other revenue (from Part VII, line 103)			11	19,642	
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	1,207,914	
	13	Program services (from line 44, column (B))			13	1,518,390	
	14	Management and general (from line 44, column (C))			14	49,240	
	15	Fundraising (from line 44, column (D))			15	250,146	
	16	Payments to affiliates (attach schedule)			16		
	17	Total expenses (add lines 16 and 44, column (A))			17	1,817,776	
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)			18	-609,862	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	4,739,546	
	20	Other changes in net assets or fund balances (attach explanation)	STMT 5		20	-53,022	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	4,076,662	

For Paperwork Reduction Act Notice, see the separate instructions

Form 990 (2001)

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 21.)

Do not include amounts reported on line 6b, 8b, 9b, 10b or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ <u>78,437</u> noncash \$ _____)	22 78,437	78,437		
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc	25 229,250	200,724	6,878	21,648
26 Other salaries and wages	26 231,597	209,958	18,754	2,885
27 Pension plan contributions	27 31,648	27,534	2,215	1,899
28 Other employee benefits	28 50,097	43,584	3,507	3,006
29 Payroll taxes	29 31,369	27,291	2,196	1,882
30 Professional fundraising fees	30 297,557	233,705	3,043	60,809
31 Accounting fees	31 11,425	9,940	800	685
32 Legal fees	32 31,162	27,111	2,181	1,870
33 Supplies	33 15,508	14,175	727	606
34 Telephone	34 18,672	16,724	1,105	843
35 Postage and shipping	35 187,379	141,730	82	45,567
36 Occupancy	36 47,528	41,820	3,237	2,471
37 Equipment rental and maintenance	37 239	239		
38 Printing and publications	38 251,872	190,055		61,817
39 Travel	39 53,404	47,702	2,065	3,637
40 Conferences, conventions, and meetings	40			
41 Interest	41			
42 Depreciation depletion etc (attach schedule)	42 17,980	16,304	950	726
43 Other expenses not covered above (itemize) STMT 8	43a 232,652	191,357	1,500	39,795
b	43b			
c	43c			
d	43d			
e	43e			
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 1,817,776	1,518,390	49,240	250,146

Joint Costs. Check ☒ if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☒ Yes ☐ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ 463,432, (ii) the amount allocated to Program services \$ 317,486,
(iii) the amount allocated to Management and general \$ 39,426, and (iv) the amount allocated to Fundraising \$ 106,520

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 24)What is the organization's primary exempt purpose? **STMT 9**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others)

a STMT 10	(Grants and allocations \$ <u>78,437</u>)	897,206
b STMT 10	(Grants and allocations \$ _____)	621,184
c	(Grants and allocations \$ _____)	
d	(Grants and allocations \$ _____)	
e Other program services (attach schedule)	(Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)		1,518,390

Part IV Balance Sheets (See Specific Instructions on page 24)

Note	Where required, attached schedules and amounts within the description column should be for end-of-year amounts only	(A) Beginning of year	(B) End of year
45	Cash - non-interest-bearing	131,884	101,373
46	Savings and temporary cash investments	205,015	49,737
47a	Accounts receivable	10,000	
b	Less allowance for doubtful accounts	NONE	10,000
48a	Pledges receivable	132,327	
b	Less allowance for doubtful accounts		132,327
49	Grants receivable		15,000
50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50
51a	Other notes and loans receivable (attach schedule)		
b	Less allowance for doubtful accounts		51c
52	Inventories for sale or use	28,265	22,556
53	Prepaid expenses and deferred charges	45,512	66,070
54	Investments - securities (attach schedule) <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	3,160,318	2,569,273
55a	Investments - land, buildings, and equipment basis		
b	Less accumulated depreciation (attach schedule)		55c
56	Investments - other (attach schedule)		56
57a	Land, buildings, and equipment basis	5,221,187	
b	Less accumulated depreciation (attach schedule) STMT 24	86,274	5,134,913
58	Other assets (describe STMT 12)	37,424	36,604
59	Total assets (add lines 45 through 58) (must equal line 74)	8,858,166	8,137,853
60	Accounts payable and accrued expenses	547,135	316,576
61	Grants payable		61
62	Deferred revenue STMT 13	1,717,316	1,696,851
63	Loans from officers, directors, trustees, and key employees (attach schedule)		63
64a	Tax-exempt bond liabilities (attach schedule)		64a
b	Mortgages and other notes payable (attach schedule) STMT 14	1,854,169	1,862,764
65	Other liabilities (describe STMT 15)	NONE	185,000
66	Total liabilities (add lines 60 through 65)	4,118,620	4,061,191
	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74		
67	Unrestricted	3,577,475	2,922,216
68	Temporarily restricted	1,162,071	1,154,446
69	Permanently restricted		69
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74		
70	Capital stock, trust principal, or current funds		70
71	Paid-in or capital surplus, or land, building, and equipment fund		71
72	Retained earnings, endowment, accumulated income, or other funds		72
73	Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, and column (B) must equal line 21)	4,739,546	4,076,662
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	8,858,166	8,137,853

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a Total revenue, gains, and other support per audited financial statements	a 2,262,819	a Total expenses and losses per audited financial statements	a 2,925,703
b Amounts included on line a but not on line 12, Form 990 (1) Net unrealized gains on investments \$ (2) Donated services and use of facilities \$ 871,075 (3) Recoveries of prior year grants \$ (4) Other (specify) STMT 16 \$ 183,830 Add amounts on lines (1) through (4)	b 1,054,905 c 1,207,914	b Amounts included on line a but not on line 17, Form 990 (1) Donated services and use of facilities \$ 871,075 (2) Prior year adjustments reported on line 20, Form 990 \$ (3) Losses reported on line 20, Form 990 \$ 53,022 (4) Other (specify) STMT 17 \$ 183,830 Add amounts on lines (1) through (4)	b 1,107,927 c 1,817,776
c Line a minus line b d Amounts included on line 12, Form 990 but not on line a (1) Investment expenses not included on line 6b, Form 990 \$ (2) Other (specify) Add amounts on lines (1) and (2)	d e 1,207,914	d Amounts included on line 17, Form 990 but not on line a (1) Investment expenses not included on line 6b, Form 990 \$ (2) Other (specify) Add amounts on lines (1) and (2)	d e 1,817,776
e Total revenue per line 12, Form 990 (line c plus line d)	e 1,207,914	e Total expenses per line 17, Form 990 (line c plus line d)	e 1,817,776

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see Specific Instructions on page 26)

[illegible]

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ☐ Yes ☒ No
If "Yes," attach schedule - see Specific Instructions on page 27

Yes	No
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Form 990 (2001)

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 32)

Note Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	128,915	
97 Net rental income or (loss) from real estate					
a debt-financed property					-118,435
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	3,085	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					20,710
103 Other revenue a					
b ROYALTIES			15	19,642	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				151,642	-97,725
105 Total (add line 104, columns (B), (D), and (E))					53,917

Note Line 105 plus line 1d Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 32)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
97A	GRAZING ACTIVITY - TO MAINTAIN THE TALLGRASS PRAIRIE NATIONAL PRESERVE ECOSYSTEM.
102	SALES OF MATERIALS AND PUBLICATIONS RELATED TO AND FOR THE ACCOMPLISHMENT OF THE TRUST'S PRIMARY EXEMPT PURPOSE

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 33)

(A) Name, address and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on page 33)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Anna
Date 1/10/03
ANNA, SENIOR VICE PRESIDENT

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.)

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▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

NATIONAL PARK TRUST, INC.

Employer identification number

52-1691924

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	▶ NONE			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	▶ NONE	

Part III Statements About Activities (See page 2 of the instructions)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>4,913</u> (Must equal amount on line 38, Part VI-A, or line 1 or Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	1 X	
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d X	
e Transfer of any part of its income or assets?	2e	X
3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)	3	X
4 Do you have a section 403(b) annuity plan for your employees?	4	X
Note: Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments.	STMT 21	STMT 22

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is (Please check only ONE applicable box.)

- 5 ☐ A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6 ☐ A school Section 170(b)(1)(A)(ii) (Also complete Part V.)
- 7 ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 ☐ A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9 ☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶ _____
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A.)
- 11 a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A.)
- 11 b ☐ A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A.)
- 12 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4) (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3).)

Provide the following information about the supported organizations (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 ☐ An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting.***Note** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28)	3,725,307	4,766,853	4,600,861	5,710,622	18,803,643
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	52,935	58,582	46,728	30,371	188,616
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	88,997	163,723	223,538	232,991	709,249
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	STMT 23 72	6,794	7,929	12,877	27,672
23 Total of lines 15 through 22	3,867,311	4,995,952	4,879,056	5,986,861	19,729,180
24 Line 23 minus line 17	3,814,376	4,937,370	4,832,328	5,956,490	19,540,564
25 Enter 1% of line 23	38,673	49,960	48,791	59,869	
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				26a 390,811
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b
c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c 19540564
d Add Amounts from column (e) for lines 18 709,249 19 22 27,672 26b					26d 736,921
e Public support (line 26c minus line 26d total)					26e 18803643
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 96.2288 %
27 Organizations described on line 12	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year.				
(2000) (1999) (1998) (1997)	NOT APPLICABLE				
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year.					
(2000) (1999) (1998) (1997)					
c Add Amounts from column (e) for lines 15 16 17 20 21					27c
d Add Line 27a total and line 27b total					27d
e Public support (line 27c total minus line 27d total)					27e
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e)					27f
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h %
28 Unusual Grants. For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V Private School Questionnaire (See page 7 of the instructions)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)	31	

32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		

33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance?	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		

34a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended?	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement		

35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

Check ☐ a if the organization belongs to an affiliated group
 Check ☐ b if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	4,913
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	4,913
39	Other exempt purpose expenditures	39	1,812,863
40	Total exempt purpose expenditures (add lines 38 and 39)	40	1,817,776
41	Lobbying nontaxable amount Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is - Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000	41	240,889
42	Grassroots nontaxable amount (enter 25% of line 41)	42	60,222
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	

Caution If there is an amount on either line 43 or line 44, you must file Form 4720

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 instructions for lines 45 through 50 on page 11 of the instructions)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in) ▶	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
Lobbying nontaxable amount	240,889	374,540	376,091	396,700	1,388,220
45					
Lobbying ceiling amount (150% of line 45(e))					2,082,330
46					
Total lobbying expenditures	4,913	1,139	2,657	3,555	12,264
47					
Grassroots nontaxable amount	60,222	93,635	94,023	99,175	347,055
48					
Grassroots ceiling amount (150% of line 48(e))					520,583
49					
Grassroots lobbying expenditures	4,913	1,139		3,555	9,607
50					

Part VI-B Lobbying Activity by Nonelecting Public Charities
NOT APPLICABLE

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (add lines c through h)

Yes	No	Amount
N/A		

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

FORM 990, PART I - GROSS SALES LESS RETURNS AND ALLOWANCES
=====DESCRIPTION
-----AMOUNT

SALES OF EDUCATIONAL MATERIALS - EXEMPT FUNCTION

52,336.

TOTAL

52,336.
=====

FORM 990, PART I - COST OF GOODS SOLD

INVENTORY AT BEGINNING OF YEAR	
PURCHASES	
SALARIES AND WAGES	
OTHER COSTS	

SUBTOTAL	
MINUS ENDING INVENTORY	

COST OF GOODS SOLD	31,626.
	=====

FORM 990, PART I - OTHER DECREASES IN FUND BALANCES
=====DESCRIPTION
-----AMOUNT

UNREALIZED LOSS ON INVESTMENTS

53,022.

TOTAL

53,022.
=====

FORM 990, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR
AND
FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS
GRANTS PAID
=====

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

CHICAGO TITLE COMPANY

NONE
CHARITABLE

80 ACRES INDIO AREA

17,337

FRIENDS OF BLACKWATER, INC

NONE
CHARITABLE

BLACKWATER CAMPAIGN

8,500

LANUE COUNTY FISCAL COURT

NONE
GOVERNMENTAL

ABRAHAM LINCOLN BOYHOOD HOME PROPERTY

7,500

NATIONAL PARK SERVICE

NONE
GOVERNMENTAL

PUBLIC BUS TOURS OF LANDS

12,614

RIVERSIDE LAND CONSERVANCY

NONE
CHARITABLE

MOJAVE PRESERVE

32,486

FORM 990, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR
AND

RECIPIENT NAME AND ADDRESS

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

TOTAL CONTRIBUTIONS PAID

78,437.

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
COMPUTER SERVICES	89,239.	63,275.	291.	25,673.
LIST RENTAL AND RELATED EXPENS	29,747.	23,201.		6,546.
INSURANCE, LICENSES AND TAXES	62,937.	60,683.	593.	1,661.
BANK SERVICE CHARGES	19,917.	15,951.	448.	3,518.
NEWSLETTER AND PUBLIC EDUCATIO	24,884.	22,616.		2,268.
DUES AND SUBSCRIPTIONS	5,705.	5,408.	168.	129.
MISCELLANEOUS	223.	223.		
TOTALS	232,652.	191,357.	1,500.	39,795.

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE
=====

TO ASSIST IN THE IMPROVEMENT, PROTECTION, AND EXPANSION OF PROPERTIES
HELD OR MANAGED BY THE NATIONAL PARK SERVICE OF THE UNITED STATES
DEPARTMENT OF THE INTERIOR AND BY PARK SERVICES OF STATES AND
LOCALITIES OF THE UNITED STATES

FORM 990, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION -----	GRANTS AND ALLOCATIONS -----	EXPENSES -----
LAND CONSERVATION - PRESERVATION AND EXPANSION OF AMERICA'S NATIONAL SYSTEM OF PARKS (THE PARKS) INCLUDING THOSE REMAINING 4 MILLION PLUS ACRES OF PRIVATELY-OWNED LANDS WITHIN THE EXISTING 375 UNITS OF THE PARKS, THOSE ACRES ADJACENT TO THE EXISTING PARKS, WHICH ARE ESSENTIAL TO THE PRESERVATION OF THE NATURAL AND CULTURAL RESOURCES.	78,437.	897,206.
PUBLIC EDUCATION - NPT, INC. ENCOURAGES THE INVOLVEMENT OF A BROAD ARRAY OF PRIVATE CITIZENS GROUPS AND INDIVIDUALS, FOSTERS KNOWLEDGE, STIMULATES INTEREST AND FACILITATES PARTICIPATION IN THE PRESERVATION OF THE PARKS. THIS IS ACCOMPLISHED THROUGH THE PRINTING AND PUBLICATION OF THE ORGANIZATION'S GENERAL MATERIALS, NEWSLETTER, NEWSPAPER	621,184	
TOTAL	78,437.	1,518,390.

FORM 990, PART IV - INVESTMENTS - SECURITIES
=====

DESCRIPTION -----	ENDING BOOK VALUE -----
CORPORATE BONDS	1,515,927.
CORPORATE STOCKS	1,053,346.
MORTGAGE BACKED SECURITIES	

TOTALS	2,569,273. =====

NATIONAL PARK TRUST, INC.

52-1691924

FORM 990, PART IV - OTHER ASSETS

=====

DESCRIPTION	ENDING BOOK VALUE
-----	-----
ACCRUED INTEREST RECEIVABLE	36,604.

TOTALS	36,604.
	=====

NATIONAL PARK TRUST, INC.

52-1691924

FORM 990, PART IV - DEFERRED REVENUE

DESCRIPTION

ENDING
BOOK VALUE

DEFERRED REVENUE

1,696,851.

TOTALS

1,696,851.

FORM 990, PART IV - MORTGAGES AND OTHER NOTES PAYABLE
=====

LENDER: FARMERS & DROVERS BANK
ORIGINAL AMOUNT: 2,000,000.
INTEREST RATE: 0.075000
DATE OF NOTE: 08/14/1998
REPAYMENT TERMS: MONTHLY PAYMENTS OF \$16,121
PURPOSE OF LOAN: MORTGAGE

BEGINNING BALANCE DUE	1,854,169.
ENDING BALANCE DUE	1,862,764.

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE	1,854,169.
	=====

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE	1,862,764.
	=====

NATIONAL PARK TRUST, INC.

52-1691924

FORM 990, PART IV - OTHER LIABILITIES

DESCRIPTION	ENDING BOOK VALUE
-----	-----
LINE OF CREDIT	185,000.

TOTALS	185,000.
	=====

FORM 990, PART IV-A - OTHER REVENUE ON BOOKS BUT NOT ON RETURN
=====

DESCRIPTION -----	AMOUNT -----
RENTAL EXPENSE	152,205.
COST OF GOODS SOLD	31,625.

TOTAL	183,830.
	=====

FORM 990, PART IV-B - OTHER EXPENSES ON BOOKS BUT NOT ON RETURN
=====

DESCRIPTION -----	AMOUNT -----
RENTAL EXPENSE	152,205.
COST OF GOODS SOLD	31,625.

TOTAL	183,830.
	=====

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
PAUL PRITCHARD 415 SECOND ST, NE STE 210 WASHINGTON, DC 20002	PRESIDENT FULL-TIME	140,000.	39,747.	NONE
DAVINDER KHANNA 415 SECOND ST., NE, STE 210 WASHINGTON, DC 20002	VICE PRESIDENT FULL-TIME	89,250.	15,079.	NONE
DALE CRANE 415 SECOND ST., NE, STE 210 WASHINGTON, DC 20002	DIRECTOR PART-TIME	NONE	NONE	NONE
WILLIAM BROWNELL 415 SECOND ST., NE, STE 210 WASHINGTON, DC 20002	SECRETARY PART-TIME	NONE	NONE	NONE
PAUL DUFFENDACK 415 SECOND ST., NE, STE 210 WASHINGTON, DC 20002	VICE CHAIRMAN PART-TIME	NONE	NONE	NONE
MILTON ENGLISH 415 SECOND ST., NE, STE 210 WASHINGTON, DC 20002	DIRECTOR PART-TIME	NONE	NONE	NONE
ROBERT LAGOMARSINO 415 SECOND ST., NE, STE 210 WASHINGTON, DC 20002	DIRECTOR PART-TIME	NONE	NONE	NONE
STEPHEN MILLER 415 SECOND ST., NE, STE 210 WASHINGTON, DC 20002	CHAIRMAN PART-TIME	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
BARRY SCHIMEL 415 SECOND ST., NE, STE 210 WASHINGTON, DC 20002	TREASURER PART-TIME	NONE	NONE	NONE
ROBIN FARKAS 415 SECOND ST., NE, STE 210 WASHINGTON, DC 20002	DIRECTOR PART-TIME	NONE	NONE	NONE
YVONNE FERRELL 415 SECOND ST., NE STE 210 WASHINGTON, DC 20002	DIRECTOR PART-TIME	NONE	NONE	NONE
JOHN ROLLINS, JR 415 SECOND ST., NE, STE 210 WASHINGTON, DC 20002	DIRECTOR PART-TIME	NONE	NONE	NONE
FRED WILLIAMSON, ST. 415 SECOND ST , NE, STE 210 WASHINGTON, DC 20002	DIRECTOR PART-TIME	NONE	NONE	NONE
PATRICIA WOODS, PH. D. 415 SECOND ST., NE, STE 210 WASHINGTON, DC 20002	DIRECTOR PART-TIME	NONE	NONE	NONE

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D

=====

SEE FORM 990, PART 111 STATEMENT 18

SCHEDULE A, PART III - EXPLANATION FOR LINE 4

=====

THE TRUST AWARDS GRANTS TO INSTITUTIONS DEEMED TO BE BEST SITUATED TP
ACQUIRE PARK LANDS AND TO SUPPORT PARK-RELATED ACTIVITIES.

SCHEDULE A, PART IV-A - OTHER INCOME

DESCRIPTION	2000	1999	1998	1997	TOTAL
MISCELLANEOUS	72.	6,794.	7,929.		14,795.
TOTALS	72.	6,794.	7,929.		14,795.

NATIONAL PARK TRUST, INC
EIN: 52-1691924
FOR YEAR ENDED 06/30/02
FORM 990 PART IV LINE 42
FORM 990 PART II LINE 57

	Balance as of 6/30/2001	Additions	Disposals	Balance as of 6/30/2002	
Land	4,853,291	-	-	4,853,291	
Furniture and Equipment	53,328	7,426	-	60,754	
Leashold Improvements	15,106	-	-	15,106	
Furniture and Equipment	32,570	18,332	-	50,902	
Property for Parks	51,800		-	51,800	
Property for NPS		189,334		189,334	
Total Assets	4,954,295	215,092	-	5,221,187	Line 57a

Furniture and Equipment	28,678	10,350		39,028	
Leashold Improvements	12,287	2,781		15,068	
Furniture and Equipment	27,330	4,849		32,179	
Total Accumulated Depreciation	68,295	17,980	-	86,275	Line 57b

Part II Line 42

Net Book Value	<u>5,134,912</u>	Line 57c
----------------	------------------	----------

NATIONAL PARK TRUST, INC
EIN 52-1691924
FOR YEAR ENDED 06/30/02
FORM 990 PART VI LINE 90A

ALABAMA
ALASKA
ARIZONA
ARKANSAS
CALIFORNIA
CONNECTICUT
FLORIDA
GEORGIA
ILLINOIS
KANSAS
KENTUCKY
LOUISIANA
MAINE
MARYLAND
MASSACHUSETTS
MICHIGAN
MINNESOTA
MISSISSIPPI
MISSOURI
NEW HAMPSHIRE
NEW JERSEY
NEW YORK
NEW MEXICO
NORTH CAROLINA
NORTH DAKOTA
OHIO
OKLAHOMA
OREGON
PENNSYLVANIA
RHODE ISLAND
SOUTH CAROLINA
TENNESSEE
UTAH
VIRGINIA
WASHINGTON
WEST VIRGINIA
WISCONSIN

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury
Internal Revenue Service

► File a separate application for each return

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Note Do not complete **Part II** unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)

Note Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only ☐
All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

Type or print File by the due date for filing your return. See instructions	Name of Exempt Organization		Employer identification number
	NATIONAL PARK TRUST, INC		52-1691924
	Number, street, and room or suite no. If a P O box, see instructions		
	415 SECOND ST, NE		
City, town or post office, state, and ZIP code. For a foreign address, see instructions			
WASHINGTON, DC 20002			

Check type of return to be filed (file a separate application for each return)

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T(sec 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6-month, for 990-T corporation) extension of time until 02/17, 2003, to file the exempt organization return for the organization named above. The extension is for the organization's return for
 ► ☐ calendar year _____ or
 ► ☒ tax year beginning 07/01, 2001, and ending 06/30, 2002

2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____
 b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ _____
 c **Balance Due** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ _____

Signature and Verification

Under penalties of perjury I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Joel C. Susco Title CPA BOND BEEBE, A PROF CORP
1421 PRINCE ST., #240
ALEXANDRIA, VA Date 11/14/2002
For Paperwork Reduction Act Notice, see instruction 22314 Form 8868 (12 2000)