DLN: 93493178002273

Department of the Treasury

# **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

2012

Open to Public Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service A For the 2012 calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31-2012 D Employer identification number B Check if applicable CIVIL WAR PRESERVATION TRUST Address change 54-1426643 Doing Business As CIVIL WAR TRUST Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite 1140 PROFESSIONAL COURT E Telephone number Terminated (301)665-1400 City or town, state or country, and ZIP + 4 HAGERSTOWN, MD 21740 Amended return Application pending **G** Gross receipts \$ 25,316,938 Name and address of principal officer H(a) Is this a group return for O JAMES LIGHTHIZER ┌ Yes 🗸 No 1140 PROFESSIONAL COURT HAGERSTOWN, MD 21740 **H(b)** Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) Tax-exempt status H(c) Group exemption number ▶ Website: ► WWW CIVILWAR ORG K Form of organization 
✓ Corporation 
☐ Trust 
☐ Association 
☐ Other ► L Year of formation 1987 M State of legal domicile VA Part I Summary Briefly describe the organization's mission or most significant activities THE PRESERVATION OF AMERICA'S SIGNIFICANT CIVIL WAR BATTLEFIELDS BY PROTECTING THE LAND AND EDUCATING THE PUBLIC ABOUT THE VITAL ROLES THOSE BATTLEFIELDS PLAYED IN DIRECTING THE COURSE OF OUR NATION'S HISTORY Activities & Governance Check this box 📂 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . 29 4 Number of independent voting members of the governing body (Part VI, line 1b) . 4 28 Total number of individuals employed in calendar year 2012 (Part V, line 2a) . 5 59 54 Total number of volunteers (estimate if necessary) . . . . 6 **7a** Total unrelated business revenue from Part VIII, column (C), line 12 . 7a 0 **b** Net unrelated business taxable income from Form 990-T, line 34 **7**b 0 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 16,511,283 24,195,603 9 Program service revenue (Part VIII, line 2g) . 181,084 182,971 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 17,621 -521,019 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 160,266 626,551 11 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 16,870,254 24,484,106 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . 5,016,182 4,134,070 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 2,856,996 3,159,651 Expenses 5 - 10)16a Professional fundraising fees (Part IX, column (A), line 11e) . . 163,659 149,663 Total fundraising expenses (Part IX, column (D), line 25)  $\blacktriangleright \frac{1,464,860}{}$ b 6,005,887 5,391,978 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 13,449,271 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 13,428,815 19 Revenue less expenses Subtract line 18 from line 12  $\,$  . 3,441,439 11,034,835 Assets or d Balances **Beginning of Current End of Year** Year 20 77,445,637 87,986,290 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . . . . . . 7,338,442 6,305,192 Net assets or fund balances Subtract line 21 from line 20 70,107,195 81,681,098 Signature Block 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

	TK	**	****	2013-06-27					
Sign Here	7	Sıg	nature of officer		Date				
		<u>o</u> j	JAMES LIGHTHIZER PRESIDENT						
		Тур	pe or print name and title						
Doid			Print/Type preparer's name WILLIAM E TURCO CPA	Preparer's signature	Date	I CHECK I II I	PTIN P00369217		
Paid Prepare	Firm's name ► MCGLADREY LLP				Firm's EIN ► 42-0714325				
Use Or			Firm's address - 9737 WASHINGTO	DNIAN BLVD 400	Phone no (301) 296-3600				
			GAITHERSBURG,	MD 208787340					

May the IRS discuss this return with the preparer shown above? (see instructions)

✓ Yes ☐ No

1 0111	JJ0 (2012)				raye 2
Par	Check if Schedule O contains a respi	•			
1	Briefly describe the organization's mission				
	PRESERVATION OF AMERICA'S SIGNIFIC IC ABOUT THE VITAL ROLES THOSE BAT				
2	Did the organization undertake any signification the prior Form 990 or 990-EZ?				┌ Yes ┌ No
	If "Yes," describe these new services on Sc	hedule O			
3	Did the organization cease conducting, or m services?	ake significant	changes in how it cor	nducts, any program	┌ Yes ┌ No
	If "Yes," describe these changes on Schedu	le O			
4	Describe the organization's program service expenses Section 501(c)(3) and 501(c)(4) the total expenses, and revenue, if any, for expenses to the total expenses of the total ex	) organizations a	are required to report		
4a	(Code ) (Expenses \$	7,060,645	ıncludıng grants of \$	4,134,070 ) (Revenue \$	)
	LAND IN 2012, THE CIVIL WAR PRESERVATION TRUE CIVIL WAR BATTLEFIELDS ENDANGERED BY SPRAWL TRANSACTIONS AT 25 BATTLEFIELDS IN 9 STATES, I AVERASBORO, NC, BENTONVILLE, NC, GETTYSBURG, CEDAR MOUNTAIN, VA, CHANCELLORSVILLE, VA, CO PETERSBURG, VA, TOM'S BROOK, VA, WILDERNESS, ANNIVERSARY OF THE AMERICAN CIVIL WAR, THE T BATTLEFIELDS, AND EDUCATING THE PUBLIC REGAR	THROUGH ACQUIS NCLUDING RESACA , PA, SHILOH, TN, F OL SPRING, VA, CR VA AND SUMMIT PO TRUST EXPECTS TO	SITIONS AND GRANTS, TH	E TRUST PRESERVED 3,735 ACRES IN PERRYVILLE, KY, ROWLETT'S STATION ILLE, TN, APPOMATTOX COURT HOUSI ILL, VA, KELLY'S FORD, VA, MIDDLEBU ARTICULARLY DURING THE ONGOING NT RECORD OF SUCCESS IN PRESER'	I 39 COMPLETED I, KY, MANSFIELD, LA, E, VA, CEDAR CREEK, VA, RG, VA, MINE RUN, VA, SESQUICENTENNIAL VING ENDANGERED CIVIL WAR
4b	(Code ) (Expenses \$	2,635,478	including grants of \$	) (Revenue \$	182,971 )
עד	MEMBERSHIP THE CIVIL WAR PRESERVATION TRUS' EVERY MEMBER RECEIVES OUR 48-PAGE MAGAZINE THEIR DIRECT SUPPORT HELPS PRESERVE ENDANG NATION'S HISTORY, AND EDUCATES THEM DIRECTL' DEPENDS UPON ITS MEMBERS TO HELP FULFILL ITS WELL AS ADDITIONAL CHARITABLE GIFTS THE TRUS BEARERS," COMPRISED OF THOSE MEMBERS WHO I APPROXIMATELY 980 INDIVIDUALS AT THE END OF 2 OPENING UP A NEW POOL OF POTENTIAL FUTURE D	T IS A MEMBERSHIF , "HALLOWED GROU ERED CIVIL WAR BAY Y ON HISTORICAL E BATTLEFIELD PRES ET ALSO HAS A MAJO MAKE DUES PAYMER 2012 AT THE END O	P-BASED ORGANIZATION V JND", AS FREE EDUCATIO ATTLEFIELD LAND, ADVANG ELEMENTS OF IMPORTANC ERVATION AND EDUCATIO OR DONOR SOCIETY, AS A NTS OF \$1,000 OR MORE DF 2012, THE TRUST ALSO	VITH MORE THAN 51,000 ACTIVE MEM NAL MEMBERSHIP BENEFIT THE MAG CES THE CAUSE OF EDUCATION ABOU' E ABOUT THE CIVIL WAR AND LAND P IN MISSIONS EVERY YEAR THROUGH T IN SUBSET OF ITS OVERALL MEMBERSH ANNUALLY TOTAL MEMBERSHIP IN TH	MBERS EACH QUARTER, AZINE HIGHLIGHTS HOW T THIS KEY PERIOD IN OUR RESERVATION THE TRUST THEIR DUES PAYMENTS, AS IP, CALLED "THE COLOR HIS GROUP WAS
<b>4</b> c	(Code ) (Expenses \$ EDUCATION IN 2012, THE EDUCATION DEPARTMEN	· · · · · · · · · · · · · · · · · · ·	Including grants of \$	) (Revenue \$	224,292 ) INA MORE THAN 150
	TEACHERS FROM ACROSS THE COUNTRY PARTICIPAL DEPARTMENT ALSO HELD SMALLER, REGIONAL TEACHERS IN ATTENDANCE AT WAR CURRICULUM FOR ELEMENTARY, MIDDLE AND TRUNK PROGRAM MADE AVAILABLE FOUR TRUNKS (YEAR DEPARTMENT STAFF ALSO RELEASED THE BOY IN ASSOCIATION WITH AND ON CIVIL WAR BATTLEF.	ATED IN THIS 3-DAY THER INSTITUTES LA TEACH THE EDUCA HIGH SCHOOL TEA DF CIVIL WAR TEAC OK "THE CIVIL WAR	Y PROFESSIONAL DEVELOF ASTING 1 1/2 DAYS EACH ATION DEPARTMENT CREA ICHERS ALONG WITH OTH ICHING TOOLS AND ACTIVII K KIDS 150," WHICH ENCO	MENT EXPERIENCE, OFFERED FREE ( IN LOS ANGELES, CALIFORNIA AND CI TOUTH WAR HAVERSACK PROGF ER PHYSICAL AND DIGITAL TEACHING TIES THAT TRAVELED THE COUNTRY TOURAGES 8-12 YEAR-OLDS TO VISIT A	OF CHARGE THE HICAGO, ILLINOIS, WITH RAM TO HOUSE THE NEW CIVI ASSETS OUR TRAVELLING HROUGHOUT THE SCHOOL
4d	Other program services (Describe in Sche				
	(Expenses \$ inclu	uding grants of \$	5	) (Revenue \$	)
4e	Total program service expenses 🕨	11,264,253			

art TV	Check	list of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	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 $I^{\bullet}$	3		No
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	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.	5		No
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		No
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	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
C	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		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
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		No
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	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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	21	Yes	
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		No
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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
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		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
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		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part $IV \cdot \cdot \cdot \cdot$	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
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	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm <b>99</b> 0	(2012)

9.1	Statements Regarding Other 1RS Fillings and Tax Compliance			-
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   114		1 63	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
	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			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
)	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
3	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
)	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
1	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
,	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
:	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
•	2. 100/ to the building and the organization menorm obout 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	5c		
a	Does the organization have annual gross receipts that are normally greater than $$100,\!000$ , and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 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		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter	_ <del>-</del> _		
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
ı	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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	13a		
)	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		- •

Form 990 (2012) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No **1a** Enter the number of voting members of the governing body at the end of the tax 29 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 Enter the number of voting members included in line 1a, above, who are Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct 3 Νo  $\hbox{supervision of officers, directors or trustees, or key employees to a management company or other person? \quad .}$ Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Νo Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Nο Νo Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a Νo Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Νo Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes **b** Each committee with authority to act on behalf of the governing body? . . . . . . . . . . . . Yes Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a 10a Did the organization have local chapters, branches, or affiliates? . . . . . . . . . . . . Νo **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing Yes 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . . . . 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . . . . . . 12a Yes b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c Yes 13 Yes 14 Did the organization have a written document retention and destruction policy? . . . . . . . . . . . . . . . 14 Yes 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? a The organization's CEO, Executive Director, or top management official . . . . . . . . . . 15a Yes Yes If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a Νo **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . . . . . . . . . . . . . . .

## **Section C. Disclosure**

- List the States with which a copy of this Form 990 is required to be filed AK, AL, AR, AZ, CA, CO, CT, DC, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MS, MN, MO, MT, NC, ND, NE, NJ, NH, NM, NV, NY, OH, OK,  $\mathsf{OR}$  ,  $\mathsf{PA}$  ,  $\mathsf{RI}$  ,  $\mathsf{SC}$  ,  $\mathsf{SD}$  ,  $\mathsf{TN}$  ,  $\mathsf{TX}$  ,  $\mathsf{UT}$  ,  $\mathsf{VA}$  ,  $\mathsf{VT}$  ,  $\mathsf{WA}$  ,  $\mathsf{WI}$  , WV, WY
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►RUTH HUDSPETH 1140 PROFESSIONAL COURT HAGERSTOWN, MD (301)665-1400

Form	990	(201	2)

Page 7

#### 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 . . . . .

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

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

- ◆ 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, or 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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Officer Institution						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related
	below dotted line)	Individual trustee or director	Institutional Trustee	Cel	Ke) employee	Highest compensated employee	Former			organızatıons
See Additional Data Table										
	•	1	1							Form <b>990</b> (2012)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	A verage Position (do not check hours per more than one box, unless week (list person is both an officer any hours and a director/trustee)								(E) Reportable compensation from related organizations (W-		(F) Estima amount o compens from organizat	ated of other sation the	
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC	,	related organizations		
												$\top$			
												+			
												+			
												+			
												4			
												+			
		+										+			
		+										+			
												$\perp$			
1b	Sub-Total			٠.				<b>-</b>							
С	Total from continuation shee	ts to Part VII, S	ection /	Α.				Þ							
d	Total (add lines 1b and 1c) .					•		<b>*</b>		1,069,910		0		190,996	
2	Total number of individuals (ir \$100,000 of reportable comp						d abov	e) w	ho receive	ed more th	an				
													Yes	No	
3	Did the organization list any <b>f</b>					, key	emplo	yee,	, or highes	t compen	sated employee				
	on line 1a? <i>If</i> "Yes," complete s					•		•				3	$\bot$	No	
4	For any individual listed on lin organization and related organ														
	ındıvıdual		• •					•				4	Yes		
5	Did any person listed on line 1 services rendered to the orga									ganızatıon • • •	or individual for	5		No	
					_							<u> </u>			
	ection B. Independent Co														
1	Complete this table for your fi compensation from the organi													r	
		(A) Name and business						<u> </u>			(B) cription of services		1	<del></del>	
ENVE	LOPES UNLIMITED 649 N HORNERS LA									-	PRODUCTION & MAII	LING		1,294,147	
CARL	TON FIELDS ATTORNEYS AT LAW PO B	OX 3239 TAMPA FL3	3601323	9						LEGAL SERV	/ICES			410,994	
	L SIMMS & LYNCH INC 7704 LEESBURG										ANIMATED MAPS		<del>                                     </del>	132,268 124,556	
	WIDE AWAKE FILMS 315 DELAWARE ST 2ND FLOOR KANSAS CITY MO 64105 CREATING ANIMATED MAPS NEOTREKS INC 15270 BOVARY COURT COLORADO SPRINGS CO 80921 CREATING BATTLE APPS FOR CIVIL										-	119,544			

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

\$100,000 of compensation from the organization 1-6

Form 99			_					Page <b>9</b>
Part V	<b>7</b> 111	Statement o	<b>f Revenue</b> ule O contains a respon	se to any question i	n this Part VIII .			
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
2 × 2	1a	Federated cam	paigns 1a	178,556				
an an	ь	Membership du	es <b>1b</b>	3,094,553				
يَّةِ ق	С	Fundraising eve	ents <b>1c</b>					
ife F	d	Related organiz	ations 1d					
nii.G	e	Government grants	s (contributions) <b>1e</b>	9,820,479				
ons Sir	f	All other contribution	ons, gifts, grants, and <b>1f</b>	11,102,015				
Contributions, Giffs, Grants and Other Similar Amounts	•	sımılar amounts no	ot included above					
Ę Ę	g	Noncash contribute 1a-1f \$	ons included in lines	1,009,860				
Con	h	Total. Add lines	s 1a-1f	🛌	24,195,603			
				Business Code				
JE .	2a	CONFERENCE REG	ISTRATIO	900099	182,971	182,971		
₽	ь							
ъ. Н	С		_					
er Fi	d		_					
ૐ =	е							
Program Service Revenue	f	All other progra	ım service revenue					
Š	g	Total. Add lines	 		182,971			
	3		ome (including dividence		·			
			aramounts)	<b>_</b>	16,737			16,737
	4		tment of tax-exempt bond p	· · · · ·	304,080			304,080
	5	Royalties	(ı) Real	(II) Personal	304,080			304,080
	6a	Gross rents	98,179	(II) Personal				
	ь	Less rental	0					
	c	expenses Rental income	98,179					
	d	or (loss)	me or (loss)		98,179			98,179
	"	Net rental incol	(i) Securities	(II) O ther	55,2.5			30,213
	7a	Gross amount	(i) Securities					
		from sales of assets other		281,175				
	ь	than inventory Less cost or						
		other basis and sales expenses		818,931				
	С	Gain or (loss)		-537,756				
	d	Net gain or (los	s)		-537,756			-537,756
άs	8a	Gross income f events (not inc	=					
Other Revenue		\$						
eve		of contributions See Part IV, lin	reported on line 1c)					
÷ Œ		•	a					
ŧ.	ь	Less direct ex	penses <b>b</b>					
٥	С		loss) from fundraising (	events 🛌				
	9a	Gross income f See Part IV, lin	rom gaming activities					
			a					
	ь	Less direct ex	penses <b>b</b> [					
	С		loss) from gaming activ	⁄ities <b></b> -				
	10a	Gross sales of returns and allo						
		recumb and and	a a	114,470				
	b	Less cost of go	oods sold <b>b</b>	13,901				
	С		(loss) from sales of inve		100,569	100,569		
		Miscellaneous		Business Code	المدمدو	المديديد		
		OTHER REVEN	_	900099	116,101	7 622		
	b	AFFINITY CAR	RDS	900099	7,622	7,622		<b></b>
	C	A 11 - +1-						<b></b>
	d e	All other revenue Total. Add lines	L	🕨				<del>                                     </del>
					123,723			<b></b>
	12	Total revenue.	See Instructions		24,484,106	407,263	C	-118,760

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX (D) (B) (C) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 4,134,070 4,134,070 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and 843,664 650,599 55,968 137,097 key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 1,413,802 Other salaries and wages 1,833,348 121,624 297,922 Pension plan accruals and contributions (include section 401(k) 12,936 9,976 858 and 403(b) employer contributions) . . . . 2,102 292,423 225,505 19,399 Other employee benefits . . . . 47,519 10 177,280 136,711 11,761 28,808 11 Fees for services (non-employees) Management . . . . 412,533 7,287 Legal . . . . . . . . 428,631 8,811 33,500 23,450 3,350 6,700 Professional fundraising services See Part IV, line 17 149,663 149,663 Investment management fees . . . . . Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 440,248 350,773 11,756 77,719 Schedule O) . . . . . . . Advertising and promotion . . 106,769 106,699 70 12 13 Office expenses . . . . . 1,636,698 1,151,649 16,391 468,658 389,475 358,706 7,283 14 Information technology . . . 23,486 15 Royalties . 510,626 406,810 26,930 76,886 16 Occupancy . . . . . . **17** 131,107 122,627 4,013 4,467 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . . 19 Conferences, conventions, and meetings . . . 240,521 227,842 4,245 8,434 20 96,428 96,428 Payments to affiliates . . . . . . 21 22 Depreciation, depletion, and amortization . 178,997 170,351 4,323 4,323 23 79,131 73,038 2,572 3,521 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a MEMBERSHIP FULFILLMENT 845,472 725,528 119,944 LAND MAINTENANCE 633,206 633,206 **EDUCATIONAL PROGRAMS** 161,934 161,934 d OTHER EXPENSES 1,955 34,900 32,795 150 e All other expenses 58,244 42,943 15,127 174 Total functional expenses. Add lines 1 through 24e 25 13,449,271 11,264,253 720,158 1,464,860 Joint costs. Complete this line only if the organization 26 reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► [ if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

	't X	Check if Schedule O contains a response to any question in thi	s Part	х							
					(A) Beginning of year		(B) End of year				
	1	Cash—non-interest-bearing			174,692	1	232,625				
	2	Savings and temporary cash investments			9,239,908	2	8, 185, 141				
	3	Pledges and grants receivable, net			185,575	3	1,080,786				
	4	Accounts receivable, net			26,226	4	100,000				
	5	Loans and other receivables from current and former officers, of employees, and highest compensated employees. Complete P. Schedule L	lirecto art II	ors, trustees, key of		5					
Assets	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	contrı mploy	buting employers		6					
χ. Ψ.	7	Notes and loans receivable, net				7					
₹	8	Inventories for sale or use				8					
	9		Prepaid expenses and deferred charges								
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		78,103,385	425,406	9	532,039				
	ь	Less accumulated depreciation	10b	617,672	67,097,426	10c	77,485,713				
	11	Investments—publicly traded securities	<u> </u>	234,986		312,528					
	12	Investments—other securities See Part IV, line 11	,	12	,						
	13	Investments—program-related See Part IV, line 11				13					
	14	Intangible assets				14					
	15	Other assets See Part IV, line 11			61,418		57,458				
	16	Total assets. Add lines 1 through 15 (must equal line 34).			77,445,637		87,986,290				
	17	Accounts payable and accrued expenses			281,051	17	268,918				
	18	Grants payable	201,001	18	200,010						
	19	Deferred revenue	•		56,015		66,825				
	20	Tax-exempt bond liabilities			5,200,000		5.000.000				
	21	Escrow or custodial account liability Complete Part IV of Sch			3,200,000	21	3,000,000				
<u>ē</u>	22	Loans and other payables to current and former officers, direct		21							
Liabiliti		key employees, highest compensated employees, and disquali	fied	,							
逗		persons Complete Part II of Schedule L				22					
	23	Secured mortgages and notes payable to unrelated third partie	s .	•	1,225,000	23	250,000				
	24	Unsecured notes and loans payable to unrelated third parties				24					
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	rt X o	f Schedule	576,376	25	719,449				
	26	D			7,338,442	26	6,305,192				
— —	20	Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.			7,000,442	20	0,000,102				
Ĭ	27	Unrestricted net assets			3,649,515	27	6,424,988				
<u> </u>	28	Temporarily restricted net assets			66,457,680		75,256,110				
— —	29	Permanently restricted net assets			, ,	29	, ,				
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check h									
Ξ		complete lines 30 through 34.		•							
2) 2)	30	Capital stock or trust principal, or current funds	•			30					
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31					
Ą	32	Retained earnings, endowment, accumulated income, or other	funds			32					
Net	33	Total net assets or fund balances			70, 107, 195	33	81,681,098				
_	34	Total liabilities and net assets/fund balances			77,445,637	34	87,986,290				

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				৮			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		24,4	184,106			
2	Total expenses (must equal Part IX, column (A), line 25)	2	2 13,449,2					
3	Revenue less expenses Subtract line 2 from line 1	3	<b>3</b> 11,034,8					
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4						
5	Net unrealized gains (losses) on investments	5			,			
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9		Ę	39,068			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		81,6	81,098			
Par	t XII Financial Statements and Reporting							
	Check if Schedule O contains a response to any question in this Part XII				. $\sqsubset$			
				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?		2a		No			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ved on						
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes				
	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	rate						
	Separate basis Consolidated basis Both consolidated and separate basis							
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	of the	2c	Yes				
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	1						
За	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?	<b>2</b>	За	Yes				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes				

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493178002273

**Employer identification number** 

OMB No 1545-0047

# **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

CIVIL WAR PRESERVATION TRUST

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Open to Public Inspection

									54-1426			
	t I			blic Charity Sta						nstruction	s.	
The o	rganı	zatıon ıs	not a priva	te foundation becaus	seitis (Forl	lines 1 thro	ough 11, chec	k only one	box )			
1			•	ion of churches, or a				section 170	)(b)(1)(A)(i).			
2	Γ	A scho	ol described	d in <b>section 170(b)(</b> 1	<b>L)(A)(ii).</b> (At	tach Sche	dule E )					
3		A hosp	ital or a cod	perative hospital se	rvice organiz	zation desc	ribed in <b>secti</b>	on 170(b)(	1)(A)(iii).			
4	Г			h organization opera	ted ın conjun	iction with	a hospital des	scribed in <b>s</b>	ection 170(b)	(1)(A)(iii).	Enter the	
5	_			ity, and state	t of a college	or univer	city owned or	operated by	v a governmer	tal unit doc	cribed in	
,	'	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)								scribed iii		
6	_			local government o	•	tal unit des	cribed in <b>sect</b>	ion 170(h)	(1)(4)(4)			
7	<u>'</u>			at normally receives						from the ae	neral nublic	
•	,-			on 170(b)(1)(A)(vi).			3 Support Hon	ra governi	nental unit of	nom the ge	neral public	
8	Γ			described in <b>sectio</b>			omplete Part I	I)				
9	Γ	An org	anızatıon th	at normally receives	(1) more th	ian 331/3%	of its support	from conti	rıbutıons, men	nbership fee	es, and gross	
		receipt	s from activ	rities related to its e	xempt functı	ons—subje	ct to certain e	exceptions	, and (2 ) no m	ore than 33	1/3% of	
		ıts sup	port from gr	oss investment inco	me and unre	lated busır	ness taxable i	ncome (les	s section 511	tax) from l	ousinesses	
		acquire	ed by the org	ganızatıon after June	30,1975 S	ee <b>sectior</b>	1 <b>509(a)(2).</b> (0	Complete P	art III )			
10	Γ	An org	anızatıon or	ganızed and operate	d exclusively	to test fo	r public safety	See <b>secti</b>	on 509(a)(4).			
11	Γ			ganized and operate								
				ly supported organiz ibes the type of supp						ee <b>section</b>	<b>509(a)(3).</b> Check	
			Type I							on-function	nally integrated	
е	$\Gamma$		• •	ox, I certify that the								
		othert	han foundat	on managers and ot								
			1 509(a)(2)			C	DC +b -+ -+	T T.	<b> </b>			
f			rganization this box	received a written d	etermination	from the I	RS that it is a	Type I, Ty	pe II, or I ype	e III suppoi	ting organization,	
g				2006, has the organ	ızatıon accep	oted any gi	ft or contribut	ion from ar	ny of the		,	
			ng persons?									
				irectly or indirectly of	•		_	n persons d	lescribed in (ii		Yes No	
				governing body of th		_	on?				lg(i)	
		• •	•	er of a person descr	• •						g(ii)	
_				lled entity of a perso						11	g(iii)	
h		Provide	e the followi	ng information about	the support	ed organiza	ation(s)					
(i	) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did yo	u notify	(vi) Is	the	(vii) A mount of	
	uppoi			organization	organizati		the organ		organiza		monetary	
or	ganiz	ation		(described on lines 1- 9 above	col (i) lıs your gove		ın col (i) suppo		col (i) org		support	
				or IRC section	docume	_	Suppo	10.	III the t	, , ,		
				(see		-						
				instructions))	Yes	No	Yes	No	Yes	No	7	
						1	+	1	1	<del> </del>		
Total			<del>                                     </del>			1	1	1				

supported organization

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do 12,026,415 18,901,103 22,356,767 16,511,283 24,732,803 94,528,371 not include any "unusual grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 12,026,415 18,901,103 22,356,767 16,511,283 24,732,803 94,528,371 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 138,996 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 94,389,375 from line 4 Section B. Total Support Calendar year (or fiscal year (c) 2010 (e) 2012 (a) 2008 **(b)** 2009 (d) 2011 (f) Total beginning in) 🟲 12,026,415 22,356,767 16,511,283 24,732,803 Amounts from line 4 18,901,103 94,528,371 Gross income from interest, dividends, payments received on 90,502 securities loans, rents, royalties 104,731 159,382 134,645 418,996 908,256 and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 331,917 62,616 57,825 36,926 124,279 613,563 capital assets (Explain in Part IV) 11 Total support (Add lines 7 96,050,190 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 98 270 % Public support percentage for 2011 Schedule A, Part II, line 14 15 97 870 % 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box **▶**▼ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6 )						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	<b>(b)</b> 2009	(c) 2010	( <b>d)</b> 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493178002273

## OMB No 1545-0047

Inspection

### **SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** CIVIL WAR PRESERVATION TRUST 54-1426643 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes 3 Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

section 4911 tax for this year?

┌ Yes ┌ No

# Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

Check	<b>▶</b> □	ıf the filing	organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, E	ĪN,
		expenses	and share of excess lobbying expenditures)	

B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	<b>(b)</b> Affiliated group totals		
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	85			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	188,314			
c	Total lobbying expenditures (add lines 1a and 1b	Total lobbying expenditures (add lines 1a and 1b)				
d	O ther exempt purpose expenditures	12,732,592				
e	Total exempt purpose expenditures (add lines 1	12,920,991				
f	Lobbying nontaxable amount Enter the amount f	796,050				
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:				
	Not over \$500,000	20% of the amount on line 1e				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000				
	Over \$1,000,000 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				
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	199,013			
h	Subtract line 1g from line 1a If zero or less, ente	er-0-	0			
i	Subtract line 1f from line 1c If zero or less, ente	r-0-	0			
j	If there is an amount other than zero on either lir	ne 1h or line 1i, did the organization file Form 472	0 reporting	□ Ves □ No		

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five

columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) Total beginning in) Lobbying nontaxable amount 748,162 633,184 821,631 796,050 2,999,027 Lobbying ceiling amount 4,498,541 (150% of line 2a, column(e)) 83,119 70,283 188,399 Total lobbying expenditures 133,755 475,556 Grassroots nontaxable amount 187,041 158,296 205,408 199,013 749,758 Grassroots ceiling amount 1,124,637 (150% of line 2d, column (e)) 182 2,031 2,586 Grassroots lobbying expenditures

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has Notice filed Form 5768 (election under section 501(h)).	ОТ			7 0	ge <b>S</b>
	Week Week was a second to be a second to be a second to be a second to be a second to the second to	( 6	a)		(b)	
activ	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying vity.	Yes	No	1	Amoun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities?					
j	Total Add lines 1c through 1:					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 505(c)(6).	01(c	)(5), (	or s		
_			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			3		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?					
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 505(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
	Current year	2a				
b	Carryover from last year	2b				
C	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier Return Reference Explanation

DLN: 93493178002273

OMB No 1545-0047

**SCHEDULE D** (Form 990)

**Supplemental Financial Statements** ► Complete if the organization answered "Yes," to Form 990,

Open to Public Department of the Treasury Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b Inspection Internal Revenue Service ► Attach to Form 990. ► See separate instructions. **Employer identification number** Name of the organization CIVIL WAR PRESERVATION TRUST 54-1426643 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) 🔽 Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure ✓ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b 237 00 Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year -Number of states where property subject to conservation easement is located 🛌 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

#### Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
  - (i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Par	Organizations Maintaining Co	illections of Ar	t, HIS	storicai II	reasures, or O	tne	r Similar Asse	<b>ts</b> (contir	าued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	ds, cl	heck any of	the following that a	are a	significant use of	ıts	
а	Public exhibition		d	┌ Loan	or exchange progi	ams	;		
b	Scholarly research		e	┌ Othe	r				
С	Preservation for future generations								
4	Provide a description of the organization's c	ollections and expla	ain ho	w they furth	er the organization	's ex	xempt purpose in		
•	Part XIII				-				
5	During the year, did the organization solicit assets to be sold to raise funds rather than							Yes $ extstyle  $	No
Par	t IV Escrow and Custodial Arrang		-				•		
	Part IV, line 9, or reported an ar							<u>,                                      </u>	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	dian or other interm	edıary	for contribu	utions or other ass	ets	not $ u$	Yes $ extstyle  $	No
b	If "Yes," explain the arrangement in Part XI $$	II and complete the	follo	wing table	_				
							Amou	nt	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on F	orm 990, Part X, lır	e 21?	•			Γ	Yes $ extstyle  $	No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anation has	been provided in P	art :	XIII	Г	_
Pa	rt V Endowment Funds. Complete								
	•	(a)Current year	(b)	<b>)</b> Prior year		_	Three years back (e		
1a	Beginning of year balance	66,457,680		64,948,567		_	832,858		97,512
b	Contributions	13,689,460		7,830,683	13,300,86	8	56,524,504	28	83,925
С	Net investment earnings, gains, and losses								
d	Grants or scholarships					1			
е	Other expenditures for facilities					1			
	and programs	4,891,030		6,321,570	1,743,64	1	3,966,022		48,579 ———
f	Administrative expenses					_			
g	End of year balance	75,256,110		66,457,680	64,948,56	7	53,391,340	83	32,858
2	Provide the estimated percentage of the cur	rent year end balan	ce (lır	ne 1g, colum	nn (a)) held as				
а	Board designated or quasi-endowment ►								
b	Permanent endowment ►								
С	Temporarily restricted endowment ► 100	000 %							
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%							
За	Are there endowment funds not in the posse	ssion of the organiz	ation	that are hel	d and administere	d for	the		
	organization by						[ _ r)		lo_
	(i) unrelated organizations					•	3a(i)		0
b	(ii) related organizations					•	3a(ii)		0
4	Describe in Part XIII the intended uses of the	·				•	30	<u> </u>	—
	t VI Land, Buildings, and Equipme				10.				
	Description of property			(a) Cost or basis (invest	other (b)Cost or of		(c) Accumulated depreciation	(d) Book v	alue
					<u> </u>	•			
	Land		•		72,639			72,63	39,980
	Buildings		•		3,898	-	<del>                                     </del>		9,383
	Leasehold improvements		•		1,196		<del>                                     </del>	95	50,043
	Equipment		-		367	,918	181,611	18	36,307
	Other						<u> </u>		
Tota	<b>I.</b> Add lines 1a through 1e <i>(Column (d) must e</i>	equal Form 990, Part	X, colι	umn (B), line	10(c).)		🕨	77,48	35,713

Part VIII Investments—Other Securities. S			
(a) Description of security or category	(b)Book value		od of valuation
(including name of security)		Cost or end-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>F</b>		
Part VIII Investments—Program Related.	See Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value		od of valuation
(a) Decemporaries and the control of	(2) Book raids		f-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	Los 45		
Part IX Other Assets. See Form 990, Part X			(h) Baak walus
(a) Des	cription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	e 15.)	<b>.</b>	
Part X Other Liabilities. See Form 990, Pa			
1 (a) Description of liability	(b) Book value		
Federal income taxes			
	220.440		
DEFERRED RENT	229,448		
DEFERRED COMPENSATION PAYABLE	323,676		
FAIR VALUE OF INTEREST RATE SWAP	166,325		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)  2. Fin 48 (ASC 740) Footnote. In Part XIII, provide the	,		

Sche	dule D (Form 990) 2012				Page <b>4</b>
Pai	t XI Reconciliation of R	evenue per Audited Finan	cial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and othe	r support per audited financial sta	tements	1	25,108,590
2	Amounts included on line 1 bu	it not on Form 990, Part VIII, line	12		
а	Net unrealized gains on invest	ments	2a		
b	Donated services and use of f	acılıtıes	<b>2b</b> 23,283		
C	Recoveries of prior year grants	s	2c		
d	Other (Describe in Part XIII )		<b>2d</b> 587,300		
е	Add lines <b>2a</b> through <b>2d</b> .			2e	610,583
3	Subtract line ${f 2e}$ from line ${f 1}$ .			3	24,498,007
4	Amounts included on Form 99	0, Part VIII, line 12, but not on li	ne <b>1</b>		
а	Investment expenses not incl	uded on Form 990, Part VIII, line	7b <b>. 4a</b>		
b	Other (Describe in Part XIII )		<b>4b</b> -13,901		
С	Add lines <b>4a</b> and <b>4b</b>			<b>4</b> c	-13,901
5	Total revenue Add lines 3 and	d <b>4c.</b> (This must equal Form 990, F	Part I, line 12).......	5	24,484,106
Par			ncial Statements With Expenses	per	
1		r audited financial statements .		1	12,987,399
2		t not on Form 990, Part IX, line 2	1 1		
а	Donated services and use of fa	acılıtıes	<b>2a</b> 23,283		
b	· •				
С					
d	Other (Describe in Part XIII )		<b>2d</b> 66,618		
е	-			2e	89,901
3				3	12,897,498
4		0, Part IX, line 25, but not on line	1 1		
a	•	uded on Form 990, Part VIII, line			
b	·		<b>4b</b> 551,773		
_ C	Add lines <b>4a</b> and <b>4b</b>			4c	551,773
5	<u> </u>	•	Part I, line 18)	5	13,449,271
	t XIII Supplemental Inf		0.5 10.5 1.77		
Par	V, line 4, Part X, line 2, Part XI		s 3, 5, and 9, Part III, lines 1a and 4, P les 2d and 4b Also complete this part to		
11110	rmation Identifier	Return Reference	Explanat	ion	
		PART II, LINE 9	<del> </del>		CORDED AC AN
	CRIPTION OF HOW ANIZATION REPORTS	PART II, LINE 9	CONSERVATION EASEMENTS AF ASSET ON THE BALANCE SHEET		
CON	SERVATION EASEMENTS		A WRITTEN DOCUMENT REGARD		
			MONITORING, INSPECTION, VIC		
			HOLD		
	CRIPTION OF INTENDED USE NDOWMENT FUNDS	PART V, LINE 4	THE CIVIL WAR PRESERVATION SAVE AND PRESERVE MORE THA		
OFE	NDOWMENT FUNDS		BATTLEFIELD LAND AT 110 BATT		
			DIFFERENT STATES \$72,639,98		
			RESTRICTED ENDOWMENT IS PR LAND THE REMAINING AMOUNT		
			LAND ACQUISITION AND OTHER		
	RIPTION OF UNCERTAIN	PART X, LINE 2	CWT (CIVIL WAR PRESERVATION		•
TAX	POSITIONS UNDER FIN 48		(ENDANGERED BATTLEFIELD DE GENERALLY EXEMPT FROM FEDE		•
			UNDER THE PROVISIONS OF SEC	TION	N 501(C)(3) OF THE
			INTERNAL REVENUE CODE AFBE BATTLEFIELD PROTECTION)IS G		
			FEDERAL INCOME TAXES UNDER		
			SECTION 501(C)(4) OF THE INTE		
			ADDITION, CWT AND EBDF QUAI CONTRIBUTION DEDUCTIONS A		
			CLASSIFIED AS ORGANIZATION		
			FOUNDATIONS CONTRIBUTION DEDUCTIBLE TO DONORS INCO		
			TO EXEMPT PURPOSES, LESS AP		
			IS SUBJECT TO FEDERAL AND ST		
			TAXES NEITHER CWT, AFBP, NO UNRELATED BUSINESS INCOME		
			DECEMBER 31, 2012 THE ACCO	IITNU	NG STANDARD ON
			ACCOUNTING FOR UNCERTAINT (FASB ASC TOPIC 740-10) ADDR		
			DETERMINATION OF WHETHER T		
			OR EXPECTED TO BE CLAIMED O		
			BE RECORDED IN THE FINANCIA THIS GUIDANCE, CWT, AFBP, AN		
			THE TAX BENEFIT FROM AN UNC		
			ONLY IF IT IS MORE-LIKELY-THA		
			POSITION WILL BE SUSTAINED ( TAXING AUTHORITIES, BASED O		
			MERITS OF THE POSITION THE	TAXE	BENEFITS
			RECOGNIZED IN THE FINANCIAL SUCH A POSITION ARE MEASUR		
			LARGEST BENEFIT THAT HAS A G		
			LIKELIHOOD OF BEING REALIZE SETTLEMENT THE GUIDANCE O		
			UNCERTAINTY IN INCOME TAXE		
			RECOGNITION, CLASSIFICATIO		
			PENALTIES ON INCOME TAXES, INTERIM PERIODS MANAGEMEN		
			AND EBDF'S TAX POSITIONS AN	D COI	NCLUDED THAT THEY
			HAVE TAKEN NO UNCERTAIN TA REQUIRE ADJUSTMENT TO THE		
			FINANCIAL STATEMENTS TO CO		
			PROVISIONS OF THIS GUIDANC		
			AND EBDF ARE NO LONGER SUBJEXAMINATIONS BY THE U S FED		
		ı			
			TAX AUTHORITIES BEFORE 2009		
	XI, LINE 2D - OTHER		CONSOLIDATED ENTITY ACTIVI	TIES	- AMERICANS FOR
	XI, LINE 2D - OTHER			TIES SP)20 TIES	- AMERICANS FOR ,100 - ENDANGERED

PART XI, LINE 4B - OTHER

PART XII, LINE 2D - OTHER

PART XII, LINE 4B - OTHER

ADJUSTMENTS

ADJUSTMENTS

ADJUSTMENTS

COST OF SALES REPORTED ON LINE 10B -13,901

20,000

COST OF SALES 13,901 CONSOLIDATED ENTITY ACTIVITIES - AFBP 23,707 CONSOLIDATED ENTITY ACTIVITIES - EBDF 29,010

501(C)(4) EXPENSES 14,573 GRANT TO EBDF, RELATED ENTITY 517,200 GRANT TO AFBP, RELATED ENTITY

THE ORGANIZATION HAS A WRITTEN DOCUMENT REGARDING THE PERIODIC MONITORING, INSPECTION,

VIOLATIONS, AND ENFORCEMENT OF THE

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

DLN: 93493178002273

OMB No 1545-0047

**SCHEDULE G** (Form 990 or 990-EZ)

Department of the Treasury

**Supplemental Information Regarding** 

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Internal Revenue Service Name of the organization **Employer identification number** CIVIL WAR PRESERVATION TRUST 54-1426643

1	Indicate whether the orga	nızatıon raısed funds t	:hrough ar	ny of the i	following activities Che	ck all that apply	
а	Mail solicitations			е	□ Solicitation of non	-government grants	
b	☐ Internet and email so	licitations		f	□ Solicitation of gov	ernment grants	
c	Phone solicitations			g	Special fundraising	g events	
d	✓ In-person solicitation	S					
	Did the organization have or key employees listed in If "Yes," list the ten highe to be compensated at leas	n Form 990, Part VII) st paid individuals or	or entity entities (f	ın connec	ction with professional f	undraising services?	<b>▼ Yes                                   </b>
	(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of utions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
			Yes	No			
	PUBLIC INTEREST COMM 7700 LEESBURG PIKE SUITE 301	PHONE SOLICITATIONS		No	30,237	17,395	12,842
	FALLS CHURCH, VA 22043						
	O DELL SIMMS & LYNCH INC 7700 LEESBURG PIKE SUITE 2	CONSULTANT - FUNDRAISING CAMPAIGN, SPONSORSHIP & MAJOR DONOR		No	0	132,268	-132,268
	FALLS CHURCH, VA 22043						
<b>.</b>				<u> </u>	22.22	110.000	
Tot					30,237	149,663	-119,426
3	List all states in which the licensing	e organization is regist	ered or li	censed to	o solicit funds or has be	en notified it is exempt	from registration or
	AK, AZ, AR, CA, CO, CT, D OH, OK, OR, PA, RI, SC, S					MS, MO, MT, NE, NV, I	NH, NJ, NM, NY, NC,

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.										
			(a) Event #1	<b>(b)</b> Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))				
als.			(event type)	(event type)	(total number)					
Revenue	1	Gross receipts								
ξeV6	2	Less Contributions								
<u></u>	3	Gross income (line 1 minus line 2)								
	4	Cash prizes								
ın.	5	Noncash prizes								
agus Be	6	Rent/facility costs								
Expenses	7	Food and beverages .								
Direct	8	Entertainment								
ā	9	Other direct expenses .								
	10	Direct expense summary Add line	es 4 through 9 ın colum	nn (d)		( )				
	11	Net income summary Combine lir								
Par	t II	<b>Gaming.</b> Complete if the or \$15,000 on Form 990-EZ, lin		d "Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than				
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))				
<u>₩</u>	1	Gross revenue								
ses	2	Cash prizes								
Expenses	3	Non-cash prizes								
	4	Rent/facility costs								
Drea	5	Other direct expenses								
	6	Volunteerlabor	│ Yes │ No	☐ Yes	☐ Yes	_				
	7	Direct expense summary Add lines	s 2 through 5 in column	(d)	🛌					
	8	Net gaming income summary Com	bine lines 1 and 7 in co	lumn (d)	🛌					
9 a b	Is	ter the state(s) in which the organiza the organization licensed to operate 'No," explain	gaming activities in ea	ch of these states?						
10a b		Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No  If "Yes," explain								

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gaming?		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ed by the third party 🟲 \$		
C	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address ►			
<b>.6</b>	Gaming manager information			
	Name 🟲			
	Gaming manager compensation <b>I</b>	<b>\$</b> \$		
	Description of services provided	<b>&gt;</b>		
	☐ Director/officer	Employee	Independent contractor	
.7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Г <sub>Yes</sub> Г <sub>No</sub>
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent
		activities during the tax year 🟲 💲		
Par	columns (III) and (v), a	<b>mation.</b> Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493178002273 OMB No 1545-0047

Governments and Individuals in the United States

Schedule I

(Form 990)

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

**Grants and Other Assistance to Organizations,** 

Department of the Treasury nternal Revenue Service			Attach to Form 990				Inspection
lame of the organization						Employer identificati	
CIVIL WAR PRESERVATION TRUST						54-1426643	
Part I General Information	n on Grants and	d Assistance				•	
Does the organization maintain re the selection criteria used to awa	ard the grants or as	sistance?					✓ Yes
2 Describe in Part IV the organizat							
<b>Part II Grants and Other As</b> Form 990, Part IV, line							es" to
(a) Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grader or assistance
See Addıtıonal Data Table							
	1						
2 Enter total number of section 50						<b>-</b> _	21
3 Enter total number of other organ	nizations listed in th	ne line 1 table				•	1

100	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22
	Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	<b>(d)</b> A mount of non-cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	,	SCHEDULE I, PART I, LINE 2 MOST OF CWPT'S GRANTS ISSUED ARE REIMBURSEMENT GRANTS TO AID IN ACQUIRING LAND OR CONSERVATION EASEMENTS THE GRANT IS NOT ISSUED UNTIL THE LAND OR EASEMENT HAS BEEN ACQUIRED OR AT THE TIME OF SETTLEMENT THESE TYPES OF GRANTS DO NOT NEED MONITORING

Schedule I (Form 990) 2012

(h) Purpose of grant

Software ID: **Software Version:** 

**EIN:** 54-1426643

Name: CIVIL WAR PRESERVATION TRUST

assistance

**(b)** EIN (c) IRC Code section (d) Amount of cash (e) Amount of non-(a) Name and address of (f) Method of (g) Description of organization or government valuation (book, FMV, appraisal, ıf applıcable grant cash non-cash assistance or assistance

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

					other)		
FRIENDS OF HARPERS FERRY NATIONAL HISTORICAL PARK253 PROSPECT AVE 25425 HARPERS FERRY, WV 25425	20-4286082	501(C)(3)	26,925				APPRAISALS & EXTENSION OF CONTRACT ON 2 39 ACRE DRUMHELLER TRACT AT HARPERS FERRY, WV
CENTRAL VIRGINIA BATTLEFIELDS TRUSTPO BOX 3417 FREDERICKSBURG, VA 22402	54-1828344	501(C)(3)	95,000				TO AID IN ACQUISITION OF 13 95 ACRE PARTAIN TRACT, CHANCELLORSVILLE, VA
COMMONWEALTH OF KENTUCKY500 MERO ST FRANKFURT,KY 40601	61-0600439	GOVERN	33,955				TO AID IN ACQUIRING CONSERVATION EASEMENT ON 15 565 ACRE SATTERLY TRACT,
STATE OF MARYLAND DEPARTMENT OF NATURAL RESOURCES580 TAYLOR AVE ANNAPOLIS,MD 21401	52-6002033	GOVERN	12,875				PERRYVILLE, KY  APPRAISAL & TITLE  SEARCH TO AID IN  ACQUIRING  CONSERVATION  EASEMENT ON 272  ACRE BAPTIST  CONVENTION TRACT,
COMMONWEALTH OF VIRGINIA DEPARTMENT OF HISTORIC RESOURCES 2801 KENSINGTON AVE RICHMOND, VA 23221	54-0805908	GOVERN	6,000				SOUTH MOUNTAIN, MD  APPRAISAL TO AID IN ACQUIRING CONSERVATION EASEMENT ON 79 699 ACRE SIMPSON TRACT,
BLUE GRASS CONSERVANCY380 S MILL ST206 LEXINGTON, KY 40508	61-1293032	501(C)(3)	202,516				SAILOR'S CREEK, VA  APPRAISAL & AID IN  ACQUIRING  CONSERVATION  EASEMENT ON  311 103 HANKLA  TRACT, PERRYVILLE,  KY
SHENANDOAH VALLEY BATTLEFIELD FOUNDPO BOX 897 NEW MARKET, VA 22844	54-2007460	501(C)(3)	50,000				TO AID IN ACQUIRING CONSERVATION EASEMENT ON 163 35 KIBLER TRACT, TOM'S BROOKS, VA
LAND CONSERVANCE OF ADAMS CO INC670 OLD HARRISBURG RD GETTYSBURG,PA 17325	23-2827874	501(C)(3)	9,500				APPRAISAL TO AID IN ACQUIRING CONSERVATION EASEMENT ON 53 11 ACRE MARINOS TRACT, GETTYSBURG, PA
SHENANDOAH VALLEY BATTLEFIELD FOUNDPO BOX 897 NEW MARKET, VA 22844	54-2007460	501(C)(3)	228,000				TO AID IN ACQUIRING CONSERVATION EASEMENT ON 83 ACRE MILLER TRACT, CROSS KEYS, VA
THE LAND TRUST FOR TENNESSEE INC209 10TH AVESOUTHST 511 NASHVILLE,TN 37203	62-1770549	501(C)(3)	14,000				TO AID IN ACQUISITION OF 19 043 ACRE ASHWORTH TRACT, NEW JOHNSONVILLE, TN
CENTRAL VIRGINIA BATTLEFIELDS TRUSTPO BOX 3417 FREDERICKSBURG, VA 22402	54-1828344	501(C)(3)	16,279				APPRAISAL & ENVIRONMENTAL TO AID IN ACQUISITION OF 81 0 ACRE LINK/ATKINS TRACT, WILDERNESS, VA
COMMONWEALTH OF VIRGINIA DEPARTMENT OF HISTORIC RESOURCES 2801 KENSINGTON AVE RICHMOND,VA 23221	54-0805908	GOVERN	1,018,678				APPRAISAL, SURVEY, TITLE POLICY, & AID IN ACQUIRING CONSERVATION EASEMENT ON 964 ACRE TRIPLE S TRACT, KELLY'S FORD, VA
CIVIL WAR HELENA PROJECTC/O SOUTHERN BANCORP CAPITAL PARTNERS 502 CHERRY ST HELENA,AR 72342	58-1766093	501(C)(3)	107,016				TO AID IN ACQUISITION OF 56 ACRE ESTEVEN HALL TRACT, HELENA, AR
LAND TRUST OF THE EASTERN PANHANDLEPO BOX 2240 MARTINSBURG, WV 254022240	55-0742460	501(C)(3)	22,500				STEWARDSHIP FEES FOR ACQUISITION OF 270 CLAYMONT TRACT, SUMMITT POINT, WV
STATE OF MARYLAND DEPARTMENT OF NATURAL RESOURCES580 TAYLOR AVE ANNAPOLIS,MD 21401	52-6002033	GOVERN	12,654				APPRAISAL, ENVIRONMENTAL, & SURVEY TO AID IN THE ACQUISITION OF 14 ACRE TIEMAN TRACT, SOUTH MOUNTAIN, MD
RICHMOND BATTLEFIELDS ASSOC10407 LEANDER DR GLEN ALLEN,VA 23060	54-2022908	501(C)(3)	82,500				TO AID IN ACQUISITION OF 7 3 ACRE NOLTE TRACT, COLD HARBOR, VA
COMMONWEALTH OF VIRGINIA DEPARTMENT OF HISTORIC RESOURCES 2801 KENSINGTON AVE RICHMOND,VA 23221	54-0805908	GOVERN	19,100				APPRAISAL & SURVEY TO AID IN ACQUIRING CONSERVATION EASEMENT ON 954 7 ACRE HOLY CROSS ABBEY, COOL SPRING, VA
US DEPT OF INTERIOR NATIONAL PARK SERVICE 200 CHESTNUT ST PHILADELPHIA, PA 19106	53-0197094	GOVERN	5,633				ENVIRONMENTAL TO AID IN ACQUIRING CONSERVATION EASEMENT ON 5 ACRE CLAPP TRACT, CEDAR CREEK, VA
ENDANGERED BATTLEFIELD DEFENSE 7777 WASHINGTON AVE HOUSTON,TX 77007	27-1035136	501(C)(3)	517,200				GRANT TO PAY LOC
AMERICANS FOR BATTLEFIELD PRESERVATION1156 15TH ST NW SUITE 900 WASHINGTON, DC 20005	04-3843239	501(C)(4)	20,000				GRANT FOR SET-UP
US DEPT OF INTERIOR NATIONAL PARK SERVICE 1849 C STREET NW WASHINGTON, DC 20240	53-0197094	GOVERN		898,354	APPRAISAL	LAND	BATTLEFIELD PRESERVATION
STATE OF NORTH CAROLINA DEPARTMENT OF CULTURAL RESOURCES 1321 MAIL SERVICE CENTER RALEIGH, NC 27699	56-6062189	GOVERN		714,129	APPRAISAL	LAND	BATTLEFIELD PRESERVATION

DLN: 93493178002273

OMB No 1545-0047

Open to Public Inspection

#### **Schedule J** (Form 990)

Department of the Treasury

Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

**Compensation Information** 

Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Name of the organization CIVIL WAR PRESERVATION TRUST **Employer identification number** 

54-1426643

Pa	rt I Questions Regarding Compensati	ion					
					Yes	No	
1a	Check the appropriate box(es) if the organization p 990, Part VII, Section A, line 1a Complete Part 1		ny of the following to or for a person listed in Form ide any relevant information regarding these items				
	First-class or charter travel	Г	Housing allowance or residence for personal use				
	Travel for companions	Г	Payments for business use of personal residence				
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees				
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)				
b	If any of the boxes in line 1a are checked, did the reimbursement or provision of all of the expenses			1b			
2	Did the organization require substantiation prior to directors, trustees, and the CEO/Executive Direc			2			
	, , ,	, 5					
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all used by a related organization to establish compe	l that apply					
	Compensation committee		Written employment contract				
	✓ Independent compensation consultant	<u>  -                                   </u>	Compensation survey or study				
	Form 990 of other organizations	F	Approval by the board or compensation committee				
4	During the year, did any person listed in Form 990 or a related organization	O, Part VII	, Section A, line 1a with respect to the filing organization				
а	Receive a severance payment or change-of-contr	ol paymen	t?	4a		No	
b	Participate in, or receive payment from, a supplen	nental non	qualified retirement plan?	4b	Yes		
С	Participate in, or receive payment from, an equity	-based co	mpensation arrangement?	4c		No	
	If "Yes" to any of lines 4a-c, list the persons and	provide th	e applicable amounts for each item in Part III				
	Only 501(c)(3) and 501(c)(4) organizations only	must comp	olete lines 5-9.				
5	For persons listed in Form 990, Part VII, Section compensation contingent on the revenues of	A, line 1a	, did the organization pay or accrue any				
а	The organization?			5a		No	
b	Any related organization?			5b		No	
	If "Yes," to line 5a or 5b, describe in Part III						
6	For persons listed in Form 990, Part VII, Section compensation contingent on the net earnings of	A, line 1a	, did the organization pay or accrue any				
а	The organization?			6a		Νo	
b	Any related organization?			6b		No	
	If "Yes," to line 6a or 6b, describe in Part III						
7	For persons listed in Form 990, Part VII, Section payments not described in lines 5 and 6? If "Yes,			7		No	
8	Were any amounts reported in Form 990, Part VII						
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe						
	ın Part III						
9	If "Yes" to line 8, did the organization also follow section 53 4958-6(c)?	the rebutta	able presumption procedure described in Regulations	9			

### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base (ii) Bonus & (iii) Other reportable compensation compensation		other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990	
(1)O JAMES LIGHTHIZER PRESIDENT	(i) (ii)	202,873 0	0	0	72,172 0	1,963 0	277,008	0 0
(2)DAVID N DUNCAN DIR - MEMBERSHIP & DEVELOPMENT	(i) (ii)	189,543 0	0	0	11,373 0	2,098 0	203,014	0 0
(3)THOMAS M GILMORE DIR - REAL ESTATE	(i) (ii)	157,179 0	0	0	7,859 0	20,152 0	185,190 0	0
(4)ROBERT C SHENK DIR - INTERNET STRATEGY DEVELOPMENT	(i) (ii)	127,540 0	0	0	6,377 0	21,156 0	155,073 0	0 0

Schedule J (Form 990) 2012

#### Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Identifier	Return Reference	Explanation						
	1 '	PART I, LINE 4B O JAMES LIGHTHIZER, PRESIDENT, PARTICIPATES IN DEFERRED COMPENSATION PLAN THE ORGANIZATION CONTRIBUTED \$43,500 TO THE PLAN IN THE CURRENT YEAR						

Schedule J (Form 990) 2012

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule K

DLN: 93493178002273

OMB No 1545-0047

Open to Public

# **Supplemental Information on Tax Exempt Bonds**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ► Attach to Form 990. ► See separate instructions.

(Form 990)

Department of the Treasury  Internal Revenue Service  **Attach to Form 990. **See separate instructions.**											Open to Public Inspection				
Name	e of the organization									Em	ployer ic	lentifica	ation num	ber	
CIV	IL WAR PRESERVATION TRUST									54	-14266	43			
Pa	rt I Bond Issues	,								,					
								/-					) On nalf of (i) Po		Pool
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(1	<b>f)</b> Description	n of purpose	(g) Deleased			issuer finai		ncing
										Yes	No	Yes	No	Yes	No
A	ECONOMIC DEVELOPMENT AUTHORITY SPOTSYLVANIA COUNTY VIRGINIA	54-1237426		04-07-2010	5,40	00,000		TO REFUND A PRIOR ISSUE DATED 05/22/07			x		x		x
Pa	rt III Proceeds						<u> </u>			•	•		<u> </u>		
						4		В		C D					
1	Amount of bonds retired					400,	,000	0							
	A mount of bonds legally defeas	ed ————————————————————————————————————													
3	Total proceeds of issue				5,400,000										
4	Gross proceeds in reserve fund														
5	Capitalized interest from procee	eds ————————————————————————————————————													
6	Proceeds in refunding escrows														
7	Issuance costs from proceeds														
8	Credit enhancement from proce														
9	Working capital expenditures fro														
10	Capital expenditures from proce	eeds													
11	Other spent proceeds					5,400,000									
12	Other unspent proceeds														
13	Year of substantial completion				20	10		] .							
					Yes	No	,	Yes	No	Yes	<u> </u>	lo	Yes	$\bot$	No
14	Were the bonds issued as part o	of a current refundin	g issue?		Х									$\bot$	
15	Were the bonds issued as part o	of an advance refund	ding issue?			Х									
16	6 Has the final allocation of proceeds been made?														
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?														
Pai	t IIII Private Business Us	e													
					<b>A</b>		В		c				D	-T	
_	Was the organization a partner in a partnership, or a member of an LLC, which owned				Yes	No	•	Yes	No	Yes	<u> </u>	lo	Yes	+	No
1	property financed by tax-exempt bonds?					Х									

financed property?

Are there any lease arrangements that may result in private business use of bond-

Χ

Sche	dule K (Form 990) 2012									Page <b>2</b>	
Par	Private Business Use (Continued)										
				A		В		<u>C</u>	<u> </u>	D	
<b>-</b>	Are there any management or service contracts that may result in private	husiness use	Yes	No	Yes	No	Yes	No	Yes	No	
3a	of bond-financed property?			Х							
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outsid counsel to review any management or service contracts relating to the financed property?										
С	Are there any research agreements that may result in private business use of bond-financed property?			х							
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper										
4	Enter the percentage of financed property used in a private business use to other than a section $501(c)(3)$ organization or a state or local government	oy entities t 🕨		0 00000%	%		%			%	
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anoth 501(c)(3) organization, or a state or local government			0 00000%		%		%	%		
6	Total of lines 4 and 5			0 00000%	%		9/6		%		
7	Does the bond issue meet the private security or payment test?			Х							
8a	Has there been a sale or disposition of any of the bond financed property t nongovernmental person other than a 501(c)(3) organization since the bounds			х							
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of		%		%		%		%	
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections									
9	Has the organization established written procedures to ensure that all non bonds of the issue are remediated in accordance with the requirements un Regulations sections 1 141-12 and 1 145-2?			х							
Par	t IV Arbitrage			•		'		•	<u></u>	•	
	<del>-</del>	Α			В		С		D		
		Yes	No	Yes	No	Yes	3	No	Yes	No	
1	Has the issuer filed Form 8038-T?		Х								
2	If "No" to line 1, did the following apply?										
a	Rebate not due yet?		Х								
b	Exception to rebate?		Х								
С	No rebate due?		Х								
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed			·		·	·				
3	Is the bond issue a variable rate issue?	X									
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	Х									
b	Name of provider SUNTRUST B		ANKS								
С	Term of hedge	10 00000	000000								
d	Was the hedge superintegrated?		Х								
е	Was a hedge terminated?		Х								
_			_							_	

Pai	t IV Arbitrage (Continued)			1		1		1	
		A		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		Х						
7	Has the organization established written procedures to monitor the requirements of section 148?		x						
Pa	rt V Procedures To Undertake Corrective Action								
		A	ı	В		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X							
	Complemental Information Complete the part to			on for rooms	to	tions on Cob	adula 14 /aa		
	Supplemental Information. Complete this part to p	rovide additior	iai iiiiormati	on for respor	ises to ques	stions on Sch	edule K (See	e instructions	).
	Identifier Return Reference				Explan	ation			

Schedule K (Form 990) 2012

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493178002273

OMB No 1545-0047

Open to Public Inspection

# **SCHEDULE M** (Form 990)

Department of the Treasury Internal Revenue Service

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

**Noncash Contributions** 

Name of the organization CIVIL WAR PRESERVATION TRUST

Employer identification number

					54-1426643			
Pa	rt I Types of Property	(a) Check If	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on	( Method of noncash contri		_	ts
		applicable		Form 990, Part VIII, line				
1	Art—Works of art			1 g				
	Art—Historical treasures .							
	Art—Fractional Interests							
	Books and publications	X		1,060	COST			
	Clothing and household			1,000	0001			
•	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .							
.0	Securities—Closely held stock .							
.1	Securities—Partnership, LLC, or trust interests							
2	Securities—Miscellaneous							
.3	Qualified conservation contribution—Historic							
	structures							
4	Qualified conservation contribution—Other							
	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other	X	2	1,008,000	APPRAISALS			
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
1	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other►( <u>CD'S</u> )	X	100	800				
	O ther ▶()							
	O ther ►()							
	Other ► ()			<u> </u>				
9	Number of Forms 8283 received for which the organization complete.		= .		29			
	,		, ,	, L			Yes	No
30a	During the year, did the organiza	atıon receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year	rs from the o	date of the initial contributi	on, and which is not require	d to be used			
	for exempt purposes for the enti					30a		No
b	If "Yes," describe the arrangem							
31	Does the organization have a gi			review of any non-standard	contributions?	31	Yes	
222	Does the organization hire or us							
- = 4	contributions?	· · · ·	· · · · · · · · ·			32a		Νo
b	If "Yes," describe in Part II							
33	If the organization did not repor describe in Part II	t an amount	: in column (c) for a type of	property for which column (	a) is checked,			

Page 2

Schedule M	(Form 990) (201:
Part II	Supplem

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

Identifier Return Reference Explanation

Schedule M (Form 990) (2012)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493178002273

OMB No 1545-0047

2012

Open to Public Inspection

# SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

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

> Attach to Form 990 or 990-EZ.

Name of the organization CIVIL WAR PRESERVATION TRUST **Employer identification number** 

54-1426643

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	AUDIT COMMITTEE MEMBERS, CHAIRMAN OF THE CWPT BOARD, PRESIDENT, COO, CFO AND KEY EMPLOYEES REVIEW THE 990 INITIALLY IF ANY CORRECTIONS NEED TO BE MADE, THE AUDITING FIRM IS NOTIFIED AFTER THE CORRECTIONS, THE 990 IS THEN DISTRIBUTED TO THE WHOLE BOARD OF TRUSTEES BEFORE THE 990 IS FILED EITHER IN PAPER OR ELECTRONIC FORM
	FORM 990, PART VI, SECTION B, LINE 12C	WHENEVER A TRUSTEE HAS A POTENTIAL DIRECT OR INDIRECT PERSONAL INTEREST IN A PROPOSED TRANSACTION OF THE CORPORATION, HE SHALL DISCLOSE THE MATERIAL FACTS OF THE TRANSACTION, THE NATURE OF HIS POTENTIAL INTEREST IN THE TRANSACTION, AND ANY OTHER RELEVANT INFORMATION REGARDING THE TRANSACTION TO THE BOARD OF TRUSTEES THEREAFTER, THE TRUSTEE SHALL NOT BE PERMITTED TO PARTICIPATE IN THE FINAL BOARD DELIBERATION REGARDING SUCH TRANSACTION, AND SHALL NOT BE PERMITTED TO VOTE ON SUCH TRANSACTION THE BOARD OF TRUSTEES REVIEW THE CONFLICT OF INTEREST POLICY ON A YEARLY BASIS
	FORM 990, PART VI, SECTION B, LINE 15	CIVIL WAR PRESERVATION TRUST WILL PAY SALARIES THAT ARE COMPETITIVE WITH THOSE PAID FOR COMPARABLE POSITIONS IN OTHER NON-PROFIT ORGANIZATIONS EACH EMPLOYEE'S SALARY IS REVIEWED ANNUALLY SALARY ADJUSTMENTS, IF ANY, WILL BE DISCUSSED AT THIS TIME AS WELL SALARY ADJUSTMENTS WILL BE PREPARED AND RECOMMENDATIONS WILL BE MADE AT THE TIME THE BUDGET IS PRESENTED TO THE BOARD IF APPROVED, THEY WILL BECOME EFFECTIVE AT THE PRESIDENT'S DISCRETION THE PRESIDENT'S SALARY AND BENEFIT PACKAGE IS REVIEWED BY AN OUTSIDE CONSULTING FIRM AND THEN APPROVED BY THE BOARD
	FORM 990, PART VI, SECTION C, LINE 19	COPIES OF THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS WILL BE PROVIDED UPON REQUEST TO THE PUBLIC OUR AUDITED FINANCIALS AND FORM 990 ARE ON THE CIVIL WAR TRUST WEBSITE
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	CHANGE IN VALUE OF THE SWAP -18,130 MANAGEMENT FEES PAID TO AN AFFILIATE-AFBP 5,426 501 (C)(4) EXPENSES 14,572 GRANT TO EBDF, RELATED ENTITY 517,200 GRANT TO AFBP, RELATED ENTITY 20,000

DLN: 93493178002273

2012

OMB No 1545-0047

Open to Public Inspection

# **SCHEDULE R** (Form 990)

# **Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization **Employer identification number** CIVIL WAR PRESERVATION TRUST 54-1426643

Part I Identification of Disregarded Entities (Co	mplete if the organization	n answered "Yes" t	o Form 990, Par	t IV, line 33.)			
(a) Name, address, and EIN (ıf applıcable) of dısregarded entıty	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income E	(e) End-of-year assets	<b>(f)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt Org or more related tax-exempt organizations duri	ng the tax year.)				-		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))		Sectio (b)( contr	(13)
						Yes	No
(1) AMERICANS FOR BATTLEFIELD PRESERVATION 1156 15TH ST NW SUITE 900	SEE PART VII OF SCHEDULE R	DC	501(C)(4)		CIVIL WAR PRESERVATION TRUST		No
WASHINGTON, DC 20005 40-3843239							
(2) ENDANGERED BATTLEFIELD DEFENSE FUND 7777 WASHINGTON AVENUE HOUSTON, TX 77007	TO CARRY OUT THE PURPOSES OF THE CIVIL WAR PRESERVATION TRUST	VA	501(C)(3)	LINE 11A, I	CIVIL WAR PRESERVATION TRUST		No
27-1035136							

<b>(a)</b> Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		( <b>†</b> Disprop r alloca	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	990, F	ral or aging	(k) Percentag ownership
					31.,			Yes	No		Yes	No	Į
V Identification of Related Or line 34 because it had one or m	ganizations Taxa ore related organiz	ble as a Corpo zations treated a	ration s a cor	or Trust ( poration or	Complete if trust during	I the organı the tax ye	zatıon ar ar.)	swere	ed "Ye	s" to Form	990,	Part	:IV,
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controll entity	(e) Type of enti (C corp, S corp, or trust)		total Share e of	(g) e of end- year ssets		(h) ercentage wnership	Section (b) (conti	on 512 (13) rolled	
		354.14.7,7								]			No
											Yes No		$\perp$

Pa	rt V	Transactions With Related Organizations (Complete if the organization	answered "Yes" to Fori	n 990, Part IV, lın	e 34, 35b, or 36.)						
	Note.	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No			
<b>1</b> D	urıng th	ne tax year, did the orgranization engage in any of the following transactions with one or mo	ore related organizations l	sted in Parts II-IV?							
а	Recei	pt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No			
b	Gıft, g	rant, or capital contribution to related organization(s)				1b		No			
c	Gıft, g	rant, or capital contribution from related organization(s)				1c	Yes				
d	Loans	or loan guarantees to or for related organization(s)				1d		No			
e	Loans	or loan guarantees by related organization(s)				1e		No			
f	Divide	ends from related organization(s)				1f		No			
g	Sale o	of assets to related organization(s)				<b>1</b> g		No			
h	Purch	ase of assets from related organization(s)				1h		No			
i	Exchai	nge of assets with related organization(s)				<b>1</b> i		No			
j	Lease	of facilities, equipment, or other assets to related organization(s)				1j		No			
k	k Lease of facilities, equipment, or other assets from related organization(s)										
I	Performance of services or membership or fundraising solicitations for related organization(s)										
m	Perfor	mance of services or membership or fundraising solicitations by related organization(s)				1m		No			
n	Sharing	g of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No			
0	Sharır	ng of paid employees with related organization(s)				1o		No			
р	Reimb	pursement paid to related organization(s) for expenses				1р		No			
q	Reimb	oursement paid by related organization(s) for expenses				1q		No			
r	Other	transfer of cash or property to related organization(s)				1r		No			
s	Other	transfer of cash or property from related organization(s)				1s		No			
	Ifthe	answer to any of the above is "Yes," see the instructions for information on who must com	nlete this line including s	overed relationships	and transaction thresholds						
	11 010	(a)	(b)	(c)	(d)						
		Name of other organization	Transaction type (a-s)	Amount involved	Method of determining amo	unt ın	volved				
(1) AI	MERICAN	S FOR BATTLEFIELD PRESERVATION	С	20,000	CASH						
(2) El	NDANGER	RED BATTLEFIELD DEFENSE FUND	С	517,200	CASH						
					1						
			1								

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

evenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships  (a)  (b)  Name, address, and EIN of entity  (c)  Primary activity  Legal  Predominant  Are all partners  Share of Share of Disproprtionate  Code V—UBI General or Percentage													
<b>(a)</b> Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under section 512-	org	(e) all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?	managing partner?	
			514)	Yes	No			Yes	No		Yes	No	
												]	l
				ш				\	-		<u> </u>	ш	

# Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Ident if ier	Return Reference	Explanation
		THE MISSION OF AMERICANS FOR BATTLEFIELD PRESERVATION (AFBP) IS TO PROMOTE AWARENESS OF THE PLIGHT OF OUR NATION'S
		REMAINING HALLOWED BATTLEGROUNDS IT IS A STRICTLY NON-PARTISAN ORGANIZATION THAT SEEKS TO BUILD SUPPORT FOR BATTLEFIELD
	PART II, LINE	PRESERVATION AMONG ALL LAWMAKERS ON ALL LEVELS OF GOVERNMENT THE ORGANIZATION'S PRIMARY FOCUS IS TO ENCOURAGE
	В	LAWMAKERS ON THE FEDERAL, STATE AND LOCAL LEVELS TO ALLOCATE PUBLIC FUNDS FOR BATTLEFIELD PRESERVATION IN ADDITION, AFBP
		SUPPORTS LOCAL OFFICIALS FOR PUBLIC OFFICE IN A VERY LIMITED NUMBER OF TARGETED COMMUNITIES, PLUS TRAINS LOCAL PEOPLE ABOUT
		HOW TO SUCCESSFULLY CONDUCT COMMUNITY GRASSROOTS ORGANIZING, FUNDRAISING, AND EFFECTIVE USE OF MEDIA

Additional Data Return to Form

Software ID: Software Version:

**EIN:** 54-1426643

Name: CIVIL WAR PRESERVATION TRUST

-->

Software ID: Software Version:

**EIN:** 54-1426643

Name: CIVIL WAR PRESERVATION TRUST

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors  (A) (B) (C) (D) (E) (F)													
(A) Name and Title	(B) Average hours per week (list any	Positio more unless an o direo	n (do than pers office ctor/t	o not one son is er and trust	box s bot d a tee)	th		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related			
	hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations			
HENRY E SIMPSON CHAIRMAN	4 00	х		х				0	0	0			
MICHAEL GRAINGER VICE-CHAIRMAN	4 00	х		х				0	0	0			
HARRISON M BAINS JR TREASURER	4 00	х		х				0	0	0			
WILLIAM W VODRA SECRETARY	8 00	х		х				0	0	0			
DR MARY M ABROE TRUSTEE	30	х						0	0	0			
TRACE ADKINS TRUSTEE	30	х						0	0	0			
DON BARRETT TRUSTEE	30	х						0	0	0			
CRICKET BAUER TRUSTEE	30	х						0	0	0			
EDWIN C BEARSS TRUSTEE	30	х						0	0	0			
KIRK J BRADLEY TRUSTEE	30	х						0	0	0			
PAUL W BRYANT TRUSTEE	30	х						0	0	0			
WALTER W BUCKLEY JR TRUSTEE	30	х						0	0	0			
CARLTON B CRENSHAW TRUSTEE	3 00	х						0	0	0			
JEFF DAHLGREN TRUSTEE	30	х						0	0	0			
BEVERLY M DUBOSE III TRUSTEE	30	х						0	0	0			
BRUCE C GOTTWALD TRUSTEE	30	х						0	0	0			
WILLIAM J HUPP TRUSTEE	1 00	х						0	0	0			
THOMAS H LAUER TRUSTEE	30	х						0	0	0			
DUKE R LIGON TRUSTEE	30	х						0	0	0			
JEFFREY P MCCLANATHAN TRUSTEE	10	х						0	0	0			
JOHN L NAU III TRUSTEE	30	х						0	0	0			
STEPHAN F NEWHOUSE TRUSTEE	30	х						0	0	0			
DR LIBBY O'CONNELL TRUSTEE	30	х						0	0	0			
JEFF RODEK TRUSTEE	30	х						0	0	0			
J DENNIS SEXTON TRUSTEE	10	х						0	0	0			

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

50 00

50 00

45 00

50 00

DIR - MEMBERSHIP & DEVELOPMENT

DIR - INTERNET STRATEGY DEVELOPMENT

DIR - POLICY & COMMUNICATIONS

THOMAS M GILMORE

DIR - REAL ESTATE

SAMUEL F DELUCA

ROBERT C SHENK

JAMES J CAMPI

SENIOR VP - MAJOR GIVING

Compensated Employees, and I	ndependent Contr	actors	•		•	-			1	1
<b>(A)</b> Name and Title	(B) A verage hours per week (list	Average Position (do not check hours more than one box, per unless person is both week an officer and a (list director/trustee)							(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	any hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
JEFF SHAARA TRUSTEE	30	х						0	0	0
W DENMAN ZIRKLE TRUSTEE	30	х						0	0	0
DOUG WALKER TRUSTEE	0 00	х						0	0	0
O JAMES LIGHTHIZER PRESIDENT	60 00	х		х				202,873	0	72,172
RONALD M COGSWELL COO	32 00			х				63,525	0	3,438
RUTH E HUDSPETH CFO	50 00			х				98,201	0	14,667
DAVID N DUNCAN	50 00				x			189,543	0	11,508

Χ

Χ

Χ

Х

189,543

157,179

101,784

127,540

129,265

11,508

26,048

22,698

25,608

14,857

0

0

0

0

0