Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

Open to Public Inspection

A Fo	r the	2014 cal	endar year, or tax year beginn	ing 07-01-2014 , and ending 06-30-20	015					
B Ch	eck ıf a	pplicable	C Name of organization NATIONAL PARK TRUST INC			D Emplo	yer ider	itification number		
☐ Ad	dress ch	nange	NATIONAL PARK TROOT INC			52-16	52-1691924			
Г№	me cha	nge	Doing business as							
┌ Inr	tıal retu	m				E Telepho	ne numl	ner .		
⊢ Fir	al		Number and street (or P O box if 401 EAST JEFFERSON STREET NO	mail is not delivered to street address) Room,	/suite					
_		minated				(301)	279-7	275		
	nended plicatior	return n pending	ROCKVILLE, MD 20850	ountry, and ZIP or foreign postal code		G Gross r	eceipts \$	1,220,722		
			F Name and address of p	rıncıpal officer	H(a) Is	this a group	return	for		
			GRACE K LEE 401 EAST JEFFERSON ST	DEET NO 203		ıbordınates ?		┌ Yes 🗸 No		
			ROCKVILLE, MD 20850	KEET NO 203	Н(Б) Д	re all subordı	nates	□ Yes □ No		
					in	cluded?				
I Ta	ıx-exem	npt status	▼ 501(c)(3)	(insert no) 4947(a)(1) or 527	If	"No," attach	a lıst	(see instructions)		
J W	ebsite	e:► WW	VW PARKTRUST ORG		H(c) G	roup exempt	ion nun	nber ►		
K For	m of or	ganızatıon	Corporation Trust Associa	tion Cther ►	L Year o	of formation 19	90 M	State of legal domicile DC		
Pa	rt I	Sum	ımary		<u> </u>		<u> </u>	-		
	1	Briefly d	escribe the organization's miss	sion or most significant activities						
	!	PRESER	VING PARKS TODAY, CREAT	TING PARK STEWARDS FOR TOMORI	RO W					
န္	:									
Governance	.									
ş	2	Check th	his box দ if the organization	discontinued its operations or dispose	d of more tha	n 25% of its	net as:	sets		
ট ক	3	Number	of voting members of the gove	rning body (Part VI, line 1a)			з	1.5		
40 40 40				s of the governing body (Part VI, line 1			4	15		
Activities			· · · · · · · · · · · · · · · · · · ·	n calendar year 2014 (Part V, line 2a)			5	8		
<u>₹</u>				fnecessary)			6	1,000		
4	7a -	Total un	related business revenue from	Part VIII, column (C), line 12			7a	0		
	ь	Net unre	elated business taxable income	e from Form 990-T, line 34			7b	0		
					F	Prior Year		Current Year		
O.	8	Contri	butions and grants (Part VIII,	line 1 h)		1,393,3	361	1,175,353		
Revenue	9			ce revenue (Part VIII, line 2g)				0		
3	10			nn (A), lines 3, 4, and 7d)		<u>_</u>	106	10,453		
	11), lines 5, 6d, 8c, 9c, 10c, and 11e) 1 (must equal Part VIII, column (A), l		24,2	219	23,863		
	12				iine	1,425,9	986	1,209,669		
	13			rt IX, column (A), lines 1–3)		103,9	922	110,321		
	14	Benefi	its paid to or for members (Par	t IX, column (A), line 4)			0	0		
	15			yee benefits (Part IX, column (A), line	s	303,6	526	340,745		
Expenses	16a	5-10)	•	X, column (A), line 11e)			0	0		
কু			indraising expenses (Part IX, column		•			0		
Д	Ь				-					
	17), lines 11a-11d, 11f-24e)		460,3		564,316		
	18 19			nust equal Part IX, column (A), line 25		867,9		1,015,382		
- 47 hr 47	19	Reven	iue less expenses. Subtract lin	e 18 from line 12		558,0 ning of Curre		194,287		
Not Assets or Fund Balances					Degiiii	Year		End of Year		
3.45 4.45 4.45 4.45 4.45 4.45 4.45 4.45	20	Total	assets (Part X, line 16)			4,624,5	572	4,863,465		
2 E	21				•	33,2		77,572		
	22			ct line 21 from line 20		4,591,2	298	4,785,893		
	rt II	_	nature Block							
				examined this return, including accomp complete Declaration of preparer (other						
			nowledge	omplete Beelalation of preparer (other	i ciiaii oiiiooi,	, 15 54564 611	411 11110			
		k								
Sigr	,	**** Signa	*** ature of officer			2016-03-01 Date				
Her		GRAC	CE K LEE EXECUTIVE DIRECTOR							
			e or print name and title							
		P	Print/Type preparer's name ANDREW PHILLIPS CPA	Preparer's signature ANDREW PHILLIPS CPA		Check 🔽 ıf	PTIN P00839	833		
Pai	d	<u> </u>	Firm's name F PHILLIPS & ASSOCIA			self-employed Firm's EIN 🟲 52				
	pare	er								
llse	On e	lv l⁺	Firm's address 🟲 15825 SHADY GROVI	E KUAD SUITE 40		Phone no (301) 519-32	.00		

ROCKVILLE, MD 20850

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

✓ Yes ☐ No

				Page 2
nt of Program Serv hedule O contains a res			II	
ne organization's missio	า			
ODAY, CREATING PAR	K STEWARDS FO) R TOMORROW		
on undertake any signific) or 990-EZ?			which were not listed on	┌ Yes ┌ No
these new services on S	chedule O			
on cease conducting, or	-	_	nducts, any program	┌ Yes ┌ No
these changes on Sche	dule O			
	1) organizations a	ire required to report	ree largest program services, as the amount of grants and alloca	
) (Expenses \$	186,534	including grants of \$	65,154) (Revenue \$)
N PROGRAM - SEE SCHEDULE	O FOR ACCOMPLISH	MENTS		
) (Expenses \$	121,309	including grants of \$) (Revenue \$)
- SEE SCHEDULE O FOR ACCO	DMPLISHMENTS			·
) (Expenses \$	425,827	including grants of \$	45,167) (Revenue \$)
SEE SCHEDULE O FOR ACCOM	PLISHMENTS			
ervices (Describe in Sch	edule O)			
Inc	luding grants of \$	·) (Revenue \$)
rvice expenses 🟲	733,670			
	ınc		including grants of \$	including grants of \$) (Revenue \$

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	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	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		No
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? <i>If "Yes," complete Schedule D, Part 1</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 2	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 "Yes," complete Schedule D, Part V</i>	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			
a	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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part χ^{\bullet}	11e		No
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	Yes	
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
	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 other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? 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		No
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 or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	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? <i>If "Yes," complete Schedule L, Part III</i>	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
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than $\$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		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? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
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		No
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a	Yes	
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	Yes	
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? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2014)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			厂_
_			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 1 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
		1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	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	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country •			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	30		
	The rest, to line 3d of 3b, and the organization mer of in occours.	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		V	
	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	
	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	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		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	Ţ		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u></u>

Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "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
1 a	Enter the number of voting members of the governing body at the end of the tax year	1a	15			
	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					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	15			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3		No
4	Did the organization make any significant changes to its governing documents since filed?	e the p	rıor Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the o	rganız	atıon's assets? .	5		No
6	Did the organization have members or stockholders?			6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?			7a		No
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?			7b		No
8	Did the organization contemporaneously document the meetings held or written activear by the following	ons ur	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>			9		No
Se	ection B. Policies (This Section B requests information about policies not	requi	red by the Internal R	even	ue Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not	requi	red by the Internal R		yes Yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	<u>requi</u> 	red by the Internal R	10a		•
10a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization	tivitie: on's e	of such chapters, xempt purposes?			No
10a b	Did the organization have local chapters, branches, or affiliates?	tivitie: on's e	of such chapters, xempt purposes?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization that the organization provided a complete copy of this Form 990 to all members of its	tivitie: on's e ts gov	s of such chapters, xempt purposes? erning body before filing	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	tivitie on's e ts gov Form 9	s of such chapters, xempt purposes? erning body before filing 	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization are consistent with the organization to review this form?	tivitie: on's e ts gov Form 9	s of such chapters, xempt purposes? erning body before filing 90 rests that could give	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivities on's e ts gov Form 9 	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivities on's e ts gov . Form 9 . ly inte . i the p	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivitie: on's e ts gov form 9 ly inte the p	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivities on's e ts gov . Form 9 . ly inte . the p i the p	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	tivities on's e ts gov form 9 ly inte the p i the p	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	tivitie: on's e ts gov form 9 ly inte the p the p lew an	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	tivitie: on's e ts gov form 9 ly inte the p the p lew an	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	tivities on's e ts gov form 9 ly inte the p iew an ne deli or sim	s of such chapters, xempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed►AL , AK , AZ , AK , CA , CT , FL , GA , IL , KS , KY , CO , ME , $\mathsf{MD}\,,\,\mathsf{MA}\,,\,\mathsf{MI}\,,\,\mathsf{MN}\,,\,\mathsf{MS}\,,\,\mathsf{MO}\,,\,\mathsf{NH}\,,\,\mathsf{NJ}\,,\,\mathsf{NY}\,,\,\mathsf{NM}\,,\,\mathsf{NC}\,,\,\mathsf{ND}\,,$ OH, OK, OR, PA, RI, SC, TN, UT, VA, WV, WI
- 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 Own website Another's website Vpon request Other (explain in Schedule O)
 - 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, address, and telephone number of the person who possesses the organization's books and records 20 ►THE ORGANIZATION

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

	Т	ı						<u> </u>		
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot	not box h ar or/tr	office	ss er	(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 organizations
		Islae	Trustee		Ď	pensated				
(1) WILLIAM BROWNELL ESQ CHAIRMAN	2 00	х		х				0	0	0
(2) ANN GUALTIERI VICE CHAIR	2 00	х		х				0	0	0
(3) FREDRIC WALLS TREASURER	2 00	х		х				0	0	0
(4) RAYMOND J SHERBILL SECRETARY	2 00	х		х				0	0	0
(5) CHARLES H KNAUSSESQ TRUSTEE	2 00	х						0	0	0
(6) JENNIFER CURTIN TRUSTEE	2 00	х						0	0	0
(7) EVAN ANDERSON TRUSTEE	2 00	х						0	0	0
(8) JONATHAN COHENESQ TRUSTEE	2 00	х						0	0	0
(9) RICHARD LEHMAN TRUSTEE	2 00	×						0	0	0
(10) MICHAEL R STEED TRUSTEE	2 00	х						0	0	0
(11) DAVID N PARKER TRUSTEE	2 00	×						0	0	0
(12) STEPHEN SCHULER TRUSTEE	2 00	х						0	0	0
(13) CHARLES H PARDOE	2 00	х						0	0	0
TRUSTEE (14) LEE VERSTANDIG PHD	2 00	х						0	0	0
TRUSTEE		I								Form 990 (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h ar	chec (, unle n offic ustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(15) CHRISTOPHER GRAHAM	2 00	x						0	0	0
TRUSTEE										
(16) JOHN ROLLINS JR	2 00									
TRUSTEE		X						0	0	0
(17) RONNIE GATHERS	2 00									
TRUSTEE		Х						0	0	0
(18) GRACE LEE	40 00									
EXECUTIVE DIRECTOR				Х				107,160	0	0

1b	Sub-Total	Ŧ			
C	Total from continuation sheets to Part VII, Section A	۰			
d	Total (add lines 1b and 1c)	۰	107,160	0	0

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►1

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No

Section	R	Inda	non	dont	Cor	tracto	rc
Section	D.	THUE	:ven	lueni	. COI	ILFACLO	Гъ

L Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

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 ►0

Part V	•	-				Page 9
Part V		Check if Schedule O contains a response or note to a	ny line in this Part VIII			
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s	1a	Federated campaigns 1a 47,	326			
s, Grants Amounts	b	Membership dues 1b				
Gr.	c	Fundraising events 1c				
ffs, r A	d	Related organizations 1d				
nila	e	Government grants (contributions) 1e				
Contributions, Gifts, Grants and Other Similar Amounts			027			
utic	f	All other contributions, gifts, grants, and similar amounts not included above 1,128	027			
tributio Other !	g	Noncash contributions included in lines 1a-1f \$	i			
Con1 and	h	Total. Add lines 1a-1f	1,175,353			
		Business Co	de de			
nne	2a	Dusiness es				
eve Fe	b					
H ec	c					
er vi	d					
ج پ	e					
Program Service Revenue	f	All other program service revenue				
Ě	g	Total. Add lines 2a-2f	-			
	3	Investment income (including dividends, interest,	10,453			10,453
	4	and other similar amounts)	10,135			10,133
	5	Royalties	-			
		(ı) Real (ıı) Persona	ı			
	6a	Gross rents				
	b	Less rental expenses				
	C	Rental income or (loss)				
	d	Net rental income or (loss)	▶			
		(i) Securities (ii) Other				
	7a	Gross amount from sales of				
		assets other than inventory				
	b	Less cost or other basis and				
	c	sales expenses Gain or (loss)				
	d	Net gain or (loss)	<u>-</u>			
	8a	Gross income from fundraising				
Other Revenue		events (not including \$				
÷		of contributions reported on line 1c)				
Вe		See Part IV, line 18 a				
her	ь	Less direct expenses b				
5	c	Net income or (loss) from fundraising events	-			
	9a	Gross income from gaming activities				
		See Part IV, line 19 a				
	b	Less direct expenses b				
	c	Net income or (loss) from gaming activities	<u></u>			
	10a	Gross sales of inventory, less returns and allowances .	,916			
	b		,053			
		Net income or (loss) from sales of inventory		23,863		
		Miscellaneous Revenue Business Co				
	11a					
	b					
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d	•			
	12	Total revenue. See Instructions	1,209,669	23,863	o	10,453

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must comp

section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All other organizations must complete colur
--

<u> </u>	on 501(c)(3) and 501(c)(4) organizations must complete all columns All Check if Schedule O contains a response or note to any line in this				
Do m	ot include amounts reported on lines 6b,		(B)	(c)	(D)
	o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	110,321	110,321		
2	Grants and other assistance to domestic individuals See Part IV, line 22		,		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	107,160	67,661	30,113	9,386
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	202,322	141,417	37,634	23,271
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	7,168	6,041	1,127	
10	Payroll taxes	24,095	16,473	5,264	2,358
11	Fees for services (non-employees)				
а	Management				
ь	Legal				
c	Accounting	68,799	50,972	12,879	4,948
d	Lobbying	33,133	33,512	12,0.5	.,,,,,
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	2,246	1,471	560	215
g g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,255	2,030	76	2,149
12	Advertising and promotion	1,135	1,135		
13	Office expenses	86,702	58,264	8,659	19,779
14	Information technology	15,406	14,421	712	273
15	Royalties	13,400	17,721	712	273
16	Occupancy	38,603	25,285	9,621	3,697
17	Travel	19,423	18,169	862	3,097
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	19,423	18,169	802	392
19	Conferences, conventions, and meetings	46,365	43,681	1,939	745
20	Interest	+0,303	+5,001	1,555	7+3
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	623	408	155	60
23					
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	16,036	10,503	3,997	1,536
а	CONSULTANTS' FEES	134,061	63,947	2,413	67,701
b	TOOLKIT AND FIELD TRIPS	65,130	65,130	_,	,
c	TAXES AND LICENSES	28,408	23,770	192	4,446
d	TEMPORARY STAFFING/INTE	24,913	9,260	13,495	2,158
e	All other expenses	12,211	3,311	4,817	4,083
25	Total functional expenses. Add lines 1 through 24e	1,015,382	733,670	134,515	147,197
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here	1,013,382	733,070	134,313	147,137

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			_
		Check it Selledule & Contains a response of note to any line in this fare X	(A)		(B)
	Ι.,	Cook was substituted by a man	Beginning of year 193,258	_	End of year 49.577
	1	Cash-non-interest-bearing			
	2	Savings and temporary cash investments	365,002	2	786,449
	3	Pledges and grants receivable, net	310,150		229,126
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
<i>9</i> 2	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			
Assets				6	
36	7	Notes and loans receivable, net		7	
~4	8	Inventories for sale or use	31,186	8	34,307
	9	Prepaid expenses and deferred charges	13,149	9	13,251
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 20,125			
	Ь	Less accumulated depreciation 10b 19,200	1,549	10c	925
	11	Investments—publicly traded securities	291,155	11	298,560
	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	3,419,123	15	3,451,270
	16	Total assets. Add lines 1 through 15 (must equal line 34)	4,624,572	16	4,863,465
	17	Accounts payable and accrued expenses	33,274	17	77,572
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
ω.	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
i ge		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D		25	
	26	Total liabilities. Add lines 17 through 25	33,274	26	77,572
SO.		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete			
ĕ		lines 27 through 29, and lines 33 and 34.	2 274 804	27	2 121 510
or Fund Balance	27	Unrestricted net assets	3,274,894		3,121,510
	28	Temporarily restricted net assets	1,002,024	28	1,385,003
Ĭ	29	Permanently restricted net assets	314,380	29	279,380
ī.		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
!S S	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	4,591,298	33	4,785,893
Ŋet					
	34	Total liabilities and net assets/fund balances	4,624,572	34	4,863,465

					age ==
Par	Reconcilliation of Net Assets Check If Schedule O contains a response or note to any line in this Part XI			<u> </u>	
	Tabel manager (manabaser) Bast (MM, asluma (A) los 42)				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,2	209,669
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,(15,382
3	Revenue less expenses Subtract line 2 from line 1	3		-	194,287
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	-		4,5	591,298
_	Donated services and use of facilities	5			308
6	Donated Services and use of lacinties	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			785,893
Par	t XII Financial Statements and Reporting			,,	03,033
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				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	wed 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 sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	ıt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	1			
3 a	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?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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As Filed Data -

DLN: 93493062007186

Employer identification number

OMB No 1545-0047

Open to Public Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

Name of the organization

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OITA	NAL PA	RK TRUST INC						
							52-1691924	
Pa	rt I	Reason for Publi	c Charity S	Status (All organiza	itions must co	mplete this p	part.) See instruction	ons.
he o	organı	zation is not a private fo	oundation beca	auseıtıs (Forlines 1	through 11, ch	eck only one b	ox)	
1	Γ	A church, convention	of churches, o	r association of churc	hes described i	n section 170(b)(1)(A)(i).	
2	Γ	A school described in	section 170(b)(1)(A)(ii). (Attach S	chedule E)			
3	Γ	A hospital or a cooper	atıve hospıtal	service organization of	described in sec	ction 170(b)(1))(A)(iii).	
4	Γ	A medical research or	ganızatıon ope	erated in conjunction v	vith a hospital c	described in se	ction 170(b)(1)(A)(iii	i). Enter the
		hospital's name, city,						
5	Γ	An organization opera	ted for the ber	nefit of a college or uni	versity owned o	or operated by	a governmental unıt d	escribed in
		section 170(b)(1)(A)((iv). (Complet	e Part II)				
6	Γ	A federal, state, or loc	al governmen	t or governmental unit	described in s e	ection 170(b)(:	1)(A)(v).	
7	굣	An organization that n	ormally receiv	es a substantial part	of its support fr	om a governme	ental unit or from the o	general public
_	_	described in section 1						
8	<u> </u>	A community trust des						
9	ı	An organization that n						
		receipts from activitie						
		its support from gross	investment ir	ncome and unrelated b	usiness taxable	e income (less	section 511 tax) fron	n businesses
		acquired by the organi	zatıon after Ju	ıne 30, 1975 See sec	tion 509(a)(2).	. (Complete Pa	rt III)	
10	Γ	An organization organ	ized and opera	ated exclusively to tes	t for public safe	ety See sectio	n 509(a)(4).	
11	Г	An organization organ	•	•				
		one or more publicly s						
а	\vdash	the box in lines 11a th Type I. A supporting o	_			-		-
a	,	supported organization						
		organization You mus				.,		
b	Γ	Type II. A supporting	_					=
		management of the su			same persons t	hat control or r	manage the supported	organization(s) You
_	_	must complete Part I\	•		n anaratad in a	annaction with	and functionally into	aratad weth sta
C	ļ	Type III functionally i supported organization						grated with, its
d	Г	Type III non-function						janization(s) that is
	·	not functionally integr						
	_	(see instructions) You						
е	ı	Check this box if the o					s a Type I, Type II, T	ype III functionally
f		ıntegrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations						
g		Provide the following i						
9			simation ab	cat the supported orge	24 (1011(3)			
	(i)N:	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the or	ganization	(v) A mount of	(vi) A mount of
		organization	(,	organization	listed in your		monetary support	other support (see
		-		(described on lines	docume		(see instructions)	instructions)
				1-9 above or IRC				
				section (see				
				ınstructions))	Vos	No	1	
					Yes	No		

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.)

Se	ection A. Public Support								
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 20	14	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	516,386	1,424,228	687,036	1,393,361	1,	175,353	5,196,364	
	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	,							
4	Total. Add lines 1 through 3	516,386	1,424,228	687,036	1,393,361	1,	175,353	5,196,364	
5	The portion of total contributions by each person (other than a governmental unit or publicly								
	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							1,920,599	
6	Public support. Subtract line 5 from line 4	1						3,275,765	
_Se	ection B. Total Support	_							
Cale	endar year (or fiscal year	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 20	14	(f) Total	
7	beginning in) ► A mounts from line 4	516,386	1,424,228	687,036	1,393,361		175,353	5,196,364	
8	Gross income from interest,	310,300	1, 12 1,220	007,030	1,555,501	1,	173,333	3,130,301	
J	dividends, payments received on securities loans, rents, royalties and income from similar	6,767	5,644	9,119	8,406		10,453	40,389	
9	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 capital assets (Explain in Part VI)								
11	Total support Add lines 7 through 10							5,236,753	
12	Gross receipts from related activity	ies, etc (see inst	ructions)			12		173,440	
13	First five years. If the Form 990 is organization, check this box and st	_				section 5)	
Se	ection C. Computation of Pul								
14	Public support percentage for 2014			11, column (f))		14		62 550 %	
15	Public support percentage for 2013	3 Schedule A, Par	t II, line 14			15		64 900 %	
16a	33 1/3% support test—2014. If the	organization did	not check the box	on line 13, and l	ine 14 is 33 1/3%	or more,	check t		
	and stop here. The organization qual 33 1/3% support test—2013. If the	alıfıes as a publıcl e organızatıon dıd	y supported orgar not check a box o	nization n line 13 or 16a,		•		▶ ✓ eck this	
	box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2014. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2013. 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.								
18	Explain in Part VI how the organiza supported organization Private foundation. If the organiza instructions	ition meets the "fa	acts-and-circums	tances" test The	e organization qua	alıfıes as a	publicly	, ▶⊏	
	madactiona							F 1	

Schedule A (Form 990 or 990-EZ) 2014 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) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2013 Schedule A, Part III, line 17

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1	

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

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

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthexcess of income from activity			
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

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

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

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DLN: 93493062007186

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

ame of the organization ATIONAL PARK TRUST INC		Employer iden	tification number
		52-1691924	
organizations Maintaining Donoi organization answered "Yes" to Form	· Advised Funds or Other Similar · 990. Part IV. line 6.	Funds or Acco	unts. Complete if the
	(a) Donor advised funds	(b) Funds	and other accounts
Total number at end of year			
Aggregate value of contributions to (during year)			
Aggregate value of grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and donor a funds are the organization's property, subject to		onor advised	┌ Yes ┌ No
Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?			┌ Yes ┌ No
art II Conservation Easements. Comple	ete if the organization answered "Yes	' to Form 990, Pa	art IV, line 7.
Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., recressive Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization easement on the last day of the tax year	Preservation of Preservation of	a certified historic	structure
easement on the last day of the tax year		Held a	t the End of the Year
Total number of conservation easements		2a	1
Total acreage restricted by conservation easeme	ents	2b	2,093 00
Number of conservation easements on a certified		2c	
Number of conservation easements included in (o historic structure listed in the National Register	e) acquired after 8/17/06, and not on a	2d	
Number of conservation easements modified, tra	nsferred, released, extinguished, or termina	ated by the organiz	ation during
the tax year 🛌			
Number of states where property subject to cons	oryation eacoment is located b 1		
Does the organization have a written policy regar enforcement of the conservation easements it ho	ding the periodic monitoring, inspection, ha	andling of violations	s, and Ves No
Staff and volunteer hours devoted to monitoring, 10 00	inspecting, and enforcing conservation eas	ements during the	year
A mount of expenses incurred in monitoring, insper	ecting, and enforcing conservation easeme	nts during the year	
Does each conservation easement reported on li and section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of s	ection 170(h)(4)(E	3)(ı)
In Part XIII, describe how the organization repor balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financ sements	ıal statements that	describes
Complete if the organization answers		s, or Other Sim	ilar Assets.
If the organization elected, as permitted under SI works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the foot	assets held for public exhibition, educatio	n, or research in fui	
If the organization elected, as permitted under SI works of art, historical treasures, or other similar service, provide the following amounts relating to	assets held for public exhibition, educatio		
(i) Revenue included in Form 990, Part VIII, line	2 1	► \$_	
(ii) Assets included in Form 990, Part X		► \$_	
If the organization received or held works of art, I following amounts required to be reported under S			provide the
Revenue included in Form 990, Part VIII, line 1		► \$_	
Assets included in Form 990, Part X		⊳ - \$	

Part	Organizations Maintaining Co	llections of Art	, His	tori	<u>cal Tr</u>	easur	es, or O	ther	Similar Ass	ets (continu	ed)
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other recor	ds, cł	neck	any of t	he follo	wing that a	re a s	significant use o	fıts		
а	Public exhibition		d	Γ	Loan	or exch	ange progra	ams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	llections and expla	ın hov	w the	y furthe	r the or	ganızatıon'	sexe	empt purpose in			
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t									Yes	Гм	lo.
Par	t IV Escrow and Custodial Arrang	ements. Comple	ete ıf	the	organı	zatıon			<u> </u>		1 18	-
	Part IV, line 9, or reported an and Is the organization an agent, trustee, custod						rother acc	ata n				—
1a L	ıncluded on Form 990, Part X?					tions or	rotherasse	ets no		Yes	Ги	lo
b	If "Yes," explain the arrangement in Part XII	1 and complete the	TOHOV	wing t	abie		Г	Т	Amo	unt		—
c	Beginning balance							1c	Allie	unc		_
d	Additions during the year						<u> </u>	1d				—
e	Distributions during the year						<u> </u>	1e				—
f	Ending balance						-	1f				_
2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21,	for e	scrow o	rcusto	ـــ dıal accour	ıt lıab	oility?	Yes	ΓN	—— lo
ь	If "Yes," explain the arrangement in Part XII										Ē	
Pa	rt V Endowment Funds. Complete									• •		
		(a)Current year		Prior y						e) Fou	r years ba	ack
1a	Beginning of year balance	314,380			313,130		306,630					
b	Contributions				1,250		6,500		306,630			
С	Net investment earnings, gains, and losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs	35,000										
f	Administrative expenses											
g	End of year balance	279,380			314,380		313,130		306,630			
2	Provide the estimated percentage of the curr	ent year end baland	e (lın	ie 1g	, colum	n (a)) h	eld as					
а	Board designated or quasi-endowment ►											
b	Permanent endowment ► 100 000 %											
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	ıld equal 100%										
За	Are there endowment funds not in the posses	ssion of the organiza	ation	that	are helo	l and ad	lmınıstered	for t	he		1	_
	organization by (i) unrelated organizations								3a(i)	Ye	s No	-
	(ii) related organizations		• •					· .	3a(ii)		No	_
b	If "Yes" to 3a(II), are the related organization			Sched	ule R?	٠			3b			-
4	Describe in Part XIII the intended uses of th	e organization's en	dowm	ent f	unds							
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1		he o	rgan	ızatıor	n answ	ered 'Yes'	to F	form 990, Par	t IV,	line	
	Description of property				a) Cost o		(b)Cost or basis (oth		(c) Accumulated depreciation	(d) Book va	alue
1a	Land		•	\top								
b I	Buildings											
	Leasehold improvements											
	Equipment						20),125	19,20	00		925
	I. Add lines 1a through 1e <i>(Column (d) must e</i>			<u> </u>	B), line	10(c).)				+		925
	22 2 (a) mast e	,	,		,,	- (-/•/	<u> </u>		Schedule D (Form		

Part VII	Investments—Other Securities. C	omplete if the organization	n answered 'Yes' to For	rm 990, Part IV, line 11b.
	See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b)Book value	(c) Method of v Cost or end-of-year	
(1)Financia	al derivatives			
(2)Closely Other	-held equity interests			
Total (Colu	mn (b) must equal Form 990, Part X, col (B) line 12)	 -		
	Investments—Program Related.		 on answered 'Yes' to Fo	orm 990, Part IV, line 11c.
	See Form 990, Part X, line 13.			
	(a) Description of investment	(b) Book value	(c) Method of v Cost or end-of-year	
			Cost of the of year	market varae
Total. (Colui	mn (b) must equal Form 990, Part X, col (B) line 13)	was a succeed Wash to Forms Of	20 Dawk IV lima 11 d. Can	5 000 Dort V line 15
Partix	Other Assets. Complete if the organizat (a) Des		90, Part IV, Ille IId See	(b) Book value
(1) CONSE	ERVATION EASEMENT AND RELATED REA	· · · · · · · · · · · · · · · · · · ·		1,465,101
(2) MINER	AL RIGHTS DONATED TO NPT			1,390,600
(3) DUE FF	ROM CANONIE IDNL LLC			595,569
Total (Col)	ımn (b) must equal Form 990, Part X, col.(B) lıne	. 15)		3,451,270
Part X				
	Form 990, Part X, line 25.		,	
1	(a) Description of liability	(b) Book value		
Federal inc	ome taxes		_	
			-	
			+	
			_	
 _				
			1	
			1	
			1	
			4	
Total. (Colui	mn (b) must equal Form 990, Part X, col (B) line 25)	*	1	
	for uncortain tax positions. In Part VIII. prov			-1 -4-4

Part	XI		evenue per Audited Financial Statements Wit ered 'Yes' to Form 990, Part IV, line 12a.	h Revenue p	er R	eturn Complete if
1	Total		r support per audited financial statements		1	1,448,669
2			not on Form 990, Part VIII, line 12		_	2,110,005
a			on investments 2a			
b		- , , ,	cilities 2b	239,000		
c				233,000		
d						
e		lines 2a through 2d .			2e	239,000
3		ract line 2e from line 1 .			3	1,209,669
4					3	1,209,009
a		·	ided on Form 990, Part VIII, line 7b 4a 4b 4b			
b					4-	_
_ C		lines 4a and 4b			4c 5	1 200 660
5 Part			4c. (This must equal Form 990, Part I, line 12)			1,209,669
rait	711		swered 'Yes' to Form 990, Part IV, line 12a.	tii Expelises	, bei	Return. Complete
1	Total	expenses and losses per	audited financial statements		1	1,254,382
2	A mot	unts included on line 1 but	not on Form 990, Part IX, line 25			
а	Dona	ted services and use of fa	cilities	239,000		
b	Prior	year adjustments				
С	Othe	rlosses				
d	Othe	r (Describe in Part XIII)			1	
e	A dd I	ines 2a through 2d			2e	239,000
3		=			3	1,015,382
4), Part IX, line 25, but not on line 1:			, ,
а			ded on Form 990, Part VIII, line 7b 4a			
b			4b			
С					4c	0
5	Total	expenses Add lines 3 ar	d 4c. (This must equal Form 990, Part I, line 18)		5	1,015,382
Part		Supplemental Inf			I	, ,
Provid	de the	descriptions required for	Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV,	lines 1b and 2b	٠,	
			lines 2d and 4b, and Part XII, lines 2d and 4b Also comp	lete this part to	provid	de any addıtıonal
ınform			T			
	R€	eturn Reference	Explanation			
PART I	I, LIN	IE 9	THE ORGANIZATION'S CONSERVATION EASEMENT I			
			FINANCIAL POSITION AT MARKET VALUE AS DETERI APPRAISAL	MINED BY AN I	NDEF	ENDENT
PART \	/,LIN	E 4	THE TRUST'S ENDOWMENT FUND INCLUDES A PERMA	NENTLY REST	RICT	ED FUND WHICH IS A
	•		TRADITIONAL DONOR-RESTRICTED ENDOWMENT FU			
			EARNINGS WILL BE USED IN THE UNRESTRICTED OP BY GENERALLY ACCEPTED ACCOUNTING PRINCIPLE			
			ENDOWMENT FUNDS ARE CLASSIFIED AND REPORTE			
			ABSENCE OF DONOR-IMPOSED RESTRICTIONS			
PART >	K, LIN	E 2	EFFECTIVE JULY 1, 2009 THE TRUST ADOPTED A POIL ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES			
			FINANCIAL STATEMENTS THE POLICY PRESCRIBES			
			MEASUREMENT PRINCIPLES FOR THE FINANCIAL ST			
			MEASUREMENT OF TAX POSITIONS TAKEN OR EXPEC			
			RETURN THAT ARE NOT CERTAIN TO BE REALIZED THAD NO IMPACT ON THE TRUST'S FINANCIAL STATE			
			TAKEN BY THE TRUST FOR ANY YEARS OPEN UNDER			
			LIMITATIONS ARE THAT THE TRUST CONTINUES TO			
			THE TRUST HAS PROPERLY REPORTED UNRELATED B INCOME TAXES THE TRUST BELIEVES THAT THERE A			
			EXPECTED TO BE TAKEN THAT WOULD SIGNIFICANT			
			BENEFITS WITHIN 12 MONTHS OF THE REPORTING D	ATE NONE OF	THE	TRUST'S FEDERAL
			INCOME TAX RETURNS ARE CURRENTLY UNDER EXAM	OH NOITANIN	WEVE	R, FISCAL YEARS

2012 AND LATER REMAIN SUBJECT TO EXAMINATION BY THE IRS AND STATE AUTHORITIES

Jenedale 2 (1 31111 33 3) 23 13		i age S
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

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Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

2044

2014

DLN: 93493062007186OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

NATIONAL PARK TRUST INC

Employer identification number 52-1691924

Part I General Information on Grants and Assistance

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

✓ Yes

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount 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 grant or assistance
(1) THE TRUST FOR PUBLIC LAND 111 SOUTH GRAND AVE STE 203 BOZEMAN, MT 59715	23-7222333	501 (C)(3)	15,000				HAYES INHOLDING ACQUISITION AT KENNESAW MOUNTAIN NATIONAL BATTLEFIELD PARKZION NATIONAL PARK INHOLDING ACQUISITION
(2) NATIONAL PARK SERVICE 2701 BARSTOW ROAD BARSTOW,CA 92311	53-0197094	GOV'T UNIT	47,044				FUND RESEARCH AND OPERATIONS AT IVANPAH DESERT TORTOISE RESEARCH FACILITY
(3) NATIONAL GEOGRAPHIC SOCIETY- DC 1145 17TH ST NW WASHINGTON, DC 20036	53-0193519	501 (C)(3)	10,000				FUNDING TO ASSIST IN THE DEVELOPMENT OF A BUDDY BISON BOOK SERIES FOR YOUNG READERS

Enter total number of section 501(c)(3) and government organizati	ions	ıızatıons	listedi	i in 1	n th	the	e li	ıne	1 t	:able	е.
---	------	-----------	---------	--------	------	-----	------	-----	-----	-------	----

Part III	Grants and Other Assistance to Domestic Individuals. 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) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

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

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As Filed Data -

DLN: 93493062007186

OMB No 1545-0047

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE 0

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization NATIONAL PARK TRUST INC	Employer identification number
	52-1691924

Return Reference	Explanation	
	990 PART III, LINE 4A PROGRAM SERVICE ACCOMPLISHMENTS	ENSURING PARK PRESERVATION TODAY, CREATING PARK STEWARDS FOR TOMORROW FOR 32 YEARS, NATIONAL PARK TRUST (NPT) HAS WORKED ON HUNDREDS OF PARK PRESERVATION PROJECTS FROM MANET OAL SKA AND HAS BEEN INSTRUMENTAL IN PRESERVAS INSARILY 39,000 ACRES OF PARK LANDS FROM DEVELOP MENT. WE ARE UNIQUE IN THAT WE MOVE QUICKLY TO SELECT, ACQUIRE AND PRESERVE LAND AND WATER BY DEJOCATING PUNDING TO COMMUNITIES AND PROJECTS THAT NEED IT MOST OFTEN WE SERVE AS A PARTINER WITH LARGE NATIONAL LAND PROJECTS THAT NEED IT MOST OFTEN WE SERVE AS A PARTINER WITH LARGE NATIONAL LAND REJECTS THAT NEED IT MOST OFTEN WE SERVE AS A PARTINER WITH LARGE NATIONAL LAND RESIDER STO COMPLETE PARK PRESERVA TION NOW THROUGH OUR NATIONALLY RECOGNIZED ENVIRONMENTAL EDUCATION INTO THE SELECT ON THE PARK PRESERVA THO NOW THROUGH OUR NATIONALLY RECOGNIZED ENVIRONMENTAL EDUCATION INTO THE SELECT ON THE PARK PRESERVA THO NOW THROUGH OUR NATIONALLY RECOGNIZED ENVIRONMENTAL EDUCATION BY PROVIDING INDEPTH ENVIRONMENTAL AND OUTDOOR EDUCATION EXPERIENCES FOR KIDS. THE FAMILES AND TEACHERS WITH A STRONG FOCUS ON LINGER-SERVED COMMUNITIES OUR GOAL IS TO QUI. THATE THE NEXT GENERATION OF ENVIRONMENTAL STEWARDS AND CONSERVATION FOR PRESERVATION TO PROVIDE SERVED OF THE PARK PRESERVATION OF ENVIRONMENTAL STEWARDS AND WATER, AND TO REPORTANT CONTROL FOR THE PARK PROVIDED OF THE PARK PRO

Return Explanation	ion	
990 PART III, LI PROGRAM SEI ACCOMPLISHIN	RVICE Y M M M S B C P F Y G C T G B C P T U A M M T N A B P L P C P M E	JILD THE LASSEN PEAK TRAIL, THE SIGNATURE TRAIL TO THE PEAK OF THE PARK'S NAMESAKE YEARS OF USE HAS LED TO THE TRAIL'S DETERIORATION AND DEGRADATION OF THE FRAGILE WOUNTAIN ECOSY'S TEM NPT HAS HELD A FALL BOARD MEETING AT LASSEN SANTA MONICA WOUNTAINS NATIONAL RECREATION AND REAL BOARD MEETING AT LASSEN SANTAT MONICA WOUNTAINS NATIONAL RECREATION AND REAL BOARD MEMBERS HIP AND THE TRUST FOR PUBLIC LA ND TO PROTECT HIGH PRIORITY INHOLDINGS IN THE SMINNRA CALIFORNIA-BASED BOARD MEMBERS HAVE MET WITH CALIFORNIA CONGRESSMEN ON BEHALF OF THE PROJECT AND HAVE HELPED SECURE LWCF FUNDS FOR THEIR PURCHASE CALIFORNIA-BASED MEMBER HAS MET WITH CALIFORNIA CONGRESSMEN ON BEHALF OF THE PROJECT YOSEMITE NATIONAL PARK (SUMMER 2014 TO PRESENT) PARTNERING WITH THE TRUST FOR PUBLIC LANDS TO ACQUIRE, PRESERVE, AND DONATE 400 ACRES OF CRITICAL HABITAT TO YOSEMITE NATIONAL PARK NPT HELD THE SEMI-ANNUAL BOARD MEETING IN FALL OF 2014 GEORGIA KENNESSA W MOUNTAIN NATIONAL BATTLEFIELD PARK (WINTER 2010 TO PRESENT) TO COMMEMORATE THE SESQUICEN TENNIAL OF THE CIVIL WAR, NPT IS WORKING IN PARTNERSHIP WITH THE TRUST FOR PUBLIC LAND TO ACQUIRE AND PROTECT A CRITICAL INHOLDING OF 16 ACRES IN GEORGIA'S KENNESSAW MOUNTAIN NATION AL BATTLEFIELD PARK (THE BATTLEFIELD SIGNIFICANT BOTH HISTORICALLY AND ENVIRONMENTALLY AMONG ITS NATURAL RESOURCES ARE THE NOSES CREEK WATERSHED, KENNESSAW MOUNTAIN, THE APPALAC HIAN FOOTHILLS, SCENIC VIEW-SHED PROTECT ON AND RECREATIONAL PARKLAND. ITS HISTORICAL SIGN IFICANCE RESTS IN THE UNION'S TROOP MOVEMENTS IN 1864, WHEN CONFEDERATE SOLDIERS CELEBRATE DA RARE VICTORY OVER JINION TROOPS DURING THE WANING YEARS OF THE WAR NPT IS PROVIDING TE CHINICAL ASSISTANCE, ADVOCACY WORK AND FUNDIS FOR DUE DILLIGENCE TO HEYER AND THE COMPANIES TO ACQUIRE HIS PARCEL AND THE CIVIL WAR TRUST INDIANA INDIANA DUNES NATIONAL LAKESHORE (FALL 2013 TO PRESENT) NPT IS WORKING WITH THE NES SOND TWO AREA ENERGY COMPANIES TO ACQUIRE HEADED FOR PERTY AT THE NATIONAL LAKESHORE USING FUNDS THE COMPANIES HAVE COMMITTED AS PART OF SETILLEMENT AGR

Return Reference	Explanation	
Reference	990 PART III, LINE 4A PROGRAM SERVICE ACCOMPLISHMENTS	MINIESOTA BRUCE VENTO NATURE SANCTUARY (ONGOING SINCE 2006) NPT IS WORKING TO RAISE FUNDS FOR THE ECOLOGICAL RESTORATION OF THIS UNIQUE 27-ACRE PARK ON THE MISSISSEPH FLOODE. AIN EAST OF ST PAUL, MINIESOTA THE SANCTUARY INCLUDES SPRING-TED WETLANDS, FLOODE. AIN FOREST, FRABE AND OAK WOODLAND HABITAT, AND UNIQUE LOCK OF THE MISSISSEPH FLOODE. AIN FOREST, FRABE AND OAK WOODLAND HABITAT, AND UNIQUE LOCK OF THE PAUL OF THE MISSISSEPH FLOODE. AIN FOREST, FRABE AND OAK WOODLAND HABITAT, AND UNIQUE LOCK OF THE PAUL OF THE P
		MA RYLAND - 7 SCHOOLS, 1300 STUDENTS MISSISSIPPI - 4

Return Explanation Reference	
PROGRAM SERVICE SACCOMPLISHMENTS SERVICE SERV	SCHOOLS, 550 STUDENTS MISSOURI - 2 SCHOOL, 200 STUDENTS NEV ADA - 4 SCHOOLS, 500 STUDENTS NEW YORK - 2 SCHOOLS, 100 STUDENTS NEW JERSEY - 3 SCHOOL, 400 STUDENTS NEW ORLEANS - 1 SCHOOL, 250 STUDENTS NORTH CAROLINA - 1 SCHOOL, 200 STUDENTS OREGON - 2 SCHOOL, 200 STUDENTS PENNSYLVANIA - 1 SCHOOL, 300 STUDENTS TEXAS - 1 SCHOOL, 200 STUDENTS PENNSYLVANIA - 1 SCHOOL, 300 STUDENTS TEXAS - 1 SCHOOL, 200 STUDENTS VIRGINIA - 3 SCHOOL, 4 00 STUDENTS WASHINGTON, DC - 13 SCHOOLS, 2800 STUDENTS BELOW ARE SAMPLES OF BUDDY BISON SC HOOL EVENTS IMPLEMENTED BY NPT CALIFORNIA MARCH 2013. NPT BROUGHT OVER 50 UNDER-SERVED Y OUTH (TOTAL 100) FROM STEPHEN C FOSTER ELEMENTARY TO THE SANTA MONICA MOUNTAINS NATIONAL RECREATION AREA IN THOUSAND OAKS, CA WHERE THE CHILDREN WENT ON NATURE HIKES AND CONDUCTED OTHER ACTIVITIES DESIGNED TO ENGAGE THE CHILDREN IN ENVIRONMENTAL EDUCATION AND OUTDOOR R ECREATION ARRIL 2013. 70 STUDENTS FROM DEL SUR ELEMENTARY VISIT THE CALIFORNIA STATE POPP Y RESERVE TO LEARN ABOUT THE WILDLIFE, PLANTS AND HISTORY OF THEIR COMMUNITY/PARK MAY 2013. 150 2ND GRADERS FROM WALTER V. LONG ELEMENTARY VISITED LAKE MEAD NATIONAL RECREATION AR EA. THEY TOOK A RIDE ON A RIVER BOAT AND LEARNED ABOUT THE LAKE AND ITS SURROUNDING WILDLIFE MAY 2013. 70 STUDENTS FROM COYOTE CANYON ELEMENTARY SCHOOL TRAVELED TO MOJAVE DESERT IN ATIONAL PRESERVE TO LEARN ABOUT THE DESERT ECOSYSTEM AND HOW THE ANIMALS ARE ADAPTED TO THE UNIQUE TERRAIN OCTOBER 2014. 100 STUDENTS FROM BAKER ELEMENTARY VISIT THE WANPAH DESER T. TORTOISE FACILITY TO HELP THE NATIONAL PARK SERVICE LAUNCH THE HATCHING PROGRAM AND LEAR NABOUT THE ENDANGERED SPECIES GEORGIA FALL 2013. NPT WORKED ONCE AGAIN WITH HOLLY DALE ELEMENTARY (140 5TH GRADERS), MARIETTA BY VISITING KENNESAW MOUNTAIN NATIONAL BATTLEFIELD AND THE RESERVE ET DENTS LEARNED ABOUT THE SIGNIFICANCE OF THIS CIVIL WAR BATTLEFIELD AND THE LIFE OF A CIVIL WAR SCHOOL SENDENTLY B EING USED FEATURING STEM MOUNTAIN AND SAW BREATHTAKING VIEWS OF MARIETTA BY VISITING KENNESS WE MOUNTAIN NATIONAL BATTLEFIELD AND THE

DE DIEGO COMMUNITY ORE THEY VISITED NEW NATURAL PLAY O COMMUNITY ACADEMY ISTORY MUSEUM IN THEIR TICIPATED IN LEARNING PLANNED FOR 70 3RD END LOUISVILLE NATURE OUT THE LOCAL WILDLIFE ME NTARY PARTICIPATE IN TEPS TO REDUCE THEIR TA OTHER SCHOOL S TO WITH THE NATIONAL PARK AL PARK, 120 STUDENTS Z FEBRUARY 2014 AND NTARY PLANNED AND NEW ORLEANS THEY NCE, PLACEMENT, AND O GRADE) PARTICIPATE IN TEPS TO REDUCE THEIR TA OTHER SCHOOLS TO STUDENTS FROM ST INACOSTIA RIVER, BEREAK AT HARPER'S BENTS (MD) WENT TO IN EVENT AT THE US IDDLE SCHOOL FOR GIRLS XENT RESEARCH REFUGE THAT US FISH AND VISITED TIMONIUM RTANCE OF OUTDOOR TANDREWS FROM TWILDLIFE, NATURAL BEACON HEI GHTS CTS AT GLENRIDGE -2013 SCHOOL YEAR THEY OSYSTEM AND LEARNED BEACON HEIGHTS EL, MUSEUM FOR NATIONAL RAL AGENCIES TO BRING THE STUDENTS JUNE TACADEMY (DC) CANOED THIS WAS TO CELEBRATE DENT S ABOUT THE RY (150 3RD GRA DERS) MOF NATURAL HISTOR Y ESTATE PARK THEY ALSO MINING A WASTE SPILL RADERS) VISITED THE OAT THEY LEARNED AY 2015 KREOLE PRIMARY ATIONAL WILDLIFE REFUGE FALL 2014 60 STUDENTS BISON CARBON BON FOOTPRINT AT WITH A PARK VISITED ESTE LL MANOR MPORTANCE OF THE PINE S AREA (ATLANTIC CITY) S AREA (ATLANTIC CITY)
C OHEN HOLD TO SAINT OF CHOOK OF THE SOUTH O

Return	Explanation	
Reference	990 PART III, LINE 4A PROGRAM SERVICE ACCOMPLISHMENTS	RICHMOND AVENUE SCHOOL 4TH GRADE) PARTICIPATE IN OUR BUDDY BISON CARBON REDUCTION CONTEST. THEY TOOK 8 SIMPLE STEPS TO REDUCE THEIR CARBON FOOTPRINT AT SCHOOL AND AT HOME. THEY COM PETED AGAINST 4 OTHER SCHOOLS TO WITH A PARK SCHOLARSHIP. NEW YORK JULY/AUGUST 2014 & 201 5 30 STUDENTS FROM THE DARE2B PROGRAM IN NYC VISITED THE BROOKLYN BRIDGE PARK, CENTRAL PARK & ZOO, AND GATEWAY NATIONAL RECREATION AREA (JUG BAY) TO LEARN ABOUT THE HISTORY AND EC OLOGY OF THE PARKS, CONDUCTED SCIENCE
		IGNATIUS LOYOLA ACADEMY VISIT FT MCHENRY NATIONAL MONUMENT AND HISTORIC SHRINE TO CELEBR ATE KIDS TO PARKS DAY WITH NFL PLAYER FROM THE BALTIMORE RAVENS AND NFLPA MEMBERS

OCT 2014 TO PRESENT - 40 THIRD GRADE STUDENTS FROM NEVAL THOMAS ELEMENTARY VISITED THE NATIONAL PROGRAM SERVICE MALL AND MEMORIALS PARK TO SEE THE PLACES THEY STUDIED IN SCHOOL. WEST VIRGINA MARCH AND JUNE ACCOMPLISHMENTS AC	Return Reference	Explanation
I AND HISTORIC I ANDMARKS AND TO PROVIDE THE DIRLIC WITH INFORMATION ON SLICH CONTDID ITIONS	990 PART III, LINE 4A PROGRAM SERVICE	CCT 2014 TO PRESENT - 40 THIRD GRADE STUDENTS FROM NEVAL THOMAS ELEMENTARY VISITED THE NATIONAL MALL AND MEMORIALS PARK TO SEE THE PLACES THEY STUDIED IN SCHOOL WEST VIRGINIA MARCH AND JUNE 2013, 2014 AND 2015 NPT FUNDS KIDS TO PARKS SCHOLARSHIPS TO HARPERS FERRY NATIONAL HISTORICAL PARK AND TO FOR LOVE OF CHILDRENS OUTDOOR EDUCATION CENTER IN W MAY 2013 40 STUDENTS FROM STOKES PUBLIC CHARTER SCHOOL TRAVELED TO HARPERS FERRY AND FLOC'S OUTDOOR EDUCATION CENTER TO TAKE PART IN TEAM BUILDING EXERCISES AND HIKES THROUGH THE FOREST KIDS TO PARKS DAY THIS NATIONAL DAY OF PLAY WAS LAUNCHED IN 2011 BY NATIONAL PARK TRUST MAY 18, 2013 306 MAYORS REPRESENTING 50 STATES AND WASHINGTON D.C. AND 10 GOVERNORS PARTICIPATED AND PROMOTED THE EVENT A SENATE RESOLUTION WAS PASSED AND THERE WERE 367 PARK EVENTS REGISTERED AT KIDSTOPARKS ORG MORE THAN 139, 000 PARTICIPATED CAST TO COAST THO 20 SCHOOLS CONTEST WINNERS WERE SELECTED REPRESENTING 21 STATES AND WASHINGTON DC. AS A RESULT OF THE SCHOOL CONTEST, NPT PROVIDED PARK EXPERIENCES FOR OVER 1,600 STUDENTS MAY 17, 2014 405 MAYORS REPRESENTING 50 STATES AND WASHINGTON DC. AS A RESULT OF THE SCHOOL CONTEST, NPT PROVIDED PARK EXPERIENCES FOR OVER 1,600 STUDENTS MAY 17, 2014 405 MAYORS REPRESENTING 50 STATES AND WASHINGTON DC. AND 28 GOVERNORS PARTICIPATED AND PROMOTED THE EVENT A SENATE RESOLUTION WAS PASSED AND THERE WERE 1,050 PARK EVENTS REGISTERED AT KIDSTOPARKS ORG MORE THAN 440,000 PARTICIPATED COAST TO COAST AND 45 SCHOOLS CONTEST WINNERS WERE SELECTED REPRESENTING 28 STATES AND WASHINGTON DC AS A RESULT OF THE SCHOOL CONTEST, NPT PROVIDED PARK EXPERIENCES FOR OVER 3,000 STUDENTS EACH FIELD EXPERIENCE WAS BASED AROUND HEALTHY OUTDOOR LIVING, ENVIRONMENTAL EDUCATION AND PARK STEWARDSHIP EACH ONE OF THE LISTED SCHOOLS COMPLETED SENVICE PROJECTS AND LEARNED ABOUT THE NATURAL ENVIRONMENT MAY 16, 2015 359 MAYORS REPRESENTING 50 STATES AND WASHINGTON DC AND 27 GOVERNORS PARTICIPATED COAST TO COAST, AND 50 STILLE 1 SCHOOLS RECEVED PARK GRANTS THROUGH THE KIDS TO PARK SOAD AND FROM

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	NPT OFFERS MEMBERSHIPS TO THE GENERAL PUBLIC MEMBERS RECEIVE NO BENEFITS, BUT ARE ENTITLED TO RECEIVE "NPT NEWS AND "BUDDY BISON BUZZ" ELECTRONIC NEWSLETTERS AND A PLUSH TOY

Return Reference	Explanation
FORM 990, PART VI,	THE DRAFT 990 IS FIRST REVIEWED BY THE CFA AND EXECUTIVE DIRECTOR FOR ACCURACY AND CONTENT
SECTION B, LINE 11	PRIOR TO FILING, THE FULL BOARD OF TRUSTEES IS PROVIDED A COPY OF THE FINAL FORM 990

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	EACH TRUSTEE AND OFFICER IS REQUIRED TO REVIEW A COPY OF THE CONFLICT OF INTEREST POLICY, WHICH REQUIRES EACH PERSON TO DISCLOSE ANY RELATIONSHIPS, POSITIONS OR CIRCUMSTANCES IN WHICH HE OR SHE BELIEVES COULD CONTRIBUTE TO A CONFLICT FOLLOWING FULL DISCLOSURE OF A POSSIBLE CONFLICT OF INTEREST, THE BOARD OF TRUSTEES SHALL DETERMINE WHETHER A CONFLICT OF INTEREST EXISTS AND IF SO, THE BOARD SHALL VOTE TO AUTHORIZE OR REJECT THE TRANSACTION OR TAKE ANY OTHER ACTION DEEMED NECESSARY TO ADDRESS THE CONFLICT AND PROTECT NPT'S BEST INTERESTS THE TRUSTEE OR OFFICER WHO HAS THE CONFLICT IS RECUSED FROM ANY DISCUSSION AND VOTE

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE BOARD OF TRUSTEES REVIEWS AND APPROVES COMPENSATION OF THE EXECUTIVE DIRECTOR, AS WELL AS REVIEWS AND APPROVES COMPENSATION FOR OTHER SENIOR STAFF WHEN REQUESTED BY THE EXECUTIVE DIRECTOR

Return Reference	Explanation
	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

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DLN: 93493062007186

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE R

(Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization NATIONAL PARK TRUST INC

Employer identification number

52-1691924

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.											
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity						
(1) CANONIE IDNL ACQUISITION LLC 401 EAST JEFFERSON STREET SUITE 203 ROCKVILE, MD 20850 52-1691924	THE TAX EXEMPT PURPOSE OF ACQUIRING PARCELS OF LAND	IN	0	650,376	NATIONAL PARK TRUST INC						

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) (b) Name, address, and EIN of related organization Primary act		(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) cor	512(b)
						Yes	ty? No

Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Pai	rt IV, line 34
	because it had one or more related organizations treated as a partnership during the tax year.	

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h))	(i)	(j)	$\overline{}$	(k)
Name, address, and EIN of	Primary activity	y Legal	Direct	Predominant	Share of	Share of	Dispropi	rtionate	Code V-UBI	Genera	al or	Percentage
related organization	1 '	domicile	controlling	income(related,	total income	end-of-year	allocati	ions?	amount in box	manac	ging	ownership
	1 '	(state or	entity	unrelated,		assets		- 1	20 of	partne	er?	ľ
	1 '	foreign	, '	excluded from		i		- 1	Schedule K-1	i .		ŀ
	1 '	country)	, '	tax under		i		I	(Form 1065)	i		
	1 '	1	, '	sections 512-		i		- 1	'	i		
	1	1 1	, '	514)		i	\bot		. !		ightharpoonup	
	1	1	, ,			i	Yes	No		Yes	No	
			(•								
							——		i		—	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512	
related organization		domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	
		(state or foreign		corp,		assets		controlled	
		country)		or trust)				entity?	
								Yes	No

s Other transfer of cash or property from related organization(s)

hedule R (Form 990) 2014		Pa	ge 3
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b,	or 36.		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b		No
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1 e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i	Yes	
j Lease of facilities, equipment, or other assets to related organization(s)	1 j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
I Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
• Sharing of paid employees with related organization(s)	10		No
P Reimbursement paid to related organization(s) for expenses	1p		No
q Reimbursement paid by related organization(s) for expenses	1 q		No
r Other transfer of cash or property to related organization(s)	1r		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	, ,	<u>'</u>	
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) CANONIE IDNL ACQUISITION LLC	I	32,346	FMV

No

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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 revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

4 <u> </u>													
(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	s 50 orgai	(e) all partners section i01(c)(3) anizations?	(f) Share of total income	end-of-year	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
		<u> </u>	514)	Yes	No	<u> </u>	<u> </u>	Yes	No		Yes	No	
				\Box				,	\Box				

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Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

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