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Return of Organization Exempt From Income Tax

DLN: 93493351000438 OMB No 1545-0047

Department of the Treasur Internal Revenue Service

Activities & Governance

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 Open to Public ▶ Information about Form 990 and its instructions is at www IRS gov/form990 Inspection For the 2017 calendar year, or tax year beginning 07-01-2017 , and ending 06-30-2018 Name of organization NATIONAL PARK TRUST INC D Employer identification number ☐ Address change 52-1691924 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) 401 EAST JEFFERSON STREET NO 207 ☐ Amended return ☐ Application pending (301) 279-7275 City or town, state or province, country, and ZIP or foreign postal code ROCKVILLE, MD 20850 G Gross receipts \$ 1,643,147 F Name and address of principal officer **H(a)** Is this a group return for GRACE K LEE ☐Yes ☑No subordinates? 401 EAST JEFFERSON STREET NO 207 H(b) Are all subordinates ROCKVILLE, MD 20850 ☐Yes ☐No included? Tax-exempt status 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW PARKTRUST ORG L Year of formation 1990 M State of legal domicile DC Summary 1 Briefly describe the organization's mission or most significant activities PRESERVING PARKS TODAY, CREATING PARK STEWARDS FOR TOMORROW Check this box 🕨 🗌 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 3 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 11 1,800 Total number of volunteers (estimate if necessary) . . . 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 . **7**b **b** Net unrelated business taxable income from Form 990-T, line 34 **Current Year** 8 Contributions and grants (Part VIII, line 1h) . . 1,591,697 1,375,026 **9** Program service revenue (Part VIII, line 2g) . . . 3,630 2,970 23,250 13,250 47,072 39,697 1,655,649 1,440,943

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . 935,668 **14** Benefits paid to or for members (Part IX, column (A), line 4) . . 565,134 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 36,000 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶135,108 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . 818,725 2,355,527 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 . -699,878 Assets or d Balances **Beginning of Current Year** 20 Total assets (Part X, line 16) . 5,053,807 21 Total liabilities (Part X, line 26) 73.685 4,980,122 22 Net assets or fund balances Subtract line 21 from line 20 .

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

2018-12-06 Signature of officer

Type or print name and title Print/Type preparer's name ANDREW PHILLIPS CPA Paid

Sign Here

Preparer

Use Only

Preparer's signature ANDREW PHILLIPS CPA Firm's name PHILLIPS & ASSOCIATES LLC

Date 2018-12-06

Check 🗹 ıf self-employed PTIN P00839833

Firm's EIN ► 52-2009588 Firm's address ▶ 15825 SHADY GROVE ROAD SUITE 40 Phone no (301) 519-3280

ROCKVILLE, MD 20850 May the IRS discuss this return with the preparer shown above? (see instructions) .

✓ Yes 🗆 No

746,528

664,853

22,800

773,321

2,207,502

-766,559

4,274,743

51.114 4,223,629

End of Year

For Paperwork Reduction Act Notice, see the separate instructions.

GRACE K LEE EXECUTIVE DIRECTOR

Form **990** (2017) Cat No 11282Y

Form	990 (2	(017)					Page 2
Par	t III	Statement o	f Program Servic	e Accomplis	hments		
		Check If Schedu	ile O contains a respo	nse or note to	any line in this Part III		🗆
1	Briefly	describe the org	janization's mission				
PERS	ERVING	PARKS TODAY,	CREATING PARK STE	WARDS FOR TO	DMORROW		
	Did +h	o organization ur	dortalio any cianifica	nt program cor	vices during the year wh	auch ware not listed on	
2		ie organization ui ior Form 990 or 9	, ,		· .	non were not listed on	☐ Yes ☑ No
			e new services on Sch				Lifes Lino
3					changes in how it condu	icts any program	
•		es?		are significant	changes in how it conde	icts, any program	□ Yes ☑ No
		res no					
4			e changes on Schedul on's program service		nts for each of its three	largest program services, as meas	ured by expenses
	Sectio	on 501(c)(3) and		ns are required	to report the amount o	f grants and allocations to others,	
	(Code) (Expenses \$	957 630	including grants of \$	664,697) (Revenue \$)
44	•	ldıtıonal Data) (Expenses \$	637,629	including grants or \$	664,697) (Revenue \$,
		Takionai Bata					
4b	(Code) (Expenses \$	1,039,875	including grants of \$	81,831) (Revenue \$)
	See Ad	ldıtıonal Data					
4-	(C- 1-		\) (D	
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4d	Other	program service	s (Describe in Schedu	ıle O)			
		nses \$	•	uding grants of	\$) (Revenue \$)
4e	Total	program service	e expenses >	1,897,5	104		<u> </u>
			•				Form 990 (2017

or X as applicable

Checklist of Required Schedules

Yes

Page 3

No

Nο

Nο

Nο

Nο

Nο

No

Nο

Nο

Nο

No

Nο

Nο

Nο

Nο

No

Nο

Form **990** (2017)

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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 🛸 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 💆

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

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 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Was the organization included in consolidated, independent audited financial statements for the tax year?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

assessments, or similar amounts as defined in Revenue Procedure 98-19?

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

4 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right 6

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11a

11b

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11d

11e

11f

12a

12b

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14a

14b

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17

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19

Yes

Yes

Yes

Yes

Yes Yes

Yes

29

Page 4

Part IV Checklist of Required Schedules (continued)

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

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 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

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

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

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

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes,"

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

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24a

24b

24c

24d

25a

25b

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28a

28b

28c

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35a

35h

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Yes

Form 990 (2017)

Yes

Yes

No

20b Yes

Νo Nο

Νo Nο

Νo

Nο

orm	990 (2017)			Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 9			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	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	2b	Yes	
D	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)	20	165	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
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)?	4-		
		4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	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?			
		5 c		
	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
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		No
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		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
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		
	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? Section 501(c)(7) organizations. Enter	9b		
	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
.2a	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			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.	_		
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for			
	additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in	13a		
_	which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		1

ar	· VI C			
	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No' 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	" respo	nse to l	ines
	Check if Schedule O contains a response or note to any line in this Part VI			✓
Se	ction A. Governing Body and Management			
			Yes	No
la	Enter the number of voting members of the governing body at the end of the tax year 19			
	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 19			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
		6		No
_	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more	•		NO
	members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
3	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
e	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	⊋.)	
			Yes	No
а	Did the organization have local chapters, branches, or affiliates?	10a		No
)	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
а	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
,	Describe in Schedule O the process, if any, used by the organization to review this Form 990		162	
	Describe in Schedule O the process, if any, used by the organization to review this form 990		162	
3	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	Yes	
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>		Yes	
)	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b	Yes Yes	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c	Yes	
.	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13	Yes Yes Yes	
2	Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent	12b 12c	Yes Yes	
:	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13	Yes Yes Yes	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
3	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
b c a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
b c a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	Nd
b c a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14 15a 15b 16a 16b	Yes Yes Yes Yes Yes Yes A, MI,	MN,
a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14 15a 15b 16a 16b	Yes Yes Yes Yes Yes Yes A, MI,	MN,
b c a b	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Ction C. Disclosure List the States with which a copy of this Form 990 is required to be filed AL , AR , CA , DC , FL , GA , HI , IL , KS , N	12b 12c 13 14 15a 15b 16a 16b	Yes Yes Yes Yes Yes Yes A, MI,	
a b a e	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14 15a 15b 16a 16b	Yes Yes Yes Yes Yes Yes A, MI,	MN,
a b	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Ction C. Disclosure List the States with which a copy of this Form 990 is required to be filed AL , AR , CA , DC , FL , GA , HI , IL , KS , N	12b 12c 13 14 15a 15b 16a 16b	Yes Yes Yes Yes Yes Yes A, MI,	MN,

(15) CHRISTOPHER GRAHAM TRUSTEE

(16) JOHN ROLLINS JR

(17) ROGER WRIGHT

TRUSTEE

TRUSTEE

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 year

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

 List all of the organization's former director organization, more than \$10,000 of reportable co 										
List persons in the following order individual trus compensated employees, and former such person		rs, ınstı	tution	nal t	:rust	ees, c	office	ers, key employees	s, highest	
Check this box if neither the organization no	r any related o	rganızat	a <u>on c</u>	:omr	<u>ens</u>	ated :	any	current officer, dire	ector, or trustee	
(A) Name and Title	(B) Average hours per week (list any hours	perso and	an ònd son is	ne bo both recto	ot che ox, u :h an or/tr	unless n office rustee)	er e)	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) WILLIAM BROWNELL ESQ CHAIRMAN	2 00	×		x				0	0	0
(2) ANN GUALTIERI VICE CHAIR	2 00	×		x				0	0	0
(3) STEPHEN SCHULER TREASURER	2 00	×		x				0	0	0
(4) RAYMOND J SHERBILL SECRETARY	2 00	×		х				0	0	0
(5) CHARLES H KNAUSSESQ TRUSTEE	2 00	×						0	0	0
(6) JENNIFER CURTIN TRUSTEE	2 00	×						0	0	0
(7) TOM COSTLEY TRUSTEE	2 00	X						0	0	0
(8) CHADWICK DAYTON TRUSTEE	2 00	×						0	0	0
(9) RICHARD LEHMAN TRUSTEE	2 00	×						0	0	0
(10) MICHAEL R STEED TRUSTEE	2 00	×						0	0	0
(11) NEAL KEMKAR TRUSTEE	2 00	X						0	0	0
(12) LEN KENNEDY TRUSTEE	2 00	×						0	0	0
(13) CHARLES H PARDOE TRUSTEE	2 00	×						0	0	0
(14) RICHARD RING TRUSTEE	2 00	×						o	О	0
(15) CHRISTOPHER GRAHAM	2 00				\vdash				[

Х

Х

2 00

2 00

Form 990 (2017)

0

0

0

0

0

0

(A)

Name and Title

compensation from the organization ▶ 0

Part VII

(F)Estimated amount of other

(E)

Reportable

compensation

Page 8

	any hours director/trustee) organization (W- organization (W- 2/100 MFG)							from relate organization	ns	compen from	the		
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099 MISC)	,-	organizat relat organiz	:ed
(18)	SCOTT STONE	2 00	×						0		0		0
IKUS	NICE												
	ELIZABETH ULMER TEE	2 00	×						0		0		0
	GRACE LEE	40 00			Ī.,								
	UTIVE DIRECTOR	†			X				113,650		0		2,900
						\vdash					\dashv		
						\vdash					\dashv		
											\neg		
					-	\vdash					\dashv		
	Sub-Total				•	1					\bot		
_	Total from continuation sheets to Part	•			•		<u> </u>		113,650		0		2,900
	Total (add lines 1b and 1c)						-		· · · · · · · · · · · · · · · · · · ·		<u> </u>		2,900
2	Total number of individuals (including bu of reportable compensation from the org		those li	sted	abov	/e) v	vho re	ceiv	ed more than \$100	.000			
	<u> </u>											Yes	No
3	Did the organization list any former office	er. director or t	rustee.	kev (emp	love	e. or h	nahe	est compensated er	nplovee on			
	line 1a? If "Yes," complete Schedule J foi			·				٠.		• •	3		No
4	For any individual listed on line 1a, is the	sum of reporta	ble con	npens	atio	n ar	ıd othe	er co	mpensation from th	ne	Ť		
	organization and related organizations gi	eater than \$150	0,000?	If "Ye	s," (com	olete S	che	dule J for such				
	ındıvıdual		•		•	•	•	•			4		No
5	Did any person listed on line 1a receive of												
	services rendered to the organization?If	"Yes," complete	Schedu	ıle J t	or s	uch	persor	7.			5		No
S	ection B. Independent Contractors	6											
1	Complete this table for your five highest from the organization Report compensation										npens	sation	
		(A)								(B)		(c) .
	Name and	business address							Descript	ion of services	\dashv	Compen	isation
											\dashv		
											-		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

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

(C)

Position (do not check more

than one box, unless person

(D)

Reportable

compensation

(B)

Average

hours per

Part	VI											
		Check if Schedul	e O contains a	a respo	onse or note to any	Ine in this F (A) Total reve		(I Relat exe fund	B) ted or impt ction	(C) Unrelated business revenue	(D) Revenuexcluded tax under se	from ections
	18	a Federated campaign	ns	1a	15,143			reve	enue		512-51	.4
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues		1b								
Gra not	١,	c Fundraising events		1c								
ts.	١,	d Related organizatio	ns	1d								
Gif ia	١,	e Government grants (co	ontributions)	1e	47,300							
ns, Sim	1	f All other contributions,	, gıfts, grants,									
atio er (and similar amounts no above	ot included	1f	1,312,583							
년 된 등	,	Noncash contribution	ons included									
Contributions, Gifts, Grants and Other Similar Amounts	L	in lines 1a-1f \$	<u> </u>	_	_							
ه د	֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡	Total. Add lines 1a-1	.Г	• •		1,375	026					
n.e	3-	. DIC DUDDY DICON DENI	TA1		Business	900099		2,970		,970		
EV 43	Za	BIG BUDDY BISON REN	IAL			900099		2,970		,970		
Program Service Revenue	Ь			_								
er vic	c d											
Š	e											
grar	f	All other program se	rvice revenue									
δ	g	Total.Add lines 2a-2f	·		>	2,970						
	3	Investment income (ii	ncluding divid	ends, ı	nterest, and other	1	40.770					
		similar amounts) .			•	`	12,770					12,770
		Income from investme Royalties				-						
	3	Royalties	(ı) Real		(II) Personal							
	6a	Gross rents	(1)		(,	1						
		Logo rental evpenses				4						
	b	Less rental expenses										
	c	Rental income or (loss)				1						
	d	Net rental income o	r (loss)			4						
		· Net rental income o	(ı) Securit		(II) Other	1						
	7a	Gross amount from sales of assets other than inventory	. ,	89,253	, , , , , , , , , , , , , , , , , , ,	1						
	ь	Less cost or other basis and sales expenses	1	84,343		1						
	c	Gain or (loss)		4,910	5,57	5						
	d	Net gain or (loss)		•	•]	10,480		5,570			4,910
Other Revenue	8a	Gross income from for (not including \$ contributions reporte See Part IV, line 18	ed on line 1c)	of								
Re		Less direct expense		b								
ıer		: Net income or (loss)			ents	_						
Off	9a	i Gross income from g See Part IV, line 19	amıng actıvıtı	es								
				а								
		Less direct expense		b								
		: Net income or (loss)		activit	ies >							
	10	Gross sales of invent returns and allowand										
				а	52,145							
	b	Less cost of goods s	sold	b	17,860	J						
	•	Net income or (loss)		ınvent			34,285		34,285			
	11	Miscellaneous			Business Code 90009	9	5,412					5,412
	-1	aREFUNDS/REWARDS	5/OTHER		30009		5,712					5,712
	ь	<u> </u>			•	1						
		•										
						1						
	C	į										
		All 11				1						
	_	All other revenue .				1						
		Total. Add lines 11a			•		5,412					
	12	Total revenue. See	Instructions	• •	· · · · •	1	,440,943		42,825		0	23,092
											Form 990	(2017)

Form 990 (2017)				Page 10
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must complete all comple	_	·		
Check if Schedule O contains a response or note to any	/ line in this Part IX			<u> ⊔</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	746,528	746,528		
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, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	131,278	77,573	34,549	19,156
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	438,286	344,827	62,177	31,282
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	20,422	3,918	15,897	607
9 Other employee benefits	31,836	6,108	24,783	945
10 Payroll taxes	43,031	32,036	7,232	3,763
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	61,837	51,970	7,276	2,591
d Lobbying				
e Professional fundraising services See Part IV, line 17	22,800			22,800
f Investment management fees	419	293	93	33
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	187,580	175,430	5,925	6,225
12 Advertising and promotion	11,574	11,574		
13 Office expenses	61,240	43,570	5,356	12,314
14 Information technology	20,598	14,659	978	4,961
15 Royalties				
16 Occupancy	60,883	55,476	3,987	1,420
17 Travel	30,292	26,735	776	2,781
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	41,995	37,883	1,496	2,616
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	19,102	13,345	4,245	1,512
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a TOOLKIT AND FIELD TRIPS	243,078	243,078		
b OTHER EXPENSES	22,893	12,501	120	10,272
c BAD DEBTS	11,830			11,830

2,207,502

1,897,504

174,890

135,108

Form **990** (2017)

d

e All other expenses

25 Total functional expenses. Add lines 1 through 24e

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 ▶ ☐ If following SOP 98-2 (ASC 958-720)

End of year

Page **11**

2,300

54,002 31,424

1,465,100

1.390,600

4,274,743

51,114

51,114

3.399.599

784,650

39.380

4,223,629

4,274,743

Form **990** (2017)

394,174

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

Cash-non-interest-bearing

2	Savings and temporary cash investments	923,864	2	325,620
3	Pledges and grants receivable, net	784,426	3	605,051
4	Accounts receivable, net	4,876	4	6,472
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule I.		5	

(A)

Beginning of year

45,843

1,465,101

1,390,600

5,053,807

73.685

73,685

2.871.882

2.068,860

4,980,122

5,053,807

39.380

370.152

10c

11

12 13

14

15

16

17

18 19 20

21

22 23

24

25

26

27

28

29

30

31

32

33

34

Assets

Liabilities

Net Assets or Fund Balances

	II of Schedule L		5
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		6
7	Notes and loans receivable, net		7
8	Inventories for sale or use	36,240	8
9	Prepaid expenses and deferred charges	32,705	9

	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	1,485,228								
	b	Less accumulated depreciation	10 b	20,128								
	11	Investments—publicly traded securities .										
	12	$Investments-other\ securities\ \ See\ Part\ IV,\ line$	11 .									
	13	Investments—program-related See Part IV, line	11 .	•								
	14	Intangible assets										
	15	Other assets See Part IV, line 11										
	16	Total assets.Add lines 1 through 15 (must equa	al line	34)								
	17	Accounts payable and accrued expenses										
	18	8 Grants payable										
19 Deferred revenue												
	20	Tax-exempt bond liabilities										
,	21	Escrow or custodial account liability Complete P	art IV	of Schedule D								
2	22	Loans and other payables to current and former key employees, highest compensated employees										
2		persons Complete Part II of Schedule L										
1	23	Secured mortgages and notes payable to unrelate	ted thi	rd parties								
	24	Unsecured notes and loans payable to unrelated	third j	parties								
	25	Other liabilities (including federal income tax, pa and other liabilities not included on lines 17-24) Complete Part X of Schedule D	iyables	s to related third parties,								
	26	Total liabilities. Add lines 17 through 25										
	27	Organizations that follow SFAS 117 (ASC 95 complete lines 27 through 29, and lines 33 Unrestricted net assets										
	28	Temporarily restricted net assets										
:	29	Permanently restricted net assets										
•		Organizations that do not follow SFAS 117	(ASC 9	958),								
	30	check here ► ☐ and complete lines 30 through 34. Capital stock or trust principal, or current funds										
	31	Paid-in or capital surplus, or land, building or equipment fund										
	32	Retained earnings, endowment, accumulated inc	ome,	or other funds								
	33	Total net assets or fund balances										
:	34	Total liabilities and net assets/fund balances .										
_												

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis Consolidated basis ☐ Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 2b Yes

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both

Consolidated basis Separate basis ☐ Both consolidated and separate basis

No

Form 990 (2017)

3b

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight

2c Yes

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

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

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

Audit Act and OMB Circular A-133? 3a

Additional Data

Software Version: **EIN:** 52-1691924

Name: NATIONAL PARK TRUST INC.

Software ID:

Form 990 (2017)

Form 990, Part III, Line 4a: LAND AND PARKS PROGRAMS - SEE SCHEDULE O FOR ACCOMPLISHMENTS

Form 990, Part III, Line 4b: YOUTH PROGRAMS - SEE SCHEDULE O FOR ACCOMPLISHMENTS

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN					DLN: 9	l: 93493351000438					
SCI	łFD	ULE A	Dubli	c Charity State	is and Bul	hlic Sunn	ort	OMB No 1545-0047			
	m 990			c Charity Statu e organization is a sect			1	2017			
90E	(Z)			4947(a)(1) nonex	empt charitable	trust.		401 /			
Denart	nent of	the Treasury	► Information a	► Attach to Form bout Schedule A (Form			ıctions is at	Open to Public			
nterna	Reven	ue Service ne organiza	tion	<u>www.irs.g</u>	ov/form990.		Employer identific	Inspection			
		RK TRUST INC						acion number			
Pai	+ T	Reason	for Public Charity St	atus (All organization	s must comple	te this part) 9	52-1691924				
			private foundation beca				occ matractions.				
1		A church, c	onvention of churches, o	r association of churches	described in sec	tion 170(b)(1)	(A)(i).				
2		A school de	scribed in section 170(l	b)(1)(A)(ii). (Attach Sc	hedule E (Form 9	990 or 990-EZ))					
3	\Box	A hospital o	or a cooperative hospital :	service organization desc	rıbed ın section	170(b)(1)(A)(iii).				
4			esearch organization ope and state	rated in conjunction with	a hospital descr	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's			
5		An organiza (b)(1)(A)	ation operated for the ber (iv). (Complete Part II)	nefit of a college or unive	rsity owned or op	perated by a gov	rernmental unit descri	bed in section 170			
6		A federal, s	tate, or local governmen	t or governmental unit de	escribed in sectio	on 170(b)(1)(A	\)(v).				
7	✓	section 17	ation that normally receiv (0(b)(1)(A)(vi). (Comp	lete Part II)		_	ınıt or from the gener	al public described in			
8		A communi	ty trust described in sect	tion 170(b)(1)(A)(vi)	(Complete Part I	I)					
9			ural research organization rant college of agriculture					ege or university or a			
10		from activit	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)								
l1			ation organized and opera		or public safety S	ee section 509	(a)(4).				
12		more public	ation organized and opera ly supported organization through 12d that describ	ns described in section !	509(a)(1) or se	ction 509(a)(2). See section 509(a				
а		Type I. A so	supporting organization on the first supporting organization on the first support of the firs	perated, supervised, or c ly appoint or elect a maj	ontrolled by its s	upported organi	zation(s), typically by				
b		manageme	supporting organization : nt of the supporting orga plete Part IV, Sections	nization vested in the sai							
С			unctionally integrated. organization(s) (see instr					ted with, its			
d		functionally	on-functionally integrated The organization You must complete	ation generally must satis	sfy a distribution	requirement and					
e			box if the organization re or Type III non-function			RS that it is a Ty	pe I, Type II, Type II	I functionally			
f	Enter	the number	of supported organizatio	ns							
g			ing information about the		·T ·		T	(vi) Amount of			
	(i) Name of supported organization										
					Yes	No					
			<u> </u>								
		· ·									
Γotal			tion Act Notice, see the				 Schedule A (Form 9				

Schedule A (Form 990 or 990-EZ) 2017

Page 2

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part										
III. If the organization fails to qualify under the tests listed below, please complete Part III.)										
Section A. Public Support										
Calendar year	(2) 2012	(b) 2014	(a) 2015	(d) 2016	(a) 2017	(f) Total				

S	ection A. Public Support							
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) i	2017	(f) Total
	(or fiscal year beginning in) ▶	(4) 2010	(5) 202	(6) 2010	(4) 2020	(0)		(.,
1	Gifts, grants, contributions, and	1 202 261	4 475 252	2 405 453	1 501 607		1 205 720	0.044.504
	membership fees received (Do not	1,393,361	1,175,353	2,495,452	1,591,697		1,385,728	8,041,591
2	include any "unusual grant ") Tax revenues levied for the							
2	organization's benefit and either paid	ı						
	to or expended on its behalf	ı						
,	The value of services or facilities							
•	furnished by a governmental unit to	ı						
	the organization without charge	ı						
4	Total. Add lines 1 through 3	1,393,361	1,175,353	2,495,452	1,591,697		1,385,728	8,041,591
	The portion of total contributions by		2,2,2	_,,,,,,,	=,==,==,			-/
•	each person (other than a	ı						
	governmental unit or publicly	ı						
	supported organization) included on	ı						1,446,303
	line 1 that exceeds 2% of the	ı						, ,
	amount shown on line 11, column (f)	ı						
	, , , ,	ı						
5	Public support. Subtract line 5 from							6,595,288
	line 4							0,555,200
S	ection B. Total Support							
	Calendar year	(a)2013	(b) 2014	(c)2015	(d)2016	(e)2	2017	(f)Total
	(or fiscal year beginning in)	` ,	` '	` , ,				. ,
7	Amounts from line 4	1,393,361	1,175,353	2,495,452	1,591,697		1,385,728	8,041,591
8	Gross income from interest,							
	dividends, payments received on	8,406	10,453	11,623	10,975		12,770	54,227
	securities loans, rents, royalties and	0,100	10,100	11,023	10,575		12,,,,	31,227
	income from similar sources							
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							8,095,818
	Gross receipts from related activities,	etc (see instruction	ins)		I	12		197,996
								· · · · · · · · · · · · · · · · · · ·
13	First five years. If the Form 990 is for				•			nization,
	check this box and stop here	<u> </u>					▶⊔	
S	ection C. Computation of Publi	c Support Perce	entage					
14	Public support percentage for 2017 (III	ne 6, column (f) dr	vided by line 11, co	olumn (f))		14		81 470 %
	Public support percentage for 2016 Sc					15		80 920 %
	33 1/3% support test—2017. If the			n line 12 and line	14 is 22 1/20/2 or		hack this h	
Lba	· · · · · · · · · · · · · · · · · · ·	=			E 14 IS 33 1/3 /0 OI	illore, c	HECK CHIS D	
	and stop here. The organization qual							. ▶ ☑
b	33 1/3% support test— 2016. If th	e organization did	not check a box or	n line 13 or 16a, a	nd line 15 is 33 1/	3% or m	nore, check	this
	box and stop here. The organization	qualifies as a publ	licly supported org	anızatıon				▶ □
17a	10%-facts-and-circumstances tes	t—2017. If the orc	anization did not o	check a box on line	e 13, 16a, or 16b,	and line	14	
	is 10% or more, and if the organization	n meets the "facts-	-and-circumstance	s" test, check this	box and stop her	e. Expla	ain	
	in Part VI how the organization meets	the "facts-and-circ	umstances" test 1	The organization q	ualifies as a public	ly suppo	orted	
	organization							ightharpoons

h 10%-facts-and-circumstances test-2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly ▶ 🗆 supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Р	art III Support Schedule fo					_	_
	(Complete only if you o						er Part II. If
	the organization fails to ection A. Public Support	o quality under	the tests listed	pelow, please co	ompiete Part II.)	
	Calendar year						(0
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
2	organization's tax-exempt purpose Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
5	to or expended on its behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
_	3 received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b Public support. (Subtract line 7c						
8	from line 6)						
Se	ection B. Total Support		l	L		l	
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(0) 2013	(d) 2010	(e) 2017	(I) Iotai
9							
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI)						
13							
14	11, and 12) First five years. If the Form 990 is for	r the organization	ı n's fırst. second. tl	ı nırd. fourth, or fıft	h tax vear as a se	ction 501(c)(3) o	rganization.
	check this box and stop here		,	,,,	,		▶ □
Se	ection C. Computation of Public	Support Perce	entage				
15	Public support percentage for 2017 (li			column (f))		15	
16	Public support percentage from 2016	Schedule A, Part I	II, line 15			16	
	ection D. Computation of Invest	ment Income	Percentage			<u> </u>	
17	Investment income percentage for 20			line 13, column (f	f))	17	
18	Investment income percentage from 2	2016 Schedule A,	Part III, line 17			18	
	331/3% support tests—2017. If the			on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and						▶□
	33 1/3% support tests—2016. If the	•					· —
,	not more than 33 1/3%, check this bo	-			*		▶□
20	Private foundation. If the organizati	-	-		· · · · · -		▶□
		and the control of					. —

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

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	İ	
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)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
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		

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				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked 12a or 12b ın Part I, answer (b) and (c) below				
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				

				3.
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 12a or 12b ın Part I, answer (b) and (c) below			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or		$\overline{}$	
	supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections			
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes		$\overline{}$	
		4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and			

			, ,	
	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support			
	e 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			
	rganization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by mendment to the organizing document)			

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing			
	organization's supported organizations? If "Yes," provide detail in Part VI .			
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a			
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)			

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

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 I of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

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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.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

```
9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

Pa	rt IV Supporting Organizations (continued)			-9	
			Yes	No	
11	Has the organization accepted a gift or contribution from any of the following persons?				
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a			
b	A family member of a person described in (a) above?	11b			
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c			
	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				
5	ection C. Type II Supporting Organizations				
	cetion c. Type 11 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)					
S	ection D. All Type III Supporting Organizations				
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No	
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)				
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 instruct 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 (see		ctions)		
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	Parent of Supported Organizations Answer (a) and (b) below.				
	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? <i>Provide details in Part VI</i> .	3a			
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard	3b			

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 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)

Qualified set-aside amounts (prior IRS approval require			
Other distributions (describe in Part VI) See instructio	ns		
Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations to wh details in Part VI) See instructions			
Distributable amount for 2017 from Section C, line 6			
Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(iii) Distributable Amount for 2017		
	Other distributions (describe in Part VI) See instruction Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to whole details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see	Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is respondetails in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i))	Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i) Underdistributions

details in Part VI) See instructions	Terraine organization is respons	sive (provide	
9 Distributable amount for 2017 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-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
а			
b From 2013			

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			

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

i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4 5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

a Excess from 2013. **b** Excess from 2014. c Excess from 2015. **d** Excess from 2016. e Excess from 2017.

instructions)

See instructions

3j and 4c 8 Breakdown of line 7

Additional Data

Software ID: Software Version:

EIN: 52-1691924

Name: NATIONAL PARK TRUST INC

Page 8

Schedule A (Form 990 or 990-EZ) 2017

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

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. OMB No 1545-0047

DLN: 93493351000438

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

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

Name of the organization **Employer identification number** NATIONAL PARK TRUST INC 52-1691924 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 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 advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e g , recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure ✓ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b 2,093 00 Number of conservation easements on a certified historic structure included in (a) 2c 0 Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ✓ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2017

- (-)	Gryanizations Maintaining Co	Directions of Art, I	115(01)	icai i	ı cas	ures, or	Other	Jiiiiiiai F	133C12 (continuet	<i>1)</i>
3	Using the organization's acquisition, accessi items (check all that apply)	on, and other records	, check	any of	the f	ollowing t	:hat are a	significant	use of it	s collectio	on
а	Public exhibition		d		Loar	n or excha	ange prog	grams			
b	Scholarly research		е		Othe	er					
c	Preservation for future generations										
4	Provide a description of the organization's c	ollections and explain	how the	ey furt	her th	ne organiz	zation's e:	xempt purp	ose ın		
5	During the year, did the organization solicit assets to be sold to raise funds rather than							nılar	□ Y €		No
Par	rt IV Escrow and Custodial Arrang	ements									
	Complete if the organization and X, line 21.		m 990), Part	IV,	ine 9, o	r reporte	ed an amo	unt on	Form 99	0, Part
1a	Is the organization an agent, trustee, custon included on Form 990, Part X?	dian or other intermed	liary for	· contri	bution	ns or othe	er assets	not	□ Y €	es 🗆	No
b	If "Yes," explain the arrangement in Part XI	III and complete the fo	llowing	table					Amount		
c	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on I	Form 990, Part X, line	21, for	escrov	v or c	ustodial a	ccount li	ability?	□ Ye	es 🗆	No
b	If "Yes," explain the arrangement in Part XI	II Chack hara if the a	volanat	ion had	- boor	n provido	d in Part	VIII			7
	irt V Endowment Funds. Complete									· · <u> </u>	
	Endownient Fanasi complete	(a)Current year		rior yea			ears back	(d)Three ye		(e)Four v	ears back
1a	Beginning of year balance	39,380			9,380		279,380		314,380	, ,	313,130
b	Contributions										1,250
С	Net investment earnings, gains, and losses			12	2,327		3,353				
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs			167	2,327		93,353		35,000		
f	Administrative expenses										
g	End of year balance	39,380		39	9,380		189,380	1	279,380		314,380
2	Provide the estimated percentage of the cur	rent year end balance	(line 1	g, colu	mn (a	a)) held a	s				
а	Board designated or quasi-endowment >	0 %									
b	Permanent endowment ► 100 000 %										
С	Temporarily restricted endowment ▶	0 %									
	The percentages on lines 2a, 2b, and 2c sho										
3а	Are there endowment funds not in the posse	ession of the organiza	tion tha	t are h	eld ar	nd admini	stered fo	r the			- N-
	organization by (i) unrelated organizations								3	a(i)	No No
	(ii) related organizations				٠					a(ii)	No
b	If "Yes" on 3a(II), are the related organization	ons listed as required	on Sche	edule R	. ?	· · ·				3b	
4	Describe in Part XIII the intended uses of th	ne organization's endo	wment	funds						ı.	
Pai	rt VI Land, Buildings, and Equipme	ent.									_
	Complete if the organization ans										
	Description of property (a) Cost or of (investri		or other	basis (other)	(c) Acc	umulated o	depreciation	1	(d) Book v	alue
1a	Land			1,4	65,100						1,465,100
b	Buildings										
	Leasehold improvements										
	Equipment				20,128	3		20,128			0
	Other										
	al. Add lines 1a through 1e (Column (d) must	equal Form 990, Part	X, colui	mn (B)	, line	10(c))		>			1,465,100

Part VII Investments—Other Securities. Complete if the org	ganızatı	on ansv	vered "Yes" on Form 99	0, 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) Metho Cost or end-of	d of valuation -year market value
(1) Financial derivatives (2) Closely-held equity interests (3)Other				
(A)				
(B)				
(C)				
(D)				_
(E)				
(F)				
(G)				
(H)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•			
Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form	990, Pa	rt IV, lı	ne 11c. See Form 990,	Part X, line 13.
(a) Description of investment	(b) Boo	k value		d of valuation -year market value
(1)				<u> </u>
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answered 'Yes'	on Form	990 Pa	rt IV line 11d See Form 9	190 Part Y line 15
(a) Description	OH FOITH	990, Fa	TCTV, IIIIe IIu See FOIIII s	(b) Book value
(1) MINERAL RIGHTS DONATED TO NPT (2)				1,390,600
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
				1,390,600
Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25.	erea Yes			.e or 11f.
1. (a) Description of liability (1) Federal income taxes	_	(b) В	ook value	
, ,				
(2)				
(3)				
(4)				
(5)				
(6)	-			
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>			
2. Liability for uncertain tax positions In Part XIII, provide the text of the forganization's liability for uncertain tax positions under FIN 48 (ASC 740)	footnote t			
progression's Haplity for uncertain tax positions under FIN 48 (ASC 740). (i neck he	re it the	text of the footnote has be	en provided in Part XIII 😽

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments

Investment expenses not included on Form 990, Part VIII, line 7b .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . .

Other (Describe in Part XIII)

Add lines **4a** and **4b**

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Supplemental Information

Add lines 2a through 2d . .

Return Reference

Donated services and use of facilities

Part XI

2

b

c

b

c

Part XII

5

1

2

c

d

3

4

b

5

Part XIII

See Additional Data Table

Schedule D (Form 990) 2017

Page 4

512,066

2,709,502

502,000

2,207,502

2.207.502

Schedule D (Form 990) 2017

d 2d e 3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

			2€
			3
- 1	- I		

10.066

502,000

502,000

2e

3

4c

5

2a

2b

2c

4b

2a

2b

2c

2d

4a

4b

Explanation

1,440,943 4c 1,440,943 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Page 5		Schedule D (Form 990) 2017 Part XIII Supplemental Info		
	ormation (continued)			
	Explanation	Return Reference		

Schedule D (Form 990) 2017

Additional Data

Software Version: **EIN:** 52-1691924 Name: NATIONAL PARK TRUST INC

Software ID:

Supplemental Information Return Reference

Explanation

THE ORGANIZATION'S CONSERVATION EASEMENT IS CARRIED ON THE STATEMENT OF FINANCIAL POSITION AT MARKET VALUE AS DETERMINED BY AN INDEPENDENT APPRAISAL

Supplemental Information	
Return Reference	Explanation
PART V, LINE 4	THE TRUST'S ENDOWMENT FUND INCLUDES A PERMANENTLY RESTRICTED FUND WHICH IS A TRADITIONAL D ONOR-RESTRICTED ENDOWMENT FUND THE FUND'S INVESTMENT EARNINGS WILL BE USED IN THE UNRESTR ICTED OPERATIONS OF THE TRUST AS REQUIRED BY GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, NE T ASSETS ASSOCIATED WITH ENDOWMENT FUNDS ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS

-

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	EFFECTIVE JULY 1, 2009 THE TRUST ADOPTED A POLICY THAT CLARIFIES THE ACCOUNTING FOR UNCERT AINTY IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS THE POLICY PRESCRIBE S A RECOGNITION THRESHOLD AND MEASUREMENT PRINCIPLES FOR THE FINANCIAL STATEMENT RECOGNITI ON AND MEASUREMENT OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON AN INCOME TAX RETURN THAT ARE NOT CERTAIN TO BE REALIZED THE IMPLEMENTATION OF THIS POLICY HAD NO IMPACT ON THE TRUST'S FINANCIAL STATEMENTS THE INCOME TAX POSITIONS TAKEN BY THE TRUST FOR ANY YEARS OPEN UNDER THE VARIOUS STATUTES OF LIMITATIONS ARE THAT THE TRUST CONTINUES TO BE EXEMPT F ROM INCOME TAXES AND THE TRUST HAS PROPERLY REPORTED UNRELATED BUSINESS INCOME THAT IS SUB JECT TO INCOME TAXES THE TRUST BELIEVES THAT THERE ARE NO TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD SIGNIFICANTLY INCREASE UNRECOGNIZED TAX BENEFITS WITHIN 12 MONTHS OF THE REPORTING DATE NONE OF THE TRUST'S FEDERAL INCOME TAX RETURNS ARE CURRENTLY UNDER EXAMINATION HOWEVER, FISCAL YEARS 2012 AND LATER REMAIN SUBJECT TO EXAMINATION BY THE IRS AND STATE AUTHORITIES

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Total

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

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

Attach to Form 990 or Form 990-EZ.

Inspection

Employer identification number

DLN: 93493351000438 OMB No 1545-0047

Open to Public

NATIONAL PARK TRUST INC 52-1691924 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply ✓ Mail solicitations ✓ Solicitation of non-government grants ✓ Internet and email solicitations ✓ Solicitation of government grants Phone solicitations Special fundraising events ✓ In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☑ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual (iii) Did (ii) Activity (iv) Gross receipts (v) Amount paid to (vi) Amount paid to fundraiser have or entity (fundraiser) from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col (i) contributions? Yes No SEE PART IV THE COMPASS GROUP INC -2961-A HUNTER MILL RD 0 No 22,800 -22,800 SUITE OAKTON, VA 22124

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA,

-22,800

22,800

	than \$15,000 of fundraising e gross receipts greater than \$5	vent contributions and								
	group receipts grouter than ye	(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col (a) through					
		(event type)	(event type)	(total number)	col (c))					
ne										
Revenue										
ă	1 Gross receipts									
	2 Less Contributions									
	4 Cash prizes									
S	5 Noncash prizes									
Expenses	6 Rent/facility costs									
å å	7 Food and beverages									
Direct E	8 Entertainment									
ă	9 Other direct expenses									
	10 Direct expense summary Add lines 4 through 9 in column (d)									
Day	11 Net income summary Subtract line 10 till Gaming. Complete if the orga			>	mara than #15 000					
Pal	t III Gaming. Complete if the organization on Form 990-EZ, line 6a.	anizacion answered 16	es on Form 990, Part I	rv, mie 19, or reported	more than \$15,000					
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))					
	1 Gross revenue									
Expenses	2 Cash prizes									
ed Xi	3 Noncash prizes									
Direct	4 Rent/facility costs									
<u>ā</u>	5 Other direct expenses									
		☐ Yes%	☐ Yes	☐ Yes%						
	6 Volunteer labor	☐ No	☐ No	☐ No						
	7 Direct expense summary Add lines 2 t	through 5 in column (d)		•						
	8 Net gaming income summary Subtrac	t line 7 from line 1, colum	nn (d)							
9	Enter the state(s) in which the organizati	on conducts gaming activ	ities							
a	Is the organization licensed to conduct ga	aming activities in each of	these states?		☐ Yes ☐ No					
b	If "No," explain									
10a b	Were any of the organization's gaming lic	censes revoked, suspende		e tax year?	☐ Yes ☐ No					
	Tres, explain									

Sche	dule G (Form 990 or 990-EZ) 2017						F	Page 3		
11	Does the organization conduct gaming	activities with nonmem	bers?			Yes	□No			
12	Is the organization a grantor, beneficial formed to administer charitable gaming	ry or trustee of a trust o	or a member of a partnership or other en	tity		□Yes	_			
13	Indicate the percentage of gaming acti	vity conducted in								
а	The organization's facility				13a			%		
b	An outside facility				13b			%		
14	Enter the name and address of the per	son who prepares the o	rganization's gaming/special events book	s and red	ords					
	Name									
	Address >									
15a	Does the organization have a contract revenue?	with a third party from	whom the organization receives gaming			□Yes	Пио			
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$									
С	If "Yes," enter name and address of the	e third party								
	Name ▶									
	Address ►									
16	Gaming manager information									
	Name ►									
	Gaming manager compensation ► \$									
	Description of services provided ►									
	☐ Director/officer	☐ Employee	☐ Independent contracto	r						
17	Mandatory distributions									
а	Is the organization required under stat retain the state gaming license?	e law to make charitable	e distributions from the gaming proceeds	to		□Yes	Пио			
b										
	ın the organization's own exempt activ		· · · · · · · · · · · · · · · · · · ·							
Pai	TIV Supplemental Information III, lines 9, 9b, 10b, 15b, 1	n. Provide the expla 5c, 16, and 17b, as a	nations required by Part I, line 2b, c applicable. Also provide any addition	olumns al Inforn	(III) a nation	nd (v); ar ı (see ınst	nd Part ructions	s).		
	Return Reference		Explanation							
	EDULE G, PART I, LINE 2B, LIST OF TEN HEST PAID FUNDRAISERS	2961-A HUNTER MILL F FEES RELATED TO ACT	S OF INDIVIDUAL OR ENTITY (FUNDRAIS ROAD, SUITE 808 OAKTON, VA 22124 (II IVITIES TO HONE NPT MISSION, PROGRA WE WORK WITH CURRENT AND FUTURE) PÓRTIO AM, AND	N OF T	TOTAL OF \$ RAISING	90,000 1	IN .		

Schedule G (Form 990 or 990-EZ) 2017

Schedule I (Form 990) Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Part I General Information on Grants and Assistance 1 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? 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" on Form 990, Part IV, line 21, for any rected that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose	1000438	DLN: 934933510					As Filed Data -	NOT PROCESS	efile GRAPHIC print - DO I	
Part I General Information on Grants and Assistance 1 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?	OMB No 1545-0047 2017 Open to Public Inspection			d States , line 21 or 22.	s in the Uniten Form 990, Part IV	Governments mplete if the organiza	Department of the Treasury ► Infor			
Part I General Information on Grants and Assistance 1 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?		dentification number	Employer							
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?		24	52-16919							
organization (if applicable) grant cash (book, FMV, appraisal, noncash assistance or assistance		✓ Yes IV, line 21, for any recip			ted States	e of grant funds in the Un	stantiate the amount of or assistance? es for monitoring the us estic Organizations a	tain records to subs o award the grants o inization's procedure assistance to Dome	 Does the organization main the selection criteria used to Describe in Part IV the organization Part II Grants and Other A 	
				(book, FMV, appraisal,	cash	(d) Amount of cash	(c) IRC section	·	(a) Name and address of organization	
THE TRUST FOR PUBLIC LAND INHOLDING A	AT BALD	PURCHASE OF INHOLDING AT MOUNTAIN POI				480,000	501 (C)(3)	23-7222333	THE TRUST FOR PUBLIC LAND 3 SHIPMAN PLACE	
DUNES NATIONALLY IN NOTION OF THE PROPERTY OF	ONAL TO THE TO	FUNDING FOR DUNES NATION LAKESHORE, PURCHASE OF INHOLDING AT WASHITA BATT NHS, PURCHAS INHOLDING AT QUINAULT IN COMP, PURCHASE HISTORIC PRO AT PICTURED F NATIONAL LAK				168,629	GOV'T UNIT	53-0197094	1849 C STREET NW	
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table			•				-	()()		
3 Enter total number of other organizations listed in the line 1 table		Schedule I (Form 990	<u> </u>			· · · · · · ·				

Part IV

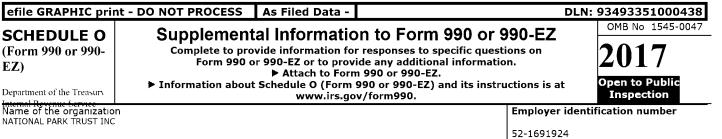
Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Explanation Return Reference

Schedule I (Form 990) 2017

efil	e GRAPHIC pr	int - DO NOT PR	OCESS	As Filed Data -		DLN:	9349335	1000	438
SCH	EDULE M			loncash Contri	hutiono		OMB No 1	.545-0	047
(For	m 990)		ľ	ioncash Contri	butions		20	1 =	7
		▶Complete if the	organizati	ons answered "Yes" on Fo	orm 990, Part IV, lines 2	9 or 30.	20	\mathbf{I}'	<i>'</i>
		► Attach to Form	990.						
Depar	tment of the Treasury	▶Information abo	ut Schedu	le M (Form 990) and its i	nstructions is at <u>www.ir</u> s	s.gov/form990	Open to	o Pub	lic
	al Revenue Service						Inspe		
	e of the organizat NAL PARK TRUST IN					Employer identi	fication n	umbe	•
						52-1691924			
Pa	rt I Types	of Property	_						
			(a)	(b)	(c)		(d)		
			Check if applicable	Number of contributions or items contributed	Noncash contribution amounts reported on	Method noncash cor	of determi		
			аррисавіс	reems contributed	Form 990, Part VIII, line	noncash cor	ici ibacioni a	moun	.5
					1g				
1	Art—Works of art								
2	Art Fractional in					1			
3 4	Art—Fractional in Books and public								
	Clothing and hou								
,	goods								
6	Cars and other v	ehicles							
7	Boats and planes	s		<u>-</u>					
8	Intellectual prope	•							
9	Securities—Public		X	7	66,000	FAIR MARKET VA	LUE		
10	Securities—Close	•							
11	Securities—Partr or trust interest								
12	Securities—Misce								
13	Qualified conserv								
	contribution—Hi								
1.1	structures .								
14	Qualified conserve contribution—Of								
15	Real estate—Res								
16	Real estate—Cor	nmercial							
17	Real estate—Oth	er							
18	Collectibles .								
19	Food inventory								
20	Drugs and medic	cal supplies .							
21	Taxidermy .					1			
	Historical artifact Scientific specim								
	Archeological art								
	Other • (
	Other ▶ (
27	Other ► (
28	Other ▶ ()							
29				tion during the tax year for		70			
	for which the org	janization completed	Form 8283	3, Part IV, Donee Acknowled	gement	29			
								Yes	No
30a				y contribution any property r e of the initial contribution, a			nt		
				• • • • • • •			·		l
							30a		No
b	If "Yes," describ	e the arrangement II	n Part II						,
31	Does the organi	zation have a gift ac	ceptance p	olicy that requires the reviev	v of any nonstandard contri	butions?	31		No
32a				or related organizations to so	olicit, process, or sell nonca	sh			,
							32a		No
	If "Yes," describ								
33	_	· ·	amount in	column (c) for a type of pro	perty for which column (a)	ıs checked,			
	describe in Part								
For D	anerwork Peductic	on Act Notice, see the	Instruction	s for Form 900	Cat No. 512271	Schadu	ile M (Form	0001	20171

Schedule M (Form 990) (2017)		
Part II	Supplemental Info	rmation.
	Provide the informat	ion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part
	I, column (b), the nu	imber of contributions, the number of items received, or a combination of both. Also complete
	this part for any add	itional information.
Ret	urn Reference	Explanation
		Schedule M (Form 990) (2017)



Determ Defenses	Front contact and
Return Reference	Explanation
990 PART III, LINE 4A PROGRAM SERVICE ACCOMPLISHMENTS	NATIONAL PARK TRUST MISSION OUR MISSION IS TO PRESERVE PARKS TODAY AND CREATE PARK STEWARD S FOR TOMORROW PRESERVE PARKS TODAY FOR 35 YEARS, NATIONAL PARK TRUST (NPT) HAS ENHANCED THE NATIONAL PARK SYSTEM BY ACQUIRING HIGH-PRIORITY LAND IDENTIFIED BY THE NATIONAL PARK SERVICE (NPS) THESE LANDS ARE LOCATED WITHIN OR ADJACENT TO NATIONAL PARKS TO DATE, NPT'S EFFORTS HAVE RESULTED IN THE PRESERVATION OF MORE THAN 31,000 ACRES BENEFITING 42 NATION AL PARK UNITS IN 29 STATES, WASHINGTON, DC, AND THE US VIRGIN ISLANDS NPT SELECTS, ACQUIRES, AND PROTECTS PARKLAND, PROVIDING FUNDING AS WELL AS LEGAL AND REAL ESTATE EXPERTISE OUR HIGH-PRIORITY PROJECTS ARE ON A "WISH LIST" PROVIDED BY THE NPS AND FOCUS ON PARCELS LOCATED WITHIN CURRENT NATIONAL PARK BOUNDARIES AS WELL AS LANDS ADJACENT TO NATIONAL PARK BOUNDARIES ALL LANDS ARE DONATED TO THE NPS FOR PERMANENT PROTECTION NPT ALSO SERVES AS A PARTNER WITH NATIONAL AND LOCAL LAND TRUSTS AND FRIENDS GROUPS TO COMPLETE PARK PRESERV ATION PROJECTS NPT'S LAND PROJECTS VARY IN SIZE FROM GREAT SWATHS OF LAND, INCLUDING THE MORE THAN 10,000 ACRES TO CREATE THE TALLGRASS PRAIRIE NATIONAL PRESERVE (KS) TO EQUALLY I MPORTANT SMALLER PARCELS, SUCH AS THE 12 5 ACRES LOCATED WITHIN THE WILD BASIN AREA OF ROC KY MOUNTAIN NATIONAL PARK SOND PUBLIC LANDS AND WATERS IN PERPETUITY, NPT'S UNIQUE COMPREHENSIVE STR ATEGY ALSO FOCUSES ON GETTING KIDS TO PARKS WITH THE GOAL OF BUILDING THE PRESERVATION OF OUR PARKS AND PUBLIC LANDS AND WATERS IN PERPETUITY, NPT'S UNIQUE COMPREHENSIVE STR ATEGY ALSO FOCUSES ON GETTING KIDS TO PARKS WITH THE GOAL OF BUILDING THE PIPELINE OF FUTURE PARK STEWARDS AND OUTDOOR ENTHLY SERVED TO PARKS DAYTM PROVIDE PARK EXP ERIENCES FOR UNDER-SERVED YOUTH, THEIR FAMILIES AND TEACHERS THE PARK EXPERIENCES FOR UNDER-SERVED YOUTH, THEIR FAMILIES AND TEACHERS THE PARK EXPERIENCES FOR UNDER-SERVED YOUTH, THEIR FAMILIES AND TEACHERS THE PARK EXPERIENCES FOR UNDER-SERVED OF THE PROVIDES FUNDING FOR MORE THAN 80% OF STUDENTS SUPPORTED BY NPT 1) ENHANCE CLASSROOM CURRICULUM, 2)

Detum Deferer	Evalenation
Return Reference	Explanation
990 PART III, LINE 4A PROGRAM SERVICE ACCOMPLISHMENTS	N WHO REMINDS KIDS TO "EXPLORE OUTDOORS, THE PARKS ARE YOURS!" BUDDY BISON IS NOT ONLY A T ANGIBLE REMINDER THAT KIDS NEED TO GET OUT AND GO, BUT HE ALSO CONNECTS KIDS ACROSS THE CO UNTRY WITH EACH OTHER FAMILES AND TEACHERS ALIKE WANT TO KNOW "WHERE'S BUDDY BISON BEEN?" IN ADDITION TO PROVIDING MORE THAN \$325,000 IN DIRECT FUNDING IN THE 2017-2018 SCHOOL YE AR TO CREATE ROBUST PARK EXPERIENCES FOR UNDER-SERVED YOUTH, NPT PROVIDES EDUCATORS WITH C LASSROOM RESOURCES (BOOKS, MAPS, DVDS, LESSON PLANS, WORKSHEETS, STEM ACTIVITIES, ETC) AN D A DEDICATED EDUCATION TEAM TO INTRODUCE ENVIRONMENTAL CONCEPTS AND ENHANCE SCHOOL CURRIC ULUM IN THE AREAS OF HISTORY, STEM, GEOGRAPHY, READING, LANGUAGE ARTS, MUSIC AND ART AS A N EXTENSION OF OUR RAPIDLY GROWING BUDDY BISON SCHOOL PROGRAM, NPT ALSO INITIATED NATIONAL KIDS TO PARKS DAY IN 2011 THIS GRASSROOTS DAY OF PLAY ENGAGES CHILDREN AND FAMILIES WITH PARKS NATIONWIDE, TEACHING THEM NOT ONLY ABOUT PARK STEWARDSHIP, ENVIRONMENTAL SCIENCE, A DU HISTORY, BUT ALSO ABOUT THE IMPORTANCE OF A HEALTHY LIFESTYLE THROUGH OUTDOOR RECREATIO N AND HEALTHY NUTRITION KIDS TO PARKS DAY HAS CAPTURED THE INTEREST OF MANY COMMUNITIES A CROSS THE COUNTRY WITH 432 MAYORS FROM ALL 50 STATES SIGNING OFFICIAL PROCLAMATIONS - MANY CITIES AND TOWNS HOSTED EVENTS IN THEIR COMMUNITY PARKS TO CELEBRATE THE DAY IN 2018, OV ER 1,200 PARK EVENTS WERE BRANDED AS KIDS TO PARKS DAY PROGRAMS AND MORE THAN 1-MILLION PE OPLE VISITED A PARK ON KIDS TO PARKS DAY OUR GOAL FOR OUR BUDDY BISON SCHOOL PROGRAM AND KIDS TO PARKS DAY IS TO INSPIRE A GENERATION OF FUTURE CONSERVATION LEADERS AND PARK ENTHU SIASTS THROUGH SPRING 2018, THE BUDDY BISON PROGRAM HAS BEEN IMPLEMENTED IN THE FOLLOWING STATES 1 CALIFORNIA - 6 SCHOOLS, 422 STUDENTS 2 GEORGÍA - 3 SCHOOLS, 70 STUDENTS 5 IN STUDENTS 5 MASSACHUSETTS - 2 SCHOOLS, 70 STUDENTS 8 MINNESOTA - 1 SCHOOL, 75 STUDENTS 9 MISSISSIPPI - 1 SCHOOL, 75 STUDENTS 10 MES SOURT - 2 SCHOOLS, 71 STUDENTS 5 LOUISIANA - 2 SCHOOLS, 10 STUDENTS 11 NEVADA - 2 SCHOOLS, 10 STUDENTS 15 PENNSYLV

Return Reference	Explanation
990 PART III, LINE 4A PROGRAM SERVICE ACCOMPLISHMENTS	LEARNED ABOUT THE WAYS PEOPLE AT HOME SUPPORTED THE WAR EFFORT AND THE CHANGING ROLES OF WOMEN MARCH 2018 32 4TH-GRADE STUDENTS FROM ANNE PENNYCOOK ELEMENTARY VISITED POINT BONI TA LIGHTHOUSE IN MARIN HEADLANDS ALONG THE TRAIL, THEY RECOGNIZED ANCIENT UNDERWATER VOLC ANOES, AND INVESTIGATED HOW THEY FORMED STUDENTS DOCUMENTED THEIR OBSERVATIONS ON A MAP (PROVIDED BY NPS) GEORGIA OCTOBER 2017 100 3RD-GRADE STUDENTS FROM M AGNES JONES ELEMEN TARY VISITED SERENBE FARMS, WHERE THEY MET WITH FARMERS WHO LED THEM TO SEVERAL STATIONS A T THE ORGANIC FARM THEY EXPLAINED PESTICIDE-FEE CROP GROWING PRACTICES, COMPOST, AND CHIC KEN HUSBANDRY THE STUDENTS PREPARED GARLIC HEADS FOR THE NEARBY RESTAURANTS AND SAMPLED S PICY ARUGULA AND RED KALE AFTERWARDS, THEY WATCHED A PRODUCTION OF ROBIN HOOD AT THE OUTD OOR THEATRE SERENBE PLAYHOUSE AND HAD A CHANCE TO MEET THE ACTORS NOVEMBER 2017 HOLLYDAL E ELEMENTARY BROUGHT 120 STH-GRADE STUDENTS TO KENNESAW MOUNTAIN NATIONAL BATTLEFIELD PARK OVER 2 DAYS THE STUDENTS LEARNED ABOUT WHAT LIFE WAS LIKE FOR A CIVIL WAR SOLDIER AND WE NT ON A HIKE OF BIG KENNESAW JANUARY 2018 M AGNES JONES ELEMENTARY TOOK 100 3RD-GRADE S TUDENTS TO MARTIN LUTHER KING, JR , NATIONAL HISTORIC SITE STUDENTS LEARNED ABOUT MARTIN LUTHER KING, JR , NATIONAL HISTORIC SITE STUDENTS LEARNED ABOUT MARTIN LUTHER KING, JR , NATIONAL HISTORIC SITE STUDENTS LEARNED ABOUT MARTIN LUTHER KING, JR , NATIONAL HISTORIC SITE STUDENTS LEARNED ABOUT MARTIN LUTHER KING, JR , NATIONAL HISTORIC SITE STUDENTS LEARNED ABOUT MARTIN LUTHER KING, JR , NATIONAL HISTORIC SITE STUDENTS LEARNED ABOUT MARTIN LUTHER KING, JR , NATIONAL HISTORIC SITE STUDENTS LEARNED ABOUT MARTIN LUTHER KING, JR SINVOLVEMENT IN THE CIVIL RIGHTS MOVEMENT ILLINGS OCTOBER 2017 80 5TH GRADERS FROM CHICAGO ACADEMY WENT TO THE WILDLIFE DISCOVERY CENTER THEY DISCOVERED HOW THE TRAIL WAS ANABOD TO PRESERVE THE WETLANDS MARCH 2018 JOSE DE DIEGO ELEMENTARY BROUGHT 30 STUDENTS, 3RD-5TH GRADE TO VISIT THE WILDLIFE DISCOVERY CENTER THEY LEARNED ABOUT THE DIETS, CONSERVATI

Return Reference	Explanation
990 PART III, LINE 4A PROGRAM SERVICE ACCOMPLISHMENTS	KANSAS NOVEMBER 2017 64 STUDENTS FROM BUCKNER PERFORMING ARTS AND SCIENCE MAGNET ELEMENT ARY VISITED TALLGRASS PRAIRIE NATIONAL PRESERVE. THE STUDENTS WENT ON A TOUR OF THE HISTOR IC HOUSE, BARN, OUTBUILDINGS, SOUTHWIND NATURE TRAIL, AND LOWER FOX CREEK SCHOOL. THEY ALS O LEARNED ABOUT THE PRAIRIE ECOSYSTEM FEBRUARY 2018. 64 STUDENTS FROM BUCKNER PERFORMING ARTS AND SCIENCE CRAFT. WITHIN THE PRAIRIE ECOSYSTEM FEBRUARY 2018. 64 STUDENTS FROM BUCKNER PERFORMING ARTS AND SCIENCE CENTER DURING THE TRIP THE 4TH GRADERS SAW A PLANETARIUM FILM ABOUT FIGHTER PILOTS, LEARNED ABOUT THE PHYSICS OF FLIGHT, ENGINEE RED AND BUILT THEIR OWN PLANES, AND EXPLORED THE EXHIBITS APRIL 2018. 45 4TH GRADE STUDENTS FROM WOODLAND STEM ACADEMY VISITED TALLGRASS PRAIRIE NATIONAL PRESERVE. THE STUDENTS WE NTON A TOUR OF THE HISTORIC HOUSE, BARN, OUTBUILDINGS, SOUTHWIND NATURE TRAIL, AND LOWER FOX CREEK SCHOOL. THEY ALSO LEARNED ABOUT THE PRAIRIE ECOSYSTEM LOUISIANA MARCH 2018. 70 4TH-GRADE STUDENTS FROM CHALMETTE ELEMENTARY WENT TO BARATARIA PRESERVE IN ADDITION TO HIKING THROUGH THE BOTTOMLAND FORESTS OF THE PRESERVES, THE STUDENTS EXPLORED THE BAYOU WIT HID PRESS AND COLLECTED A WHOLE MENAGERIE OF AQUATIC CREATURES, FROM DRAGONFLY LARVAE TO LEECHES! THEY WERE JOINED BY THE HERO VOLUNTEERS FROM THE LOCAL HARRAH'S MAY 2018. 64 4TH -GRADE STUDENTS FROM GREEN CHARTER WENT TO BARATARIA PRESERVE IN ADDITION TO HIKING THROUGH THE BOTTOMLAND FORESTS OF THE PRESERVES, THE STUDENTS EXPLORED THE BAYOU WITH DIP NETS AND COLLECTED A WHOLE MENAGERIE OF AQUATIC CREATURES, FROM DRAGONFLY LARVAE TO LEECHES! THEY WERE JOINED BY THE HERO VOLUNTEERS FROM THE LOCAL HARRAH'S MAY 2018. 64 4TH -GRADE STUDENTS FROM GREEN CHARTER WENT TO BARATARIA PRESERVE IN ADDITION TO HIKING THROUGH THE BOTTOMLAND FORESTS OF THE PRESERVES, THE STUDENTS EXPLORED THE BAYOU WITH DIP NETS AND COLLECTED A WHOLE MENAGERIE OF AQUATIC CREATURES, FROM DRAGONFLY LARVAE TO LEECHES! THEY WERE JOINED BY THE HERO VOLUNTEERS FROM THE LOCAL HARRAH'S MAY 2018 64 4TH -GRADE STUDENTS FROM STUD

Return Reference	Explanation
990 PART III, LINE 4A PROGRAM SERVICE ACCOMPLISHMENTS	ARDSHIP MISSISSIPPI NOVEMBER 2017 135 4TH-GRADE STUDENTS FROM POPPS FERRY ELEMENTARY VI SITED MISSISSIPPI SANDHILL CRANE VINITED MISSISSIPPI SANDHILL CRANE VISITOR CENTERS BEFORE SPLITTING INTO 4 DIFFEREN T STATIONS THEY HIKED THROUGH THE PINE SAVANNA AND DISCOVERED CARNIVOROUS PLANTS, CREATED CODED "TAGS" FOR THEMSELVES AND PRETENDED TO BE SANDHILL CRANE, EXPLORED THE EXHIBITS OF THE MUSEUM, AND GOT HANDS ON WITH A GUESSING GAME INVOLVING NATURAL ARTIFACTS FROM PLANTS AND ANIMALS THAT CALL THE SAVANNA THEIR HOME MAY 2018 100 3RD-GRADE STUDENTS FROM POPPS FERRY ELEMENTARY WENT TO THE HATTIESBURG ZOO MISSOURI MARCH 2018 MULLANPHY ILC ELEMENT ARY TOOK 80 4TH GRADERS TO GATEWAY ARCH NATIONAL PARK THE STUDENTS LEARNED ABOUT LEWIS AND CLARK'S WESTWARD EXPANSION, RE-ENACTED THE DREDD SCOTT CASE AT THE OLD COURTHOUSE, AND RODE OF THE ST LOUIS ARCH STUDENTS ALSO RECEIVED THEIR EVERY KIDS IN A PARK PASSES MARCH 2018 ASHLAND ES TOOK 49 4TH GRADERS TO GATEWAY ARCH NATIONAL PARK THE STUDENTS HE STUDENTS LEARNED ABOUT LEWIS AND CLARK'S WESTWARD EXPANSION, RE-ENACTED THE DREDD SCOTT CASE AT THE OLD COURTHOUSE, AND RODE OF THE ST LOUIS ARCH STUDENTS ALSO RECEIVED THEIR EVERY KIDS IN A PARK PASSES MARCH 2018 ASHLAND ES TOOK 49 4TH GRADERS TO GATEWAY ARCH NATIONAL PARK THE STUDENTS LEARNED ABOUT LEWIS AND CLARK'S WESTWARD EXPANSION, RE-ENACTED THE DREDD SCOTT CASE AT THE OLD COUR THOUSE, AND RODE OF THE ST LOUIS ARCH STUDENTS ALSO RECEIVED THEIR EVERY KIDS IN A PARK PASSES NEVADA APRIL 2018 100 5TH GRADE STUDENTS FROM HOWARD HOLLINGSWORTH ELEMENTARY VISITED RED ROCK CANYON PARK NATIONAL CONSERVATION AREA LED BY THEIR EVERY KIDS IN A PARK PASSES NEVADA APRIL 2018 100 5TH GRADE STUDENTS FROM HOWARD HOLLINGSWORTH ELEMENTARY VISITED RED ROCK CANYON PARK NATIONAL CONSERVATION AREA LED BY THEIR EXCEPTIVE AND THE WAY. THEY LEARNED ABOUT ROCK FORMATIONS, LOCAL PLANT AND ANIMAL LIFE, AND THE CULTURE OF THE FIRST NATIONS OF THE AREA THROUGH EXPLORATION AND HANDSON LEARNING CAESAR'S HERO VOLU NTEERS ACCOMPANIED THEM ON THEIR JOURNEY AFTER

Return Reference	Explanation
990 PART III, LINE 4A PROGRAM SERVICE ACCOMPLISHMENTS	AND ENGAGING OUTDOOR TEAM BUILDING ACTIVITIES NEW YORK APRIL 2018 30 8TH GRADE STUDENT S FROM BROOKLYN JESUIT PREP ELLIS ISLAND AND THE STATUE OF LIBERTY STUDENT ENJOYED GETTIN G TO MEET WITH PARK RANGERS ON ELLIS ISLAND, AND TAKING THE AUDIO TOUR MAY 2018 100 4TH GRADE STUDENTS FROM P S 119 PARTICIPATED IN AN EVENT AT GATEWAY NRA, SPONSORED BY THE NOR TH FACE THE DAY STARTED OUT WITH A WELCOME FROM NPT AND FROM GATEWAY SUPERINTENDENT JENNI FER NERSESIAN, WHO HELPED PASS OUT EKIP PASSES STUDENTS THE ROTATED THROUGH 4 ACTIVITIES THEY TOOK AN NPS GUIDED HIKE, PARTICIPATED IN A BIRD GRAPHING ACTIVITY, MADE BIRD FEEDERS, AND PLAYED "PACK THE PACK AND PITCHED TENTS WITH NORTH FACE STAFF NORTH CAROLINA NOVEM BER 2017 WITH THE GUIDANCE OF RANGERS, POWE ELEMENTARY'S 80 STUDENTS HIKE DTHROUGH OCCONE ECHEE MOUNTAIN NATURAL AREA AT THE TOP OF THE MOUNTAIN, THEY LEARNED ABOUT THE ROCKS AND MINERALS THAT MAKE UP THE CLIFF, THAN CONTINUED EXPLORING THE GEOLOGIC HISTORY OF THE AREA AS THEY HIKED BACK DOWN AT THE TRAILHEAD, THEY EXAMINED PRESEATED NATIVE ANIMAL SPECIMEN S AND LEARNED HOW THEIR ADAPTATIONS HELPED THEM SURVIVE LASTLY, THEY PLAYED "OH DEER!" TO DISCOVER THE RELATIONSHIPS BETWEEN PRODUCERS, CONSUMERS, AND DECOMPOSERS APRIL 2018 EMILY K CENTER'S 45 6TH-12TH-GRADE STUDENTS CANOED ON THE ENO RIVER WITH FROG HOLLOW OUTDOORS HALF STARTED THE DAY ON THE RIVER, WHERE THEY LEARNED THE BASICS OF PADDLING AND LOOKED FOR TURTLES ALONG WITH OTHER WILDLIFE THE OTHER HALF STAYED ON LAND AND ROTATED THROUGH T HREE DIFFERENT STATIONS WITH THE ENO RIVER ASSOCIATION, THEY LEARNED ABOUT THE ADAPTATION S OF THE MAMMALS WHO LIVE IN THEIR WATERSHED THE PARK RANGERS FROM ENO RIVER STATED THE DAY ON THE RIVER, WHERE THEY LEARNED THE BASICS OF PADDLING AND LOOKED FOR TURTLES ALONG WITH OTHER WILDLIFE THE ON FIVER ASSOCIATION, THEY LEARNED ABOUT THE ADAPTATION S OF THE MAMMALS WHO LIVE IN THEIR WATERSHED THE PARK RANGERS FROM ENO RIVER STATED THE DAY ON THE RIVER SHOW THE HALF STAYED ON LAND AND ROTATED THROUGH THE RIVER FROM THE ENFERDENT

Return Reference	Explanation
990 PART III, LINE 4A PROGRAM SERVICE ACCOMPLISHMENTS	WASHINGTON, D.C. YEARLY PROGRAM (OCTOBER 2012 TO PRESENT). 1000 STUDENTS FROM LOCAL D.C. BUDDY BISON SCHOOLS CANOE ON THE ANACOSTIA RIVER WITH NATIONAL PARK SERVICE, THE ARMY CORP S.O.F. ENGINEERS AND WILDERNESS INQUIRY. (STOKES PCS, NEVAL THOMAS ELEMENTARY, EL. HAYNES, WE ST EDUCATION CAMPUS, PATTERSON ELEMENTARY, FRIENDSHIP PUBLIC CHARTER SCHOOL, AND MORE). MA RCH/APRIL 2013 TO PRESENT - NPT BROUGHT 30 FIFTH GRADE STUDENTS FROM WASHINGTON JESUIT ACA DEMY TO ROCK CREEK PARK WHERE THEY LEARNED ABOUT THEIR LOCAL WILDLIFE AND STUDIED PLANETS AT THE ONLY PLANETARIUM IN A NATIONAL PARK SEPT/OCT 2014 TO PRESENT - 40 THIRD-GRADE STUD ENTS FROM NEVAL THOMAS ELEMENTARY VISITED THE NATIONAL MALL AND MEMORIALS PARK TO SEE THE PLACES THEY STUDIED IN SCHOOL, YEARLY PROGRAM (OCTOBER 2015 TO PRESENT) 350 STUDENTS FROM E.W. STOKES ELEMENTARY VISITED THE NATIONAL MALL AND MEMORIALS PARK TO SEE THE PLACES THEY STUDIED IN SCHOOL YEARLY PROGRAM (OCTOBER 2015 TO PRESENT) 350 STUDENTS FROM E.W. STOKES ELEMENTARY VISITED WATKINS REGIONAL PARK THE STUDENTS ROTATED THROUGH ACTIVITIES THAT INCLUDED LEARNING ABOUT THE NATIONAL PARK THE STUDENTS ROTATED THROUGH ACTIVITIES THAT INCLUDED LEARNING ABOUT THE NATIONAL PARK THE STUDENTS ROTATED THROUGH ACTIVITIES THAT INCLUDED LEARNING ABOUT THE NATIONAL DAY OF PLAY WAS LAUNCHED IN 2011 BY NATIONAL PARK TRUST MAY 19, 2018 432 MAYORS FROM ALL 50 STATES PARTICIPATED AND PROMOTED THE MORE THAN 1,200 REGISTERED PARK EVENTS ON KIDSTOPARKS ORG A SENATE RESOLUTION WAS PASSED PRO CLAIMING THE DAY "NATIONAL KIDS TO PARKS DAY "MORE THAN 1 MILLION INDIVIDUALS PARTICIPATE D COAST TO COAST AS A RESULT OF THE SCHOOL CONTEST, THY PROVIDED PARK EXPERIENCES FOR OVER 5,100 STUDENTS FROM 92 SCHOOLS NPT ALSO PARTISED WITH THE NATIONAL NON-PROFIT BLUE ST AS FAMILIES WHICH SERVED 1,130 ACTIVE-DUTY MILITARY FAMILIES WITH 18 KIDS TO PARKS DAY "MORE THAN 1 MILLION INDIVIDUALS. PARTICIPATE DE COAST TO COAST AS A RESULT OF THE SCHOOL CONTEST, THY PROVIDED PARK EXPERIENCES FOR OVER 5,100 STUDENTS FROM 92 SCHOOLS NPT ALSO

Return Reference	Explanation
990 PART III, LINE 4A PROGRAM SERVICE ACCOMPLISHMENTS	AT WWW PARKTRUST ORG RECENT AND ONGOING PROJECTS INCLUDE ARKANSAS JOHNNYCAKE RANCH (ON GOING SINCE 2003) NPT HOLDS THE CONSERVATION EASEMENT ON THIS 2000 ACRE RANCH, WHICH ABUTS THE OUACHITA NATIONAL FOREST AND THE POTEAU MOUNTAIN WILDERNESS AREA THE FOREST IS HOME TO 79 PROPOSED, ENDANGERED, THREATENED, AND SENSITIVE SPECIES THE EASEMENT ALSO PROVIDES HABITAT PROTECTION FOR THE BALD EAGLE. THE CONSERVATION EASEMENT BENEFITS BOTH THE WILDERN ESS AREA AND THE NATIONAL FOREST BY PROVIDING A BUFFER ZONE TO ENSURE THE CONTINUED ECOLOG ICAL VIABILITY OF THESE FEDERAL ASSETS MARCH 2013 THROUGH MARCH 2017 NPT RENEWED CONTRAC T WITH OKLAHOMA BASED LAND TRUST TO OVERSEE EASEMENT RESPONSIBILITIES ON ARKANSAS PROJECT FOR 2018, NPT IS CONTRACTING WITH A NORTHWEST ARKANSAS BASED LAND TRUST TO OVERSEE EASEMENT RESPONSIBILITIES ON THE PROJECT CALIFORNIA MOJAVE NATIONAL PRESERVE (ONGOING SINCE 20 99) NPT IS MANAGING MITIGATION FUNDS FOR A DESERT TORTOISE FACILITY AT THE PRESERVE JULY 2012 NPT TOOK LEGAL CUSTODY FOR FACILITY UNTIL IT IS READY TO BE TURNED OVER TO NPS NPT RECEIVED DONATION/MITIGATION FUNDS FOR THE MANAGEMENT OF THE FACILITY OVER THE NEXT 5 YEAR S NPT VISITED FACILITY AND MET WITH SCIENTISTS AND NPS PARK OFFICIALS IN OCTOBER 2012 FI NAL TRANSFER OF PROPERTY TO NPS OCCURRED IN FALL 2014 NPT CONTINUES TO PROVIDE FUNDING FOR RESEARCH COLORADO ROCKY MOUNTAIN NATIONAL PARK (2016 TO 2017) NPT IS WORKING WITH WILD ERNESS LAND TRUST AND THE ROCKY MOUNTAIN CONSERVANCY TO PROTECT 32 ACRES WITHIN THE NATION AL PARK MAINE APPALACHIAN NATIONAL SCENIC TRAIL (2016-PRESENT) NATIONAL PARK TRUST (NPT) HAS BEEN WORKING WITH THE TRUST FOR PUBLIC LAND (TPL) ON THE ACQUISITION OF AN ADJACENT 1, 494-ACRE PARCEL OF OLD-GROWTH WOODLAND TO BENEFIT THE NATIONAL PARK SERVICE'S APPALACHIAN NATIONAL SCENIC TRAIL (AT) TRANSFER OF THE LAND TO CCUR IN 2018 THE REMOTENESS AND SCENIC VIEWS MAKE THE PROPERTY AN ICONIC DESTINATION FOR BACKCOUNTRY ADVENTURES THAT COMBINE PADDLING AND HINKING ON THE AT INTO A SINGLE DAY'S OUTING THE ADJACENT POND CONT

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Return Reference	Explanation
990 PART III, LINE 4A PROGRAM SERVICE ACCOMPLISHMENTS	HOUSE REMOVAL OF THE NON-HISTORIC HOUSE ON THE PROPERTY WILL IMPROVE THE HISTORIC SCENE AND PROVIDE PARKING FOR THE SITE IT IS EXPECTED TO BE FINISHED IN 2018 OR EARLY 2019 THE PROJECT PUTS NPT ONE STEP CLOSER TO ITS PLEDGE TO A CQUIRE AND DONATE 100 HIGH-PRIORITY PR OPERTIES TO NPS, IN COMMEMORATION OF THE NPS CENTENNIAL OKLAHOMA WASHITA BATTLEFIELD NAT IONAL HISTORIC SITE (2017-2018) THERE WAS A 3-ACRE INHOLDING IN THE PARK THAT WAS OF GREAT ADVANTAGE FOR THE PARK TO OWN IT WAS THE BEST LOCATION FOR AN OVERLOOK OF THE PARK IT W AS OWNED BY THE STATE OF OKLAHOMA, UNDER THE OKLAHOMA HISTORICAL SOCIETY, WHO WANTED TO MA KE THE TRANSFER, BUT THE MECHANISM FOR IT WAS NOT CLEAR NPT RESEARCHED AND FOUND A PATHWAY, GAVE THE INFORMATION TO NPS, DEPARTMENT OF THE INTERIOR ATTORNEYS AND OKLAHOMA HISTORICAL SOCIETY (OHS) THE OKLAHOMA HISTORICAL SOCIETY REQUESTED A STATE ATTORNEY GENERAL OPINIO N, THE AG RULLING OHS COULD SELL TO NPT, WHO COULD SELL TO NPS CLOSING WITH NPT AND OHS WAS IN MAY 2018, FOLLOWED BY SALE TO NPS. TWO WEEKS LATER AS A RESULT OF THE ACQUISITION, NP S WAS ABLE TO SECURE \$1 MILLION FOR RENOVATION OF THE 3-ACRES FOR AN OVERLOOK AND IMPROVED BATTLEFIELD TRAIL WASHINGTON OLYMPIC NATIONAL PARK (2016 TO 2017) NPT WORKED WITH THE PARK SERVICE TO PROTECT A 0.5 ACRE PARCEL AT LAKE QUINAULT NPT FINANCED THE PURCHASE, WHI CH NPS COMPLETED IN 2017 TEXAS LAKE MEREDITH NATIONAL RECREATION AREA (2017-2018) THE L AST TWO PARCELS OF PRIVATE LAND IN THE PARK, TOTALLING 3 ACRES, WERE SCHEDULED FOR SALE AT A SHERIFF'S AUCTION, AND NPS COULD NOT LOCATE THE OWNERS, NPT WAS ABLE TO FIND THE PROPER TY OWNERS, WORKED WITH NPS TO SET A PRICE ON THE PROPERTY, AND NEGOTIATE THE PURCHASE AT A N NPS-APPROVED PRICE NPT TRANSFERRED FUNDS TO NPS, AND FUNDED THE CLOSING, SIMILAR TO THE OLYMPIC NP PROJECT THE CLOSING TOOK PLACE ON THE PROPERTY, AND NEGOTIATE THE PURCHASE AT A N NPS-APPROVED PRICE (WINTER 2013 TO PRESENT) NPT STAFF MET WITH NPS LAND ACQUISITION D IRECTOR TO IDENTIFY CRITICAL UNFUNDED ACQUISITION STATES NPT WILL WORK T

Return Reference	Explanation
990 PART III, LINE 4A PROGRAM SERVICE ACCOMPLISHMENTS	

Return Explanation
Reference

FORM 990, PART VI, DIRECTOR FOR ACCURACY AND CONTENT PRIOR TO FILING, THE FULL BOARD OF TRUSTEES IS PROVIDED A COPY OF THE FINAL FORM 990

LINE 11B

Return

Reference	
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

Explanation

Return Explanation
Reference

LINE 15

FORM 990, PART VI, REVIEWS AND APPROVES COMPENSATION OF THE EXECUTIVE DIRECTOR, AS WELL AS SECTION B, DIRECTOR

Return Explanation

LINE 19

FORM 990, PART VI, SECTION C,

Return Explanation
Reference

FORM 990, PART XII, LINE 2C