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DLN: 93493214002102

Department of the Treasury

2

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public

Internal Rev				y state reporting	requirement	Inspection
		11 calendar year, or tax year beginning 01-01-2011 C Name of organization	and ending 12-31-2	011	D Employer	identification number
B Check Addres		CIVIL WAR PRESERVATION TRUST			54-1426	643
		Doing Business As			E Telephone	
Name		e CIVIL WAR TRUST			(301)66	5-1400
Initial Termir		Number and street (or P O box if mail is not delivered 1140 PROFESSIONAL COURT	d to street address) Room	/suite		pts \$ 16,900,528
Amend		HAGERSTOWN, MD 21740				
търше	acioii p	F Name and address of principal officer		11/->		
		O JAMES LIGHTHIZER		H(a) Is the	s a group ret tes?	Yes V No
		1140 PROFESSIONAL COURT				, , , , , , , , ,
		HAGERSTOWN, MD 21740		1 ' '	l affiliates incl	·
I Tax-e	exempt	status	1947(a)(1) or		o," attach a l p exemption	ist (see instructions) number >
J Web	site:	► WWW CIVILWAR ORG			p 0.0000penon	
K Form o	of organ	nization Corporation Trust Association Other		L Year of for	mation 1987	M State of legal domicile VA
Part	_	Summary				,
_	<u>N</u> A	DUCATING THE PUBLIC ABOUT THE VITAL ROLE ATION'S HISTORY Heck this box F if the organization discontinued its				
Activities &	3 Nu	ımber of votıng members of the governıng body (Part	VI, line 1a)		3	31
<u>ĕ</u> .	4 Nu	imber of independent voting members of the governing	ng body (Part VI, line 1	.b) 	4	30
	5 To	tal number of individuals employed in calendar year	2011 (Part V , line 2a)		5	5 51
ଧ୍ୟ	6 To	tal number of volunteers (estimate if necessary) .			6	5 50
	7a To	tal unrelated business revenue from Part VIII, colur	nn (C), line 12		7:	a 0
	b N∈	t unrelated business taxable income from Form 990	-T, line 34		7	b 0
				Prio	r Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)			22,356,767	16,511,283
Beyenue 1	9	Program service revenue (Part VIII, line 2g)	ım service revenue (Part VIII, line 2g)			
§ 1	0	Investment income (Part VIII, column (A), lines 3, 4	l, and 7d)		12,530	17,621
# 1	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8	c, 9c, 10c, and 11e)		202,691	160,266
1		Total revenue—add lines 8 through 11 (must equal P		line	22,705,965	16,870,254
 1		12)			1,680,549	
		Benefits paid to or for members (Part IX, column (A)		•	1,000,545	
		Salaries, other compensation, employee benefits (Pa	•	<u> </u>		
8 1	_	5–10)	(17, column (7,7, me		2,629,514	2,856,996
Expenses	6a	Professional fundraising fees (Part IX, column (A), li	ne 11e)		175,885	163,659
ਨੂੰ	b ·	Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright \frac{1,48}{1,48}$	4,202	_		
_ 1	7	Other expenses (Part IX, column (A), lines 11a–11o	i,11f-24e)		5,177,729	5,391,978
1	8	Total expenses Add lines 13–17 (must equal Part I	X, column (A), line 25)	9,663,677	13,428,815
1	9	Revenue less expenses Subtract line 18 from line 1	2		13,042,288	3,441,439
Net Assets or Fund Balances					of Current ear	End of Year
gg ∰ 2	.0	Total assets (Part X, line 16)			75,079,828	77,445,637
중 중 중 중 2	1 '	Total liabilities (Part X, line 26)			8,372,302	7,338,442
		Net assets or fund balances Subtract line 21 from li	ne 20		66,707,526	70,107,195
	enaltie Ige an	Signature Block es of perjury, I declare that I have examined this return, d belief, it is true, correct, and complete. Declaration of ****** Signature of officer		icer) is based on a		
)	O JAMES LIGHTHIZER PRESIDENT Type or print name and title				
Paid	S	Preparer's WILLIAM E TURCO CPA	Date	Check if self-employed	Preparer's tax (see instruction P00369217	xpayer identification number ons)
Prepare		firm's name (or yours MCGLADREY LLP f self-employed),	1	<u>'</u>	EIN • 42-07	14325
Use On		address, and ZIP + 4 9737 WASHINGTONIAN BLVD 400				

GAITHERSBURG, MD 208787340

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

▼Yes 「No

Phone no 🕨 (301) 296-3600

	, , , , , , , , , , , , , , , , , , , ,				rage 2
Par	Statement of Program Check if Schedule O conta				
1	Briefly describe the organization's				· · · ·,
	PRESERVATION OF AMERICA'S		MAD BATTIFFIFIDS B	V DDOTECTING THE LAN	
	LIC ABOUT THE VITAL ROLES TH				
2	Did the organization undertake an the prior Form 990 or 990-EZ?	y sıgnıfıcant program se	ervices during the year	which were not listed on	┌ Yes ┌ No
	If "Yes," describe these new servi	ces on Schedule O			
3	Did the organization cease conduction services?	cting, or make significar	nt changes in how it cor	nducts, any program	┌ Yes ┌ No
	If "Yes," describe these changes	on Schedule O			
4	Describe the organization's progra expenses Section 501(c)(3) and grants and allocations to others, t	501(c)(4) organization	s and section 4947(a)(1) trusts are required to re	port the amount of
4a	(Code) (Expens	ses \$ 7,585,558	including grants of \$	5,016,182) (Revenue \$)
	LAND IN 2011, THE CIVIL WAR TRUST (ENDANGERED BY SPRAWL THROUGH AY STATES, INCLUDING HOG MOUNTAIN, A CREEK, OK, GETTYSBURG, PA, ALLEN TO CHANCELLORSVILLE, VA, COLD HARBOR TREVILIAN STATION, VA, WILDERNESS, THE AMERICAN CIVIL WAR, CWT EXPECTEDUCATING THE PUBLIC REGARDING THE	CQUÍSITIONS AND GRANTS, (L, NATURAL BRIDGE, FL, RES IMBERS/SHILOH, TN, FORT D , VA, GAINES MILL, VA, GLENI VA AND SHEPHERDSTOWN, V TS TO CONTINUE ITS CONSI	CWT PRESERVED 2,042 ACR ACA, GA, PERRYVILLE, KY, F ONELSON, TN, FORT SANDE DALE/FIRST DEEP BOTTOM, ' VV IN 2011 AND PARTICULA STENT RECORD OF SUCCESS	ES IN 39 COMPLETED TRANSACT ORT DERUSSY, LA, WOOD LAKE, RS, TN, FRANKLIN, TN, PARKER VA, MANASSAS, VA, THOROUGHF RLY DURING THE UPCOMING SE S IN PRESERVING ENDANGERED	TONS AT 25 BATTLEFIELDS IN 12 MN, BENTONVILLE, NC, CABIN S CROSSROADS, TN, FARE GAP, VA, TOM'S BROOK, VA, SQUICENTENNIAL ANNIVERSARY OF
46	(Code) (Expens	ses \$ 2,689,045	ıncludıng grants of \$) (Revenue \$	181,084)
4b	MEMBERSHIP THE CIVIL WAR TRUST IS			, ,	
	CONTINUED TO EXPERIENCE DECLINING APPROXIMATELY 53,000 ACTIVE MEMBE FREE EDUCATIONAL MEMBERSHIP BENE LAND, ADVANCES THE CAUSE OF EDUCATIMPORTANCE ABOUT THE CIVIL WAR AN EDUCATION MISSIONS EVERY YEAR THE A SUBSET OF ITS OVERALL MEMBERSHIF ANNUALLY TOTAL MEMBERSHIP IN THIS 60,000 NEW FACEBOOK "FANS," OPENII	G MEMBERSHIP, CWT WAS AIRS FOR THE ENTIRE YEAR EFIT THE MAGAZINE HIGHLIGATION ABOUT THE KEY PERICULUM THE MEMORIAN COUGH THEIR DUES PAYMENTO, CALLED "THE COLOR BEAR GROUP WAS APPROXIMATE!	BLE TO RECRUIT ENOUGH NI ACH QUARTER, EVERY MEM HTS HOW THEIR DIRECT SU DD IN OUR NATION'S HISTOR T DEPENDS UPON ITS MEMB FS, AS WELL AS ADDITIONAL ERS," COMPRISED OF THOS Y 925 INDIVIDUALS AT THE	EW MEMBERS AND REACTIVATE BER RECEIVES OUR 48-PAGE MAIPPORT HELPS PRESERVE ENDAN, Y, AND EDUCATES THEM DIRECERS TO HELP FULFILL ITS BATTL CHARITABLE GIFTS CWT ALSO E MEMBERS WHO MAKE DUES P. END OF 2011 IN 2011, CWT ALS	LAPSED MEMBERS TO MAINTAIN IGAZINE, HALLOWED GROUND, AS GERED CIVIL WAR BATTLEFIELD TLY ON HISTORICAL ELEMENTS OF EFIELD PRESERVATION AND HAS A MAJOR DONOR SOCIETY, AS AYMENTS OF \$1,000 OR MORE
4c	(Code) (Expens	ses \$ 1,218,862	ıncludıng grants of \$) (Revenue \$	44,817)
π.	EDUCATION IN 2011, CWT'S EDUCATION FROM ACROSS THE COUNTRY PARTICIF HELD SMALLER, REGIONAL TEACHER IN: AND 50 TEACHERS IN ATTENDANCE AT SCHOOL TEACHERS AND MADE IT AVAIL WAR TEACHING TOOLS AND ACTIVITIES OF THE MINE RUN PAYNE'S FARM BATT DO PARTICULAR THINGS IN ASSOCIATION	N DEPARTMENT HOSTED ITS PATED IN THIS 3-DAY PROFES STITUTES LASTING 10 DAYS I EACH THE EDUCATION DEPA ABLE FREE OF CHARGE ON O THAT TRAVELED THE COUNT ILEFIELD INTERPRETIVE TRA	10TH ANNUAL TEACHER INS SSIONAL DEVELOPMENT EXPE EACH IN GETTYSBURG, PENN RTMENT CREATED A NEW C UR WEB SITE OUR TRAVELL RY THROUGHOUT THE SCHO IL, AND RELEASED THE BOOK	STITUTE IN NASHVILLE, TENNESS ERIENCE, OFFERED FREE OF CH ISYLVANIA, AND BOSTON, MASSA IVIL WAR CURRICULUM FOR EL ING TRUNK PROGRAM MADE AV DOL YEAR DEPARTMENT STAFF (THE CIVIL WAR 150, WHICH E	EE MORE THAN 140 TEACHERS ARGE THE DEPARTMENT ALSO ICHUSETTS, WITH BETWEEN 40 EMENTARY, MIDDLE AND HIGH AILABLE THREE TRUNKS OF CIVIL ALSO FACILITATED THE OPENING INCOURAGES PEOPLE TO VISIT AND
4d	Other program services (Descri	,	•		
	(Expenses \$	ıncludıng grants o	† \$) (Revenue \$	
4e	Total program service expenses	- \$ 11,493,46	5		

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{f 2}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II.	7	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		_

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	•		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	1a 76			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b 0			
c	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
		2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
l a	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 or securities account)?	4a		No
h	, and the second			110
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	See instructions for filing requirements for Form 1D F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
U	bid any taxable party notiny the organization that it was on is a party to a prombited tax sheller transaction?	5b		
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
				NI -
5a	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?	6a		Νo
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	7a	Yes	
	services provided to the payor?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	_		
	file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		Νo
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		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
)	Sponsoring organizations maintaining donor advised funds.	-		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
LO	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Sources against amounts due of received from them /			
L2a	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 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization			
	allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by			
	the states in which the organization is licensed to issue qualified health plans			
C	Enter the aggregate amount of reserves on hand 13c			
4>	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
TCI	If "Ves " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schodule O	1.4L		110

Form 990 (2011) Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management

			Yes	No			
_							
1a	Enter the number of voting members of the governing body at the end of the tax year						
b	Enter the number of voting members included in line 1a, above, who are independent						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was						
_	filed?	5		No No			
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	6					
6	Did the organization have members or stockholders?	-		No			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		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			
8	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				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No			
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)							
	vende code.)		Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νο			
	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					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes				
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes				
	Were officers, directors or trustees, and key employees required to disclose annually interests that could give	12b	Yes				
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe						
13	In Schedule O how this was done	12c	Yes				
14	Did the organization have a written document retention and destruction policy?	14	Yes				
15	Did the process for determining compensation of the following persons include a review and approval by	14	165				
_	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15-	V				
	The organization's CEO, Executive Director, or top management official	15a	Yes				
D	Other officers or key employees of the organization	15b	Yes				
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the						
	organization's exempt status with respect to such arrangements?	16b					
Se	ection C. Disclosure						
17	List the States with which a copy of this Form 990 is required to be filed AK, AL, AR, AZ, CA, CO, CT, DC, E						
	ID , IL , IN , KS , KY , LA , MA , MD , ME	, l [∨] l I ,	1415, MI	IN,			

- MO, MT, NC, ND, NE, NJ, NH, NM, NV, NY, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, VT, WA, WI, WV, WY
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available Check all that apply ☐ Own website ☐ Another's website ☐ Upon request
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of
- interest policy, and financial statements available to the public. See Additional Data Table State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20
- RUTH HUDSPETH 1140 PROFESSIONAL COURT HAGERSTOWN, MD 21740 (301)665-1400

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

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

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

Check this box if neither the or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee
(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Additional Data Table										
				\vdash			_			

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

	(A) Name and Title	hours more than one box, compensation compensation from the week an officer and a (describe director/trustee) 2/1099-MISC) (W- 2/1099-MISC)				(F) Estimated amount of other compensation from the organization and related									
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC		organiz		
See A	udditional Data Table			<u> </u>			+ -	\vdash				\dashv			
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1b c	Sub-Total				•	•						+			
d	Total (add lines 1b and 1c) .				•	•		P		1,023,056		0		180,972	
2	Total number of individuals (inc \$100,000 of reportable comper					ted	above) who	o receive	d more tha	ın				
													Yes	No	
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sc											3	.	No	
4	For any individual listed on line												'	No	
	organization and related organiz														
5	Did any person listed on line 1a	receive or accru	ue com	pensa	- atıon	· ı froı	many	- unre	lated org	anızatıon (or individual for	4	Yes		
	services rendered to the organiz								_			5	;	No	
S	ection B. Independent Con	tractors													
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	highest comper n the organizatio													
		(A) me and business ad	dress							Doca	(B) ription of services		Compa	C) nsation	
649 N	LOPES UNLIMITED I HORNERS LANE VILLE, MD 20850	me and business au	uiess								RODUCTION & MAII	ING		1,041,342	
PROG 2677	RRESS PRINTING WATERLICK RD HBURG, VA 24502									PRINT & MA MAGAZINE	IL QUARTERLY			160,760	
ODEL 7704	L SIMMS & LYNCH INC LEESBURG PIKE G CHURCH, VA 22043									DEVELOPME	NT CONSULTING			129,130	
CONV PO BO	ЛО INC DX 671445 AS, TX 75267									WEBSITE HC	ST			105,824	
120 V									HILL STUDIO PC 120 WEST CAMBELL AVE SW CONSULTING - WILDERNESS BATTLEFIELD CATE						

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

\$100,000 of compensation from the organization \blacktriangleright 5

Part v		Statement of Revenue					
- 4		Fodomikal assuman		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
쓸쓸	1a	Federated campaigns 1a					
亞克	ь	Membership dues 1b	2,831,700				
S.E.	С	Fundraising events 1c					
差	d	Related organizations 1d	374,356				
% <u>E</u>	e	Government grants (contributions) 1e	2,542,452				
등등	f	All other contributions, gifts, grants, and 1f	10,762,775		ŀ		
五百		sımılar amounts not ıncluded above					
팔	g	Noncash contributions included in lines 1a-1f \$					
Contributions, gifts, grants and other similar amounts	h	Total. Add lines 1a-1f	▶	16,511,283			
Q re		Total Add Into Id I I I I I		, ,			
e =			Business Code				
Ze.	2a	CONFERENCE REGISTRATIO	900099	181,084	181,084		
윤	b						
95	C						
桑	d						
É	e						
Program Serwce Revenue	f	All other program service revenue					
ج	g	Total. Add lines 2a-2f		181,084			
	3	Investment income (including dividen		101,004			
		and other similar amounts)	. · ·	19,196			19,196
	4	Income from investment of tax-exempt bond					
	5	Royalties	▶	9,430			9,430
		(ı) Real	(II) Personal				
	6a	Gross rents 106,019	, ,				
	ь	Less rental 0					
	_c	expenses Rental income 106,019					
		or (loss)		106,019			106,019
	d	Net rental income or (loss)		100,019			100,019
	7a	(1) Securities Gross amount	(II) O ther 17,013				
	/a	from sales of	17,013				
		assets other than inventory					
	ь	Less cost or other basis and	18,588				
		sales expenses					
	C	Gain or (loss)	-1,575	4 575			4 575
	d	Net gain or (loss)	▶	-1,575			-1,575
in e	8a	Gross income from fundraising events (not including					
Other Revenue		of contributions reported on line 1c) See Part IV, line 18					
		а					
ŧ	Ь	Less direct expenses b					
0	C C	Net income or (loss) from fundraising	events 🏲				
	9a	Gross income from gaming activities See Part IV, line 19 a					
	ь	Less direct expenses b					
	c	Net income or (loss) from gaming acti	vities				
	10a	Gross sales of inventory, less returns and allowances					
		а	19,577				
	ь	Less cost of goods sold b	11,686				
	С	Net income or (loss) from sales of inve		7,891	7,891		
	<u> </u>	Miscellaneous Revenue	Business Code	54.5	24.5		
	11a	OTHER REVENUE	900099	31,154	31,154		
	Ь	AFFINITY CARDS	900099	5,772	5,772		
	C						
	d	All other revenue					
	e	Total. Add lines 11a-11d	🛌	36,926			
	12	Total revenue. See Instructions .		16,870,254	225,901	0	133,070

3

5

6

7

17

е

25

All other expenses

combined educational campaign and fundraising solicitation

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 5,016,182 5,016,182 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and 812,853 584,670 85,364 142,819 key employees . . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 1,614,961 1,161,612 169,599 283,750 Pension plan contributions (include section 401(k) and section 7,065 1,031 403(b) employer contributions) 9,822 1,726 258,780 186,136 27,176 Other employee benefits 45,468 160,580 115,502 16,864 28,214 10 Fees for services (non-employees) 11 Management 56,123 43,041 13,082 Legal 29,900 Accounting 20,930 2,990 5,980 Lobbying Professional fundraising See Part IV, line 17 . . 163,659 163,659 Investment management fees 353,830 6,955 g 323,308 23,567 Advertising and promotion . . . 88,830 87,850 980 12 1,861,715 29,756 13 Office expenses 1,280,073 551,886 265,525 11,440 14 Information technology 231,544 22,541 15 Royalties . . 16 433,239 309,244 58,310 65,685 105,835 92,880 4,704 8,251 Payments of travel or entertainment expenses for any federal, 18 state, or local public officials 19 Conferences, conventions, and meetings 218,555 205,419 4,591 8,545 219,144 219,144 20 21 Payments to affiliates . 22 Depreciation, depletion, and amortization 146,464 135,938 5,263 5,263 23 57,171 49,995 3,588 3,588 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) MEMBERSHIP FULFILLMENT 918,795 796,146 122,649 LAND MAINTENANCE 434,457 434,457 **EDUCATIONAL PROGRAMS** 138,792 138,792 OTHER EXPENSES 30,748 28,432 2,164 d 152

32,855

25,105

459

7,291

Part X **Balance Sheet** (A) (B) Beginning of year End of year 212,626 174,692 1 1 9.399.515 9.239.908 2 2 3 219,848 185,575 3 4 26.226 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 1.510 8 9 318,771 9 425,406 Prepaid expenses and deferred charges 10a 67,581,153 Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b 483,727 b Less accumulated depreciation 64,747,639 10c 67,097,426 114,541 234,986 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 65,378 15 15 61,418 75,079,828 77,445,637 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 254,367 281,051 17 17 Accounts payable and accrued expenses . 18 18 19 55,755 19 56,015 20 5.400.000 20 5.200.000 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 2.200.000 23 1,225,000 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 462,180 25 576,376 D 26 8,372,302 26 7,338,442 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 1,758,959 27 3,649,515 Unrestricted net assets 64,948,567 28 66,457,680 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶

and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 66.707.526 33 70.107.195 75,079,828 34 Total liabilities and net assets/fund balances 34 77.445.637

Ра	Check if Schedule O contains a response to any question in this Part XI			. I	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		16.8	370,254
2	Total expenses (must equal Part IX, column (A), line 25)	2			128,815
3	Revenue less expenses Subtract line 2 from line 1	3		3,4	141,439
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		66,7	707,526
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-	-41,770
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		70,1	107,195
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		•	୮	
		_		Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separated basis	sued			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired	3b	Yes	

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

h

Public Charity Status and Public Support

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

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

Inspection **Employer identification number**

CIVIL WAR PRESERVATION TRUST 54-1426643 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) 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) 10 An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III - Functionally integrated Type III - Other Type I **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizat col (i) lis your gove docume	e Ion In ted In Frning	(v) Did you not organizati col (i) of suppor	ion in your	(vi) Is the organization in col (i) organized in the US?		(vii) A mount of support?
		ınstructions))	Yes	No	Yes	No	Yes	No	
Total									

Provide the following information about the supported organization(s)

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

-	under Part III. II tr	<u>ie organization</u>	rails to quality u	nder the tests	iistea below, pie	ase complete i	Part III.)
	ection A. Public Support endar year (or fiscal year beginning						
Cui	in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do	14,896,79	6 12,026,415	18,901,103	22,356,767	16,511,283	84,692,364
	not include any "unusual grants ")	11,030,73	12,020,113	10,501,103	22,330,707	10,311,203	
2	Tax revenues levied for the organization's benefit and either						
	paid to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	14,896,79	6 12,026,415	18,901,103	22,356,767	16,511,283	84,692,364
5	The portion of total contributions by each person (other than a						
	governmental unit or publicly						
	supported organization) included						305,595
	on line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)						
6	Public Support. Subtract line 5 from line 4						84,386,769
	ection B. Total Support						
Cal	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	A mounts from line 4	14,896,796	12,026,415	18,901,103	22,356,767	16,511,283	84,692,364
8	Gross income from interest,	, ,			, ,	, ,	
	dividends, payments received	240 470	00 500	104 724	450 202	124.645	720.420
	on securities loans, rents, royalties and income from similar sources	249,170	90,502	104,731	159,382	134,645	738,430
9	Net income from unrelated						
	business activities, whether or						
	not the business is regularly carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss	300,185	331,917	62,616	57,825	36,926	789,469
	from the sale of capital	,	,	,	,	,	,
11	Total support (Add lines 7						86,220,263
12	through 10) Gross receipts from related activity	ties.etc (See ins	tructions)			12	593,122
 13	First Five Years If the Form 990 is		•	third fourth or f	ifth tay year as a !		
	check this box and stop here	, for the organizat	ion 5 mst, second,	cima, rouren, or r	nen eux yeur us u .	501 (C)(5) 019d1112	▶ □
S	ection C. Computation of Pu	blic Support	Percentage				
14	Public Support Percentage for 201	l 1 (line 6 column	(f) divided by line	11 column (f))		14	97 870 %
15	Public Support Percentage for 201	LO Schedule A , P	art II, line 14			15	97 960 %
16a	33 1/3% support test—2011. If th	-		•	line 14 is 33 1/3%	or more, check t	
b	and stop here. The organization qu 33 1/3% support test—2010. If th				a, and line 15 is 3	33 1/3% or more,	▶ ✓ check this
	box and stop here. The organization	on qualifies as a p	oublicly supported	organızatıon	•		► □
17a	10%-facts-and-circumstances test						
	is 10% or more, and if the organiz in Part IV how the organization me						ed
	organization				4		
b	10%-facts-and-circumstances test						
	15 is 10% or more, and if the orga Explain in Part IV how the organiz						
	supported organization	and mades the	and chedilla		o. gamzacion quui	as a pasiiciy	▶ ┌
18	Private Foundation If the organiza	tion did not chec	k a box on line 13,	16a, 16b, 17a o	r 17b, check this l	oox and see	
	ınstructions						▶ □

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

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

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

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

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

Software ID: Software Version:

EIN: 54-1426643

Name: CIVIL WAR PRESERVATION TRUST

Form 990, Special Condition Description:

Special Condition Description

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

(A) Name and Title	(B) A verage hours per	that apply)			<u> </u>	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Officei	Key amployaa	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
HENRY E SIMPSON CHAIRMAN	4 00	х		x				0	0	0
MICHAEL GRAINGER VICE-CHAIRMAN	4 00	Х		х				0	0	0
HARRISON M BAINS JR TREASURER	4 00	Х		х				0	0	0
WILLIAM W VODRA SECRETARY	4 00	Х		х				0	0	0
DR MARY M ABROE TRUSTEE	30	Х						0	0	0
TRACE ADKINS TRUSTEE	30	х						0	0	0
DON BARRETT TRUSTEE	30	Х						0	0	0
CRICKET BAUER TRUSTEE	30	х						0	0	0
EDWIN C BEARSS TRUSTEE	30	Х						0	0	0
KIRK J BRADLEY TRUSTEE	30	Х						0	0	0
PAUL W BRYANT TRUSTEE	30	Х						0	0	0
WALTER W BUCKLEY JR TRUSTEE	30	Х						0	0	0
CARLTON B CRENSHAW TRUSTEE	3 00	Х						0	0	0
JEFF DAHLGREN TRUSTEE	30	Х						0	0	0
BEVERLY M DUBOSE III TRUSTEE	30	Х						0	0	0
BRUCE C GOTTWALD TRUSTEE	30	х						0	0	0
WILLIAM J HUPP TRUSTEE	1 00	Х						0	0	0
THOMAS H LAUER TRUSTEE	30	Х						0	0	0
DUKE R LIGON TRUSTEE	30	Х						0	0	0
JEFFREY P MCCLANATHAN TRUSTEE	30	Х						0	0	0
JOHN L NAU III TRUSTEE	30	Х						0	0	0
STEPHAN F NEWHOUSE TRUSTEE	30	Х						0	0	0
DR LIBBY O'CONNELL TRUSTEE	30	Х						0	0	0
JEFF RODEK TRUSTEE	30	х						0	0	0
J DENNIS SEXTON TRUSTEE	30	х						0	0	0

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

(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
JEFF SHAARA TRUSTEE	30	Х						0	0	0
DOUG WALKER TRUSTEE	30	Х						0	0	0
W DENMAN ZIRKLE TRUSTEE	30	Х						0	0	0
CHILDS BURDEN TRUSTEE	30	Х						0	0	0
JOHN D HAYNES TRUSTEE	30	Х						0	0	0
O JAMES LIGHTHIZER TRUSTEE/PRESIDENT	60 00	Х		х				202,873	0	71,672
RONALD M COGSWELL	32 00			х				63,525	0	3,459
RUTH E HUDSPETH CFO	50 00			х				92,632	0	12,584
DAVID N DUNCAN DIR OF MEMBERSHIP & DEVELOPMENT	50 00				х			172,836	0	10,495
THOMAS M GILMORE DIRECTOR OF REAL ESTATE	50 00				х			151,429	0	25,879
SAMUEL F DELUCA SENIOR VP FOR MAJOR GIVING	50 00					Х		101,784	0	19,660
ROBERT C SHENK DIR OF INTERNET STRATEGY DEVEL	45 00					Х		119,417	0	23,682
JAMES J CAMPI DIR OF POLICY & COMMUNICATIONS	50 00					Х		118,560	0	13,541

DLN: 93493214002102

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

Yes

Yes

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name	oft	:he d	orgai	nızatı	on
CIVIL V	VAR	PRES	ERVA	TION	TRUS

Employer identification number

54-1426643

Part I-A	Complete if the organization is exempt under section 501(c) or is a section	on 527 organization.

- Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV
- 2 Political expenditures
- 3 Volunteer hours

Part I-B	Comp	lete if	the or	ganization	is exem	pt under	section	501(c)(3)	

- 1 Enter the amount of any excise tax incurred by the organization under section 4955
- Enter the amount of any excise tax incurred by organization managers under section 4955
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
- Was a correction made?
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- Enter the amount directly expended by the filing organization for section 527 exempt function activities
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- Did the filing organization file Form 1120-POL for this year?

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -

i Subtract line 1f from line 1c If zero or less, enter -0-

		1 49
Part II-A	Complete if the organization is exempt under section 501(c)(3) and filed Form 5768	(election
	under section 501(h)).	

Α	Check	abla	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,
			expenses, and share of excess lobbying expenditures)
В	Check		if the filing organization checked box A and "limited control" provisions apply

	Check If the filing organization checked box	x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing O rganization's Totals	(b) Affiliated Group Totals
.a	Total lobbying expenditures to influence public o	2,031		
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	131,724	
c	Total lobbying expenditures (add lines 1a and 1b	o)	133,755	
d	Other exempt purpose expenditures		13,298,860	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	13,432,615	
f	Lobbying nontaxable amount Enter the amount f	821,631		
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxable amount is: 20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000			
	Over \$1,000,000 but not over \$1,500,000			
	Over \$1,500,000 but not over \$17,000,000			
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	205,408	
h	Subtract line 1g from line 1a If zero or less, ento	er -0-	0	_

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

 	_	
Yes		No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total				
2a	Lobbying non-taxable amount	546,817	748,162	633,184	821,631	2,749,794				
b	Lobbying ceiling amount (150% of line 2a, column(e))					4,124,691				
C	Total lobbying expenditures	73,589	83,119	70,283	133,755	360,746				
d	Grassroots non-taxable amount	136,704	187,041	158,296	205,408	687,449				
e 	Grassroots ceiling amount (150% of line 2d, column (e))					1,031,174				
f	Grassroots lobbying expenditures	283	288		2,031	2,784				

_	edule C (Form 990 or 990-EZ) 2011				Page 3						
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has (election under section 501(h)).	NOT f	iled Fo	orm 57	768 						
		(a)		<u>(a)</u>		<u>(a)</u>		<u>(a)</u>		(b)
		Yes	No	Am	ount						
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of										
а	Volunteers?										
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?										
C	Media advertisements?										
d	Mailings to members, legislators, or the public?										
е	Publications, or published or broadcast statements?										
f	Grants to other organizations for lobbying purposes?										
g	Direct contact with legislators, their staffs, government officials, or a legislative body?										
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?										
i	O ther activities? If "Yes," describe in Part IV										
j	Total lines 1c through 1i		_								
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?										
b	If "Yes," enter the amount of any tax incurred under section 4912										
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912										
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?										
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), d	or sect	tion						
			_	Y	es No						
1	Were substantially all (90% or more) dues received nondeductible by members?			1							
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2							
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3							
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".				tion						
1	Dues, assessments and similar amounts from members	1									
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).										
а	Current year	2a									
b	Carryover from last year	2b									
C	Total	2c									
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues	3									
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4									
5	Taxable amount of lobbying and political expenditures (see instructions)	5									

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier | Return Reference | Explanation

DLN: 93493214002102

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Name of the organization

Employer identification number

CIVIL WAR PRESERVATION TRUST		F4 1436643	
Part I Organizations Maintaining Donor organization answered "Yes" to Form		Funds or Accou	nts. Complete if the
organization answered Tes to Form	(a) Donor advised funds	(b) Funds a	nd other accounts
1 Total number at end of year			
Aggregate contributions to (during year)			
Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and donor ac funds are the organization's property, subject to th			┌ Yes ┌ No
Did the organization inform all grantees, donors, ar used only for charitable purposes and not for the b conferring impermissible private benefit			┌Yes ┌No
Part II Conservation Easements. Complet	e if the organization answered "Yes	" to Form 990, Par	t IV, line 7.
Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., recreation) Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qu	ation or pleasure) Preservation of Preservation of	an historically impor a certified historic so orm of a conservation	tructure
easement on the last day of the tax year		I I a I di a a a	Aba Fad af Aba Vasa
a Total number of conservation easements		2a Heid at	the End of the Year
b Total acreage restricted by conservation easemen	ts	2b	237 00
c Number of conservation easements on a certified h		2c 2c	237 00
d Number of conservation easements included in (c)	, ,	2d	
Number of conservation easements modified, trans the taxable year ►	sferred, released, extinguished, or termin	ated by the organizat	ion during
Number of states where property subject to conse	rvation easement is located 🛌 👤 1		
Does the organization have a written policy regard enforcement of the conservation easements it hold		andling of violations,	and ✓ Yes ✓ No
Staff and volunteer hours devoted to monitoring, in	specting and enforcing conservation eas	ements during the ye	ar 🕨 160 00
Amount of expenses incurred in monitoring, inspect			
Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	e 2(d) above satisfy the requirements of	section	✓ Yes
In Part XIV, describe how the organization reports balance sheet, and include, if applicable, the text of the organization's accounting for conservation eas	of the footnote to the organization's financ		
art III Organizations Maintaining Collect Complete if the organization answered	ions of Art, Historical Treasure d "Yes" to Form 990, Part IV, line 8.	s, or Other Simil	ar Assets.
If the organization elected, as permitted under SFA art, historical treasures, or other similar assets he provide, in Part XIV, the text of the footnote to its	AS 116, not to report in its revenue state Id for public exhibition, education or rese	ment and balance shearch in furtherance o	
b If the organization elected, as permitted under SFA historical treasures, or other similar assets held for provide the following amounts relating to these item	or public exhibition, education, or researc		
(i) Revenues included in Form 990, Part VIII, line	1	► \$	
(ii) Assets included in Form 990, Part X		► \$	
If the organization received or held works of art, hi following amounts required to be reported under SF		· · · · ·	rovide the
a Revenues included in Form 990, Part VIII, line 1		► \$	

Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art,	, His	tori	cal Tre	asures, or Ot	:he	<u>r Similar As</u>	sets	(cor	itinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th	ne foll	lowing tha	at are a significa	nt u	se of its collect	ion		
а	Public exhibition		d	Γ	Loan or	exchange progra	ams				
b	Scholarly research		e	Γ	Other						
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	ın hov	w the	y further t	the organization'	s ex	empt purpose i	n		
5	During the year, did the organization solicit assets to be sold to raise funds rather than								– Yes	5	∏ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar	ements. Comple	te ıf	the	organiza	ation answered		es" to Form 9	90,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interme	dıary	for c	ontributio	ons or other asse	ets r		– _{Yes}	5	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the t	follow	/ıng ta	able	Г		Α	ount		
c	Reginning helenes					<u> </u>	1c	An	iount		
d	Additions during the year						1d				
e	Additions during the year Distributions during the year					<u> </u>	1e				
f							ıe 1f				
	Ending balance	0.00 D+-V l				L	<u> </u>				
2a	Did the organization include an amount on F		211						Yes	•	∏ No
	If "Yes," explain the arrangement in Part XI\				ad !!Vaa!!	to Forms 000	Do.	+ TV line 10			
Ра	rt V Endowment Funds. Complete	(a)Current Year)Prior		(c)Two Years Back		TIV, IINE IU. Three Years Back	(e)Fo	ur Ye	ars Back
1a	Beginning of year balance	64,948,567	(5		,391,340	832,85	_	897,512		ui ic	ars back
b	Contributions	7,830,683		13	,300,868	56,524,50	4	283,925			
c	Investment earnings or losses						T				
d	Grants or scholarships										
e	Other expenditures for facilities and programs	6,321,570		1	,743,641	3,966,02	2	348,579			
f	Administrative expenses										
g	End of year balance	66,457,680		64	,948,567	53,391,34	0	832,858			
2	Provide the estimated percentage of the yea	rend balance held a	ıs		•						
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment 🕨										
c	Term endowment ► 100 000 %										
За	Are there endowment funds not in the posse	ssion of the organiza	tion	that a	are held a	ınd admınıstered	for	the			
	organization by									es	No
	(i) unrelated organizations			•			•	3a(\dashv	N o
	(ii) related organizations							3a(ᆛ	No_
	If "Yes" to 3a(II), are the related organization	•					•	3t)		
4	Describe in Part XIV the intended uses of the										
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	U, Pa						T	—	
	Description of property				Cost or oth s (investme			(c) Accumulated depreciation	(d)	Воо	k value
1a	Land					63,761,	496			63	,761,496
b I	Buildings					2,299,	576	116,15	1	2	,183,422
c I	Leasehold improvements					1,192,	911	216,97			975,941
d I	Equipment					327,	170	150,60	3		176,567
_e (Other	<u> </u>									
Tota	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colun	nn (B)), line	10(c).) .			▶		67	,097,426
								Schedule D	(Forr	n 99	0) 2011

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12		
(a) Description of security or category	(b)Book value		od of valuation
(including name of security)		Cost of elia-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
T-4-1 (C-1) (h) -h			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		1.2	
Part VIII Investments—Program Related. See	e Form 990, Part X, line		
(a) Description of investment type	(b) Book value		od of valuation f-year market value
		Cost of elia-o	- year market value
Total. (Column (b) should equal Form 990. Part X. col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III			(b) Book value
(a) Descrip	ocion		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		
Part X Other Liabilities. See Form 990, Part X			
(a) December of Labelity			
	(b) A mount		
Federal Income Taxes			
DEFERRED RENT	190,481		
DEFERRED COMPENSATION PAYABLE	237,700		
FAIR VALUE OF INTEREST RATE SWAP	148,195		
	210,233		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	576,376		
, , ,	370,376		

Schedule D (Form 990) 2011				Page 4
	Change in Net Assets from For	m 990 to Financial Statemer		16 070 254
1 Total revenue (Form 990, Part			1	16,870,254
Total expenses (Form 990, PaExcess or (deficit) for the year			2	13,428,815
-			3 4	3,441,439
Net unrealized gains (losses) ofDonated services and use of fa			5	
- Donated Services and ase of it	acilities		6	
-			7	
-			8	-41,770
- other (besenbe in rate xiv)				-41,770
			10	•
zxeess or (delicit) for the year	perfinancial statements Combine line Revenue per Audited Financial			3,399,669
	er support per audited financial statem		1	16,939,000
	ut not on Form 990, Part VIII, line 12			
a Net unrealized gains on inves	tments	2a		
b Donated services and use of	facilities	. 2b 4,543		
c Recoveries of prior year grant	ts	. 2c		
d Other (Describe in Part XIV)		2d 52,517		
e Add lines 2a through 2d			2e	57,060
Subtract line $2e$ from line 1 .		[3	16,881,940
4 Amounts included on Form 99	90 , Part VIII , line 12 , but not on line $oldsymbol{1}$			
a Investment expenses not inc	luded on Form 990, Part VIII, line 7b	. 4a		
b Other (Describe in Part XIV)		. 4b -11,686		
c Add lines 4a and 4b			4c	-11,686
	nd 4c. (This should equal Form 990, Pa	•	5	16,870,254
	xpenses per Audited Financia	il Statements With Expenses	per Re	turn 14,040,501
1 Total expenses and losses per statements	· · · · · · · ·		1	14,040,50.
2 Amounts included on line 1 be	ut not on Form 990, Part IX, line 25			
a Donated services and use of	facilities	2a 4,543		
b Prior year adjustments		2b		
c Other losses		. 2c		
d Other (Describe in Part XIV)		2d 619,572		
e Add lines 2a through 2d			2e	624,11!
Subtract line 2e from line 1 .			3	13,416,386
A mounts included on Form 99	90, Part IX, line 25, but not on line 1:			
a Investment expenses not inc	luded on Form 990, Part VIII, line 7b			
b Other (Describe in Part XIV)		4b 12,429		
c Add lines 4a and 4b			4c	12,429
Total expenses Add lines 3 a Part XIV Supplemental In	ind 4c. (This should equal Form 990, Pa	art I, line 18)	5	13,428,815
additional information	· · · · · · · · · · · · · · · · · · ·	5, and 9, Part III, lines 1a and 4, Pa III, lines 2d and 4b Also complete t		provide any
Identifier DESCRIPTION OF HOW	Return Reference PART II, LINE 9	Explanat CONSERVATION EASEMENTS AR	ion E RECOR	DED AS AN
Identifier DESCRIPTION OF HOW DRGANIZATION REPORTS	Return Reference	Explanati CONSERVATION EASEMENTS AR ASSET ON THE BALANCE SHEET	ion E RECOR THE ORG	DED AS AN GANIZATION HAS
Identifier ESCRIPTION OF HOW ORGANIZATION REPORTS	Return Reference	Explanati CONSERVATION EASEMENTS AR ASSET ON THE BALANCE SHEET A WRITTEN DOCUMENT REGARD: MONITORING, INSPECTION, VIO	ion E RECOR THE ORG ING THE I	DED AS AN GANIZATION HAS PERIODIC G, AND
Identifier DESCRIPTION OF HOW DRGANIZATION REPORTS	Return Reference	Explanati CONSERVATION EASEMENTS AR ASSET ON THE BALANCE SHEET A WRITTEN DOCUMENT REGARD:	ion E RECOR THE ORG ING THE I	DED AS AN GANIZATION HAS PERIODIC G, AND
Identifier DESCRIPTION OF HOW DRGANIZATION REPORTS CONSERVATION EASEMENTS DESCRIPTION OF UNCERTAIN	Return Reference	Explanati CONSERVATION EASEMENTS AR ASSET ON THE BALANCE SHEET A WRITTEN DOCUMENT REGARD: MONITORING, INSPECTION, VIO ENFORCEMENT OF THE CONSERV HOLD CWPT AND EBDF ARE GENERALLY	E RECOR THE ORG ING THE I LATIONS VATION E	DED AS AN GANIZATION HAS PERIODIC G, AND EASEMENTS IT
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DLN: 93493214002102

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Open to Public Inspection

Vame :	of the	organızatıon	
CIVIL	WAR	PRESERVATION	TRUST

Employer identification number

54-1426643

Part I Fundraising Ac	tivities. Complete	e if the c	organizat	tion answered "Yes"	to Form 990, Part IV	, lıne 17.
a	olicitations is a written or oral agre n Form 990, Part VII st paid individuals or	ement wil or entity entities (e f g th any ind in conne (fundraise	Solicitation of nor Solicitation of gov Special fundraising Invidual (including office ction with professional ars) pursuant to agreem	n-government grants vernment grants ng events ers, directors, trustees fundraising services? ents under which the fun	
(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of outlons?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
	PHONE SOLICITATIONS		No	33,098	34,529	-1,431
ODELL SIMMS & LYNCH INC 7700 LEESBURG PIKE SUITE 2	CONSULTANT - FUNDRAISING CAMPAIGN, SPONSORSHIP AND MAJOR DON		No	0	129,130	-129,130

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

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY, DC

33,098

-130,561

163,659

Part I	Fundraising Events. Commore than \$15,000 on Form				
		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))
		(event type)	(event type)	(total number)	(4)
1 2	Gross receipts				
2	Less Charitable				
3	contributions Gross income (line 1				
	minus line 2)				
4	Cash prizes				
5	Non-cash prizes				
6	Rent/facility costs				
. 7	Food and beverages				
8	Entertainment				
9	Other direct expenses .				
10	Direct expense summary Add lir	nes 4 through 9 in colum	an (d)	.	(
111	•	_	• •		,
art I	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		i tes lo foilii 990, Pa	rt IV, iiile 19, or repo	orted more than
		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	Gross revenue				
2	Cash prizes				
3	Non-cash prizes				
1 4					
4	Rent/racinty costs				
5	Other direct expenses				
6	Volunteer labor	┌ Yes		┌ Yes	
		Г №	ΓNο	Γ No	_
7	Direct expense summary Add line	s 2 through 5 in columr	n (d)		(
8	Net gaming income summary Com	ndine lines 1 and 7 in co	olumn (a)	<u> </u>	
	nter the state(s) in which the organiz				
Is	the organization licensed to operate	e gamıng actıvıtıes ın ea	ch of these states?		· Fyes Fno
b If	"No," Explain				
 a W	ere any of the organization's gaming				
	"Yes," Explain				- , res , NO

Sche	dule G (Form 990 or 990-EZ) 20	11			Page 3
11	Does the organization operate ga	aming activities with nonmembers? .		Г _{Yes} Г	- No
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	per of a partnership or other entity		
	formed to administer charitable (gamıng?		· · · · F Yes F	- No
13	Indicate the percentage of gamii	ag activity operated in		1 1	
a				13a	
b					
14		f the person who prepares the organiza		<u> </u>	
	Name ►				
	Address ►				
	revenue?	ntract with a third party from whom the			- No
		ed by the third party 🟲 \$			
С	If "Yes," enter name and address	S			
	Name 🟲				
	Address ►				
16	Gaming manager information				
	Name 🟲				
	Gaming manager compensation I	\$ \$			
	Description of services provided	>			
17 a		Employee er state law to make charitable distribu		· · ·	- No
b	Enter the amount of distributions	required under state law distributed to	o other exempt organizations or sp		-
_		activities during the tax year > \$		hadala C /	
Par	t IV Complete this part to proceed instructions.)	provide additional information for	responses to quuestion on Sc	nedule G (see	
	Identifier	ReturnReference	Explana	tion	
		•	•		

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Schedule I (Form 990)

Department of the Treasury

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

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

▶ Attach to Form 990

OMB No 1545-0047

2011

DLN: 93493214002102

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number CIVIL WAR PRESERVATION TRUST 54-1426643 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (a) Name and address of **(b)** EIN (c) IRC Code (d) Amount of cash (f) Method of (a) Description of (h) Purpose of grant (e) A mount of nonorganization section grant valuation non-cash assistance or assistance cash ıf applicable (book, FMV, or government assistance appraisal, other) See Additional Data Table Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

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

Schedule I (Form 990) 2011

Software ID: **Software Version:**

EIN: 54-1426643

Name: CIVIL WAR PRESERVATION TRUST

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	I	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant
CENTRAL VA HISTORIC PRES FOUND2109 BUCKEYE DR RICHMOND, VA 23228	42- 1708410	501(C)(3)	248,000			TO AID IN ACQUISITION OF 5 53 ACRE TRACT AT COLD HARBOR BATTLEFIELD
SHENANDOAH VALLEY BATTLEFIELD FOUNDPO BOX 897 NEW MARKET, VA 22844	54- 2007460	501(C)(3)	125,000			TO AID IN ACQUIRING CONSERVATION EASEMENT ON GUINN TRACT, TOM'S BROOK, VA
SHENANDOAH VALLEY BATTLEFIELD FOUNDPO BOX 897 NEW MARKET, VA 22844	54- 2007460	501(C)(3)	158,157			TO AID IN ACQUIRING CONSERVATION EASEMENT ON SPIKER TRACT, TOM'S BROOK, VA
THE CONSERVATION FUND1655 N FT MYER DRST 1300 ARLINGTON,VA 222093199	52- 1388917	501(C)(3)	24,863			TO AID IN ACQUISITION OF GETTYSBURG COUNTRY CLUB, GETTYSBURG, PA
THE TRUST FOR PUBLIC LAND202 TREMONT ST CHATTANOOGA,TN 37405	23- 7222333	501(C)(3)	100,000			TO AID IN ACQUIRING CONSERVATION EASEMENT AT RESACA, GA
BLUE GRASS CONSERVACY380 S MILL ST205 LEXINGTON, KY 40508	61- 1293032	501(C)(3)	18,288			APPRAISAL, TITLE UPDATE, & SURVEY FOR CONSERVATION EASEMENT ON HANKLA TRACT, PERRYVILLE, KY
MINNESOTA HISTORICAL SOCIETY345 W KELLOGG BLVD ST PAUL,MN 55102	41- 0829432	501(C)(3)	107,386			TO AID IN ACQUIRING CONSERVATION EASEMENT ON COULTER TRACT, WOOD LAKE, MN
TRUST FUND OF THE STATE OF FLORIDA 3900 COMMONWEALTH BLVD TALLAHASSEE, FL 32303	59- 6007353	GOVERNMENT	20,000			TO AID IN ACQUISITION OF GERRELL TRACT, NATURAL BRIDGE, FL
FRIENDS OF FORT DERUSSY INC7162 HWY 29 COTTONPORT, LA 71327	02- 0672814	501(C)(3)	8,000			TO AID IN ACQUISITION OF BORDELON INTEREST, FT DERUSSY, LA
STATE OF TENNESSEE401 CHURCH ST NASHVILLE, TN 37243	62- 6001445	GOVERNMENT	180,001			TO AID IN ACQUISITION OF BRITT TRACT, PARKER'S CROSSROADS, TN
US DEPT OF INTERIOR NPS200 CHESTNUT ST PHILADELPHIA,PA 19106	53- 0197094	GOVERNMENT	25,983			APPRAISALS & ENVIRONMENTAL ON VARIOUS TRACTS TO AID IN ACQUISITION OF LLOYD TRACT, GETTYSBURG
LEGACY PARKS FOUNDATION625 MARKET ST ST1203 KNOXVILLE,TN 37902	20- 4631230	501(C)(3)	10,000			TO AID IN ACQUISITION OF 70 ACRE TRACT ON KNOXVILLE BATTLEFIELD
JEFFERSON CO HISTORIC LANDMARKS COMM PO BOX 23 CHARLES TOWN, WV 25414	45- 3213370	GOVERNMENT	117,640			TO AID IN THE ACQUISITION OF THE CEMENT MILL TRACT, SHEPHERDSTOWN, WV
US DEPT OF THE INTERIOR NPS1849 C STREET NW WASHINGTON, DC 20240	53- 0197094	GOVERNMENT	2,494,387	APPRAISAL	LAND	BATTLEFIELD PRESERVATION
STATE OF NORTH CAROLINA DCR 1321 MAIL SERVICE CENTER RALEIGH, NC 27699	56- 6062189	GOVERNMENT	1,056,843	APPRAISAL	LAND	BATTLEFIELD PRESERVATION
COMMONWEALTH OF VIRGINIA DCR 203 GOVERNOR ST STE 302 RICHMOND, VA 23219	54- 6004497	GOVERNMENT	121,732	APPRAISAL	LAND	BATTLEFIELD PRESERVATION
STATE OF TENNESSEE TN HISTORICAL COMMISSION2941 LEBANON RD NASHVILLE,TN 37214	62- 6001445	GOVERNMENT	186,134	APPRAISAL	LAND	BATTLEFIELD PRESERVATION

DLN: 93493214002102

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of	the organization
CIVIL WAR	PRESERVATION TRUST

Employer identification number

54-1426643

Pa	tt I Questions Regarding Compensation								
					Yes	No			
1a	Check the appropriate box(es) if the organization provided 990, Part VII, Section A, line 1a Complete Part III to								
	First-class or charter travel	Γ	Housing allowance or residence for personal use						
	Travel for companions	Γ	Payments for business use of personal residence						
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees						
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)						
b	If any of the boxes in line 1a are checked, did the orga reimbursement orprovision of all the expenses describ			1b					
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?								
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all that								
	Compensation committee		Written employment contract						
	Independent compensation consultant	고	Compensation survey or study						
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee						
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization								
а	Receive a severance payment or change-of-control pa	aymen	nt?	4a		Νo			
b	Participate in, or receive payment from, a supplementa	al non	qualified retirement plan?	4b	Yes				
С	Participate in, or receive payment from, an equity-bas	sed co	mpensation arrangement?	4c		Νο			
	If "Yes" to any of lines 4a-c, list the persons and prov	vide th	ne applicable amounts for each item in Part III						
	Only 501(c)(3) and 501(c)(4) organizations only must								
5	For persons listed in form 990, Part VII, Section A, lir compensation contingent on the revenues of	ne 1a,	, did the organization pay or accrue any						
а	The organization?			5a		Νo			
b	Any related organization?			5b		No			
	If "Yes," to line 5a or 5b, describe in Part III								
6	For persons listed in form 990, Part VII, Section A, lir compensation contingent on the net earnings of	ne 1a,	, did the organization pay or accrue any						
а	The organization?			6a		Νo			
b	Any related organization?			6b		Νο			
	If "Yes," to line 6a or 6b, describe in Part III								
7									
8	Were any amounts reported in Form 990, Part VII, pai subject to the initial contract exception described in R in Part III			8		No			
9	If "Yes" to line 8 did the organization also follow the r	rehutt	able presumption procedure described in Regulations	Ť					
_	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?								

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

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

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
	_	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) O JAMES LIGHTHIZER	(1) (11)	202,873 0	0	0 0	71,672 0	1,992 0	276,537 0	o 0
(2) DAVID N DUNCAN	(1) (11)	172,836 0	0	0	10,370 0	2,067 0	185,273 0	0
(3) THOMAS M GILMORE	(1) (11)	151,429 0	0	0 0	7,572 0	20,249 0	179,250 0	0

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
		O JAMES LIGHTHIZER, PRESIDENT, PARTICIPATES IN DEFERRED COMPENSATION PLAN THE ORGANIZATION CONTRIBUTED \$30,000 TO THE PLAN IN THE CURRENT YEAR

Schedule J (Form 990) 2011

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

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

OMB No 1545-0047

DLN: 93493214002102

Open to Public Inspection

Internal Revenue Service

Department of the Treasury

	ne of the organization									E	Employer identification number					
CIA	IL WAR PRESERVATION TRUST									5	54-142	6643				
Pa	art I Bond Issues	•														
	!	'								(a) Do	feased	(h)	On alf of		Pool	
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Pr	псе	(f) [[]	Description	Description of Purpose (9)		leaseu		uer financ		incing	
										Yes	No	Yes	No	Yes	No	
İ	ECONOMIC DEVELOPMENT	'				_	_ D_		-							
Α	AUTHORITY SPOTSYLVANIA COUNTY VIRGINIA	54-1237426		04-07-2010	5,400,			FUND A PR D 05/22/07			X		X		X	
						\bot										
Ра	rt III Proceeds				A		$\overline{}$	В	<u> </u>		С		Τ	D		
1	A mount of bonds retired					,000		,								
2	Amount of bonds defeased	+		+												
3	Total proceeds of issue				+	5,400,	.000									
4	Gross proceeds in reserve fund	ds .			+	-, ,	/* 									
5	Capitalized interest from procee	eds											1			
6	Proceeds in refunding escrow						\neg									
7	Issuance costs from proceeds						\neg									
8	Credit enhancement from proce	eds														
9	Working capital expenditures fro	om proceeds														
10	Capital expenditures from proce	eeds											1			
11	Other spent proceeds					5,400,000										
12	Other unspent proceeds				1								<u> </u>			
13	Year of substantial completion				201	0										
					Yes	No	,	Yes	No	Yes		No	Yes	\perp	No	
14	Were the bonds issued as part of	of a current refundir	ng issue?		Х											
15	Were the bonds issued as part of	of an advance refur	ıdıng ıssue?			Х							T			
16	Has the final allocation of proce	eeds been made?	-		Х											
17	Does the organization maintain allocation of proceeds?	adequate books ar	nd records to supp	ort the final	Х											
Pai	rt IIII Private Business Us	se									<u> </u>					
					A			В		С				D		
					Yes	No	<u>, </u>	Yes	No	Yes		No	Yes	-	No	
1	Was the organization a partner in property financed by tax-exempt		a member of an Li	LC, which owned		Х										

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

financed property?

Pai	rt IIII Private Business Use (Continued)								-
		,	4		В		С		D
		Yes	No	Yes	No	Yes	No	Yes	No
За	Are there any management or service contracts that may result in private business use?		×						
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of bond-financed property?		х						
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %		•		•		•

Χ

0 %

0 %

Part IV Arbitrage

7

Total of lines 4 and 5

للنكسا	CIV Albidage								
		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		х						
2	Is the bond issue a variable rate issue?	X							
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?								
		X							
ь	Name of provider	SUNTRUST BANKS INC							
С	Term of hedge	10 00000	0000000						
d	Was the hedge superintegrated?		x						
e	Was a hedge terminated?		х						
4a	Were gross proceeds invested in a GIC?		Х						
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		х						
6	Did the bond issue qualify for an exception to rebate?		х						

Part V Procedures To Undertake Corrective Action

Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section

Has the organization adopted management practices and procedures to ensure the

501(c)(3) organization, or a state or local government

post-issuance compliance of its tax-exempt bond liabilities?

Part VI Supplemental Information

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

Identifier Return Reference Explanation

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

DLN: 93493214002102

OMB No 1545-0047

Open to Public Inspection

(Form 990)

SCHEDULE M

Department of the Treasury Internal Revenue Service

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

NonCash Contributions

Name of the organization CIVIL WAR PRESERVATION TRUST

Employer identification number

54-1426643

	Types of Property							
		(a) Check If applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line	(c Method of c contributio	letermır	_	
1	Art—Works of art							
	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications	Х		500	COST			
5	Clothing and household							
	goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .							
	Securities—Closely held stock	•						
	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation							
	contribution—Other							
15	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—O ther	X	2	1,168,000	APPRAISALS			
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other ► ()							
	Other ►()							
	Other ► ()							
	Other ► () Number of Forms 8283 receive	d by the eve	anization during the tay ye	ar for contributions				
29	for which the organization comp				29		Yes	No No
30a	During the year, did the organiz	ation receiv	e by contribution any prope	erty reported in Part I. lines	1-28 that it		1 63	140
	must hold for at least three yea							
	for exempt purposes for the ent			·		302		No
h	If "Yes," describe the arrangem					30a		110
31	Does the organization have a gi			review of any non-standard	contributions?	31	Yes	
	Does the organization hire or us						Ì	
JZa	contributions?	· · ·				32a		No
b	If "Yes," describe in Part II							
33	If the organization did not repor describe in Part II	t revenues	ın column (c) for a type of p	roperty for which column (a) is checked,			

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2011

efile GRAPHIC print - DO NOT PROCESS

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493214002102

OMB No 1545-0047

Supplemental Information to Form 990 or 990-EZ

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

Open to Public Inspection

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

54-1426643

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	AUDIT COMMITTEE, CHAIRMAN OF THE CWPT BOARD, THE PRESIDENT, COO, CFO, AND KEY EMPLOYEES REVIEW THE 990 BEFORE IT IS FILED EITHER IN PAPER OR ELECTRONIC FORM IF ANY CORRECTIONS NEED TO BE MADE, THE AUDITING FIRM WILL BE NOTIFIED THE 990 IS THEN DISTRIBUTED TO THE WHOLE BOARD OF TRUSTEES FOR REVIEW & APPROVAL IF A CORRECTED 990 IS NEEDED, IT WILL BE REVIEWED BEFORE IT IS FILED
	FORM 990, PART VI, SECTION B, LINE 12C	WHENEVER A TRUSTEE HAS A POTENTIAL DIRECT OR INDIRECT PERSONAL INTEREST IN A PROPOSED TRANSACTION OF THE CORPORATION, HE SHALL DISCLOSE THE MATERIAL FACTS OF THE TRANSACTION, THE NATURE OF HIS POTENTIAL INTEREST IN THE TRANSACTION, AND ANY OTHER RELEVANT INFORMATION REGARDING THE TRANSACTION TO THE BOARD OF TRUSTEES THEREAFTER, THE TRUSTEE SHALL NOT BE PERMITTED TO PARTICIPATE IN THE FINAL BOARD DELIBERATION REGARDING SUCH TRANSACTION, AND SHALL NOT BE PERMITTED TO VOTE ON SUCH TRANSACTION THE BOARD OF TRUSTEES REVIEWS THE CONFLICT OF INTEREST POLICY ON A YEARLY BASIS
	FORM 990, PART VI, SECTION B, LINE 15	CIVIL WAR PRESERVATION TRUST WILL PAY SALARIES THAT ARE COMPETITIVE WITH THOSE PAID FOR COMPARABLE POSITIONS IN OTHER NON-PROFIT ORGANIZATIONS EACH EMPLOYEE'S SALARY IS REVIEWED ANNUALLY SALARY ADJUSTMENTS, IF ANY, WILL BE DISCUSSED AT THIS TIME AS WELL SALARY ADJUSTMENTS WILL BE PREPARED AND RECOMMENDATIONS WILL BE MADE AT THE TIME THE BUDGET IS PRESENTED TO THE BOARD IF APPROVED, THEY WILL BECOME EFFECTIVE AT THE PRESIDENT'S DISCRETION THE PRESIDENT'S SALARY AND BENEFIT PACKAGE IS REVIEWED BY AN OUTSIDE CONSULTING FIRM
	FORM 990, PART VI, SECTION C, LINE 19	COPIES OF THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS WILL BE PROVIDED UPON REQUEST TO THE PUBLIC
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	CHANGE IN VALUE OF THE SWAP -41,770 TOTAL TO FORM 990, PART XI, LINE 5 -41,770

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

DLN: 93493214002102

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

2011

Schedule R (Form 990) 2011

Employer identification number

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
CIVIL WAR PRESERVATION TRUST

						54-142664	3		
Part I Identification of Disregarded Entities (Con	nplete	ıf the organization	on answered "Yes	s" o	n Form 990, Pa	art IV, line 33.)			
(a) Name, address, and EIN of disregarded entity		(b) Primary activity	(c) Legal domicile (stat or foreign country)		(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organizations during	anizat ng the	t ions (Complete tax year.)	ıf the organizatio	n a	nswered "Yes"	on Form 990, Pa	ert IV, line 34 because	e it had	one
(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	Exe	(d) empt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	Section 5: conti	j) 12(b)(13 rolled ization
								Yes	No
(1) AMERICANS FOR BATTLEFIELD PRESERVATION 1156 15TH ST NW SUITE 900 WASHINGTON, DC 20005 40-3843239	SEE PAI R	RT VII OF SCHEDULE	DC	501(C)(4)			CIVIL WAR PRESERVATION TRUST		No
(2) ENDANGERED BATTLEFIELD DEFENSE FUND 7777 WASHINGTON AVENUE HOUSTON, TX 77007 27-1035136	PURPOS	RY OUT THE SES OF THE CIVIL RESERVATION TRUST	VA	501(C)(3)		LINE 11A, I	CIVIL WAR PRESERVATION TRUST		No

Cat No 50135Y

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	, ·	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproprtionate allocations?		Disproprtionate		Disproprtionate		Disproprtionate		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or nging	(k) Percentage ownership
							Yes	No		Yes	No							
												i						

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

(a) Name, address, and EIN of related organization	(b) Рптагу activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership

chedule R (Form 990) 2011		Рa	ige 3
Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 3	6.)		
Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b		No
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Sale of assets to related organization(s)	1f		No
g Purchase of assets from related organization(s)	1 g		No
h Exchange of assets with related organization(s)	1h		No
i Lease of facilities, equipment, or other assets to related organization(s)	1i		No
j Lease of facilities, equipment, or other assets from related organization(s)	1j		No
k Performance of services or membership or fundraising solicitations for related organization(s)	1k	Yes	
l Performance of services or membership or fundraising solicitations by related organization(s)	11		No
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1m		No
n Sharing of paid employees with related organization(s)	1n		No
• Reimbursement paid to related organization(s) for expenses	10		No
p Reimbursement paid by related organization(s) for expenses	1 p		No
O ther transfer of cash or property to related organization(s)	1q		No
r Other transfer of cash or property from related organization(s)	1r		No

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

		•	
(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) AMERICANS FOR BATTLEFIELD PRESERVATION	κ	20,000	CASH
(2) ENDANGERED BATTLEFIELD DEFENSE FUND	С	374,356	CASH
(3)			
(4)			
(5)			
(6)			

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	(e) Are all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		Disproprtionate allocations?		Disproprtionate allocations?		Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ener?	(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No							

Schedule R (Form 990) 2011

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation
PRIMARY	FORM 990,	THE MISSION OF AMERICANS FOR BATTLEFIELD PRESERVATION (AFBP) IS TO PROMOTE AWARENESS OF THE PLIGHT OF OUR NATION'S
ACTIVITY	SCHEDULE R,	REMAINING HALLOWED BATTLEGROUNDS IT IS A STRICTLY NON-PARTISAN ORGANIZATION THAT SEEKS TO BUILD SUPPORT FOR BATTLEFIELD
	PART II, LINE	PRESERVATION AMONG ALL LAWMAKERS ON ALL LEVELS OF GOVERNMENT THE ORGANIZATION'S PRIMARY FOCUS IS TO ENCOURAGE
	В	LAWMAKERS ON THE FEDERAL, STATE AND LOCAL LEVELS TO ALLOCATE PUBLIC FUNDS FOR BATTLEFIELD PRESERVATION IN ADDITION, AFBP
		SUPPORTS LOCAL OFFICIALS FOR PUBLIC OFFICE IN A VERY LIMITED NUMBER OF TARGETED COMMUNITIES, PLUS TRAINS LOCAL PEOPLE ABOUT
		HOW TO SUCCESSFULLY CONDUCT COMMUNITY GRASSROOTS ORGANIZING, FUNDRAISING, AND EFFECTIVE USE OF MEDIA

Schedule R (Form 990) 2011