

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



DLN: 93493178002273

OMB No 1545-0047

2012

Form **990**

Department of the Treasury

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

Return of Organization Exempt From Income Tax

Open to Public

	he 2012	calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-3:	l-2012		Inspection
	if applica	CIVIL WAR PRESERVATION TRUST		D Employe	er identification number
— Name	change	Doing Business As CIVIL WAR TRUST		31112	
- Initial	return	Number and street (or P O box if mail is not delivered to street address) Room/sui	te	E Telephone	e number
Termır	nated	1140 PROFESSIONAL COURT		·	65-1400
Amend	ded returr	City or town, state or country, and ZIP + 4 HAGERSTOWN, MD 21740		(301)0	03 1400
Applica	ation pend	ding		G Gross reco	eipts \$ 25,316,938
		F Name and address of principal officer O JAMES LIGHTHIZER		ıs a group re ates?	eturn for
		1140 PROFESSIONAL COURT	aiiiiid	ites	i resit no
		HAGERSTOWN,MD 21740			ıncluded? TYes No
Tax-e	exempt st	atus	11 "N	o," attach a	list (see instructions)
Web	site: ►	WWW CIVILWAR ORG	H(c) Grou	ıp exemptio	n number ►
Form o	of organiza	ation	L Year of fo	rmation 1987	M State of legal domicile V
Part		ummary	E rear or re	imation 1907	11 State of legal dofficie. Vi
	NAT	CATING THE PUBLIC ABOUT THE VITAL ROLES THOSE BATTLEFIELD ION'S HISTORY :k this box F if the organization discontinued its operations or disposed o			
	2 01100	and box F ₁ in the organization discontinued its operations of disposed o	i more enan z	.5 70 01 105 11	1
.		ber of voting members of the governing body (Part VI, line 1a)		H	3 29
'		ber of independent voting members of the governing body (Part VI, line 1b)		_	4 28 5 59
		I number of individuals employed in calendar year 2012 (Part V, line 2a) . I number of volunteers (estimate if necessary)			5 50
		l unrelated business revenue from Part VIII, column (C), line 12		: :	7a
		unrelated business taxable income from Form 990-T, line 34		_	7b (
			Pric	r Year	Current Year
		ontributions and grants (Part VIII, line 1h)		16,511,28	
ī		ogram service revenue (Part VIII, line 2g)		181,08	·
		vestment income (Part VIII, column (A), lines 3, 4, and 7d)		17,62 160,26	
		tal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		100,20	020,551
	12			16,870,25	-
		rants and similar amounts paid (Part IX, column (A), lines 1-3)		5,016,18	
		nefits paid to or for members (Part IX, column (A), line 4)			0 (
<u> </u>		10)		2,856,99	3,159,651
10 10 10 10 10 10 10 10 10 10 10 10 10 1		ofessional fundraising fees (Part IX, column (A), line 11e)		163,65	149,663
		tal fundraising expenses (Part IX, column (D), line 25) 1,464,860			
1		ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,391,97 13,428,81	
1		evenue less expenses Subtract line 18 from line 12		3,441,43	
Fend Basances 2 2 2 2			Beginnin	g of Current 'ear	
藩 2		tal assets (Part X, line 16)		77,445,63	87,986,290
2		tal liabilities (Part X, line 26)	·	7,338,44	
		et assets or fund balances Subtract line 21 from line 20		70,107,19	81,681,098
y knov	enalties wledge a r has ar	ignature Block s of perjury, I declare that I have examined this return, including accompanand belief, it is true, correct, and complete Declaration of preparer (other they knowledge	an officer) is		
ign		Signature of officer	D	ate	
ere		O JAMES LIGHTHIZER PRESIDENT Type or print name and title			
			ate Che	eck 🗆 ıf 🔝 P	TIN
aid		WILLIAM E TURCO CPA	self	employed P	00369217
repa	arer	Firm's name MCGLADREY LLP	Fim	n's EIN 🟲 42-0	0714325
Jse C		Firm's address ▶ 9737 WASHINGTONIAN BLVD 400	Pho	ne no (301) 2	296-3600
-		GAITHERSBURG, MD 208787340			

May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

	(/							raye 2
Par	Statement of Prog Check if Schedule O	- /	-					٦
1	Briefly describe the organizat	ion's mission						
	PRESERVATION OF AMERICALIC ABOUT THE VITAL ROLES							
2	Did the organization undertake the prior Form 990 or 990-EZ		program se		g the year wh		ısted on	┌ Yes ┌ No
	If "Yes," describe these new s	ervices on Sche	dule O					
3	Did the organization cease co services?			t changes ır • • •	how it condu	ıcts, any prog	ram · · · ·	┌ Yes ┌ No
	If "Yes," describe these chang	jes on Schedule	0					
4	Describe the organization's prexpenses Section 501(c)(3) the total expenses, and reven	and 501(c)(4) o	rganızatıons	are require	d to report th			
4a	(Code) (Ex	penses \$	7,060,645	ıncludıng gra	nts of \$	4,134,070)	(Revenue \$)
	LAND IN 2012, THE CIVIL WAR PRE CIVIL WAR BATTLEFIELDS ENDANGE TRANSACTIONS AT 25 BATTLEFIELD AVERASBORO, NC, BENTONVILLE, N CEDAR MOUNTAIN, VA, CHANCELLC PETERSBURG, VA, TOM'S BROOK, V ANNIVERSARY OF THE AMERICAN C BATTLEFIELDS, AND EDUCATING THE	ERED BY SPRAWL T PS IN 9 STATES, INC IC, GETTYSBURG, PA PRSVILLE, VA, COOL VA, WILDERNESS, VA CIVIL WAR, THE TRU	HROUGH ACQU LUDING RESAC A, SHILOH, TN, SPRING, VA, C A AND SUMMIT JST EXPECTS TO	ISITIONS AND A, GA, MILL SI FRANKLIN, TN ROSS KEYS, V POINT, WV IN D CONTINUE I	GRANTS, THE T RINGS, KY, PER JOHNSONVILL A, GAINES MILL, 2013 AND PAR S CONSISTENT	RUST PRESERVE RRYVILLE, KY, RO E, TN, APPOMATT VA, KELLY'S FOF TICULARLY DURI RECORD OF SUO	D 3,735 ACRES IN DWLETT'S STATION, FOX COURT HOUSE RD, VA, MIDDLEBUR NG THE ONGOING SECESS IN PRESERV	39 COMPLETED KY, MANSFIELD, LA, , VA, CEDAR CREEK, VA, RG, VA, MINE RUN, VA, SESQUICENTENNIAL ING ENDANGERED CIVIL WAR
4b	(Code) (Ex	penses \$	2,635,478	ıncludıng gra	nte of ¢	<u> </u>	(Revenue \$	182,971)
עד	MEMBERSHIP THE CIVIL WAR PRESEVERY MEMBER RECEIVES OUR 48-THEIR DIRECT SUPPORT HELPS PRIVATION'S HISTORY, AND EDUCATES DEPENDS UPON ITS MEMBERS TO WELL AS ADDITIONAL CHARITABLE BEARERS," COMPRISED OF THOSE APPROXIMATELY 980 INDIVIDUALS OPENING UP A NEW POOL OF POTE	SERVATION TRUST IS PAGE MAGAZINE, " PESERVE ENDANGERI S THEM DIRECTLY CHELP FULFILL ITS BA GIFTS THE TRUST A MEMBERS WHO MAI AT THE END OF 201	S A MEMBERSH HALLOWED GRO ED CIVIL WAR E ON HISTORICAL ITTLEFIELD PRE ALSO HAS A MA KE DUES PAYM 2 AT THE END	IP-BASED ORG DUND", AS FRI BATTLEFIELD L ELEMENTS OF SERVATION AI JOR DONOR S ENTS OF \$1,00 OF 2012, THE	ANIZATION WIT EE EDUCATIONA AND, ADVANCES IMPORTANCE A ID EDUCATION I OCIETY, AS A SU IO OR MORE ANI	H MORE THAN 5 L MEMBERSHIP E THE CAUSE OF BOUT THE CIVIL MISSIONS EVERY JBSET OF ITS OV NUALLY TOTAL M	1,000 ACTIVE MEM 1,000 ACTIVE MAGA EDUCATION ABOUT WAR AND LAND PR YEAR THROUGH T ERALL MEMBERSHI 1EMBERSHIP IN TH	BERS EACH QUARTER, AZINE HIGHLIGHTS HOW THIS KEY PERIOD IN OUR RESERVATION THE TRUST HEIR DUES PAYMENTS, AS P, CALLED "THE COLOR IS GROUP WAS
4 c	(Code) (Execution	JNTRY PARTICIPATE REGIONAL TEACHE ATTENDANCE AT EA RY, MIDDLE AND HI FOUR TRUNKS OF ELEASED THE BOOK	ED IN THIS 3-D. R INSTITUTES ACH THE EDUC GH SCHOOL TE CIVIL WAR TEA "THE CIVIL WA	AY PROFESSIO LASTING 1 1/2 CATION DEPAR ACHERS ALON CHING TOOLS AR KIDS 150,"	ACHER INSTITUT NAL DEVELOPME DAYS EACH IN TMENT CREATE G WITH OTHER AND ACTIVITIES WHICH ENCOUR	TE IN CHARLESTO ENT EXPERIENCE LOS ANGELES, C D A CIVIL WAR H PHYSICAL AND D THAT TRAVELEI RAGES 8-12 YEAF	, OFFERED FREE O ALIFORNIA AND CH AVERSACK PROGRA DIGITAL TEACHING A DITHE COUNTRY TH R-OLDS TO VISIT AN	F CHARGE THE IICAGO, ILLINOIS, WITH AM TO HOUSE THE NEW CIVIL ASSETS OUR TRAVELLING HROUGHOUT THE SCHOOL
4d	Other program services (Des		•	_		\		
	(Expenses \$		ng grants of	\$) (Revenue \$)
4e	Total program service expens	ses 🕨 1	1,264,253					

art TV	Check	list of	Required	Schedules

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

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part $IV \cdot \cdot \cdot \cdot$	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2012)

9.1	Statements Regarding Other 1RS Fillings and Tax Compliance			-
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 114		1 63	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
)	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
3	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
)	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
1	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
,	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
:	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
•	2. 100/ to the building and the organization menoring to the first	5c		
a	Does the organization have annual gross receipts that are normally greater than $$100,\!000$, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter	_ - _		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
ı	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
)	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		- •

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

Section C. Disclosure

- List the States with which a copy of this Form 990 is required to be filed AK, AL, AR, AZ, CA, CO, CT, DC, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MS, MN, MO, MT, NC, ND, NE, NJ, NH, NM, NV, NY, OH, OK, 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
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►RUTH HUDSPETH 1140 PROFESSIONAL COURT HAGERSTOWN, MD (301)665-1400

Form	990	(2012)
------	-----	--------

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

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

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

	1	1								
(A) Name and Title	A verage hours per week (list any hours for related (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
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2,1035 (1136)	MISC)	organization and related organizations
See Additional Data Table										
	•	•	•							Form 990 (2012)

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

_	(A) Name and Title	(B) A verage hours per week (list any hours for related	more t perso and	han on is	one both	box, an	heck unless officer stee)		Repo compe from organiza	rtable nsation n the ition (W- -MISC)	(E) Reportable compensation from related organizations (V 2/1099-MISC	v-	(F) Estimated amount of other compensation from the organization and related organizations		
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC	,			
												十			
												+			
												+			
												+			
												4			
												+			
		+										+			
		+										+			
												\perp			
1b	Sub-Total			٠.				-							
С	Total from continuation shee	ts to Part VII, S	ection /	Α.				Þ							
d	Total (add lines 1b and 1c) .					•		*		1,069,910		0		190,996	
2	Total number of individuals (ir \$100,000 of reportable comp						d abov	e) w	ho receive	ed more th	an				
													Yes	No	
3	Did the organization list any f					, key	emplo	yee,	, or highes	t compen	sated employee				
	on line 1a? <i>If</i> "Yes," complete s					•		•				3	\bot	No	
4	For any individual listed on lin organization and related organ														
	ındıvıdual		• •					•				4	Yes		
5	Did any person listed on line 1 services rendered to the orga									ganızatıon • • •	or individual for	5		No	
					_							<u> </u>			
	ection B. Independent Co														
1	Complete this table for your fi compensation from the organi													r	
		(A) Name and business						<u> </u>			(B) cription of services		(0		
ENVE	LOPES UNLIMITED 649 N HORNERS LA									-	PRODUCTION & MAII	LING	Compensation 1,294,147		
CARL	TON FIELDS ATTORNEYS AT LAW PO B	OX 3239 TAMPA FL3	3601323	9						LEGAL SERV	/ICES			410,994	
	L SIMMS & LYNCH INC 7704 LEESBURG AWAKE FILMS 315 DELAWARE ST 2NI										ENT CONSULTING ANIMATED MAPS		 	132,268 124,556	
	REKS INC 15270 BOVARY COURT COL			100							BATTLE APPS FOR CI	VIL	-	119,544	

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

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

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

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

Part X Balance Sheet

	't X	Check if Schedule O contains a response to any question in thi	s Part	х			
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			174,692	1	232,625
	2	Savings and temporary cash investments			9,239,908	2	8, 185, 141
	3	Pledges and grants receivable, net			185,575	3	1,080,786
	4	Accounts receivable, net			26,226	4	100,000
	5	Loans and other receivables from current and former officers, of employees, and highest compensated employees. Complete P. Schedule L	lirecto art II	ors, trustees, key of		5	
Assets	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	contrı mploy	buting employers		6	
χ. Ψ.	7	Notes and loans receivable, net				7	
₹	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			425,406	ĽТ	532,039
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		78,103,385	,		332,033
	ь	Less accumulated depreciation	10b	617,672	67,097,426	10c	77,485,713
	11	Investments—publicly traded securities	<u> </u>	234,986		312,528	
	12	Investments—other securities See Part IV, line 11		,	12	,	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			61,418		57,458
	16	Total assets. Add lines 1 through 15 (must equal line 34).			77,445,637		87,986,290
	17	Accounts payable and accrued expenses			281,051	17	268,918
	18	Grants payable	201,001	18	200,010		
	19	Deferred revenue	•		56,015		66,825
	20	Tax-exempt bond liabilities			5,200,000		5.000.000
	21	Escrow or custodial account liability Complete Part IV of Sch			3,200,000	21	3,000,000
<u>ē</u>	22	Loans and other payables to current and former officers, direct			21		
Liabiliti		key employees, highest compensated employees, and disquali	fied	,			
逗		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie	s .	•	1,225,000	23	250,000
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	rt X o	f Schedule	576,376	25	719,449
	26	D			7,338,442	26	6,305,192
— —	20	Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.			7,000,442	20	0,000,102
Ĭ	27	Unrestricted net assets			3,649,515	27	6,424,988
<u> </u>	28	Temporarily restricted net assets			66,457,680	-	75,256,110
— —	29	Permanently restricted net assets			, ,	29	, ,
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check h					
Ξ		complete lines 30 through 34.		•			
2) 2)	30	Capital stock or trust principal, or current funds	•			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
Ą	32	Retained earnings, endowment, accumulated income, or other	funds			32	
Net	33	Total net assets or fund balances			70, 107, 195	33	81,681,098
_	34	Total liabilities and net assets/fund balances			77,445,637	34	87,986,290

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				৮		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		24,4	184,106		
2	Total expenses (must equal Part IX, column (A), line 25)	2	149,271				
3	Revenue less expenses Subtract line 2 from line 1	3 11,034,					
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4					
5	Net unrealized gains (losses) on investments	5			,		
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9		Ę	39,068		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		81,6	81,098		
Par	t XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII				. \sqsubset		
				Yes	No		
1	Accounting method used to prepare the Form 990						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ved on					
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	rate					
	Separate basis Consolidated basis Both consolidated and separate basis						
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	of the	2c	Yes			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	1					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	2	За	Yes			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes			

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493178002273

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

CIVIL WAR PRESERVATION TRUST

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

Open to Public Inspection

									54-1426				
	t I			blic Charity Sta						nstruction	s.		
The o	rganı	zatıon ıs	not a priva	te foundation becaus	seitis (Forl	lines 1 thro	ough 11, chec	k only one	box)				
1			A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).										
2	Γ	A scho	ol described	d in section 170(b)(1	L)(A)(ii). (At	tach Sche	dule E)						
3		A hosp	ital or a cod	perative hospital se	rvice organiz	zation desc	ribed in secti	on 170(b)(1)(A)(iii).				
4	Г			h organization opera	ted ın conjun	iction with	a hospital des	scribed in s	ection 170(b)	(1)(A)(iii).	Enter the		
5	_	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)											
6 F		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7	<u>'</u>	An organization that normally receives a substantial part of its support from a governmental unit or from the general public											
•	,-			on 170(b)(1)(A)(vi).			3 Support Hon	ra governi	nental unit of	nom the ge	neral public		
8	Γ			described in sectio			omplete Part I	I)					
9	Γ	An org	anızatıon th	at normally receives	(1) more th	ian 331/3%	of its support	from conti	rıbutıons, men	nbership fee	es, and gross		
		receipt	s from activ	rities related to its e	xempt functı	ons—subje	ct to certain e	exceptions	, and (2) no m	ore than 33	1/3% of		
		ıts sup	port from gr	oss investment inco	me and unre	lated busır	ness taxable i	ncome (les	s section 511	tax) from l	ousinesses		
		acquire	ed by the org	ganızatıon after June	30,1975 S	ee sectio r	1 509(a)(2). (0	Complete P	art III)				
10	Γ	An org	anızatıon or	ganızed and operate	d exclusively	to test fo	r public safety	See secti	on 509(a)(4).				
11	Γ			ganized and operate									
		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											
			Type I							on-function	nally integrated		
е	Γ	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)											
f		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											
g				2006, has the organ	ızatıon accep	oted any gi	ft or contribut	ion from ar	ny of the		,		
			ng persons?										
) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No										
				governing body of th		_	on?				lg(i)		
		• •	•	er of a person descr							g(ii)		
_				lled entity of a perso						11	g(iii)		
h		Provide	e the followi	ng information about	the support	ed organiza	ation(s)						
(i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did yo	u notify	(vi) Is	the	(vii) A mount of		
	uppoi			organization	organizati		the organ		organiza		monetary		
or	ganiz	ation		(described on lines 1- 9 above	col (i) lıs your gove		ın col (i) suppo		col (i) org		support		
				or IRC section	docume	_	Suppo	10.	III the c	, , ,			
				(see		-							
				instructions))	Yes	No	Yes	No	Yes	No	7		
						1	+	1	1	 			
Total			 			1	1	1					

supported organization

instructions

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

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

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

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

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

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

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493178002273

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Political Campaign and Lobbying Activities

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

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

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

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

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

section 4911 tax for this year?

┌ Yes ┌ No

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

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

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

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	85	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	188,314	
c	Total lobbying expenditures (add lines 1a and 1b	p)	188,399	
d	O ther exempt purpose expenditures		12,732,592	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	12,920,991	
f	Lobbying nontaxable amount Enter the amount f	796,050		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	199,013	
h	Subtract line 1g from line 1a If zero or less, ente	er-0-	0	
i	Subtract line 1f from line 1c If zero or less, ente	r-0-	0	
j	If there is an amount other than zero on either lir	0 reporting	□ Ves □ No	

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

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

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

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

Part IV Supplemental Information

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

Identifier Return Reference Explanation

DLN: 93493178002273

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

Interna	al Revenue Service	► Attach to For	m 990. ► See separate instructions.		Inspect	ion
	me of the organ			Emple	oyer identification numbe	r
	TE WAN EKESEKVAI			54-1	426643	
Pa		nizations Maintaining Donor Adv		ınds o	or Accounts. Complet	e ıf the
	organi	zation answered "Yes" to Form 990	, Part IV, line 6. (a) Donor advised funds	· ,	b) Funds and other accou	ntc
1	Total number a	at end of year	(a) Donor advised funds	 '	b) Fullus allu otilei accou	111.5
2		tributions to (during year)				
3		nts from (during year)				
4		ue at end of year				
5	Did the organi	zation inform all donors and donor adviso organization's property, subject to the or		or advis	ed Yes	┌ No
6	used only for c	zation inform all grantees, donors, and do charitable purposes and not for the benef ermissible private benefit?			purpose T Yes	┌ No
Pa		ervation Easements. Complete if	the organization answered "Yes" to	o Form	990, Part IV, line 7.	
2	Preservati Protection Preservati Complete lines	conservation easements held by the org on of land for public use (e g , recreation of natural habitat on of open space s 2a through 2d if the organization held a the last day of the tax year	or education) Preservation of an Preservation of a c	ertified	historic structure	
	easement on t	the last day of the tax year	[T	Held at the End of the	Year
а	Total number of	of conservation easements		2a	Tield at the End of the	8
ь	Total acreage	restricted by conservation easements		2b		237 00
С		servation easements on a certified histo	oric structure included in (a)	2c		
d		iservation easements included in (c) acq ure listed in the National Register	juired after 8/17/06, and not on a	2d		
3	Number of con	servation easements modified, transferr	ed, released, extinguished, or terminate	d by the	e organization during	
	the tax year ►	· <u> </u>				
4	Number of sta	tes where property subject to conservati	ion easement is located 🕨 1			
5		nization have a written policy regarding t f the conservation easements it holds?	the periodic monitoring, inspection, hand	lling of v	violations, and Ves	┌ No
6	Staff and volur	nteer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	nents du	uring the year	
7	A mount of exp	——— penses incurred in monitoring, inspecting	. and enforcing conservation easements	durina	the vear	
,	-	2,900	,,		,	
8		nservation easement reported on line 2(o 70(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	tion 17	0(h)(4)(B)(ı)	┌ No
9	balance sheet	lescribe how the organization reports cor , and include, if applicable, the text of the on's accounting for conservation easeme	e footnote to the organization's financial			
Pai	ttiii Organ	nizations Maintaining Collection lete if the organization answered "Y	s of Art, Historical Treasures,	or Oth	er Similar Assets.	
1a	If the organiza works of art, h	ition elected, as permitted under SFAS 1 istorical treasures, or other similar asse de, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its rever ts held for public exhibition, education, o	or resea	rch in furtherance of publi	
b	works of art, h	ition elected, as permitted under SFAS 1 istorical treasures, or other similar asse de the following amounts relating to thes	ts held for public exhibition, education, o			ıc
	(i) Revenues	included in Form 990, Part VIII, line 1			► \$	
	(ii) Assets inc	luded in Form 990, Part X			► \$	
2	If the organiza	ition received or held works of art, histor unts required to be reported under SFAS		r financ	·	
а	Revenues incl	uded in Form 990, Part VIII, line 1			► \$	
		· ,			· -	

b Assets included in Form 990, Part X

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

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2.	<u> </u>
(a) Description of security or category	(b)Book value		d of valuation
(including name of security)		Cost or end-of	-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F		
Part VIII Investments—Program Related. Se		<u> </u>	
(a) Description of investment type	(b) Book value		d of valuation
	. ,		-year market value
		-	
	<u> </u>		
Part IX Other Assets. See Form 990, Part X, I		T	(b) Book value
(a) Descr	iption		(D) BOOK Value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1	5.)		
Part X Other Liabilities. See Form 990, Part			
1 (a) Description of liability	(b) Book value		
Federal income taxes			
DEFERRED RENT	229,448		
DEFERRED COMPENSATION PAYABLE	323,676		
FAIR VALUE OF INTEREST RATE SWAP	166,325		
	<u> </u>		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	/		
2. Fin 48 (ASC 740) Footnote In Part XIII provide the te	yt of the footpote to the orga	nization's financial statem	ents that reports the

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue	<u>per F</u>	
1	Total revenue, gains, and other support per audited financial statements	1	25,108,590
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII) 2d 587,300		
e	Add lines 2a through 2d	2e	610,583
3	Subtract line 2e from line 1	3	24,498,007
4	A mounts included on Form 990, Part VIII, line 12, but not on line $oldsymbol{1}$		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII) 4b -13,901		
c	Add lines 4a and 4b	4c	-13,901
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	24,484,106
art	XII Reconciliation of Expenses per Audited Financial Statements With Expense	s per	Return
L	Total expenses and losses per audited financial statements	1	12,987,399
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	3	
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII)	3	
e	Add lines 2a through 2d	2e	89,901
3	Subtract line 2e from line 1	3	12,897,498
ŀ	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)	3	
c	Add lines 4a and 4b	4c	551,773
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	13,449,271
Part	XIII Supplemental Information		•

		es 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, nes 2d and 4b Also complete this part to provide any additional
Identifier	Return Reference	Explanation
DESCRIPTION OF HOW ORGANIZATION REPORTS CONSERVATION EASEMENTS	PART II, LINE 9	CONSERVATION EASEMENTS ARE RECORDED AS AN ASSET ON THE BALANCE SHEET THE ORGANIZATION HAS A WRITTEN DOCUMENT REGARDING THE PERIODIC MONITORING, INSPECTION, VIOLATIONS, AND ENFORCEMENT OF THE CONSERVATION EASEMENTS IT HOLD
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE CIVIL WAR PRESERVATION TRUST HAS WORKED TO SAVE AND PRESERVE MORE THAN 34,000 ACRES OF BATTLEFIELD LAND AT 110 BATTLEFIELDS IN 20 DIFFERENT STATES \$72,639,980 OF THE TEMPORARILY RESTRICTED ENDOWMENT IS PRESERVED BATTLEFIELD LAND THE REMAINING AMOUNTS ARE TO BE USED FOR LAND ACQUISITION AND OTHER SPECIFIED PROJECTS
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	CWT (CIVIL WAR PRESERVATION TRUST) AND EBDF (ENDANGERED BATTLEFIELD DEFENSE FUND) ARE GENERALLY EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AFBP (AMERICANS FOR BATTLEFIELD PROTECTION)IS GENERALLY EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF SECTION 501(C)(4) OF THE INTERNAL REVENUE CODE IN ADDITION, CWT AND EBDF QUALIFY FOR THE CHARITABLE CONTRIBUTION DEDUCTIONS AND HAVE BEEN CLASSIFIED AS ORGANIZATIONS THAT ARE NOT PRIVATE FOUNDATIONS CONTRIBUTIONS TO AFBP ARE NOT DEDUCTIBLE TO DONORS INCOME THAT IS NOT RELATED TO EXEMPT PURPOSES, LESS APPLICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE INCOME TAXES NEITHER CWT, AFBP, NOR EBDF HAD NET UNRELATED BUSINESS INCOME FOR THE YEAR ENDED DECEMBER 31, 2012 THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES (FASB ASC TOPIC 740-10) ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS UNDER THIS GUIDANCE, CWT, AFBP, AND EBDF MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE-LIKELY-THAN-NOT THAT THE TAX POSITION WILL BE SUSTAINED ON THE TECCHNICAL MERITS OF THE POSITION THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LECCHNICAL MERITS OF THE POSITION THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LECCHNICAL MERITS OF THE POSITION THE TAX BENEFITS HAD PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS MANAGEMENT EVALUATED CWT, AFBP, AND EBDF'S TAX POSITIONS AND CONCLUDED THAT THEY HAVE TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE CONSOLIDATED FINANCIAL STATEMENT FOR PANALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS MANAGEMENT EVALUATED CWT, AFBP, AND EBDF'S TAX POSITIONS AND CONCLUDED THAT THEY HAVE TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE CONSOLIDATED FINANCIAL STATEMENTS TO CO
PART XI, LINE 2D - OTHER ADJUSTMENTS		CONSOLIDATED ENTITY ACTIVITIES - AMERICANS FOR BATTLEFIELD PROTECTION (AFBP) 20,100 CONSOLIDATED ENTITY ACTIVITIES - ENDANGERED BATTLEFIELD DEFENSE FUND (EBDF) 567,200
PART XI, LINE 4B - OTHER ADJUSTMENTS PART XII, LINE 2D - OTHER		COST OF SALES REPORTED ON LINE 10B -13,901 COST OF SALES 13,901 CONSOLIDATED ENTITY
ADJUSTMENTS		ACTIVITIES - AFBP 23,707 CONSOLIDATED ENTITY ACTIVITIES - EBDF 29,010
PART XII, LINE 4B - OTHER ADJUSTMENTS		501(C)(4) EXPENSES 14,573 GRANT TO EBDF, RELATED ENTITY 517,200 GRANT TO AFBP, RELATED ENTITY 20,000
		THE ORGANIZATION HAS A WRITTEN DOCUMENT REGARDING THE PERIODIC MONITORING, INSPECTION, VIOLATIONS, AND ENFORCEMENT OF THE CONSERVATION EASEMENTS IT HOLDS

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

DLN: 93493178002273

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding

Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

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

Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contribu	cion answered "Yes" to tions and gross income	Form 990, Part IV, li e on Form 990-EZ, lin	ne 18, or reported es 1 and 6b. List
		<u> </u>	(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
_			(event type)	(event type)	(total number)	(3)
Revenue	1	Gross receipts				
9. 9.	2	Less Contributions				
<u>~</u>	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
en.	5	Noncash prizes				
Expenses	6	Rent/facility costs				
ğ	7	Food and beverages .				
Direct	8	Entertainment				
ā	9	Other direct expenses .				
	10	Direct expense summary Add lin	es 4 through 9 ın colum	n (d)		()
	11	Net income summary Combine Ii	ne 3, column (d), and Iır	e 10		
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
<u>—</u>		\$13,000 OH TOTHI 330 EZ, III	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add
Revenue				bingo/progressive bingo		col (a) through col (c))
<u>_</u>	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
			☐ Yes	┌ Yes	┌ Yes	
	6	Volunteer labor	□ No	│ No	┌ No	
	7	Direct expense summary Add lines	s 2 through 5 ın column	(d)		
	8	Net gaming income summary Com	bine lines 1 and 7 in co	lumn (d)	🛌	
9	Ent	er the state(s) in which the organiza	ation operates gaming a	ctivities		
а		the organization licensed to operate				. 「Yes 「No
b	If"	No," explain				
10a b		re any of the organization's gaming Yes," explain	icenses revoked, suspe	ended or terminated during	the tax year?	

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

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

Schedule I

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

DLN: 93493178002273

Open to Public

Department of the Treasury

(Form 990)

lame of the organization	_					Employer identificati	on number
CIVIL WAR PRESERVATION TRUST	Г					54-1426643	
Part I General Information							
 Does the organization maintain the selection criteria used to an Describe in Part IV the organiz 	ward the grants or as	ssistance?					ע Yes ר No
				united States. Con art II can be duplicated			es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							
Enter total number of section 5Enter total number of other organization						_	21
for Paperwork Poduction Act Natice Co				Cat No FOOFED			In I (Form 000) 2012

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

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

Part IV	Supplemental	Information
---------	--------------	-------------

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

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

Schedule I (Form 990) 2012

or government

FRIENDS OF HARPERS

HISTORICAL PARK253 PROSPECT AVE 25425

FERRY NATIONAL

(h) Purpose of grant

APPRAISALS & EXTENSION OF

CONTRACT ON 2 39 ACRE DRUMHELLER

Software ID: **Software Version:**

20-4286082

EIN: 54-1426643

Name: CIVIL WAR PRESERVATION TRUST

26,925

assistance

(book, FMV, appraisal, other)

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash	(f) Method of valuation	(g) Description of non-cash assistance	(h) Purpose of g or assistance				

501(C)(3)

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

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

DLN: 93493178002273

Open to Public

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

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

► Attach to Form 990. ► See separate instructions.

Inspection

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

54-1426643

Рa	Questions Regarding Compensation		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence			110
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
	,			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	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?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	Form 990 of other organizations 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 payment?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		No
b	,	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		Νo
b	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III			
		8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

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

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

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

Schedule J (Form 990) 2012

Part IIII Supplemental Information

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

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

Schedule J (Form 990) 2012

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

DLN: 93493178002273 OMB No 1545-0047

2012

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 Part VI. ► Attach to Form 990. ► See separate instructions.

Open to Public **Inspection**

Internal Revenue Service

Department of the Treasury

	Name of the organization Employer identification number																
CIVI	IL WAR PRESERVATION TRUST									54-	-14266	43					
Pa	Part I Bond Issues																
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	e) Issue price (f) Description of purpose			(g) De	feased	beha	On alf of financing					
										Yes	No	Yes	No	Yes	No		
A	ECONOMIC DEVELOPMENT AUTHORITY SPOTSYLVANIA COUNTY VIRGINIA	54-1237426		04-07-2010	5,40	0,000		REFUND A PRIOR ISSUE ED 05/22/07					×		х		х
Pai	rt III Proceeds																
	A mount of bonds retired				<u> </u>			В			С			D			
1	Amount of bonds retired Amount of bonds legally defease					400,	000										
2	Total proceeds of issue					7 100											
3	<u> </u>					5,400,	000										
4	Gross proceeds in reserve funds																
5	Capitalized interest from procee	<u> </u>															
6	Proceeds in refunding escrows																
7	Issuance costs from proceeds	1.															
8	Credit enhancement from proces																
9	Working capital expenditures fro																
10	Capital expenditures from proce	eds															
11	O ther spent proceeds					5,400,	000										
12	O ther unspent proceeds																
13	Year of substantial completion				20				Ī		1						
			2		Yes	No	-	Yes	No	Yes	N	lo	Yes	-	No		
14	Were the bonds issued as part o				Х		\dashv				 			\perp			
15	Were the bonds issued as part o		ding issue?			Х											
16	Has the final allocation of procee	eds been made?			Х												
Does the organization maintain adequate books and records to support the final allocation of proceeds?				rt the final	Х												
Par	t IIII Private Business Us	<u>e </u>															
					V			B Vac		Vac	C	-	Vaa	D	No.		
1	Was the organization a partner ii property financed by tax-exemp		a member of an LL(C, which owned	Yes	No X		Yes	No	Yes	N	iO	Yes	+	No		
. —	, , , , , , , , , , , , , , , , , ,						-				+						

financed property?

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

Χ

	dule K (Form 990) 2012									Page Z
Par	Private Business Use (Continued)		1							
			Yes	A No	Yes	B No	Yes	C No	Yes	D No
За	Are there any management or service contracts that may result in private of bond-financed property?	business use	res	X	res	140	res	NO	res	NO
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fine property?									
С	Are there any research agreements that may result in private business us financed property?	e of bond-		х						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper									
4	Enter the percentage of financed property used in a private business use to other than a section 501(c)(3) organization or a state or local government			0 00000%		%		%		%
5	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 501(c)(3) organization, or a state or local government			0 00000%		%		%		%
6	Total of lines 4 and 5			0 00000%		%		%		%
7	Does the bond issue meet the private security or payment test?			X						
8a	Has there been a sale or disposition of any of the bond financed property t nongovernmental person other than a 501(c)(3) organization since the bounds			х						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of		%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?									
9	Has the organization established written procedures to ensure that all non bonds of the issue are remediated in accordance with the requirements un Regulations sections 1 141-12 and 1 145-2?			x						
Par	t IV Arbitrage		l							
I GII	Arbitrage	А			В				D	
		Yes	No	Yes	No	Yes		No	Yes	No
1	Has the issuer filed Form 8038-T?		Х							
2	If "No" to line 1, did the following apply?		•	•	•	•	•	•		
а	Rebate not due yet?		Х							
b	Exception to rebate?		Х							
С	No rebate due?		Х							
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed		•	-		•	, <u> </u>	,		
3	Is the bond issue a variable rate issue?	Х								
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	х								
b	Name of provider	SUNTRUST B INC	ANKS							
С	Term of hedge	10 00000	0000000							
d	Was the hedge superintegrated?		Х							
e	Was a hedge terminated?		Х							
					-	•				

Part IV Arbitrage (Continued)

Identifier

Return Reference

		A		В		C		ט	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		Х						
7	Has the organization established written procedures to monitor the requirements of section 148?		Х						
Pa	rt V Procedures To Undertake Corrective Action								
		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	х							
Pa	art VI Supplemental Information. Complete this part to pr	ovide addition	<u>ial informati</u>	on for respon	ises to quest	ions on Sche	dule K (see	instructions)	•

Schedule K (Form 990) 2012

Explanation

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

DLN: 93493178002273

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

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

Noncash Contributions

Name of the organization CIVIL WAR PRESERVATION TRUST

Employer identification number

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

Page 2

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

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

Identifier Return Reference Explanation

Schedule M (Form 990) (2012)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493178002273

OMB No 1545-0047

2012

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Name of the organization CIVIL WAR PRESERVATION TRUST Employer identification number

54-1426643

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

DLN: 93493178002273

2012

OMB No 1545-0047

Open to Public

SCHEDULE R (Form 990)

Name of the organization

CIVIL WAR PRESERVATION TRUST

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Inspection

Employer identification number

					54-142664	13		
Name, address, and EIN (if applicable) of disregarded entity Pumary activity Legal domcile (state or foreign country) Part* II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Name, address, and EIN of related organization Primary activity (a) Name, address, and EIN of related organization Primary activity (b) Primary activity (c) Legal domcile (state or foreign country) (d) Exempt Code section Public charity status (if section 501(c)(3)) Proct controlling entity (o) Sockor foreign country) 1) AMERICANIS FOR BATTLEFIELD PRESERVATION R 136 15TH ST MW SUITE 900 NAMHINGTON, DC 2000S 2) ERIOMACERCE DATTLEFIELD DEFENSE FUNID PURPOSES OF THE CMIL WAR PRESERVATION TRUST	Part I Identification of Disregarded Entities (C	omplete if the organizatior	n answered "Yes" t	o Form 990, Pa	rt IV, line 33.)			
or more related tax-exempt organizations during the tax year.) Name, address, and EIN of related organization Name, address, and EIN of the controling (b)(3) Notice to the control of the	(a) Name, address, and EIN (ıf applıcable) of dısregarded entıty		Legal domicile (state	(d) Total income	(e) End-of-year assets	Direct controlling		
Or more related tax-exempt organizations during the tax year.) Name, address, and EIN of related organization Name, address, and EIN of related organization Name, address, and EIN of related organization Primary activity Legal domicile (state or foreign country) Legal domicile (state or foreign country) Exempt Code section Public charity status (if section 501(c)(3)) Direct controlling entity Section (b)(0) Civil War PRESERVATION TRUST TO CARRY OUT THE PURPOSES OF THE CIVIL WAR PRESERVATION TRUST OUSTON, TX 77007								
Or more related tax-exempt organizations during the tax year.) (a) Name, address, and EIN of related organization (b) Primary activity Legal domicile (state or foreign country) (b) Primary activity Legal domicile (state or foreign country) (c) Exempt Code section (d) Exempt Code section (b)(3) controlling (c) (b)(3) Controlling (c) (b)(4) Yes 156 15TH ST NW SUITE 900 (ASHINGTON, DC 20005 0-3843239 2) ENDANGERED BATTLEFIELD DEFENSE FUND (ASHINGTON AVENUE OUSTON, TX 77007								
or more related tax-exempt organizations during the tax year.) Name, address, and EIN of related organization Name, address, and EIN of the controling (b)(3) Notice to the control of the								
Or more related tax-exempt organizations during the tax year.) Name, address, and EIN of related organization Name, address, and EIN of the Color of the Col								_
Name, address, and EIN of related organization Primary activity Legal domicile (state or foreign country) Primary activity Legal domicile (state or foreign country) Public charity status (if section 501(c)(3)) Public charity status (if section 501(c)(3)) Public charity status (if section 501(c)(3)) Primary activity Public charity status (if section 501(c)(3)) Public charity sta	or more related tax-exempt organizations dur	ing the tax year.)				rt IV, line 34 because it	had o	ιе
1) AMERICANS FOR BATTLEFIELD PRESERVATION SEE PART VII OF SCHEDULE R OC 501(C)(4) CIVIL WAR PRESERVATION TRUST OUTPUT OUTPU	(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state	(d) Exempt Code section	n Public charity stat	us Direct controlling	Section (b) cont	on ! (13 roll
RASHINGTON, DC 20005 10-3843239 (2) ENDANGERED BATTLEFIELD DEFENSE FUND 7777 WASHINGTON AVENUE HOUSTON, TX 77007 R TRUST TRUST VA 501(C)(3) LINE 11A, I CIVIL WAR PRESERVATION TRUST TRUST TRUST	(1) AMERICANS FOR BATTLEFIELD PRESERVATION	SEE PART VII OF SCHEDULE	DC.	501(C)(4)		CIVIL WAR PRESERVATION	Yes	l'
VASHINGTON, DC 20005 (0-3843239 2) ENDANGERED BATTLEFIELD DEFENSE FUND (7777 WASHINGTON AVENUE HOUSTON, TX 77007 TO CARRY OUT THE PURPOSES OF THE CIVIL WAR PRESERVATION TRUST TO CARRY OUT THE PURPOSES OF THE CIVIL WAR PRESERVATION TRUST TO CARRY OUT THE PURPOSES OF THE CIVIL WAR PRESERVATION TRUST TO CARRY OUT THE PURPOSES OF THE CIVIL WAR PRESERVATION TRUST TO CARRY OUT THE PURPOSES OF THE CIVIL WAR PRESERVATION TRUST		R						
TO CARRY OUT THE PURPOSES OF THE CIVIL WAR PRESERVATION TRUST TO CARRY OUT THE PURPOSES OF THE CIVIL WAR PRESERVATION TRUST TO CARRY OUT THE PURPOSES OF THE CIVIL WAR PRESERVATION TRUST HOUSTON, TX 77007	WASHINGTON, DC 20005							
7777 WASHINGTON AVENUE WAR PRESERVATION TRUST HOUSTON, TX 77007			VA	501(C)(3)	LINE 11A, I			
	7777 WASHINGTON AVENUE					IROSI		
	HOUSTON, TX 77007 27-1035136							
								T

(a) Name, address, and EIN o related organization	f	(b) Primary activit	(c) Legal domicile (state or foreign country)	entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-	(f) Share of total income	(g) Share of end-of-yea assets	(h Disprop r allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percenta ownersh
					514)			Yes	No		Yes	No	
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo	ration is a cor	or Trust (poration or	Complete if trust during	the organı the tax ye	zatıon ar ar.)	iswere	d "Ye	s" to Form	990,	Part	:IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controll entity	(e) Type of enti (C corp, S corp, or trust)		total Share e of	(g) e of end- year ssets		(h) ercentage wnership	Section (b) conti	(13)	
											Yes		No

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

Yes

1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more re	elated organizations lis	sted in Parts II-IV?								
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No				
b	Gift, grant, or capital contribution to related organization(s)				1b		No				
C	Gift, grant, or capital contribution from related organization(s)				1c	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	Dividends from related organization(s)				1f		No				
g	Sale of assets to related organization(s)				1g		No				
h	Purchase of assets from related organization(s)				1h		No				
i	Exchange of assets with related organization(s)				1i		No				
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		No				
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No				
	Performance of services or membership or fundraising solicitations for related organization(s)				11	Yes					
	m Performance of services or membership or fundraising solicitations by related organization(s)										
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No				
	Sharing of paid employees with related organization(s)				10		No				
D	Reimbursement paid to related organization(s) for expenses				1p		No				
q q					1 q		No				
r	Other transfer of cash or property to related organization(s)				1r		No				
	Other transfer of cash or property from related organization(s)				1 s		No				
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	vered relationships	and transaction thresholds							
	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount II	nvolved					
1) A	MERICANS FOR BATTLEFIELD PRESERVATION	С	20,000	CASH							
(2) E	NDANGERED BATTLEFIELD DEFENSE FUND	С	517,200	CASH							

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

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

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

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	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 section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Part VII Supplemental Information

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

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

Additional Data Return to Form

Software ID: Software Version:

EIN: 54-1426643

Name: CIVIL WAR PRESERVATION TRUST

-->

Software ID: Software Version:

EIN: 54-1426643

Name: CIVIL WAR PRESERVATION TRUST

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

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

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

45 00

50 00

ROBERT C SHENK

JAMES J CAMPI

DIR - INTERNET STRATEGY DEVELOPMENT

DIR - POLICY & COMMUNICATIONS

(A) Name and Title	(B) A verage hours per week (list any		than	not one on i er an	box s bot d a	,		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	illey	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
JEFF SHAARA TRUSTEE	30	x						0	0	0
W DENMAN ZIRKLE TRUSTEE	30	х						0	0	0
DOUG WALKER TRUSTEE	0 00	х						0	0	0
O JAMES LIGHTHIZER PRESIDENT	60 00	х		х				202,873	0	72,172
RONALD M COGSWELL COO	32 00			х				63,525	0	3,438
RUTH E HUDSPETH CFO	50 00			х				98,201	0	14,667
DAVID N DUNCAN DIR - MEMBERSHIP & DEVELOPMENT	50 00				х			189,543	0	11,508
THOMAS M GILMORE DIR - REAL ESTATE	50 00				х			157,179	0	26,048
SAMUEL F DELUCA SENIOR VP - MAJOR GIVING	50 00					х		101,784	0	22,698

Χ

127,540

129,265

25,608

14,857

0

0