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DLN: 93493309004344

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

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

OMB No 1545-0047

2013

Open to Public Inspection

		2013 ca i ipplicable	C Name of organization		J6-30-20:		D Employe	er iden	tification number
	dress cl	• •	NATIONAL RECREATION AND PARK ASS	OCIATION			13-556	3001	
□ Na	me cha	inge	Doing Business As						
Init	ial retu	ım	Number and street (or P O box if mail	ıs not delivered to street address) Rooi	m/suite		E Telephon	e numb	er
Tei	mınate	ed	22377 BELMONT RIDGE ROAD				(703)8		
Am	ended	return	City or town, state or province, country ASHBURN, VA 201484150	, and ZIP or foreign postal code			(/03/0	30 07	
Ap _l	olication	n pending	Honborn, W. Zorio iis				G Gross rec	eıpts \$	15,322,415
			F Name and address of princil BARBARA TULIPANE	pal officer	H(a) Is this		eturn f	or Ev Ev
			22377 BELMONT RIDGE ROA	D		subordı	nates?		┌ Yes ┌ No
			ASHBURN,VA 201484150		H(b) Are all		ates	┌ Yes ┌ No
T Ta	x-exen	npt status	✓ 501(c)(3)	ert no)		include If "No "		list (see instructions)
		<u> </u>	/W NRPA ORG	327		_			
					H(,	exemptio		
	m of or rt I		Corporation Trust Association	Other 🟲	L	. Year of form	ation 1926	M S	State of legal domicile NY
Pa			mary						
			escribe the organization's mission (ANCE PARKS, RECREATION AND		ATION E	EFFORTS T	HAT EN	HANC	E THE QUALITY OF
e		LIFE FO	R ALL PEOPLE						
Governance	'								
Ĕ									
§	2	Check tl	nis box দ if the organization disco	ontinued its operations or dispos	ed of mo	re than 25°	% of its n	et ass	ets
								_ 1	
Activities &	I		of voting members of the governing					3	19
Ě	I		of independent voting members of t				·	5	19
ទ្ធ	I		mber of individuals employed in cal mber of volunteers (estimate if nec				·	6	300
4	I		related business revenue from Part				·	7a	863,288
	I		lated business taxable income fron			: H	7b	003,288	
	۳	TVCC UIIIC	nated business taxable income iron		- 	Prior Y	· ′ear	//	Current Year
	8 Contributions and grants (Part VIII, line 1h)						3,259,26	9,264 4,94	
Ē	9		am service revenue (Part VIII, line			7,089,784			7,487,833
Revenue	10		tment income (Part VIII, column (A				580,149		539,060
æ	11		revenue (Part VIII, column (A), lin				590,59	1	526,199
	12		revenue—add lines 8 through 11 (m		, line		1 510 76		12.406.027
	12		and sımılar amounts paid (Part IX				1,519,78		13,496,937
	13 14		ts paid to or for members (Part IX,				1,597,00	0	3,000,211
	15		es, other compensation, employee	, ,,				-	0
\$	15	5-10		benefits (Fart 1X, column (A), in			5,013,91	. 8	5,576,798
Expenses	16a	Profes	sional fundraising fees (Part IX, co	lumn (A), line 11e)	🗀			0	0
ਨੂੰ	ь	Total fu	ındraısıng expenses (Part IX, column (D), lı	ne 25) 🕨 2,962	_				
_	17	Other	expenses (Part IX, column (A), line	es 11a-11d, 11f-24e)	· - <u> </u>		4,975,36	3	4,541,144
	18		expenses Add lines 13-17 (must o		· —	1	1,586,28	3 1	13,118,153
	19	Reven	ue less expenses Subtract line 18	from line 12			-66,49		378,784
Not Assets or Fund Balances					'	Beginning o Yea			End of Year
Set afair	20	Total	assets (Part X, line 16)		. \vdash		1,068,06	66	10,672,816
AB AB	21		liabilities (Part X, line 26)				4,835,08		4,411,083
2 2 2 2	22		ssets or fund balances Subtract lin		`. `⊢		6,232,97		6,261,733
Pai	ŧΠ		ature Block				, ,		, ,
my k	nowle	dge and as any k				fficer) is ba	sed on a		
Sigr		Signa	ature of officer			Date			
Her	е	ANN	A BRENT VP OF FINANCE/CFO or print name and title						
		<u> 17</u>		Preparer's signature	Date	l	_	TTN	
Da:	4		SUBRINA L WOOD	riepaiei s signature	Date	Check self-en		PTIN P003658	399
Paid			imn's name 🕨 TATE AND TRYON				EIN 🕨 52-:	185594	2
	pare		Firm's address • 2021 L STREET NW SUITE	400		Phone	no (202) i	293-220	00
USE	: On	ıy l'				1	·/		

WASHINGTON, DC 20036

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

✓ Yes ☐ No

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\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 1	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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	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
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	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	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
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	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to 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 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) 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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	,		1
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νo
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
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	<u> </u>
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		No
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?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Peli				_
	Check if Schedule O contains a response or note to any line in this Part V	• •	Yes	.] No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 85		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	ı.		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		—
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	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		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds 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		
9	Sponsoring organizations maintaining donor advised funds.	0-		
	Did the organization make any taxable distributions under section 4966?	9a 9b		
	Did the organization make a distribution to a donor, donor advisor, or related person?	90		
10	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			
11	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)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
L4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Form 990 (2013) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		19			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O						
b	Enter the number of voting members included in line 1a, above, who are independent	1b		19			
2	Did any officer, director, trustee, or key employee have a family relationship or a bu other officer, director, trustee, or key employee?			th any	2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co				3		No
4	Did the organization make any significant changes to its governing documents since filed?	e the p	rior Form 990 v	was	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the o	rganız	atıon's assets?	. [5		No
6	Did the organization have members or stockholders?			[6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power more members of the governing body?			one or	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approve or persons other than the governing body?			holders,	7b		Νo
8	Did the organization contemporaneously document the meetings held or written active year by the following	ions ur	ndertaken durin	g the			
а	The governing body?				8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			[8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>				9		No
Se	ection B. Policies (This Section B requests information about policies not	requi	red by the In	ternal Re	evenu	ıe Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not	requi	red by the In	<u>ternal R</u>	evenu	re Cod Yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	<u>requi</u>	red by the In	ternal Ro	evenu 10a		
10a			s of such chapte	· ers,			No
10a b	Did the organization have local chapters, branches, or affiliates?	tivitie:	s of such chapte xempt purposes	ers,	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the ac affiliates, and branches to ensure their operations are consistent with the organization that the organization provided a complete copy of this Form 990 to all members of its consistent with the organization provided accomplete copy of this Form 990 to all members of its consistent with the organization provided accomplete copy of this Form 990 to all members of its consistent with the organization provided accomplete copy of this Form 990 to all members of its consistent with the organization provided accomplete copy of this Form 990 to all members of its consistent with the organization provided accomplete copy of this Form 990 to all members of its consistent with the organization provided accomplete copy of this Form 990 to all members of its consistent with the organization provided accomplete copy of this Form 990 to all members of its consistent with the organization provided accomplete copy of this Form 990 to all members of its consistent with the organization provided accomplete copy of this Form 990 to all members of its consistent with the organization provided accomplete copy of this Form 990 to all members of its consistency and its consistency accomplete copy of this form 990 to all members of its consistency accomplete copy of the consistency accomplete copy of the copy o	tivitie: ion's e ts gov	s of such chapto xempt purposes erning body bef	ers, s? ore filing	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	tivitie: ion's e ts gov Form 9	s of such chapto xempt purposes erning body bef	ers, s? ore filing	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	tivitie: ion's e ts gov Form 9	s of such chapto xempt purposes erning body before 	ers, s? ore filing 	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivitie: ion's e ts gov Form 9	s of such chapte xempt purposes erning body bef 	ers, s? fore filing d give	10a 10b 11a 12a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivities ion's e ts gov Form 9 Illy inte	s of such chapte xempt purposes erning body before the could be the co	ers, s? ore filing · · · d give · · · describe · · ·	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivities ion's e ts gov Form 9 Illy inte	s of such chapte xempt purposes erning body before the could be the co	ers, s? ore filing · · · d give · · · describe · · ·	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	tivities ion's e ts gov . Form 9 . Illy inte . n the p . view an	s of such chapte xempt purposes erning body before the could be the co	ers, s? fore filing d give describe 	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	tivitie: ion's e ts gov . Form 9 . Illy inte . n the p . view an	s of such chapte xempt purposes erning body before the could be the co	ers, s? fore filing d give describe 	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	tivitie: ion's e ts gov . Form 9 . Ily inte . n the p . //iew an	s of such chapte xempt purposes erning body before the could be the co	ers, s? fore filing d give describe 	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	tivitie: ion's e ts gov . Form 9 . Ily inte . n the p . //iew an	s of such chapte xempt purposes erning body before the could be the co	ers, s? fore filing d give describe 	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	tivitie: ion's e ts gov Form 9 Illy inte n the p view an he deli or sim	s of such chapte xempt purposes erning body before the such could be such as the such as t	ers, s? fore filing d give describe cision?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	tivities ion's e ts gov Form 9 Illy inte n the p view an he deli or sim	s of such chapte xempt purposes erning body before the such could be a such co	ers, s? fore filing . d give . describe . cision? . the	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No No

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed AK, AZ, FL, IL, ME, MN, MS, NH, OK, OR, RI, UT, VA, WV
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available Check all that apply
 - ☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)
- 19 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 ►THE ORGANIZATION 22377 BELMONT RIDGE ROAD ASHBURN, VA 201484150 (703)858-0784

Form 990	(2013	
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г	a	ч	_	•

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

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

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

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

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid

◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"

List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations

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	(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-MISC)		(F) Estima imount of compens from t	other ation he
		for related organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-	MISC)	2/1099-MISC)		rganizati relate organiza	:d
												_		
												_		
												_		
												-		
												+		
												+		
												+		
1b	Sub-Total							┈						
C	Total from continuation sheet	· · · · · s to Part VII, S	ection A	٠.				•						
d	Total (add lines 1b and 1c) .							►		531,599		0		83,399
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) wl	ho received	d more th	an			
													Yes	No
3	Did the organization list any fc on line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee, •	or highest	compen	sated employee	3		No
4	For any individual listed on line organization and related organ individual											4	Yes	
5	Did any person listed on line 1 services rendered to the organ									anızatıon • • •	or individual for	5	. 33	No
Ç.	ction B. Independent Co	ntractors									•	_		
1	Complete this table for your fiv	e highest comp												
	compensation from the organiz	ation Report co	mpens	ation	for t	he c	alenda	arye	ar ending v	vith or wi	thin the organizat (B)	ion's	tax year (C))

(A) Name and business address	(B) Description of services	(C) Compensation
CCR SOLUTIONS INC 1040 ISLINGTON AVETORONTOONTARIOCAM8Z 6A4	AUDIO VISUAL	255,915
NCS PEARSON INC 5601 GREEN VALLEY DRIVE BLOOMINGTON MN 55437	TESTING SERVICES	220,393
DARTMOUTH PRINTING PO BOX 842371 BOSTON MA 022842371	MAGAZINE PUBLISHING	188,534
CITY KITCHEN 8101 AIRPORT BLVD HOUSTON TX 77061	FOOD SERVICES	125,655
AMERICAN TECHNOLOGY SERVICES 2751 PROSPERITY AVE FAIRFAX VA 22031	IT CONSULTING	103,132

Form 99)13)						Page 9
Part V	/111	Statement of	Revenue le O contains a respon	se or note to any lim	ne in this Part VIII			
		Check ii Schedui	e O Contains a respon	se of note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
တ္က	1a	Federated campa	aigns 1a					
ant	ь	Membership due	s 1b	447,745				
بية وير	С	Fundraising ever	nts 1c					
ifts, ar A	d	Related organiza	ntions 1d					
9 ∺	e	Government grants	(contributions) 1e	59,931				
ons Sii	f	All other contribution	ns, gifts, grants, and 1f	4,436,169			-	
Contributions, Giffs, Grants and Other Similar Amounts	•	sımılar amounts not	ıncluded above		ļ			
Ę ŏ	g	Noncash contribution 1a-1f \$	ns included in lines					
Cor	h	Total. Add lines	1a-1f	▶	4,943,845			
				Business Code				
nua	2a	CONVENTIONS AND	FEES	900099	4,450,499	2,332,633		2,117,866
Program Serwoe Revenue	ь	MEMBERSHIP DUES		900099	1,169,116	1,169,116		
95	С	ACCRED/CERT FEES	5	900099	956,008	956,008		
že.	d	PUBLICATIONS		541800	912,210	48,922	863,288	
<u> </u>	е							
ୁମନ	f	All other prograr	m service revenue	Ţ				
Š	g	Total. Add lines	2a-2f		7,487,833			
	3		me (including dividend		162,414			162,414
	4		r amounts) ment of tax-exempt bond p		,			,
	5	Royalties			282,230			282,230
		Ĺ	(ı) Real	(II) Personal				
	6a	Gross rents	84,782					
	Ь	Less rental expenses	0					
	С	Rental income or (loss)	84,782					
	d	` '	ne or (loss)		84,782			84,782
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	2,147,181					
	ь	Less cost or other basis and	1,770,535					
		sales expenses						
	C d	Gain or (loss)	376,646		376,646			376,646
	8a	Gross income from	F	· · · · ·	3,3,515			37 3,0 10
Other Revenue		events (not inclu \$	uding reported on line 1c)					
<u>.</u>			a					
ţ	Ь	Less direct exp	<u> </u>					
0	9a		oss) from fundraising e	vents 🛌				
	94	See Part IV, line	om gaming activities					
			a					
	b	Less direct exp	<u> </u>					
	10a	Net income or (lo Gross sales of ir	oss) from gaming activ	riues				
	100	returns and allow						
			а	179,833				
	b	Less cost of go	L	54,943	124.000	134 000		
		Net income or (le	oss) from sales of inve	ntory Business Code	124,890	124,890		
	11a	SALE OF MAILI		900099	32,250			32,250
	b	OTHER REVENU		900099	2,047			2,047
	C	O THEN REVENU	-		, "			
	d	All other revenue	e					
	e		11a-11d	🕨	24 207			
	12	Total revenue. S	ee Instructions		34,297			
	J			۳	13,496,937	4,631,569	863,288	3,058,235

	,	
Part IX	Statement of Functional Expenses	
Section 50	1(c)(3) and $501(c)(4)$ organizations must complete all columns	All other organizations must complete column (A)

	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	otner organizati	ions must comp	olete column (A)	
	Check if Schedule O contains a response or note to any line in this	Part IX			
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations				
	in the United States See Part IV, line 21	3,000,211	3,000,211		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	614,997	414,382	200,615	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	3,864,378	2,608,281	1,256,097	
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	174,740	117,891	56,849	
9	Other employee benefits	607,664	402,950	204,714	
10	Payroll taxes	315,019	212,712	102,307	
11	Fees for services (non-employees)				
а	Management				
b	Legal	18,885	2,581	16,304	
c	Accounting	54,312		54,312	
d	Lobbying	119,602	119,602		
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	54,410		54,410	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on	972,041	769,712	202,329	
12	Schedule O)	35,594	35,596	 	
13			<u> </u>	254,095	
	Office expenses	831,655	577,560	' 	
14	Information technology	158,409	11,785	146,624	
15	Royalties	450 270	4 200	140,000	
16	Occupancy	150,270	1,288	148,982	
17	Travel	472,103	433,244	38,859	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,154,674	1,124,884	29,790	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	327,418		327,418	
23	Insurance	68,228	9,786	58,442	
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)				
а		38,421	29,400	9,021	
ь	TRAINING & DEVELOPMENT	35,937	19,947	15,990	
c	PERSONNEL	33,336	11,482	18,892	2,962
d	COMMISSIONS	15,849	15,849		·
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	13,118,153	9,919,143	3,196,048	2,962
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)		2,723,213	2,220,0.0	2,532

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in	thıs Par	tx			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			413,944	1	90,337
	2	Savings and temporary cash investments			80,991	2	1,021,737
	3	Pledges and grants receivable, net			90,597	3	99,280
	4	Accounts receivable, net			250,037	4	184,717
	5	Loans and other receivables from current and former officers, demployees, and highest compensated employees. Complete Paschedule L	•		5		
əts	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	contribi mploye	uting employers		6	
4ssets	7	Notes and loans receivable, net				7	
₫	8	Inventories for sale or use			42,761	8	22,756
	9	Prepaid expenses and deferred charges			336,855	9	223,782
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	1 1	6,004,012	,		,
	ь	Less accumulated depreciation	10b	3,034,135	3,236,585	10c	2,969,877
	11	Investments—publicly traded securities			6,518,251	11	5,919,400
	12	Investments—other securities See Part IV, line 11			98,045	12	140,930
	13	Investments—program-related See Part IV, line 11			·	13	<u> </u>
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			11,068,066		10,672,816
	17	Accounts payable and accrued expenses			929,442		742,400
	18	Grants payable			520,112	18	
	19	Deferred revenue		• •	2,640,654		2,799,033
	20	Tax-exempt bond liabilities			2,040,004	20	2,700,000
	21	Escrow or custodial account liability Complete Part IV of Sche	· ·	• •		21	
ies						21	
Liabiliti	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquali		stees,			
<u>.</u>		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie	s .	•		23	
	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 of S	Schedule	1 264 001	25	960 650
		D			1,264,991	25	869,650
	26	Total liabilities. Add lines 17 through 25			4,835,087	26	4,411,083
ري d)		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	✓ and o	complete			
ĕ	27	Unrestricted net assets			4,428,804	27	4,117,458
<u>ಣ</u> ಣ	28	Temporarily restricted net assets			1,239,283		1,579,383
<u>~</u>	29	Permanently restricted net assets	• •	•	564,892	29	564,892
Ĕ	29			 —	304,032	29	304,032
Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check h complete lines 30 through 34.	·				
£	30	Capital stock or trust principal, or current funds				30	
SSE	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other f				32	
₹	33	Total net assets or fund balances			6,232,979		6,261,733
_	34	Total liabilities and net assets/fund balances			11,068,066	34	10,672,816

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI			,	F
1	Total revenue (must equal Part VIII, column (A), line 12)	1		13,4	196,937
2	Total expenses (must equal Part IX, column (A), line 25)	2		13,1	118,153
3	Revenue less expenses Subtract line 2 from line 1	3		3	378,784
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		6,2	232,979
5	Net unrealized gains (losses) on investments	5		4	162,470
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		- 8	312,500
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		6,2	261,733
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	ı			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

Software ID: Software Version:

EIN: 13-5563001

Name: NATIONAL RECREATION AND PARK ASSOCIATION

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

Form 990, Part VII - Compensation Compensated Employees, and Inde				IIu	Ste	es, r	(e y			
(A) Name and Title	(B) A verage hours per week (list any hours for related	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-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		-,,	related organizations
ROBERT F ASHCRAFT PHD	5 00	х		Х				0	0	0
CHAIR DETRICK L STANFORD CPRP	1 00									
CHAIR-ELECT	1 00	х		×				0	0	0
LEON T ANDREWS SECRETARY	2 00	х		х				0	0	0
PETER CAMIN TREASURER	2 00	х		х				0	0	0
STEVEN J THOMPSON	1 00	×		x				0	0	0
PAST CHAIR BARBARA BACA	1 00							0	0	0
DIRECTOR		Х						0	0	0
REBECCA BENNA CPRP DIRECTOR	1 00	×						0	0	0
NEELAY BHATT DIRECTOR	1 00	Х						0	0	0
KEVIN COYLE	1 00	х						0	0	0
STEPHEN ECKELBERRY	1 00	X						0	0	0
DIRECTOR JENNIFER HARNISH	1 00	×						0	0	0
DIRECTOR ROSLYN JOHNSON	1 00									
DIRECTOR BRIAN KNAPP	1 00	×						0	0	0
DIRECTOR LEWIS LEDFORD	1.00	X						0	0	0
DIRECTOR	1 00	х						0	0	0
JANICE M PROCHASKA PHD DIRECTOR	1 00	×						0	0	0
PAMELA SLOAN CPRP DIRECTOR	1 00	х						0	0	0
SUSAN TRAUTMAN CPRP	1 00	х						0	0	0
DIRECTOR WILLIAM JOE TURNER	1 00	Х						0	0	0
DIRECTOR BEVERLY D CHRISMAN	1 00	X						0	0	0
DIRECTOR ANNE S CLOSE	1 00									
DIRECTOR JAMES H EVANS	1 00	×						0	0	0
DIRECTOR ROSEMARY HALL EVANS		Х						0	0	0
DIRECTOR	1 00	х						0	0	0
CHESTER W FREEMAN DIRECTOR	1 00	x						0	0	0
EARL T GROVES DIRECTOR	1 00	х						0	0	0
CHARLES E HARTSOE PHD	1 00	х						0	0	0
DIRECTOR	J									

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

compensated imployees, and inde]	 					J			l I
(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				nless ficer		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)		organization and related organizations
HARRY G HASKELL JR DIRECTOR	1 00	х						0	0	0
KATHRYN A PORTER	1 00	х						0	0	0
DIRECTOR										
PERRY J SEGURA DIRECTOR	1 00	х						0	0	0
R DEAN TICE	1 00	х						0	0	0
DIRECTOR										
EUGENE A YOUNG CPRP DIRECTOR	1 00	×						0	0	0
BARBARA TULIPANE CAE	37 50	Х		Х				332,341	0	34,081
PRESIDENT & CEO ANNA AMSELLE BRENT	27.50									
VP FINANCE & CFO	37 50			Х				57,719	0	20,403
MICHAEL LAUREN YOST	37 50					х		141,539	0	28,915
VP OPERATIONS	J									
I										

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As Filed Data -

DLN: 93493309004344

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

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.

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

2013

Open to Public Inspection

lame	of	the	organiz	zatio	on		
IATION	ΑL	RECR	EATION	AND	PARK	ASSOCIATIO	NC

Employer identification number

13-5563001

Pai	rt I	Reas	on for Pu	blic Charity Sta	tus (All or	ganızatıor	ns must com	plete this	part.) See		 5.	
				e foundation becaus							-	
1		A churc	h, conventi	on of churches, or as	ssociation o	fchurches	described in	section 170	(b)(1)(A)(i).			
2			· ·	I in section 170(b)(1								
3		A hosp	ıtal or a coo	perative hospital se	rvice organiz	zatıon desc	rıbed ın secti	on 170(b)(1	.)(A)(iii).			
4		•		n organızatıon operat	=					(1)(A)(iii).	Enter the	
		hospita	l's name, ci	ty, and state	_							
5	Г	An orga	anızatıon op	erated for the benefi	t of a college	e or univers	ity owned or	operated by	a governmer	ntal unit des	cribed in	
		sect ion	170(b)(1)(A)(iv). (Complete P	art II)							
6	Г	A feder	al, state, or	local government or	governmen	tal unıt des	cribed in sec	tion 170(b)((1)(A)(v).			
7	Γ	_		at normally receives		•	s support fror	n a governm	ental unit or	from the ger	ieral publ	ıc
	_			n 170(b)(1)(A)(vi). described in section	•	•	malata Barti	r				
8 9	▽		•				•	•	hutions mon	sharchin faa	c and are	
3	1*	_		at normally receives ities related to its ex					•	-	-	33
				oss investment inco								_
			_	janization after June				•		tax) Holli b	usiliesse:	•
10	_			ganized and operated								
11	<u>'</u>			ganized and operated ganized and operated							the nurne	sees of
		the box a 「	that descri Type I	y supported organız bes the type of supp b Type II c	orting organ Type II	iization and I - Functio	complete lin nally integrat	es 11e thro ed d	ugh 11h Type III - N	on-function	ally integ	rated
е	Γ	other th		ox, I certify that the on managers and otl								
f				received a written de	etermination	from the I	RS that it is a	Type I, Ty	pe II, or Type	III support	ing organ	ıızatıon,
			his box					_				Γ
g			ugust 17, 2 g persons?	2006, has the organi	zation acce	pted any gi	ft or contribut	tion from an	y of the			
			• .	rectly or indirectly o	ontrols, eith	ner alone or	together wit	n persons de	escribed in (ii)	Yes	No
				governing body of th			_		(g(i)	+ 110
			•	er of a person descri		-					y(ii)	+
			*	lled entity of a perso			above?				(iii)	+
h				ng information about							. ,	
				•	• •	,	,					
(i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did yo	u notify	(vi) Is	the	(vii) A	mount of
supported organization organiz							the organ		organiza			netary
or	organization (described on				col (i) lis		ın col (i)	•	col (i) organized		su	oport
				lines 1- 9 above or IRC section	your gove docume	_	suppo	ort,	In the C	15'		
				(see	docume							
				instructions))	Yes	No	Yes	No	Yes	No	┪	
					1.63	140	162	140	162	140	+	
											_	
[otal	i							+			+	

Sch	edule A (Form 990 or 990-EZ) 2013						Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(6) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is t	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ □
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

Part III 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.)

	ction A. Public Support						_
Cale	ndar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	4,170,685	2,603,489	7,144,098	4,354,015	6,112,96	24,385,248
	grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished	8,361,963	8,305,658	6,677,815	6,105,574	5,565,01	.8 35,016,028
	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						
	furnished by a governmental unit to the organization without						
	charge						
6	Total. Add lines 1 through 5	12,532,648	10,909,147	13,821,913	10,459,589	11,677,97	9 59,401,276
_	Amounts included on lines 1, 2,	12,332,010	10,303,111	13/321/313	10, 133,303	11,0,7,57	33,101,270
/a	and 3 received from disqualified	18,200	36,742	12,594	14,751	26,25	108,537
	persons	, i	,	,	,	,	
ь	Amounts included on lines 2 and						
	3 received from other than						
	disqualified persons that exceed	1,967,543		1,353,973		3,330,96	6,652,483
	the greater of $$5,000$ or 1% of						
	the amount on line 13 for the year						
С	Add lines 7a and 7b	1,985,743	36,742	1,366,567	14,751	3,357,21	7 6,761,020
8	Public support (Subtract line 7c						52,640,256
	from line 6)						
	ction B. Total Support	<u> </u>					1
Cale	beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	A mounts from line 6	12,532,648	10,909,147	13,821,913	10,459,589	11,677,97	9 59,401,276
10a	Gross income from interest,						
	dividends, payments received						
	on securities loans, rents,	625,104	563,671	644,584	514,447	529,42	6 2,877,232
	royalties and income from						
	similar sources						
b	Unrelated business taxable						
	income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b	625,104	563,671	644,584	514,447	529,42	6 2,877,232
11	Net income from unrelated		·		·	·	
	business activities not included						
	ın lıne 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of	87,903	36,419	136,219	113,084	104,54	1 478,166
	capital assets (Explain in Part IV)						
13	Total support. (Add lines 9,						
13	10c, 11, and 12)	13,245,655	11,509,237	14,602,716	11,087,120	12,311,94	62,756,674
14	First five years. If the Form 990 is	for the organization	on's first, second	, third, fourth, or i	fifth tax year as a	501(c)(3) orga	anization,
	check this box and stop here				·		
	ction C. Computation of Pub						
15	Public support percentage for 2013	(line 8, column (f) divided by line	13, column (f))		15	83 880 %
16	Public support percentage from 201	2 Schedule A, Pa	art III, line 15			16	88 960 %
Se	ction D. Computation of Inv	estment Inco	me Percentag	ge			
17	Investment income percentage for				n (f))	17	4 580 %
	Investment income percentage from	n 2012 Schedule A	A. Part III. line 1	7		18	4 780 %
18	Threstment meanic percentage nor		.,				
18 19a	33 1/3% support tests—2013. If the	organization did	not check the bo	x on line 14, and		nan 33 1/3% , an	

33 1/3% support tests—2012. 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

Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).										
	Facts And Circumstances Test										
Retu	ırn Reference	Explanation									
		Schodulo A / Form 000 o	000 E7) 201								

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493309004344

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

Open to Public Inspection

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

	me of the organization IONAL RECREATION AND PARK ASSOCI	IATION		Employer ide	ntification number
				13-5563001	
Par	I-A Complete if the or	ganization is exempt under s	section 501(c) or is a section 52	7 organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect politic	al campaign act	ıvıtıes ın Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	Complete if the or	ganization is exempt under s	section 501(c)(3).	
1	<u> </u>	e tax incurred by the organization und	•	-	\$
2	Enter the amount of any excise	e tax incurred by organization manage	ers under sectioi	n 4955 🕨	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	O for this year?		☐ Yes ☐ No
4a	Was a correction made?				┌ Yes ┌ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt under :	section 501(c), except section 50	01(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exemp	ot function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	rganızatıon's funds contributed to otl	ner organizations	s for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 112	0-POL, line 17b ►	\$
4	Did the filing organization file F	Form 1120-POL for this year?			□ Yes □ No
5	organization made payments f amount of political contribution	nd employer identification number (EI For each organization listed, enter thens received that were promptly and di political action committee (PAC) If a	e amount paid fro rectly delivered	om the filing organization's to a separate political org	funds Also enter the anization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

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

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
3	Total lobbying expenditures to influence public of	pinion (grass roots lobbying)		
)	Total lobbying expenditures to influence a legisl	120,634		
2	Total lobbying expenditures (add lines 1a and 1	120,634		
ı	Other exempt purpose expenditures	12,863,946		
2	Total exempt purpose expenditures (add lines 1	c and 1d)	12,984,580	
•	Lobbying nontaxable amount Enter the amount columns	799,229		
	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		
J	Grassroots nontaxable amount (enter 25% of lir	e 1f)	199,807	
1	Subtract line 1g from line 1a If zero or less, ent	er-0-	0	
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -	0	
j	If there is an amount other than zero on either lii	ne 1h or line 1i, did the organization file Form 472	0 reporting	_ Ves

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) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) Total beginning in) Lobbying nontaxable amount 763,917 824,354 636,419 799,229 3,023,919 Lobbying ceiling amount 4,535,879 (150% of line 2a, column(e)) 122,756 75,180 Total lobbying expenditures 131,232 120,634 449,802 Grassroots nontaxable amount 190,979 206,089 159,105 199,807 755,980 Grassroots ceiling amount 1,133,970 (150% of line 2d, column (e)) Grassroots lobbying expenditures

	Part II-B Complete if the organization is exempt under section filed Form 5768 (election under section 501(h)).					
For e	r each "Yes" response to lines 1a through 1ı below, provide in Part IV a detailed descri	ption of the lobbying	(8	a)	(1	b)
	tivity.		Yes	No	Amo	ount
1 a	legislation, including any attempt to influence public opinion on a legislative r through the use of					
b c	b Paid staff or management (include compensation in expenses reported on line	es 1c through 1ı)?				
d	d Mailings to members, legislators, or the public?					
e	e Publications, or published or broadcast statements?					
f	f Grants to other organizations for lobbying purposes?					
g	g Direct contact with legislators, their staffs, government officials, or a legislati	ive body?				
h i		ımılar means?				
j	•			1		
2a	.	on 501(c)(3)?				
b						
C	, , , , , , , , , , , , , , , , , , , ,			İ		
	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for	-				
Par	art III-A Complete if the organization is exempt under section 501(c)(6).	on 501(c)(4), section 5	01(c)(5), c	or sect	ion
	301(0)(0).				Ye	s No
1	Were substantially all (90% or more) dues received nondeductible by membe	rs?		Г	1	111
2					2	
3					3	
Pai	art III-B Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 a 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 inclease for which the section 527(f) tax was paid).	lude amounts of political	20			
a	•		2a			
b			2b 2c			
с 3		a saction 163(a) duas	3			
4						
•	does the organization agree to carryover to the reasonable estimate of nonde political expenditure next year?	•	4			
5	, , , , , , , , , , , , , , , , , , , ,		5			
P	Part IV Supplemental Information					
	Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line Part II-B, line 1 Also, complete this part for any additional information	e 5, Part II-A (affiliated grou	p lıst),	Part II	-A , line	2, and
	Return Reference Explanation					

201104410 3 (1 01111 3 3 0 01 3 3 0 12) 2 0 1 3	r age -		
Part IV Supplemental Information	on <i>(continued)</i>		
Return Reference	Explanation		

Schedule D (Form 990) 2013

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DLN: 93493309004344

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. ► Information about Schedule D (Form 990)

Open to Public

emal	Revenue Service and its instruct	tions is at <u>www.irs.gov/10111990</u> .		Inspection
	ne of the organization IONAL RECREATION AND PARK ASSOCIATION		Emp	loyer identification number
Α1.	IONAL RECREATION AND PARK ASSOCIATION		13-	5563001
a.	rt I Organizations Maintaining Donor Adv		unds	or Accounts. Complete if the
_	organization answered "Yes" to Form 990	· ·	<u> </u>	(h) Funda and ather accounts
	Total number at end of year	(a) Donor advised funds		(b) Funds and other accounts
	Aggregate contributions to (during year)			
	Aggregate grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor advisor	ors in writing that the assets held in do	nor advi	sed
	funds are the organization's property, subject to the or	5		☐ Yes ☐ No
	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the benef			
7	t II Conservation Easements. Complete if	the organization answered "Ves"	to Forn	
ш	Purpose(s) of conservation easements held by the org	•	10 1011	11 330, Fart IV, line 7.
	Preservation of land for public use (e.g., recreation		n histor	ically important land area
	Protection of natural habitat			d historic structure
	Preservation of open space			
	Complete lines 2a through 2d if the organization held a	a qualified conservation contribution in	the forn	n of a conservation
	easement on the last day of the tax year			
	T. b		<u> </u>	Held at the End of the Year
	Total number of conservation easements		2a	
	Total acreage restricted by conservation easements	oric structure included in (a)	2b	
	Number of conservation easements on a certified history	, ,	2c	
	Number of conservation easements included in (c) acq historic structure listed in the National Register	quired after 6/17/06, and not on a	2d	
	Number of conservation easements modified, transferr	red, released, extinguished, or terminat	ed by th	ne organization during
	the tax year ▶			
	Number of states where property subject to conservati	ion easement is located 🕨		
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?			violations, and Yes No
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ments o	luring the year
	A mount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easement	ts durin	g the year
	▶ \$			
	Does each conservation easement reported on line 2(of and section 170(h)(4)(B)(II)?	d) above satisfy the requirements of se	ction 17	70(h)(4)(B)(ı)
	In Part XIII, describe how the organization reports conbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemed	e footnote to the organization's financia		
1	Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures,	or Ot	her Similar Assets.
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote to	ets held for public exhibition, education	, or rese	arch in furtherance of public
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to thes	.16 (ASC 958), to report in its revenue	statem	ent and balance sheet
	(i) Revenues included in Form 990, Part VIII, line 1			▶ \$
	(ii) Assets included in Form 990, Part X			▶ \$
	If the organization received or held works of art, histor following amounts required to be reported under SFAS			
	Revenues included in Form 990, Part VIII, line 1			► \$
	Assets included in Form 990, Part X			▶ \$

Part	IIII Organizations Maintaining Co	llections of Art,	Histo	rical Tr	reasu	res, or O	<u>the</u>	<u> Similar As</u>	sets (c	continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	s, chec	k any of t	the foll	owing that a	re a	significant use	of its	
а	Public exhibition		d 「	Loan	orexc	hange progr	ams			
b	Scholarly research		е Г	– Othei	r					
С	Preservation for future generations									
4	Provide a description of the organization's c Part XIII	ollections and explair	n how th	ney furthe	er the o	organızatıon	's ex	empt purpose II	n	
5	During the year, did the organization solicit								_	_
Do-	assets to be sold to raise funds rather than	<u>`</u>						<u>.</u>	Yes	No
Раг	Escrow and Custodial Arrang Part IV, line 9, or reported an ar					i answered	u Y	es to Form 9	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					or other ass	ets r		_ _{Yes}	┌ No
b	If "Yes," explain the arrangement in Part XI $$	II and complete the f	ollowing	g table		_				
								Am	ount	
С	Beginning balance					-	1c			
d	Additions during the year						1d			
e	Distributions during the year					-	1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21?					ſ	_ Yes	Г No
_ь	If "Yes," explain the arrangement in Part XI									<u>'</u>
Pai	t V Endowment Funds. Complete						_		/->\Faur	
1a	Beginning of year balance	(a)Current year 1,150,823	(b)Prioi	1,094,720	в (с) г	1,148,929		hree years back 1,088,312	(e)rour y	years back 1,079,002
b	Contributions	200								
c	Net investment earnings, gains, and losses									
a		121,875		99,103		-10,400		108,982		57,611
d e	Grants or scholarships Other expenditures for facilities									
-	and programs	34,000		43,000		43,809		48,365		48,301
f	Administrative expenses									
g	End of year balance	1,238,898		1,150,823		1,094,720		1,148,929		1,088,312
2	Provide the estimated percentage of the cur	rent year end balance	e (lıne 1	g, colum	n (a)) l	held as				
а	Board designated or quasi-endowment ►									
b	Permanent endowment ► 45 600 %									
c	Temporarily restricted endowment ► 54 The percentages in lines 2a, 2b, and 2c sho	400 % uld equal 100%								
За	Are there endowment funds not in the posse	ssion of the organizat	tion tha	t are held	d and a	ıdmınıstered	for	the		
	organization by							<u> </u>	Yes	+
	(i) unrelated organizations						٠	3a(No No
b	(ii) related organizations		on Sch	• • edule R?			٠. ٠	3b		1
_							•			
4	Describe in Part XIII the intended uses of the	ne organization's end	owment	: runas						
	Describe in Part XIII the intended uses of the Land, Buildings, and Equipment	ent. Complete if th			n ansv	vered 'Yes	' to	Form 990, Pa	rt IV, l	ine
	Describe in Part XIII the intended uses of t	ent. Complete if th	ne orga		other	vered 'Yes (b)Cost or or basis (other	ther	Form 990, Pa (c) Accumulated depreciation		ine book value
Par	Describe in Part XIII the intended uses of the Land, Buildings, and Equipment 11a. See Form 990, Part X, line	ent. Complete if th	ne orga	anızatıoı (a) Cost or	other	(b)Cost or o	ther	(c) Accumulated		
Par	Describe in Part XIII the intended uses of the Land, Buildings, and Equipmed 11a. See Form 990, Part X, line Description of property	ent. Complete if th	ne orga	anızatıoı (a) Cost or	other	(b)Cost or o	ther er)	(c) Accumulated	(d) B	
Par 1a L	Describe in Part XIII the intended uses of the triangle of	ent. Complete if th	ne orga	anızatıoı (a) Cost or	other	(b)Cost or o basis (othe	ther er)	(c) Accumulated depreciation	(d) B	Book value
Par 1a l b E	Describe in Part XIII the intended uses of the triangle of	ent. Complete if th	ne orga	anızatıoı (a) Cost or	other	(b)Cost or o basis (othe	ther er) ,599	(c) Accumulated depreciation	(d) B	Book value
Par la l b E c l d E e (Describe in Part XIII the intended uses of the two states of two states	ent. Complete if the state of t	ne orga	anizatioi (a) Cost or asis (inves	r other itment)	(b)Cost or or basis (other 4,471	ther er) ,599	(c) Accumulated depreciation	(d) B	2,702,219

Part VII Investments—Other Securities. Com	plete if the organization	answered 'Yes' to Form 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method 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)		a annual of lives to Forms COO. Port IV. line 11.
Part VIII Investments—Program Related. Con See Form 990, Part X, line 13.	mpiete ir the organizatio	n answered Yes' to Form 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (h) must equal Form 990. Part X. col (B) line 13.)		
Total (column (2) mast equal rem 330, rately col (2) mile 13)		J, Part IV, line 11d See Form 990, Part X, line 15
(a) Descrip		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15		
Part X Other Liabilities. Complete if the organ Form 990, Part X, line 25.	nization answered 'Yes' t	o Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
ACCRUED PENSION LIABILITIES	728,720	
DEFERRED COMPENSATION	140,930	
Total (Column (h) must equal Form 999 Part V col (P) log 35 \	0.00 0.50	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	869,650	

PART XI, LINE 4B - OTHER

PART XII, LINE 2D - OTHER

ADJUSTMENTS

ADJUSTMENTS

Par		levenue per Audited Financial Statements With Revenue p wered 'Yes' to Form 990, Part IV, line 12a.	oer R	eturn Complete if
1		er support per audited financial statements	1	14,014,350
2	Amounts included on line 1 bu	ut not on Form 990, Part VIII, line 12		
а	Net unrealized gains on invest	tments 2a 462,470		
b	Donated services and use of f	acılıtıes 2b	1	
c	Recoveries of prior year grant	s	1	
d	Other (Describe in Part XIII)			
e	Add lines 2a through 2d .	 	2e	462,470
3	Subtract line ${f 2e}$ from line ${f 1}$.		3	13,551,880
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1		
а	Investment expenses not incl	luded on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)	4b -54,943		
C	Add lines 4a and 4b	 	4c	-54,943
5		d 4c. (This must equal Form 990, Part I, line 12)	5	13,496,937
Par		xpenses per Audited Financial Statements With Expenses swered 'Yes' to Form 990, Part IV, line 12a.	s per	Return. Complete
1		r audited financial statements	1	13,987,306
2		it not on Form 990, Part IX, line 25		, ,
а	Donated services and use of fa	acılıtıes		
ь	Prior year adjustments	2b	1	
С			1	
d	Other (Describe in Part XIII)		1	
e	Add lines 2a through 2d		2e	869,153
3	Subtract line ${f 2e}$ from line ${f 1}$.		3	13,118,153
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:		
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	0
5	Total expenses Add lines 3 a	nd 4c. (This must equal Form 990, Part I, line 18)	5	13,118,153
Par	t XIII Supplemental Inf	formation		
Part		Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to		de any additional
	Return Reference	Explanation		
PART	V, LINE 4	ENDOWMENT FUNDS ARE TO BE SPENT IN ACCORDANCE WITH DO RESTRICTIONS THE PERMANENTLY RESTRICTED PORTIONS ARE PERPETUITY AND THE REVENUE OF THOSE FUNDS ARE TO BE SPETHE TERMS OF THE DONOR THE TEMPORARILY RESTICTED AMOUTHE ENDOWMENT AND KEPT RESTRICTED UNTIL SUCH TIME AS THE	TO BE NT IN NTS A	MAINTAINED IN ACCORDANCE WITH ARE REVENUE FROM
PART	X, LINE 2	THE ORGANIZATION BELIEVES THAT IT HAS APPROPRIATE SUPPORITIONS TAKEN, AND THEREFORE, DOES NOT HAVE ANY UNCE THAT ARE MATERIAL TO THE CONSOLIDATED FINANCIAL STATEM THE 2010 THROUGH 2013 TAX YEARS ARE OPEN FOR EXAMINATION	RTAIN 1ENTS	N TAX POSITIONS S AT A MINIMUM,

AUTHORITIES

COST OF GOODS SOLD -54,943

NET ASSET ADJUSTMENT 1,710

COST OF GOODS SOLD 54,943 PENSION PLAN LIABILITY ADJUSTMENT 812,500 OTHER

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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As Filed Data -

DLN: 93493309004344

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

	e of the organization IONAL RECREATION AND PARK	(ASSOCIATIO	N		Employer ident	ification number
101	TO NAL RECREATION AND LARI	(4550014110			13-5563001	
Pa	General Information "Yes" to Form 990, Pa			ne United States. C	omplete if the organiz	ation answered
1	For grantmakers. Does the o	_			-	d
	other assistance, the grantee	es' eligibility fo	r the grants o	r assistance, and the s	selection criteria used	
	to award the grants or assist	ance?				│ Yes │ No
2	For grantmakers. Describe in assistance outside the United		ganızatıon's p	rocedures for monitori	ng the use of its grant	s and other
3	Activites per Region (The follow	ving Part I, line 3	table can be d	uplicated if additional spa	ace is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	NORTH AMERICA	0	1	PROGRAM SERVICES	AUDIO VISUAL EXPENSES	255,915
(2))					
(3)						
(4))					
(5))					
За	Sub-total	0	1			255,915
b	Total from continuation sheets to Part I	0	0			C
•	Totals (add lines 3a and 3b)	0	1			255,915

			ived more than \$5,0					
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
			ted above that are re or counsel has pro					
3 Enter total nu	mber of other or	ganızatıons or en	tities					

Schedule F (Form 990) 2013

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be	duplicated if addit	ional space is ne	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
	1			l .			

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	V	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Г	Yes	V	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	<u>ح</u> ا	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	V	. No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	দ	. No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	V	. No

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 Page **5**

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	THE ASSOCIATION'S PARTNERSHIP AND BUSINESS DEVELOPMENT OFFICE EXERCISES REGULAR REVIEW OF GRANTEE PROGRESS ON A MID-YEAR, ANNUAL, AND END-OF-GRANT BASIS TO ENSURE GRANTEE COMPLIANC E WITH GRANT REQUIREMENTS AND TO PROVIDE ASSESSMENT OF OBJECTIVES, PROGRESS, AND FINANCIAL STEWARDSHIP NO FOREIGN GRANTS WERE GIVEN DURING THE FISCAL YEAR ENDED JUNE 30, 2014

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

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

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

OMB No 1545-0047

DLN: 93493309004344

Open to Public Inspection

Employer identification number

NATIONAL RECREATION AND PAR	V ASSOCIATION						
NATIONAL RECREATION AND PAR	K A 3 3 O CTATION					13-5563001	
Part I General Informatio	n on Grants and	Assistance					
 Does the organization maintain the selection criteria used to aw Describe in Part IV the organization 	vard the grants or ass	sistance?			the grants or assist	ance, and	F Yes □
Part II Grants and Other A Form 990, Part IV, lin							es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
2 Enter total number of section 5)1(c)(3) and governm	nent organizations lis	ted in the line 1 table .			•	89

Enter total number of other organizations listed in the line 1 table

	(1 · · · · · ·) = · = ·
t III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) 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 Inform	nation. Provide the inf	ormation required in P	art I, line 2, Part III, co	lumn (b), and any other a	dditional information.		
Return Reference Explanation							

Part IV Supplemental I		formation. Provide the information required in Part 1, line 2, Part 111, column (b), and any other additional information.						
Return Refere	nce	Explanation						
· · · · · · · · · · · · · · · · · ·		THE ASSOCIATION'S PARTNERSHIP AND BUSINESS DEVELOPMENT OFFICE EXERCISES REGULAR REVIEW OF GRANTEE PROGRESS ON A MID-YEAR, ANNUAL, AND END-OF-GRANT BASIS TO ENSURE GRANTEE COMPLIANCE WITH GRANT REQUIREMENTS AND TO PROVIDE ASSESSMENT OF OBJECTIVES, PROGRESS, AND FINANCIAL STEWARDSHIP						

Additional Data

Software ID:

Software Version:

EIN: 13-5563001

Name: NATIONAL RECREATION AND PARK ASSOCIATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WHEELING PARK COMISSION 1801 NATIONAL RD WHEELING, WV 26003	55-6000663		9,615				GRANT PROMOTIONS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF BLOOMINGTON PARKS & REC IN 401 N MORTON STREET BLOOMINGTON,IN 47402	35-6000954		19,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF COLORADO SPRINGS 1401 RECREATION WAY COLORADO SPRINGS,CO 80905	84-6000573		25,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF DES MOINES PARKS REC AND SENIOR SE 1000 S 220TH ST DES MOINES,WA 98198	91-6016496		25,000				GRANT PROMOTIONS		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF EVANSTON PARKS REC & COMMUNITY SVS 2100 RIDGE EVANSTON,IL 60201	36-6005870		20,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF FORT WORTH 4200 SOUTH FREEWAY FORT WORTH,TX 76115	75-6000528		25,000				GRANT PROMOTIONS		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF FRESNO PARKS AFTER SCHOOL RECREATI 848 M STREET FRESNO,CA 93721	94-0348220		25,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF GARY DEPARTMENT OF PUBLIC PARKS 839 BROADWAY GARY,IN 46402	35-6001040		25,000				GRANT PROMOTIONS		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CITY OF HARTFORD RECREATION DIVISION 550 MAIN STREET HARTFORD,CT 06103	06-6001870		25,000				GRANT PROMOTIONS			

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF KNOXVILLE PARKS AND RECREATION 400 MAIN STREET KNOXVILLE,TN 37902	62-6000326		20,100				GRANT PROMOTIONS		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CITY OF LONGVIEW RECREATION 2920 DOUGLAS STREET LONGVIEW,CA 98632	91-6001367		15,000				GRANT PROMOTIONS			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CITY OF LOS ANGELES DEPARTMENT OF PARKS AND 221 N FIGUEROA ST LOS ANGELES,CA 90012	95-6000735		20,000				GRANT PROMOTIONS			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF LYNWOOD 11301 BULLIS RD LYNWOOD,CA 90262	95-6000741		15,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF MEMPHIS DIVISION OF PARKS AND NEIGH 2599 AVERY AVENUE MEMPHIS,TN 38112	62-6000361		25,000				GRANT PROMOTIONS		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF OAKLAND OFFICE OF PARKS & RECREATION 250 FRANK OGAWA PLAZA OAKLAND,CA 94612	94-6000384		20,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF PORTSMOUTH PARKS RECREATION AND LE 801 CRAWFORD STREET PRTSMOUTH, VA 23704	54-6001512		19,000				GRANT PROMOTIONS		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CITY OF SAN DIEGO PARK AND RECREATION DEPART 202 C STREET SAN DIEGO,VA 92101	95-6000776		25,000				GRANT PROMOTIONS			

<u> Form 990,Schedule I, Pa</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF SHREVPORT 505 TRAVIS STREET SHREVEPORT,LA 71101	72-6001326		25,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF SOUTH SAN FRANCISCO 33 ARROYO DRIVE SOUTH SAN FRANCISCO, CA 94080	94-6000435		25,000				GRANT PROMOTIONS		

Form 990,Schedule I, Pai	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CITY OF ST PETERSBURG PARKS & RECREATION 1400 19TH STREET NORTH ST PETERSBURG,FL 33713	59-6000424		25,000				GRANT PROMOTIONS			

Form 990, Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF SYRACUSE DEPARTMENT OF PARKS AND REC 412 SPENCER STREET SYRACUSE,NY 13204	15-6000416		6,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF TUCSONPARKS AND RECREATION 900 S RANDOLPH RD TUCSON,AZ 85716	86-6000266		19,000				GRANT PROMOTIONS		

Form 990,Schedule I, Pai	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CITY OF WHITEFISH PARKS AND RECREATION 510 RAILWAY STREET WHITEFISH,MT 59937	81-6001325		15,000				GRANT PROMOTIONS			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(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		
CITY OF WICHITA PARK & REC 455 N MAIN WICHITA,KS 67202	48-6000653		20,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
COLUMBUS REC & PARKS 1111 E BROAD ST COLUMBUS,OH 43205	31-6400223		25,000				GRANT PROMOTIONS	

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DISTRICT OF COLUMBIA DEPARTMENT OF PARKS AND 1250 U STREET WASHINGTON,DC 20009	53-6001131		25,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
DYERSBURG PARKS AND RECREATION 1010 RECREATION DRIVE DYERSBURG,TN 38024	62-6000282		25,000				GRANT PROMOTIONS	

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FORT WAYNE PARKS & REC DEPT 705 E STATE BLVD FORT WAYNE, IN 46805	35-6001029		20,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GREENSBORO PARKS & RECREATION 1001 FOURTH STREET GREENSBORO,NC 27405	56-6000230		20,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GWINNETT COUNTY GOVERNMENT 75 LANGLEY DRIVE LAWRENCEVILLE, GA 30046	58-6000835		20,000				GRANT PROMOTIONS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HANNAVILLE INDIAN COMMUNITY N14911 HANNAHVILLE B-1 RD WILSON,MI 49896	38-2008182		15,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HIALEAH'S DEPT OF PARKS AND RECREATION 5601 E 8 AVENUE HIALEAH,FL 33013	59-6000335		25,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HOUSTON PARKS AND RECREATION DEPARTMENT 2999 S WAYSIDE DR HOUSTON,TX 77023	74-6001164		25,000				GRANT PROMOTIONS		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
INDIANAPOLIS PARKS FOUNDATION 615 N ALABAMA STREET INDIANAPOLIS,IN 46204	35-1860468		25,000				GRANT PROMOTIONS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
INGLEWOOD PARKS RECREATION AND LIBRARY SERV ONE MANCHESTER BOULEVARD INGLEWOOD,CA 90301	95-6000728		25,000				GRANT PROMOTIONS		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
KANSAS CITY PARKS & RECREATION 4600 E 63RD ST KANSAS CITY, MO 64130	44-6000201		25,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
LINCOLN PARKS AND RECREATION DEPARTMENT 2740 A STREET LINCOLN,NE 68502	47-6006256		25,000				GRANT PROMOTIONS		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MADISON SCHOOL & COMMUNITY RECREATION 3802 REGENT ST MADISON,WI 53705	39-6003202		25,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MINNEAPOLIS PARK & RECREATION BOARD 2117 WEST RIVER RD MINNEAPOLIS, MN 55411	41-6005375		25,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MONTGOMERY COUNTY RECREATION DEPARTMENT 4010 RANDOLPH RD SILVER SPRING,MD 20902	52-6000980		25,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NEW YORK CITY DEPT OF PARKS & RECREATION 830 FIFTH AVENUE NEW YORK, NY 10065	13-6400434		25,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NORTH LITTLE ROCK PARKS AND RECREATION 2700 WILLOW STREET NORTH LITTLE ROCK,AR 72114	71-6009176		18,000				GRANT PROMOTIONS		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
OMAHA PARKS RECREATION & PUBLIC POLICY 1819 FARNHAM STREET OMAHA,NE 68183	47-6006304		25,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PINE BLUFF PARKS AND RECREATION 200 LAKE SARACEN DR PINE BLUFF,AR 71601	71-0421440		25,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PORT HURON CITY RECREATION DEPARTMENT 2829 ARMOUR STREET PORT HURON,MI 48060	38-6004727		20,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PORTLAND PARKS & RECREATION 1120 SW 5TH AVE PORTLAND,OR 97204	93-6002236		25,000				GRANT PROMOTIONS		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(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		
SENECA NATIONS OF INDIANS EDUCATION DEPARTME 12861 ROUTE 438 IRVING,NY 14081	16-0786768		20,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ST PAUL PARKS AND RECREATION 25 WEST FOURTH STREET SAINT PAUL, MN 55102	44-6005521		25,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
THE CITY OF LUBBOCK PARKS AND RECREATION PO BOX 2000 LUBBOCK,TX 79457	75-6000590		20,000				GRANT PROMOTIONS		

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
THE ORGANWISE GUYS 3838 SONG RIVER CIRCLE DULUTH, GA 30097	58-2020674		463,900				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
WEST ALLIS-WEST MILWAUKEE RECREATION AND COM 1205 S 70TH ST WEST ALLIS, WI 53214	39-1304215		25,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AUSTIN PARKS & REC DEPT 200 S LAMAR BLVD AUSTIN,TX 78704	74-6000085		10,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
BALTIMORE CITY RECREATION AND PARKS 3001 EAST DRIVE BALTIMORE,MD 21217	52-6000769		10,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF BOISE DEPARTMENT OF PARKS & RECREATI 1104 ROYAL BLVD BOSIE,ID 83706	82-6000165		10,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF COLUMBUS 1111 E BRAOD ST COLUMBUS,OH 43206	31-6400223		10,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF LAS CRUCES RECREATION 1501 E HADLEY LAS CRUCES,NM 88001	85-6000147		10,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF NORTH LAUDERDALE 701 SW 71ST AVENUE NORTH LAUDERDALE,FL 33068	59-1205666		10,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF NORTH MIAMI 12300 NE 8TH AVE NORTH MIAMI,FL 33161	59-6000390		10,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GENESEE CO PARKS & REC COMM 5045 STANLEY RD FLINT,MI 48506	38-6004849		10,000				GRANT PROMOTIONS		

Form 990,Schedule I, Pa	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GROW MILWAUKEE W153 N5186 PLAZA DR MENOMONEE FALLS, WI 53051	26-3214541		10,000				GRANT PROMOTIONS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HOUSTON PARKS AND RECREATION DEPARTMENT 2999 SOUTH WAYSIDE HOUSTON,TX 77023	74-6001164		10,000				GRANT PROMOTIONS		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
LOS ANGELES NEIBORHOOD LAND TRUST 315 W 9TH STREET LOS ANGELES,CA 90015	38-3687836		10,000				GRANT PROMOTIONS	

orm 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
RIVERBANK STATE PARK GARDEN NHT 625 BROADWAY NEW YORK,NY 12238	16-1019635		10,000				GRANT PROMOTIONS		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SEATTLE PARKS AND RECREATION 100 DEXTER AVENUE SEATTLE, WA 98109	91-6001275		10,000				GRANT PROMOTIONS		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
WASHINGTON YOUTH GARDEN 3501 NEW YORK AVE WASHINGTON,DC 20002	52-1257712		10,000				GRANT PROMOTIONS	

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(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		
WEST ATLANTA WATERSHED ALLIANCE INC PO BOX 50043 ATLANTA,GA 30302	20-0890449		10,000				GRANT PROMOTIONS		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
MECKLENBURG CO PARKS & REC 5841 BROOKSHIRE BLVD CHARLOTTE,NC 28216	56-6000319		6,000				GRANT PROMOTIONS		

orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ASPIRA INC OF NEW JERSEY 390 BROAD ST NEWARK,NJ 07104	22-1859916	501(C)(3)	47,500				GRANT PROMOTIONS		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY & COUNTY OF HONOLULU DEPT OF COMMUNITY 1505 DILLINGHAM BLVD HONOLULU,HI 96817	99-6001257		145,000				GRANT PROMOTIONS		

Form 990,Schedule I, Pa	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CITY OF ATLANTA OFFICE OF RECREATION 233 PEACHTREE STREET ATLANTA,GA 30303	58-6000511		47,500				GRANT PROMOTIONS			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(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		
CITY OF DETROIT TREASURER 18100 MEYERS RD DETROIT,MI 48235	38-6004606		145,000				GRANT PROMOTIONS		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(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	
CITY OF LOS ANGELES DEPT OF RECREATION AND P 221 N FIGUEROA ST LOS ANGELES,CA 90012	95-6000735		145,000				GRANT PROMOTIONS	

Form 990,Schedule I, Part II	<u>[, Grants and C</u>	<u> Other Assistance to</u>	<u>o Governments a</u>	nd Organizations	in the United Sta	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF SACRAMENTONEIGHBORHOOD SERVICES DIV 915 I STREET SACRAMENTO,CA 95814	94-6000410		47,500				GRANT PROMOTIONS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PARKS FOUNDATION OF MIAMI-DADE 275 NW 2ND ST MIAMI,FL 33128	20-0924393		47,500				GRANT PROMOTIONS			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
THE FUND FOR PARKS AND RECREATION IN BOSTON 1010 MASSACHUSETTS AVE BOSTON,MA 02118	04-2784811	501(C)(3)	145,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AUSTIN PARKS AND RECREATION DEPARTMENT 301 NATURE CENTER DRIVE AUSTIN,TX 78746	74-6000085		12,000				GRANT PROMOTIONS		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF STAMFORD 888 WASHINGTON BLVD STAMFORD,CT 06901	06-6001897		12,000				GRANT PROMOTIONS		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CITY OF IDAHO FALLS PARKS AND RECREATION DIV 520 MEMORIAL DRIVE IDAHO FALLS,ID 83405	82-6000208		15,000				GRANT PROMOTIONS			

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DENVER PARKS & RECREATION CO 201 WEST COLFAX AVE DENVER,CO 802025328	84-6000580		10,000				GRANT PROMOTIONS		

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
GRAND PRAIRIE ARTS & RECREATION 400 COLLEGE STREET GRAND PRAIRIE,TX 07505	75-6000543		10,000				GRANT PROMOTIONS		

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HAWAII COUNTY DEPARTMENT OF PARKS AND RECREA 101 PAUAHI STREET HILO,HI 96720	99-6000567		5,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ROBERTA LONGWORTH FAIRFAX COUNTY PARK FOUNDA 12055 GOVERNMENT CENTER PARKWAY FAIRFAX,VA 22035	54-0787833		10,000				GRANT PROMOTIONS			

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SAN LUIS OBISPO COUNTY PARKS 6800 LOPEZ DRIVE ARROYO GRANDE,CA 93420	95-6000939		10,000				GRANT PROMOTIONS			

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THREE RIVERS PARK DISTRICT 12615 COUNTY ROAD 9 PLYMOUTH,MN 55441	41-1489848		5,000				GRANT PROMOTIONS			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(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		
WINNEBAGO COUNTY FOREST PRESERVE DISTRICT 5500 NORTHROCK DR ROCKFORD,IL 61103	36-6006676		15,000				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PHILADELPHIA PARKS& RECREATION 1515 ARCH STREET PHILADELPHIA,PA 19102	23-6003047		25,000				GRANT PROMOTIONS			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CITY OF LOS ANGELES DEPT OF RECREATION AND P 221 N FIGUEROA ST LOS ANGELES,CA 90012	95-6000735		7,500				GRANT PROMOTIONS		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HOUSTON PARKS AND RECREATION DEPARTMENT 2999 SOUTH WAYSIDE HOUSTON,TX 77023	74-6001164		7,500				GRANT PROMOTIONS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HOUSTON PARKS AND RECREATION DEPARTMENT 2999 S WAYSIDE DR HOUSTON,TX 77023	74-6001164		66,600				GRANT PROMOTIONS			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
PHOENIX PARKS FOUNDATION 2700 N 15TH AVENUE PHOENIX,AZ 85007	95-3413342	501(C)(3)	66,600				GRANT PROMOTIONS		

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DLN: 93493309004344

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, line 23. ► Attach to Form 990. ► See separate instructions.

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

Open to Public Inspection

Name of the organization NATIONAL RECREATION AND PARK ASSOCIATION **Employer identification number**

13-5563001

Pai	t I Questions Regarding Compensation					
					Yes	No
1a	Check the appropriate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the org reimbursement or provision of all of the expenses des			1b		
2	Did the organization require substantiation prior to redirectors, trustees, officers, including the CEO/Execu			2		
				H-		
3	Indicate which, if any, of the following the filing organ organization's CEO/Executive Director Check all the used by a related organization to establish compensation	at appl	y Do not check any boxes for methods			
	Compensation committee	<u>~</u>	Written employment contract			
	☐ Independent compensation consultant	~	Compensation survey or study			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, P or a related organization	art VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control p	aymen	t?	4a		No
b	Participate in, or receive payment from, a supplemen	tal non	qualified retirement plan?	4b		Νo
C	Participate in, or receive payment from, an equity-ba	sed co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pro	vide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mus	t comp	olete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, compensation contingent on the revenues of					
a	The organization?			5a		Νo
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, compensation contingent on the net earnings of	lıne 1a	, did the organization pay or accrue any			
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, payments not described in lines 5 and 6? If "Yes," de			7		No
8	Were any amounts reported in Form 990, Part VII, pa	aid or a	ccured pursuant to a contract that was			
	subject to the initial contract exception described in					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the section 53 $4958\text{-}6(c)\text{?}$	rebutt	able presumption procedure described in Regulations	9		

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
	•	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)BARBARA TULIPANE CAE PRESIDENT & CEO	(i) (ii)	284,484 0	30,357 0	17,500 0	13,800	20,281 0	366,422 0	0
(2)MICHAEL LAUREN YOST VP OPERATIONS	(i) (ii)	135,539 0	6,000 0	0	8,118 0	20,797 0	170,454 0	0 0

Schedule J (Form 990) 2013

Part III Supplemental Information

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

Return Reference Explanation

Schedule J (Form 990) 2013

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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.

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

2013
Open to Public Inspection

OMB No 1545-0047

Name of the organization
NATIONAL RECREATION AND PARK ASSOCIATION

Employer identification number

13-5563001

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	THE NATIONAL ASSOCIATION SHALL BE GOVERNED BY A BOARD OF DIRECTORS CONSISTING OF A NUMBER OF MEMBERS BETWEEN THIRTEEN (13) AND NINETEEN (19), AS SET BY THE BOARD OF DIRECTORS FOR THE COMING YEAR THE BOARD OF DIRECTORS MUST BE COMPRISED OF AT LEAST 50 PERCENT CITIZEN MEMBERS THE CHAIR OF THE BOARD OF DIRECTORS HAS THE AUTHORITY TO APPOINT TWO (2) MEMBERS OF THE BOARD OF DIRECTORS, WHOM ARE INCLUDED WITHIN THE RANGE DETERMINED ABOVE THE REMAINDER OF THE BOARD OF DIRECTORS SHALL BE COMPRISED OF AT-LARGE MEMBERS ELECTED BY A MAJORITY OF THE BOARD OF DIRECTORS

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION HAS MEMBERS THAT ARE EITHER AGENCY, CITIZEN OR PROFESSIONAL THE MEMBERS HAVE NO RIGHTS TO SHARE IN THE PROFITS NOR DO THEY HAVE ANY ELECTORAL RIGHTS

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	A DRAFT OF THE FORM 990 IS REVIEWED, IN DETAIL, BY THE BOARD OF DIRECTORS AND THE CHIEF FINANCIAL OFFICER PRIOR TO FILING, A FINAL VERSION OF THE FORM 990 IS PROVIDED TO ALL MEMBERS OF THE BOARD

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	BOARD MEMBERS ARE ASKED TO REVIEW AND SIGN THE CONFLICT OF INTEREST POLICY ANNUALLY THE CONFLICT OF INTEREST POLICY COVERS ALL DIRECTORS AND OFFICERS OF NRPA THE NRPA BOARD OF DIRECTORS DELEGATES THE AUTHORITY TO THE NRPA EXECUTIVE COMMITTEE TO MAKE DETERMINATIONS UNDER THIS POLICY AND TO ADMINISTER SANCTIONS, INCLUDING WARNING, REPRIMAND, CENSURE, AND EXPULSION THE EXECUTIVE COMMITTEE SHALL ADVISE THE BOARD OF DIRECTORS OF ANY ACTIONS TAKEN IN THE EVENT A MEMBER OF THE EXECUTIVE COMMITTEE IS CHARGED WITH A VIOLATION OF THIS POLICY, THAT MEMBER SHALL RECUSE HIM OR HERSELF FROM ANY EXECUTIVE COMMITTEE DELIBERATIONS ON THE MATTER

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	COMPENSATION FOR ALL NRPA STAFF PERSONS, WITH THE EXCEPTION OF THE CHIEF EXECUTIVE OFFICER, IS DETERMINED USING THE PROCESS OUTLINED IN THE COMPENSATION POLICY WHICH INCLUDES OUTSIDE COMPARATIVE DATA, INTERNAL EQUITY ANALYSIS AND RECOMMENDATIONS FROM HUMAN RESOURCES AND IS AT THE SOLE DISCRETION OF THE COE AS DICTATED IN THE NIPA BY LAWS AS "CHIEF OF STAFF" THE CHIEF EXECUTIVE OFFICER'S COMPENSATION, AS PER NRPA BY LAWS, IS AT THE DISCRETION OF THE CHAIR OF THE BOARD OF DIRECTORS (A NON-STAFF, ELECTED POSITION TO WHOM THE CEO REPORTS AND HAS NO CONFLICT OF INTEREST) AND INCLUDES THE FOLLOWING PROCEDURES IN DETERMINING THE INITIAL COMPENSATION 1 REVIEW AND COLLABORATION WITH THE EXECUTIVE COMMITTEE AND THE SEARCH COMMITTEE WHICH EXCLUDES PERSONS WITH A CONFLICT OF INTEREST, 2 USE OF DATA AS TO COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS PROVIDED BY HUMAN RESOURCES, 3 CONTEMPORANEOUS DOCUMENTATION AND RECORD KEEPING WITH RESPECT TO DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION MAINTAINED BY THE SEARCH COMMITTEE DURING THE PROCESS AND BY NRPA HUMAN RESOURCES AFTER THE PROCESS AND DETERMINATION IS COMPENSATION ADJUSTMENTS FOR A SITTING CHIEF EXECUTIVE OFFICER ARE SUBJECT TO PARAMETERS SET IN THE CEO'S INITIAL EMPLOYMENT CONTRACT (TYPICALLY A 3-YEAR CONTRACT), AND AS PER NRPA BY LAWS, IS ALSO AT THE DISCRETION OF THE CHAIR OF THE BOARD OF DIRECTORS (A NON-STAFF, ELECTED POSITION TO WHOM THE CEO REPORTS AND INCLUDES THE FOLLOWING PROCEDURES IN DETERMINING ANY ANNUAL COMPENSATION ADJUSTMENT 1 REVIEW AND COLLABORATION WITH THE EXECUTIVE COMMITTEE WHICH EXCLUDES PERSONS WITH A CONFLICT OF INTEREST, 2 USE OF DATA AS TO COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN COMPARABLE POSITIONS AND DICLUDES THE FOLLOWING PROCEDURES IN DETERMINING ANY ANNUAL COMPENSATION ADJUSTMENT 1 REVIEW AND COLLABORATION WITH THE EXECUTIVE COMMITTEE WHICH EXCLUDES PERSONS WITH A CONFLICT OF INTEREST, 2 USE OF DATA AS TO COMPARABLE COMPENSATION FOR SIMI

Return Reference	Explanation
· ·	THE ASSOCIATION BELIEVES ITS ORGANIZING DOCUMENTS, INCLUDING THE CONFLICT OF INTEREST POLICY ARE PROPRIETARY IN NATURE AND THEREFORE, THESE DOCUMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC THE FEDERAL FORMS 990 AND 1023 ARE MADE AVAILABLE UPON REQUEST THE ASSOCIATION ALSO PROVIDES SUMMARIZED FINANCIAL STATEMENTS IN ITS ANNUAL REPORT WHICH CAN BE DOWNLOADED FROM ITS WEBSITE.

Return Reference	Explanation
FORM 990, PART XI, LINE 9	PENSION PLAN LIABILITY ADJUSTMENT -812,500 ADJUSTMENT TO NET ASSETS

Return Reference	Explanation
FORM 990, PART VII, LINE 1A2	THE NPRA TERM FOR ITS BOARDMEMBERS RUNS FROM OCTOBER TO SEPTEMBER, CONSEQUENTLY THE BOARD LIST REPORT IN THIS RETURN IS MADE UP OF THE 2010-2011 AND 2011-2012 BOARDS

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2013

OMB No 1545-0047

Open to Public Inspection

Employer identification number

SCHEDULE R (Form 990)

NATIONAL RECREATION AND PARK ASSOCIATION

Related Organizations and Unrelated Partnerships

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

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

Department of the Treasury Internal Revenue Service

Name of the organization

					13-55630	01			
Part I Identification of Disregarded Entities Comp	ete if the organization a	answered "Yes" or	n Form 990, Pa	art IV	, line 33.				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	End-o	(e) f-year assets	D	(f) Irect controlling entity		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during	izations Complete ıf tl the tax year.	ne organization ai	nswered "Yes"	on Fo	orm 990, Pa	art IV,	line 34 because it	: had or	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code se	ection	(e) Public charity (if section 501	status (c)(3))	(f) Direct controlling entity	Section (13) co	(g) n 512(controlle ntity?
(1) NATIONAL RECREATION AND PARK FOUNDATION	SUPPORTING ORG OF NRPA	VA	501(C)(3) LINE 11A		LINE 11A, I			Yes	No No
22377 BELMONT RIDGE ROAD									
ASHBURN, VA 201484501 20-5202971									
									\perp
									<u> </u>
For Paperwork Reduction Act Notice, see the Instructions for Form 99	0.	Cat No 501	35Y				Schedule R (For	m 990) 2	2013

Part III	Identification of Related Org because it had one or more rela						ation ansv	vered "Ye	es" on	Form	990, Part	IV, lu	ne 34	ļ
	(a) Name, address, and EIN of related organization		(b) Primary activity			(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income				(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	box managin partner?		(k) Percentage ownership
						,			Yes	No		Yes	No	
												_		
													\square	
Part IV	Identification of Related Org line 34 because it had one or mo	ore related organız							wered	d "Yes				IV,
Na	(a) ame, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controllir entity	(e) Type of entit (C corp, S corp, or trust)		total Share	(g) e of end- -year ssets		(h) ercentage wnership	(i) Section 512 (b)(13) controlled entity?		No.
							1			-	ĺ	Yes	<u>*</u>	No
												ı		

Schedule R (Form 990) 2013

ı	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No			
1 Du	ring the tax year, did the orgranization engage in any of the following transactions with one or more related	ed 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		No			
d	_oans or loan guarantees to or for related organization(s)				1d		No			
e	_oans 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 E	xchange of assets with related organization(s)				1i		No			
j l	ease of facilities, equipment, or other assets to related organization(s)				1j		No			
k	_ease of facılıtıes, equipment, or other assets from related organization(s)				1k		No			
I F	erformance 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)										
n S	haring of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes				
0	Sharing of paid employees with related organization(s)				10		No			
р	Reimbursement paid to related organization(s) for expenses				1 p		No			
q	Reimbursement paid by related organization(s) for expenses				1 q	Yes				
r	Other transfer of cash or property to related organization(s)				1r		No			
s	Other transfer of cash or property from related organization(s)				1s		No			
2	f the answer to any of the above is "Yes," see the instructions for information on who must complete this (a)	(b)		(d)						
	Name of related organization	Transaction type (a-s)	(c) Amount involved	Method of determining am	ount ir	nvolved				

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

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

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

revenue) that was not a related organization. See instructions i													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations ⁷	_	(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
													_
			<u> </u>				l					<u> </u>	

Schedule R (Form 990) 2013

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2013