For Paperwork Reduction Act Notice, see the separate instructions.

Return of Organization Exempt From Income Tax

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

2019

DLN: 93493041009751 OMB No. 1545-0047

Open to Public

Form 99(
Department of th

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Interna		nue Service							Inspection
A F	or the	e 2019 c	alendar year, or tax year begi	nning 07-01-2019 , and end	ding 06-30)-2020			
		oplicable:	C Name of organization NATIONAL PARK TRUST INC				D Employ	er ident	ification number
		change	NATIONAL PARK TROST INC				52-169	1924	
	me cha tial reti	-	Doing business as						
		n/terminated							
☐ Am	nended	return		nail is not delivered to street address	s) Room/sui	te	E Telepho	ne numbe	:r
□Ар	plicatio	on pending	401 EAST JEFFERSON STREET NO				(301) 2	79-727	5
			City or town, state or province, cou ROCKVILLE, MD 20850	intry, and ZIP or foreign postal code					
			,				G Gross re	eceipts \$	2,894,170
			F Name and address of princip GRACE K LEE	al officer:		H(a) Is this	a group re	turn for	
			401 EAST JEFFERSON STREET I	NO 207			dinates?	+	□Yes ☑No
			ROCKVILLE, MD 20850			H(b) Are all include		tes	☐ Yes ☐No
I ⊤a:	x-exem	npt status:	☑ 501(c)(3) □ 501(c)() ◄	(insert no.) \Box 4947(a)(1) or	□ 527				e instructions)
J W	ebsite	e:▶ WW	/W.PARKTRUST.ORG			H(c) Group	exemption	numbe	r ▶
K Forr	n of or	ganization:	Corporation Trust Ass	ociation 🔲 Other 🟲		L Year of forma	tion: 1990	M State	e of legal domicile: DC
De	art I	Sumi	marv			<u> </u>			
Гс			scribe the organization's mission (or most significant activities:					
as			NG PARKS TODAY; CREATING PA		w.				
Š	-								
E									
Governance	2	Check thi	s box $\blacktriangleright \Box$ if the organization di	scontinued its operations or dis	sposed of m	ore than 25%	of its net a	assets.	
Ğ			of voting members of the governi					3	24
Activities &	4	Number o	of independent voting members o	f the governing body (Part VI, li	ine 1b) .			4	24
Ite	5	Total num	nber of individuals employed in c	alendar year 2019 (Part V, line 2	2a)			5	15
₹	6	Total num	nber of volunteers (estimate if ne	cessary)				6	900
¥	7a '	Total unre	elated business revenue from Pa	t VIII, column (C), line 12 .				7a	0
	b	Net unrel	ated business taxable income fro	m Form 990-T, line 39				7b	0
						Pric	or Year		Current Year
91	8	Contribut	ions and grants (Part VIII, line 1h)			2,622,	154	2,295,070
Ravenue	9	Program :	service revenue (Part VIII, line 2g)			3,	500	256,905
Ρşν	10	Investme	nt income (Part VIII, column (A),	lines 3, 4, and 7d)			20,	937	20,227
_	11	Other rev	enue (Part VIII, column (A), lines	5, 6d, 8c, 9c, 10c, and 11e)				264	16,897
			enue—add lines 8 through 11 (m	<u> </u>	line 12)		2,668,		2,589,099
	13	Grants ar	nd similar amounts paid (Part IX,	column (A), lines 1-3)	•		287,	007	154,738
	14	Benefits p	paid to or for members (Part IX, o	olumn (A), line 4)				0	С
&	15	Salaries,	other compensation, employee b	enefits (Part IX, column (A), line	es 5-10)		835,	083	925,666
ens	16a	Professio	nal fundraising fees (Part IX, colu	mn (A), line 11e)			10,	500	9,000
Expenses	l		aising expenses (Part IX, column (D),						
ш	17	Other exp	oenses (Part IX, column (A), lines	11a-11d, 11f-24e)	•		827,	648	886,394
	18	Total exp	enses. Add lines 13–17 (must eq	ual Part IX, column (A), line 25))		1,960,	238	1,975,798
-/8	19	Revenue	less expenses. Subtract line 18 f	rom line 12			708,		613,301
ĕ ĕ						Beginning	of Current \	/ear	End of Year
Net Assets or Fund Balances	20	Total asse	ets (Part X, line 16)				5,002,	528	5,768,066
AB			ilities (Part X, line 26)					261	200,502
ž.			s or fund balances. Subtract line				4,951,		5,567,564
	rt II	_	ature Block	211101111111111111111111111111111111111	-		1,551,	207	3,307,301
			erjury, I declare that I have exar	nined this return, including acco	mpanying	schedules and	statement	s, and to	o the best of my
	ledge nowle		f, it is true, correct, and complet	e. Declaration of preparer (other	r than offic	er) is based or	n all inform	ation of	which preparer has
ally K	HOWIE	uge.							
		*****	<u> </u>				1-02-04		
Sign		Signati	ure of officer			Date	9		
Here	•		K LEE EXECUTIVE DIRECTOR						
		 	r print name and title						
		Pi	rint/Type preparer's name	Preparer's signature		ate 021-02-04 Chec		PTIN P0083983	33
Paid		<u> </u>	irm's name. Dutilities a Account	TES II C		self-	employed		
-	pare	;ı	irm's name PHILLIPS & ASSOCIA	IES LLC		Firm	n's EIN ► 52	-2009588	1
Use	On	ly F	irm's address ▶ 15825 SHADY GROVE	ROAD SUITE 40		Phor	ne no. (301)	519-328	<u> </u>
			ROCKVILLE, MD 208	50					
May t	he IRS	S discuss	this return with the preparer sho	wn above? (see instructions)				✓	Yes 🗌 No

Cat. No. 11282Y

Form **990** (2019)

Form	990 (2019)					Page 2
Pa	rt III Statement	of Program Service	e Accomplis	hments		
	Check if Sch	edule O contains a respo	nse or note to	any line in this Part III		🗆
1		organization's mission:				
PRES	ERVING PARKS TODA	Y; CREATING PARK STE	WARDS FOR TO	DMORROW.		
2	Did the organization	undertake any significa	nt program ser	vices during the year v	which were not listed on	
	the prior Form 990 o	or 990-EZ?				☐ Yes ☑ No
	If "Yes," describe the	ese new services on Sch	edule O.			
3	Did the organization	cease conducting, or m	ake significant	changes in how it cond	lucts, any program	
	services?					🗌 Yes 🗹 No
	If "Yes," describe the	ese changes on Schedule	e O.			
4	Section 501(c)(3) ar	zation's program service nd 501(c)(4) organizatio nue, if any, for each prog	ns are required	I to report the amount	e largest program services, as meas of grants and allocations to others,	ured by expenses. the total
4a	(Code:) (Expenses \$	559,366	including grants of \$	45,289) (Revenue \$	245,600)
	See Additional Data					
4b	(Code:) (Expenses \$	884,381	including grants of \$	99,449) (Revenue \$	13,192)
	See Additional Data					
4c	(Code:) (Expenses \$	31,610	including grants of \$	10,000) (Revenue \$)
	See Additional Data					
4d	Other program serv	ices (Describe in Schedu	le O.)			
	(Expenses \$	inclu	ıding grants of	\$) (Revenue \$)
4e	Total program ser	vice expenses ►	1,475,3	357		
						Form 990 (2019)

17

18

19

20a

20b

21

Yes

Form **990** (2019)

Nο

Nο

Nο

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

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

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

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

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

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

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

18

19

orm	990 (2019)			Page 4
Par	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L</i> ,Part III	27		No
8	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐒	29	Yes	
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
2	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
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
5a	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		
6	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
7	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
8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
1	Enter the number reported in Pay 2 of Form 1006 Fater 0 if act applicable		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 11 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
·	(gambling) winnings to prize winners?	1c	Yes	

Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	15		
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?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over financial account in a foreign country (such as a bank account, securities account, or other financial account)?	, a 4a		No
D	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts we not tax deductible?	e 6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and serve provided to the payor?	ices 7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to figure 8282?	le 7 c		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
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Forn 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		ı
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	_		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	_		
	Enter the amount of reserves on hand	_ _		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or exce parachute payment(s) during the year?	15 		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . If "Yes," complete Form 4720, Schedule O.	16		No

Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.	,	onse to i	lines V
Sa	Check if Schedule O contains a response or note to any line in this Part VI	• •	• •	
36	ction A. Governing body and Management	I	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 24			
	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 24			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	2.)	_
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AL , AR , CA , DC , FL , GA , HI , IL , KS , NH , NJ , NY , NM , NC , OR , PA , RI , SC WI , MS			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A 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.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: ▶THE ORGANIZATION 401 EAST JEFFERSON STREET NO 207 ROCKVILLE, MD 20850 (301) 279-7275			

 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. Isist 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 organizations. List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable 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 \$100,000 of reportable compensation from the organizations. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) Name and title (B) Average hours per week (list any hours below dotted line) (B) Average hours per week (list any hours per week (list any hours below dotted line) (B) Average hours per week (list any hours per week (list any hours below dotted line) (C) Average hours per week (list any hours per week list any hours per week lis	Form 990 (2019)											Pag	ge 7
As Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear. ■ 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 organizations. ■ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 freportable compensation from the organization and any related organizations for the order in which to list the persons above. ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ (B) Name and title ■ (C) Position (do not check more than spendal properties of the organization of other organization of the organization o			Truste	es, I	Key	En	nploy	ees	, Highest Comp	ensated Employ	yees,		
La Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax rear. 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 furrent key employees, if no. See instructions for definition of "key employee." List all of the organization's furrent key employees, if any. See instructions for definition of "key employee." List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 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 organization and any related organization or any current officer, director, or trustee. (A) Name and title A Reportable compensation from the organization or any related organization or any new powers of the organization or any new powers or trustees or trustees that received, in the capacity as a former director, or trustee. (B) A Reportable compensation or trustee of the organization or trustee. (C) (B) A Reportable compensation or from the organization or end to the compensation organization organizat	Check if Schedule O contains a	response or no	te to an	y line	in t	his	Part VI	١.				. [
■ 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, more than \$10,000 of reportable compensation from the organization, more than \$10,000 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 for the order in which to list the persons above. □ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ (A) Name and title ■ (B) Average hours per week (list any hours for related organizations below dotted line) ■ (C) Reportable compensation from the organization from the organization of the organization has not officer and a director/trustee) ■ (D) Reportable compensation from the organization organization organization (W-2/1099-MISC) ■ (F) Estimated organization organizations (W-2/1099-MISC) ■ (F) Set instructions for the organization organization organization organization organization organization organization organizations (W-2/1099-MISC) ■ (F) Reportable compensation from the organization organization organization organization organization organizati	Section A. Officers, Directors, Tru	istees, Key E	mploy	ees,	an	d H	lighe	st C	Compensated En	nployees			
■ 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 freportable compensation 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. Sie instructions for the order in which to list the persons above. □ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ Check this box if neither the organization nor any related organization organization from the organization of related organizations below dotted line) ■ Check this box if neither the organization below dotted line) ■ Check this box if neither the organization or any related organization of from the organization of from the organization of the compensation from the organization and related organizations below dotted line) ■ Check this box if neither the organization or any related organi	year.		•						, ,		-	n's ta	Κ
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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 from the organization and any related organizations. ■ List all of the organization from the organization and any related organization, more than \$10,000 of reportable compensation from the organization, more than \$10,000 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 organizations. ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. ■ Check this box if neither the organization nor any related organization one box, unless person is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization one box, unless person is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization one box, unless person is both an officer and a director/trustee) ■ Check this box if neither the organization nor any related organization organization (W-2/1099-MISC) ■ Check this box if neither the organization nor any related organization organization nor any related organization organization organization (W-2/1099-MISC) ■ Check this box if neither the organization nor any related organization nor any related organization nor any related organization nor any neithe													
■ 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. See instructions for the order in which to list the persons above. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) Name and title (B) Average hours per week (list any hours below dotted line) (C) (D) (E) Reportable compensation from the organization (do not check more than one box, unless person is both an officer and a director/trustee) (W-2/1099-MISC) MISC) (F) Estimated amount of other compensation from the organization organization organization and related organizations.													
Average hours per week (list any hours for related organizations) below dotted line) Continue to the person of the order in which to list the persons above. Continue to the order in which to list the persons above.	of reportable compensation from the organiz	ation and any re	elated o	rgani	zatio	ons.			. ,	·	·		
(A) Name and title (B) Average hours per week (list any hours for related organizations below dotted line) (B) Average hours per week (list any hours for related organizations below dotted line) (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) (B) Average hours per week (list any hours for related organization (W-2/1099-MISC) (B) Reportable compensation from the organizations (W-2/1099-MISC) MISC) (F) Estimated amount of other compensation from the organization and related organizations organizations)	organization, more than \$10,000 of reportab	le compensatio	n from t								Э		
Name and title Average hours per week (list any hours for related organizations below dotted line) Name and title Average hours per week (list any hours for related organizations below dotted line) Position (do not check more than one box, unless person is both an officer and a director/trustee) Officer	Check this box if neither the organizatio	n nor any relate	d organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee.			
it st		Average hours per week (list any hours	than o is b	ne bo oth a direct	o no ox, u n of or/t	t che inles ficer	s pers	on	Reportable compensation from the organization	Reportable compensation from related organizations	Estir amount compe fror	nated of oth nsation the	n
See Additional Data Table		organizations below dotted	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		` '	rel	ated	
	See Additional Data Table												
													—
													—

Pai	It VII Section A. Officers, Direct	ors, Trustees	, Key F	<u>∠mp</u> /	oye	:es,	and l	High	iest Cor	mpens	atec	I Employees	(cont	tinued)	
	(A) Name and title	(B) Average hours per week (list any hours	than o	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			Repo compe froi organ	Reportable Report compensation from the organization organiz		(E) Reportable compensatio from related organization	n d s	Estim amount of comper from	ated of other sation the		
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2 M:	2/1099- (W-2/1099- MISC) MISC)			organizai relai organiz	ted	
See	Additional Data Table					\vdash					1				
					\vdash	\vdash					\dashv				
								\prod							
		1													
			<u> </u>		'	'	<u> </u>								
	Sub-Total						>								
	Total (add lines 1b and 1c)	•					<u> </u>			260,240			0		0
2	Total number of individuals (including of reportable compensation from the			e liste	ed a	bove	e) who) rece	eived mo	re than	\$10	0,000			
<u> </u>														Yes	No
3	Did the organization list any former of line 1a? <i>If "Yes," complete Schedule J</i>	,			•		oyee, c	-	-	mpensa	ited e	mployee on	3		No
4	For any individual listed on line 1a, is organization and related organizations individual	ns greater than \$		0? <i>If</i>								the	4		No
5	Did any person listed on line 1a receive services rendered to the organization?									tion or	indiv •	idual for	5		No
	ection B. Independent Contract				_									•	
1	Complete this table for your five higher from the organization. Report comper												mpen	sation 	
	Name ;	(A) and business addre	ess								Descri	(B) otion of services			c) nsation
				-											

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0

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		(2019)								Page 9
Part	VIII						line in this Deat VIII			
		Check if Sched	dule	O contains a	respo	nse or note to any	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
10	1:	a Federated campa	igns	· .	1a	21,373	1	revende		312 311
Grants		b Membership dues	s .	. [1b					
90 m		c Fundraising even	ts .	[1c					
fts, ir A		d Related organiza	tions	5	1d					
nila		e Government grants	(con	tributions)	1e	520,552				
Sin	1	All other contribution and similar amounts	ns, g	gifts, grants,		_				
uti her		above		L	1f	1,753,145				
돌돌	!	g Noncash contributio lines 1a - 1f:\$	ns in	icluded in	1g	382,387				
Contributions, Gifts, Grants and Other Similar Amounts		h Total. Add lines :	1a-1	f			2 205 070			
						Business Code	2,295,070			
	2a	LAND PROGRAM SVC	S			900099	245,600	245,600		
ж							7,505	7,505		
Program Service Revenue	b	PROGRAM FEES				900099	7,303	7,303		
⊕ 25	c	TICKET SALES				900099	3,800	3,800		
rvic										
8	d	I								
gran	e									
Ρ̈́		·								
	f	All other program	serv	ice revenue.						
		Total. Add lines 2				256,905	1			
		Investment income similar amounts)				nterest, and other •	14,622	2		14,622
	4	Income from invest	mer	nt of tax-exen	npt bo	ond proceeds				
	5	Royalties	_			•	374	4		374
				(i) Real		(ii) Personal	_			
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	С	Rental income								
		or (loss)	6 c							
	C	Net rental income	or	(i) Securit		(ii) Other				
	7a	Gross amount					_			
		from sales of assets other	7a	31	03,648					
		than inventory					_			
	b	Less: cost or other basis and	7b	2'	98,043					
		sales expenses					_			
		Gain or (loss)	7с		5,605			_		5.605
		Net gain or (loss) Gross income from fu				· · · •	5,605	7		5,605
ne		(not including \$		of						
Ver		contributions reported See Part IV, line 18			8a					
Other Revenue	Ŀ	Less: direct expen	ses		8b					
her	c	Net income or (los	s) fr	om fundraisii	ng eve	ents				
	9a	Gross income from	aam	ing activities.						
	_	See Part IV, line 19			9a					
		Less: direct expen			9b					
	•	Net income or (los	s) fr	rom gaming a	ctiviti	es >	1			
	10	aGross sales of inve								
		returns and allowa			10a	20,220				
		Less: cost of good			10 b	7,028		2 13,19		
	•	Net income or (los Miscellaneo			nvent	ory ► Business Code	13,192	13,19.		
	11	•aREFUNDS/REWAR				900099	3,331	1		3,331
			•							
	Ŀ	·								
	c				-					
	c	All other revenue	•							
	•	Total. Add lines 1	1a-:	11d		•	3,331	1		
	12	Total revenue. S	ee ir	nstructions .			2,589,099	9 270,09	7	0 23,932
							, , , , , , , , , , , , , , , , , , , ,			Form 990 (2019)

For	m 990 (2019)				Page 10
Р	art IX Statement of Functional Expenses				
	Section $501(c)(3)$ and $501(c)(4)$ organizations must cc	•	-		ımn (A).
	Check if Schedule O contains a response or note to an	y line in this Part IX			🗆
	not include amounts reported on lines 6b, 8b, 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 domestic organizations and domestic governments. See Part IV, line 21	154,738	154,738		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	260,240	125,026	108,961	26,253
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	532,475	375,427	118,962	38,086
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	20,544	6,793	10,770	2,981
9	Other employee benefits	47,737	34,576	9,597	3,564
10	Payroll taxes	64,670	41,271	18,395	5,004
	Fees for services (non-employees):				
a	a Management				
ı	Legal				
	Accounting	12,175	7,669	3,508	998
	Lobbying				
	Professional fundraising services. See Part IV, line 17	9,000			9,000
1	Investment management fees	410	258	118	34
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	81,002	64,658	6,586	9,758
12	Advertising and promotion	1,495	1,476	7	12
13	Office expenses	104,808	58,565	8,980	37,263
14	Information technology	26,563	23,750	1,415	1,398
15	Royalties				
16	Occupancy	73,546	64,050	4,799	4,697
17	Travel	32,894	28,757	2,980	1,157
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	24,524	16,008	2,361	6,155
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	38,109	38,109		
23	Insurance	18,433	11,161	5,143	2,129
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a BOOK VALUE OF PARK LAND	245,600	245,600		
	b TOOLKIT AND FIELD TRIPS	169,973	169,788	144	41
	c BAD DEBTS	35,000		35,000	
	d OTHER EXPENSES	21,862	7,677	2,339	11,846
	e All other expenses				
	Total functional expenses. Add lines 1 through 24e	1,975,798	1,475,357	340,065	160,376
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).				
	Check here Li ii following SOP 98-2 (ASC 958-720).				

Forn	า 990	(2019)					Page 11
Р	art X	Balance Sheet					
		Check if Schedule O contains a response or not	e to ar	ny line in this Part IX			🗆
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing				1	
	2	Savings and temporary cash investments .		[187,951	2	317,431
	3	Pledges and grants receivable, net	608,229	3	476,726		
	4	Accounts receivable, net			263,949	4	198,173
	5	Loans and other payables to any current or form key employee, creator or founder, substantial c entity or family member of any of these persons	tor, or 35% controlled		5		
	6	Loans and other receivables from other disquali section $4958(f)(1)$, and persons described in se			6		
S	7	Notes and loans receivable, net		[7	
ssets	8	Inventories for sale or use		[81,545	8	92,533
S	9	Prepaid expenses and deferred charges			46,252	9	380,403
_	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	1,618,515			
	ь	Less: accumulated depreciation	10b	38,109	1,465,100	10c	1,580,406
	11	Investments—publicly traded securities .		408,536	11	437,538	
	1	Townsteen the attended the Confidence of the Con		-			

As	9	Prepaid expenses and deferred charges			46,252	9	
		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	1,618,515			
	b	Less: accumulated depreciation	10b	38,109	1,465,100	10 c	1
	11	Investments—publicly traded securities .			408,536	11	
	12	Investments—other securities. See Part IV, line	11 .			12	
	13	Investments—program-related. See Part IV, line	11 .		230,366	13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			1,710,600	15	1
	16	Total assets. Add lines 1 through 15 (must equ	ual line	: 34)	5,002,528	16	5
	17	Accounts payable and accrued expenses			51,261	17	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tay ayamat hand liabilities				20	

or family member of any of these persons .

Secured mortgages and notes payable to unrelated third parties

Other liabilities (including federal income tax, payables to related third parties,

Unsecured notes and loans payable to unrelated third parties

23

24

25

	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11	230,366	13	553,656
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	1,710,600	15	1,731,200
	16 Total assets. Add lines 1 through 15 (must equal line 34)	5,002,528	16	5,768,066
	Accounts payable and accrued expenses	51,261	17	73,719
:	18 Grants payable		18	
:	19 Deferred revenue		19	
:	20 Tax-exempt bond liabilities		20	
: اي	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ilities	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity			

		Complete Part X of Schedule D			
	26	Total liabilities. Add lines 17 through 25	51,261	26	200,502
Balances		Organizations that follow FASB ASC 958, check here ▶ ☑ and complete lines 27, 28, 32, and 33.			
ıla	27	Net assets without donor restrictions	3,412,929	27	3,503,109
	28	Net assets with donor restrictions	1,538,338	28	2,064,455
Fund		Organizations that do not follow FASB ASC 958, check here ▶ □ and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building or equipment fund		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds		31	
_	32	Total net assets or fund balances	4,951,267	32	5,567,564
Net	33	Total liabilities and net assets/fund balances	5,002,528	33	5,768,066

22

23 24

25

126,783

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Form	990 (2019)				Page 12
Pa	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
_				_	
1	Total revenue (must equal Part VIII, column (A), line 12)	1			,589,099
2	Total expenses (must equal Part IX, column (A), line 25)	2		1	,975,798
3	Revenue less expenses. Subtract line 2 from line 1	3			613,301
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4	,951,267
5	Net unrealized gains (losses) on investments	5			2,996
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			0
	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		5	,567,564
Pa	tXII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990:				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.				
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 reviewed separate basis, consolidated basis, or both:	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:	basis,			
	☐ Separate basis ☐ Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Audit Act and OMB Circular A-133?	ngle	3a		No

3b

Form **990** (2019)

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Additional Data

Software ID: Software Version:

EIN: 52-1691924

Name: NATIONAL PARK TRUST INC

Form 990 (2019)

Form 990, Part III, Line 4a:

LAND AND PARKS PROGRAMS - SEE SCHEDULE O FOR ACCOMPLISHMENTS

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

Form 990, Part III, Line 4c: GRANT MANAGEMENT - NATIONAL PARK TRUST THROUGH ITS GRANT MANAGEMENT SERVICES, DESIGNS, IMPLEMENTS, AND EVALUATES ORIGINAL AND PARTNER PUBLIC-FACING GIVING PROGRAMS THAT FULLY ALIGN WITH PARK TRUST AND PARTNER BUSINESS GOALS AND OBJECTIVES. THROUGH TURN-KEY SERVICES, NATIONAL

PARK TRUST HELPS PARTNERS MINIMIZE ADMINISTRATIVE EXPENSES WHILE MAXIMIZING PROGRAM EFFICIENCY.

(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the compensation from related any hours and a director/trustee) organization organizations from the

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

	1 411, 10413	and a un eccor, trastee,						(11/ 2/1000	(14, 2/4,000	organization and	
	for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organizations	
WILLIAM BROWNELL ESQ CHAIRMAN	2.00	Х		х				0	0	0	
ANN GUALTIERI VICE CHAIR	2.00	Х		x				0	0	0	
STEPHEN SCHULER TREASURER	2.00	Х		х				0	0	0	
RAYMOND J SHERBILL SECRETARY	2.00	Х		х				0	0	0	

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CHARLES H KNAUSSESQ CO-CHAIR, DEVELOPMENT COMM

PATRICK CAMPBELL

MICHAEL CARPER

CHADWICK DAYTON

REGAN HERALD

HELLENE RUNTAGH

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CHAIR, YOUTH PROGRAMS COMM

TRUSTEE

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and Independent Contractors

(A) (E) (B) (C) (D) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer week (list from related from the compensation

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

and Independent Contractors

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CHAIR, COMMUNICATIONS COMMITTEE

TRUSTEE

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TRUSTEE

YASMIN BEST

JOHN ROLLINS JR

ROGER WRIGHT

SCOTT STONE

ELIZABETH ULMER

	any hours	and	a dir	ecto	r/tr	ustee))	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations	
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LEN KENNEDY TRUSTEE	2.00	Х						0	0	0	
KRUPA SHAH TRUSTEE	2.00	Х						0	0	0	

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RICHARD RING	2.00	×			0	
CHAIR, LAND AND PARK PERSE		^				·
KEVIN SETH	2.00					

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	3.00						

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

	ally llours	anu	a un	ecco	/1 / CI	ustee	,	Organización	Organizacions	110111 (116	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	1 ()	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
KATIE CLARK CO-CHAIR, DEVELOPMENT COMM	2.00	Х						0	0	0	
APARNA DAVE TRUSTEE	2.00	Х						0	0	0	
KIM HASSAN	2.00								0		

CO-CHAIR, DEVELOPMENT COMM						i
APARNA DAVE	2.00	x			0	
TRUSTEE		Λ.			Ŭ	
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TRUSTEE		Х			0	

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147,425

112,815

and Independent Contractors

TOM HEALY

MESHACH RHOADES

EXECUTIVE DIRECTOR

DIRECTOR OF FINANCE & ADMI

TRUSTEE

TRUSTEE

GRACE LEE

MIKE HOEHN

efil	e GR/	APHIC pri	nt - DO NOT PROCESS	As Filed Data -			DLN: 9	3493041009751			
SCI	-IFD	ULE A	- Dublic (Charity Statu	e and Dul	olic Supp	ort	OMB No. 1545-0047			
	m 99		Complete if the or	ganization is a sect 4947(a)(1) nonexe ▶ Attach to Form	ion 501(c)(3) e empt charitable 990 or Form 99	organization or trust. 00-EZ.	· a section	2019			
		the Treasury	► Go to <u>www.irs</u>	<u>.gov/Form990</u> for i	nstructions and	I the latest info	ormation.	Open to Public Inspection			
Nam	e of th	ne organiza					Employer identific				
NATIC	INAL PA	ARK TRUST INC					52-1691924				
	rt I		for Public Charity Statu				See instructions.				
_	rganiz		a private foundation because	•	•						
1		•	onvention of churches, or as								
2			scribed in section 170(b)(`	, ,					
3		A hospital o	or a cooperative hospital serv	vice organization descr	ribed in section	170(b)(1)(A)(iii).				
4		A medical r name, city,	esearch organization operate and state:	ed in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's			
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170 (b)(1)(A)(iv). (Complete Part II.)										
6			tate, or local government or	-							
7	✓		ation that normally receives a (O(b)(1)(A)(vi). (Complete		s support from a	governmental u	nit or from the gener	al public described in			
8		A communi	ty trust described in section	170(b)(1)(A)(vi).	(Complete Part I	I.)					
9			ural research organization de ant college of agriculture. Se					ege or university or a			
10		from activit investment	ation that normally receives: lies related to its exempt fun income and unrelated busin See section 509(a)(2). (Co	ctions—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	pport from gross			
11		An organiza	ation organized and operated	exclusively to test fo	r public safety. S	ee section 509	(a)(4).				
12		more public	ation organized and operated ly supported organizations o through 12d that describes	lescribed in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a				
a		Type I. A so	supporting organization opera n(s) the power to regularly a Part IV, Sections A and B.	ated, supervised, or co	ontrolled by its s	upported organiz	zation(s), typically by				
b		Type II. A manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A a	ervised or controlled i ation vested in the sar							
c		Type III f	unctionally integrated. A sorganization(s) (see instruction	supporting organizatio				ted with, its			
d		functionally	on-functionally integrated integrated. The organization (a). You must complete Par	n generally must satis	fy a distribution	requirement and					
e			box if the organization receiver or Type III non-functionally			RS that it is a Ty	pe I, Type II, Type II	I functionally			
f	Enter	the number	of supported organizations				<u> </u>				
g			ing information about the su	······································	т'			ı			
	(i) N	Name of supported of the second of the secon		(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
					Yes	No					
			<u> </u>								
_											
Tota		l. P. '	tion Act Notice, see the Ir		Cat. No. 11285		Schedule A (Form 9	000 57) 5515			

(or fiscal year beginning in) ▶ 2,495,452 1,591,697 1,385,728 2,622,154 2,656,830 10,751,861 Amounts from line 4. . Gross income from interest, dividends, payments received on 11,623 10,975 12,770 13,298 14,622 63,288 securities loans, rents, royalties and income from similar sources. . . Net income from unrelated business activities, whether or not the business is regularly carried on. . 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . 11 **Total support.** Add lines 7 through 10,815,149 12 191,632 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,

14

15

Schedule A (Form 990 or 990-EZ) 2019

88.640 %

84.740 %

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))

16a 33 1/3% support test-2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box h 33 1/3% support test-2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

17a 10%-facts-and-circumstances test-2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

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

h 10%-facts-and-circumstances test-2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

15 Public support percentage for 2018 Schedule A, Part II, line 14

Р	Part III Support Schedule for Organizations Described in Section 509(a)(2)									
	(Complete only if you cl						er Part II. If			
S	the organization fails to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)					
30	Calendar year	() 2015	(1) 2016	() 2247	(1) 2010	() 2010	(O.T.)			
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not include any "unusual grants.").									
2	Gross receipts from admissions,									
	merchandise sold or services									
	performed, or facilities furnished in any activity that is related to the									
	organization's tax-exempt purpose									
3	Gross receipts from activities that are									
	not an unrelated trade or business									
4	under section 513 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									
7a	Amounts included on lines 1, 2, and									
L	3 received from disqualified persons Amounts included on lines 2 and 3									
D	received from other than disqualified									
	persons that exceed the greater of									
	\$5,000 or 1% of the amount on line 13 for the year.									
c	Add lines 7a and 7b									
8	Public support. (Subtract line 7c									
	from line 6.)									
Se	ection B. Total Support		1				Г			
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total			
9	Amounts from line 6									
10a	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties and income from similar sources.									
b	Unrelated business taxable income									
	(less section 511 taxes) from									
	businesses acquired after June 30, 1975.									
С	Add lines 10a and 10b.									
11	Net income from unrelated business									
	activities not included in line 10b,									
	whether or not the business is regularly carried on.									
12	Other income. Do not include gain or									
	loss from the sale of capital assets									
12	(Explain in Part VI.) Total support. (Add lines 9, 10c,									
13	11, and 12.).									
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>			
	check this box and stop here						▶ ⊔			
	ection C. Computation of Public S			! (6))		1 1				
15	Public support percentage for 2019 (lin		•			15				
16	Public support percentage from 2018 S	-	<u> </u>			16				
	ection D. Computation of Investr Investment income percentage for 201			line 13 column (f	:))	17				
17 10	Investment income percentage for 201	-		-		17				
18 10-	331/3% support tests—2019. If the		•			18 33 1/3% and lin	e 17 is not			
	more than 33 1/3%, check this box and s									
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the									
ט	not more than 33 1/3%, check this box	-			•		_			
20	Private foundation. If the organization	-	-							
	ritvate foundation. If the organization	ni ulu not check a	a DOX ON UNE 14, I	.a, or iad, check	, unis pox and see I	HSGRUCHONS	. 📂 📖			

Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

10a

answer line 10b below.

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). 2

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination. 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. 3с

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

4b supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by 5a amendment to the organizing document).

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5c Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6

supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) . 7

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

8 complete Part I of Schedule L (Form 990 or 990-EZ). 8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI. 9a

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Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
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than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

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

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

9b

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Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in
which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
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Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

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

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

ciie	ddie A (Form 990 of 990-22) 2019			age :
Pa	Tt IV Supporting Organizations (continued)			
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c		
	ection B. Type I Supporting Organizations			
	solon Britype Leapporting enganizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
	Did the supprise time and the bounds of any supprised arrangement of the theory of a constant arrangement of the	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting			
	organization.	2		
S	ection C. Type II Supporting Organizations			
	second Type 11 supporting organizations		Yes	No
L	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Se	ection D. All Type III Supporting Organizations			
			Yes	No
L	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing			
	documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
,	Division of the valationahin described in (2) did the conscination/a conscitated conscitations have a significant value in the	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
Se	ection E. Type III Functionally-Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions):		
ā	The organization satisfied the Activities Test. Complete line 2 below.			
ŀ	The organization is the parent of each of its supported organizations. Complete line 3 below.			
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	1	Yes	No
á	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
ŀ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	20		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
i	Did the organizations? Provide details in Part VI. Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.	3h		

	ule A (Form 990 or 990-EZ) 2019			Pag
ar	Type III Non-Functionally Integrated 509(a)(3) Supporting O)rgani:	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter $1-1/2\%$ of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
5	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
3	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-in instructions)	ntegrate	ed Type III supporting o	rganization (see

2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions	
7	Total annual distributions. Add lines 1 through 6.	

5	Qualified set-aside amounts (prior IRS approval require		
6	Other distributions (describe in Part VI). See instruction		
7	Total annual distributions. Add lines 1 through 6.		
8	Distributions to attentive supported organizations to whe details in Part VI). See instructions	sive (provide	
9	Distributable amount for 2019 from Section C, line 6		
10	Line 8 amount divided by Line 9 amount		
	Section E - Distribution Allocations (see instructions)	(iii) Distributable	

other distributions (describe in Fart V2). See instructions					
7 Total annual distributions. Add lines 1 through 6.					
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions					
9 Distributable amount for 2019 from Section C, line 6					
10 Line 8 amount divided by Line 9 amount					
(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019			
	Underdistributions	Distributable			

Schedule A (Form 990 or 990-EZ) (2019)

3 Excess distributions carryover, if any, to 2019:

g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see

a Applied to underdistributions of prior years b Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2020. Add lines

a Excess from 2015. **b** Excess from 2016. c Excess from 2017. **d** Excess from 2018. e Excess from 2019.

j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2019 from Section D, line 7:

a From 2014. **b** From 2015. c From 2016. **d** From 2017. e From 2018. f Total of lines 3a through e

instructions)

See instructions.

3j and 4c. 8 Breakdown of line 7:

\$

Additional Data

Software ID: Software Version:

EIN: 52-1691924

Name: NATIONAL PARK TRUST INC

Schedule A (Form 990 or 990-EZ) 2019

Part VI

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

instructions).

Facts And Circumstances Test

SCHEDULE D

DLN: 93493041009751

Cat. No. 52283D Schedule D (Form 990) 2019

OMB No. 1545-0047

Supplemental Financial Statements

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

Attach to Form 990.

Open to Public

2019

Department of the Treasury

(Form 990)

Na	ime of the organization	101 Histructions and the latest milot		dentification	n number
NA	TIONAL PARK TRUST INC		52-1691924	1	
Pa	Organizations Maintaining Donor Advis Complete if the organization answered "Ye				
	Complete in the organization and notice in	(a) Donor advised funds	(b) Fur	nds and other	accounts
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor adviso organization's property, subject to the organization's ex				Yes 🗌 No
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?	or donor advisor, or for any other purpose of		ermissible] Yes ☐ No
Pa	rt II Conservation Easements.				
	Complete if the organization answered "Ye	<u> </u>			
1	Purpose(s) of conservation easements held by the organ				
	✓ Preservation of land for public use (e.g., recreation	n or education)	historically in	portant land	area
	Protection of natural habitat	☐ Preservation of a c	certified histor	ic structure	
	✓ Preservation of open space				
2	Complete lines 2a through 2d if the organization held a	qualified conservation contribution in the for	rm of a conser	vation	
	easement on the last day of the tax year.	i	. —	at the End	of the Year
a	Total number of conservation easements		2a		1
b	,		2b		2,093.00
С	Number of conservation easements on a certified historic	` '	2c		
d	Number of conservation easements included in (c) acqui structure listed in the National Register	red after 7/25/06, and not on a historic	2d		
3	Number of conservation easements modified, transferre tax year ▶	d, released, extinguished, or terminated by	the organizati	on during the	
4	Number of states where property subject to conservatio	n easement is located 🗲	1		
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds		of violations,	✓ Yes	□ No
6	Staff and volunteer hours devoted to monitoring, inspect 10.00	ting, handling of violations, and enforcing co	onservation ea	sements duri	ng the year
7	Amount of expenses incurred in monitoring, inspecting, \$ 750	handling of violations, and enforcing conser	vation easeme	ents during th	e year
8	Does each conservation easement reported on line $2(d)$ and section $170(h)(4)(B)(ii)$?		70(h)(4)(B)(i)	☐ Yes	□ No
9	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the	footnote to the organization's financial state		, and	
D.~·	the organization's accounting for conservation easement III Organizations Maintaining Collections		or Similar	Accetc	
Pal	Complete if the organization answered "Ye		ier Similar i	455ets.	
1a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finan	public exhibition, education, or research in f			
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for publ following amounts relating to these items:				
	(i) Revenue included on Form 990, Part VIII, line 1		🕨 \$		
	ii)Assets included in Form 990, Part X		-		
2	If the organization received or held works of art, historic following amounts required to be reported under SFAS 1	cal treasures, or other similar assets for fina	-	vide the	
а	Revenue included on Form 990, Part VIII, line 1	· ,	►\$		
h	Assets included in Form 990 Part X		.		

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

d Equipment .

Sch	edule D (Form 990) 2019					Page 2
Pai	tt IIII Organizations Maintaining Co	lections of Art, I	Historical Trea	sures, or Other	Similar Assets (d	ontinued)
3	Using the organization's acquisition, accessio items (check all that apply):	n, and other records,	, check any of the	following that are a	significant use of its	collection
а	Public exhibition		d Lo	an or exchange prog	grams	
b	Scholarly research		e 🗌 Ot	her		
С	Preservation for future generations					
4	Provide a description of the organization's co Part XIII.	lections and explain	how they further	the organization's e	xempt purpose in	
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to					s 🗆 No
Pa	Complete if the organization answ X, line 21.		rm 990, Part IV,	line 9, or reporte	ed an amount on F	orm 990, Part
1a	Is the organization an agent, trustee, custodi included on Form 990, Part X?					s 🗆 No
b	If "Yes," explain the arrangement in Part XII:	Cand complete the fo	allowing table:		Amount	
C	, ,		-	1c	Amount	
d	• •			·		
e				• • • • • • • • • • • • • • • • • • • •		
f	Distributions during the year			· · ·		
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for escrow or	custodial account lia	ability? 🗌 Ye :	s 🗆 No
b	If "Yes," explain the arrangement in Part XIII	Check here if the e	xplanation has be	en provided in Part :	хии 🗆	
Pa	art V Endowment Funds.					
	Complete if the organization answ				I	
	Danisasia a of consultation of	(a) Current year	(b) Prior year		-	(e) Four years back
	Beginning of year balance	39,380	39,380	39,380	189,380	279,380
	Contributions				12 227	2 252
	Net investment earnings, gains, and losses				12,327	3,353
d	Grants or scholarships					
е	Other expenditures for facilities and programs				162,327	93,353
f	Administrative expenses					
g	End of year balance	39,380	39,380	39,380	39,380	189,380
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g, column	(a)) held as:		
а	Board designated or quasi-endowment 🟲					
b	Permanent endowment ▶					
С	Temporarily restricted endowment ►					
	The percentages on lines 2a, 2b, and 2c show	ıld equal 100%.				
3a	Are there endowment funds not in the posses organization by:	ssion of the organizat	tion that are held	and administered fo	r the	Yes No
	(i) unrelated organizations				3a	(i) No
	(ii) related organizations					(ii) No
b	. ,,	•			3	b
4	Describe in Part XIII the intended uses of the		wment funds.			
Pa	Land, Buildings, and Equipme		rm 000 Part IV	line 11a See Fo	rm 990 Part V lin	0.10
	Complete if the organization answ Description of property (a) Cost or ot		or other basis (other			d) Book value
	(investme				.	•
1 -	Land		1,465,10	00		1,465,100
			1,703,10			1,703,100
	Buildings Leasehold improvements					
U	Leasendia iiiibi oveilleillä – I	ı		1	1	

115,306

1,580,406

38,109

153,415

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Part VII	Investments—Other Securities.			<u> </u>
	Complete if the organization answered "Yes" on Form 990, I (a) Description of security or category	Part IV, li), Part X, line 12. thod of valuation:
	(including name of security)	Book value		of-year market value
(1) Financia	Il derivatives	value		
(2) Closely- (3)Other	held equity interests			
. ,				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	n (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, I	Part IV, lii	ne 11c. See Form 99	0. Part X. line 13.
	(a) Description of investment		(b) Book value	(c) Method of valuation: Cost or end-of-year market value
	MARKET FUND		553,656	F
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, col.(B) line 13.)	•	553,656	
Part IX	Other Assets. Complete if the organization answered 'Yes' on Form 990, P	art IV lin	ie 11d. See Form 990	Part X line 15
(4) MINED AL	(a) Description	G. C 2 1 7		(b) Book value
	RIGHTS DONATED TO NPT TY HELD FOR PARKS			1,390,600 340,600
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col.(B) line 15.)			▶ 1,731,200
Part X	Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P	art IV, lin	e 11e or 11f.See For	m 990, Part X, line 25.
1.	(a) Description of liability			(b) Book value
(1) Federal	income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, col.(B) line 25.)			•
	or uncertain tax positions. In Part XIII, provide the text of the footnot			
organization	's liability for uncertain tax positions under FIN 48 (ASC 740). Check	nere if the	text of the footnote has	been provided in Part XIII 🔼

4a

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

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

Page 4

0

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019

4b b Add lines **4a** and **4b** 4c C 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 2,589,099 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements 1 1 2,324,448 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities . . . 2a 348,650 2b Prior year adjustments 2c C

2d d Other (Describe in Part XIII.) . . . Add lines 2a through 2d . 2e 348,650 е Subtract line 2e from line 1 3 1,975,798 3 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . . 4a 4b b

Add lines **4a** and **4b** 4c 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 1.975.798 Supplemental Information

Part XIII Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference Explanation

See Additional Data Table

chedule D (Forn	n 990) 2019	Page 5
Part XIII	rmation (continued)	
Return Reference		Explanation

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

EIN: 52-1691924

Name: NATIONAL PARK TRUST INC.

Supplemental Information

Return Reference

Explanation

PART II, LINE 9:

AT MARKET VALUE AS DETERMINED BY AN INDEPENDENT APPRAISAL.

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

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

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I

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

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

OMB No. 1545-0047

DLN: 93493041009751

Open to Public

Department of the Treasury Internal Revenue Service		► Go to <u>wu</u>	► Attach to Forn www.irs.gov/Form990 for		on.		Inspection
Name of the organization NATIONAL PARK TRUST INC						Employer identification 52-1691924	cation number
Part I General Inform	ation on Grants	and Assistance				1	
 Does the organization main the selection criteria used Describe in Part IV the org Part II Grants and Other 	to award the grants anization's procedu	or assistance? res for monitoring the u	se of grant funds in the U	nited States.			Yes No
that received more	than \$5,000. Part II	I can be duplicated if ad	ditional space is needed.	1	1		<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of sections3 Enter total number of other	. , . ,	-					

(Form 990)

Schedule I (Form 990) 2019 Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on 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) Amoun cash grar			(e) Method of valuation (book, FMV, appraisal, other)		(f) Description of noncash assistance
(1)							_
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

Schedule I (Form 990) 2019

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

Part IV

Return Reference

Explanation

Additional Data

(a) Name and address of

WASHINGTON, DC 20240

BLUE STAR FAMILIES INC

ENCINITAX, CA 92023

PO BOX 230637

Software ID: **Software Version:** Name: NATIONAL PARK TRUST INC.

(b) EIN

80-0369895

EIN: 52-1691924

50,697

(c) IRC section

	organization or government		if applicable	grant	cash assistance	other)	
--	-------------------------------	--	---------------	-------	--------------------	--------	--

(d) Amount of cash (e) Amount of non-

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (f) Method of valuation

(g) Description of non-cash assistance

(h) Purpose of grant or assistance

NATIONAL PRESERVE

BLUE STAR FAMILIES

KIDS TO PARKS DAY

EVENT SPONSORSHIP

PROJECT (NM), ST. CROIX NATIONAL SCENIC REVERWAY PROJECT (WI)

NATIONAL PARK SERVICE 53-0197094 GOV'T UNIT 41,500 1849 C STREET NW

501 (C)(3)

VALLES CALDERA

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

TROPICAL FORESTS

60 NOWELO STREET HILO, HI 96720

PACOIMA BEAUTIFUL 13520 VAN NUYS BLVD PACOIMA, CA 91331	95-4770745	501 (C)(3)	21,900		PILOT A NEW LOS ANGELES PROGRAM WITH A FOCUS ON SUSTAINING A "HEALTHY WATERSHED"
AKAKA FOUNDATION FOR	46-4119442	501 (C)(3)	10,000		EVERY KID OUTDOORS

IGRANT FUNDING

(a) Name and address of (b) EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

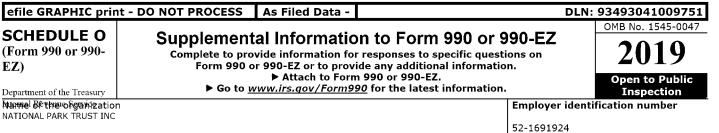
92-0152268 501 (C)(3) 22.500 TRAGEDY ASSITANCE 12020 OUTDOOR PROGRAM FOR SURVIVORS EXPERIENCE RETREATS (TAPS)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3033 WILSON BLVD SUITE 300 ARLINGTON, VA 22201

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493041009751 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** NATIONAL PARK TRUST INC 52-1691924 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art—Historical treasures **3** Art—Fractional interests 4 Books and publications 5 Clothing and household goods Cars and other vehicles **7** Boats and planes . . . 8 Intellectual property . . . Securities—Publicly traded . Χ 13 382,387 FAIR MARKET VALUE 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures Qualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . Real estate—Other . . . 18 Collectibles 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ (___ 26 Other ▶ (______) 27 Other ▶ (______) Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Nο 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2019) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2019)	Page 2
	tion. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization
is reporting in Part I, colu complete this part for an	ımn (b), the number of contributions, the number of items received, or a combination of both. Also y additional information.
Return Reference	Explanation
	Schedule M (Form 990) (2019)



Return Reference	Explanation
Return Reference PROGRAM SERVICE ACCOMPLISHMENTS	Explanation NATIONAL PARK TRUST MISSION OUR MISSION IS TO PRESERVE PARKS TODAY AND CREATE PARK STEWARD S FOR TOMORROW. PRESERVE PARKS TODAY: FOR OVER 35 YEARS, NATIONAL PARK TRUST (THE PARK TRU ST) HAS ENHANCED THE NATIONAL PARK SYSTEM BY ACQUIRING HIGH-PRIORITY PRIVATELY OWNED LAND FOR THE NATIONAL PARK SERVICE (NPS). THESE LANDS ARE LOCATED WITHIN OR ADJACENT TO NATIONAL PARKS AND REPRESENT THE MISSING PIECES OF OUR NATIONAL PARKS' SITES. TO DATE, THE PARK T RUST'S EFFORTS HAVE RESULTED IN THE PRESERVATION OF MORE THAN 25,000 ACRES OF CONSERVATION LANDS FROM DEVELOPMENT IMPACTING 48 NATIONAL PARK SITES. THE PARK TRUST SELECTS, ACQUIRES, AND PROTECTS PARKLAND, PROVIDING FUNDING AS WELL AS LEGAL AND REAL ESTATE EXPERTISE. ALL LANDS ARE DONATED OR SOLD TO NPS. OFTEN NPS USES SPECIFIED LAND AND WATER CONSERVATION FU NDS (LWCF), TO PURCHASE PARCELS FROM THE PARK TRUST FOR PERMANENT PROTECTION. IN THESE CAS ES, NPS WILL ASK THE PARK TRUST TO PURCHASE THE LAND FIRST BECAUSE
	THE PARK TRUST CAN MOVE QUICKLY BEFORE THE LAND IS SOLD TO OTHERS. THE PARK TRUST ALSO SERVES AS A PARTNER WITH N ATIONAL AND LOCAL LAND TRUSTS AND FRIENDS GROUPS TO COMPLETE PARK PRESERVATION PROJECTS. THE PARK TRUST'S LAND PROJECTS VARY IN SIZE FROM GREAT SWATHS OF LAND, INCLUDING THE MORE THAN 10,000 ACRES TO CREATE THE TALLGRASS PRAIRIE NATIONAL PRESERVE (KS) TO EQUALLY IMPORTA NT SMALLER PARCELS, SUCH AS THE 12.5 ACRES LOCATED WITHIN THE WILD BASIN AREA OF ROCKY MOU NTAIN NATIONAL PARK (CO). CREATE PARK STEWARDS FOR TOMORROW: THROUGH OUR NATIONALLY-RECOGN IZED EDUCATION INITIATIVES INCLUDING THE BUDDY BISON SCHOOL PROGRAMS, KIDS TO PARKS DAY AN D KIDS TO PARKS DAY SCHOOL GRANTS, THE PARK TRUST HAS FURTHER IMPACTED PARK PRESERVATION BY PROVIDING IN-DEPTH ENVIRONMENTAL, HISTORY, AND OUTDOOR EDUCATIONAL EXPERIENCES FOR KIDS, THEIR FAMILIES, AND TEACHERS - WITH A STRONG FOCUS ON UNDER-SERVED COMMUNITIES. OUR GOAL IS TO CULTIVATE THE NEXT GENERATION OF PARK STEWARDS AND CONSERVATION PROFESSIONALS WHO WILL MAKE IMPORTANT DECISIONS ABOUT THE FUTURE OF OUR PARKS, PUBLIC LAND, AND WATER AND EXPERIENCE A HEALTHIER LIFESTYLE THROUGH OUTDOOR RECREATION. THE PARK EXPERIENCES FUNDED BY THE PARK TRUST SUPPORT OUR THREE PILLARS BY 1) USING PARKS TO ENHANCE CLASSROOM CURRICULUM; 2) PROMOTING HEALTH AND WELLNESS THROUGH OUTDOOR RECREATION, AND 3) FOSTERING PARK STEWARD SHIP THROUGH CAREER AWARENESS AND VOLUNTEER OPPORTUNITIES. TO DATE, THE PARK TRUST PROVIDE S FUNDING FOR MORE THAN 96 TITLE I ELEMENTARY AND MIDDLE SCHOOLS IN 14 STATES AND WASHINGT ON, DC. FOR EXAMPLE, IN OUR BUDDY BISON SCHOOL PROGRAM ALONE WHICH PROVIDES MULTIPLE PARK TRIPS AND EXPERIENCES EACH YEAR FOR STUDENTS, MORE THAN 80% OF THE 6,756 STUDENTS SUPPORTED BY THE PARK TRUST QUALIFY FOR FREE OR REDUCED-PRICE LUNCH, THE FEDERAL INDICATOR OF LOW INCOME.
	TO DATE, THE PARK TRUST'S PROGRAMS HAVE REACHED MORE THAN 2-MILLION CHILDREN AND F AMILIES AND THE PROGRAMS HAVE GARNERED RECOGNITION FROM LEADERS IN THE EDUCATION, MEDICAL, RECREATION, AND CONSERVATION

Return Reference	Explanation
PROGRAM SERVICE ACCOMPLISHMENTS	COMMUNITIES INCLUDING THE DEPARTMENT OF INTERIOR (DOI), NATIONAL PARK SERVICE (NPS), AMERI CA'S STATE PARKS, AMERICAN ACADEMY OF PEDIATRICS, AND OUTDOORS ALLIANCE FOR KIDS. THE COVID-19 OUTBREAK IN SPRING 2020 BROUGHT UNPRECEDENTED CHALLENGES FOR OUR NATION'S SCHOOLS. WE KNOW THE TRANSFORMATIONAL IMPACT THAT PARKS AND THE OUTDOORS HAVE ON FAMILIES, ESPECIALLY THOSE LIVING IN LOW-INCOME HOUSEHOLDS AND COMMUNITIES OF COLOR. FOR OVER A DECADE, WE'VE BEEN BREAKING DOWN BARRIERS BETWEEN THOSE COMMUNITIES AND OUR OUTDOOR SPACES. UNFORTUNATELY, THESE BARRIERS HAVE ONLY BEEN ELEVATED BY THE COVID-19 PANDEMIC. CHILDREN THAT ALREADY HAD DIFFICULTY ACCESSING PARKS ARE FINDING IT EVEN MORE CHALLENGING TO ENJOY GREEN SPACES WHILE ADHERING TO SOCIAL DISTANCING GUIDELINES. HELPING SCHOOLS AND FAMILIES THROUGH THIS CRISIS IS OUR TOP PRIORITY. ALONG WITH PROMOTING RESPONSIBLE OUTDOOR RECREATION CLOSE TO HOME, THE PARK TRUST HAS ALSO DEVELOPED THE BUDDY BISON CREATIVE LEARNING PROGRAM FOR OUR S CHOOLS. THIS NEW PROGRAM CONNECTS CHILDREN TO OUR PARKS THROUGH DISTANCE LEARNING OPPORTUN ITIES PROVIDED BY OUR PARKS AND PARTNERS AND PROVIDES GREATLY NEEDED MATERIALS FOR HANDS-ON, EDUCATIONAL ACTIVITIES. THESE HANDS-ON ACTIVITIES PROVIDE A BREAK FROM COMPUTER SCREENS AND CAN BE DONE INDEPENDENTLY AT HOME. WHILE NOTHING CAN REPLACE THE MAGIC OF VISITING OUR PUBLIC LANDS IN PERSON, THE BUDDY BISON CREATIVE LEARNING PROGRAM WILL CONTINUE TO KINDLE A LOVE FOR OUR PARKS IN OUR STUDENTS WHILE THEY ARE LEARNING REMOTELY FROM HOME FOR THE FORESEEABLE FUTURE. IN THE COMING YEARS, THE PARK TRUST WILL WORK TO EXPAND AND FUTTHER IN TEGRATE OUR LAND CONSERVATION AND YOUTH EDUCATION PROGRAMS SO THAT WE NOT ONLY CREATE MEAN INGFUL EXPERIENCES IN NATURE WHERE CHILDREN GAIN IMPORTANT ACADEMIC AND SOCIAL SKILLS BUT ALSO LEARN IMPORTANT LESSONS IN CONSERVATION HISTORY, AND SOCIAL JUSTICE AND THEIR ROLE IN PROTECTING OUR NATIONS. SCIENTISTS, ENGINEERS, LAND MANAGERS, AND EDUCATORS, AMONG OTHER PROFESS IN NATURE WHERE CHILDREN GAIN IMPORTANT ACADEMIC AND

Return Reference	Explanation
PROGRAM SERVICE ACCOMPLISHMENTS	UST PARK EXPERIENCES FOR UNDER-SERVED YOUTH, THE PARK TRUST PROVIDES EDUCATORS WITH CLASSR OOM RESOURCES (BOOKS, MAPS, DVDS, LESSON PLANS, WORKSHEETS, STEM ACTIVITIES, ETC) AND A DE DICATED EDUCATION TEAM TO INTRODUCE ENVIRONMENTAL CONCEPTS AND ENHANCE SCHOOL CURRICULUM I N THE AREAS OF HISTORY, STEM, GEOGRAPHY, CIVICS, READING, LANGUAGE ARTS, MUSIC, AND ART. T HROUGH OUR BUDDY BISON YOUTH PROGRAMS, THE PARK TRUST PROVIDED PARK PROGRAMS FOR 6,756 STU DENTS IN 97 SCHOOLS. OUR GOAL FOR ALL OUR YOUTH PROGRAMS IS TO INSPIRE A GENERATION OF FUT URE CONSERVATION LEADERS AND PARK ENTHUSIASTS. 1. BUDDY BISON SCHOOL PROGRAM FULLY INTEGRA TES LEARNING OBJECTIVES FROM THE SCHOOL'S CURRICULUM WITH PARK PROGRAMS AND SUPPLEMENTAL E DUCATION MATERIALS. WORKING DIRECTLY WITH TEACHER FEEDBACK, THE PARK TRUST CUSTOMIZED OVER 58 TRIPS TO ALL PARKS WORKING WITH 3,506 STUDENTS. 2. THE KIDS TO PARKS DAY NATIONAL SCHOOL CONTEST HAS AWARDED 109 GRANTS TO 90 TITLE I SCHOOLS TO SUPPORT OVER 5,400 STUDENTS IN GRADES PRE-K THROUGH 12. THE SELECTED SCHOOLS REPRESENT 37 STATES PLUS WASHINGTON, D.C. DU E TO COVID-19, ONLY TWO 2020 NATIONAL SCHOOL CONTEST WINNERS (28 STUDENTS) WERE ABLE TO TA KE THEIR PARK TRIP. THE REMAINING CONTEST WINNERS ARE POSTPONING THEIR TRIP OR USING THEIR RESOURCES FOR DIGITAL LEARNING. 3. IN ADDITION, THE PARK TRUST HAS ALSO IMPLEMENTED "PARK EXPERIENCE PROGRAMS". THIS MODEL OF ENGAGEMENT FOCUSES OUR EFFORTS ON A PARTICULAR PARK, FOR AN IMMERSIVE DAY OF OUTDOOR LEARNING. DURING THE 2019-2020 SCHOOL YEAR, NATIONAL PARK, TRUST BROUGHT 3,222 STUDENTS TO THE FOLLOWING NATIONAL PARK, TRUST BROUGHT 3,222 STUDENTS TO THE FOLLOWING THE 2019-2020 SCHOOL YEAR, NATIONAL PARK T RUST BROUGHT 3,222 STUDENTS TO THE FOLLOWING THE 2019-2020 SCHOOL YEAR, NATIONAL PARK T RUST BROUGHT 3,222 STUDENTS TO THE FOLLOWING THE 2019-2020 SCHOOL YEAR, NATIONAL PARK T RUST BROUGHT 3,222 STUDENTS TO THE FOLLOWING THE 2019-2020 SCHOOL YEAR, NATIONAL PARK T RUST BROUGHT 3,222 STUDENTS TO THE FOLLOWING THUS A SMALLER AMOUNT OF DIRECT FUNDS GOING TO

5. 5.	
Return Reference	Explanation
PROGRAM SERVICE ACCOMPLISHMENTS	PENNSYLVANIA - 1 SCHOOL, 130 STUDENTS TEXAS - 1 SCHOOL, 77 STUDENTS VIRGINIA - 7 SCHOOLS, 386 STUDENTS WASHINGTON, DC - 36 SCHOOLS, 2,244 STUDENTS MANY SCHOOLS CANCELED OR POSTPONE D THEIR PLANNED TRIPS DUE TO THE COVID 19 OUTBREAK. WE ARE CURRENTLY WORKING TO PROVIDE VI RTUAL PROGRAMS OR IN-PERSON PARK EXPERIENCE DURING THE 2020-2021 SCHOOL YEAR FOR THESE LOC ATIONS: ALABAMA - 2 SCHOOLS, 380 STUDENTS ARIZONA - 1 SCHOOL, 10 STUDENTS CALIFORNIA - 9 S CHOOLS, 562 STUDENTS COLORADO - 6 SCHOOLS, 502 STUDENTS DELLAWARE - 1 SCHOOL, 25 STUDENTS G EORGIA - 6 SCHOOLS, 436 STUDENTS HAWAII - 2 SCHOOLS, 116 STUDENTS IDAHO - 4 SCHOOLS, 284 S TUDENTS ILLINOIS - 8 SCHOOLS, 238 STUDENTS INDIANA - 5 SCHOOLS, 326 STUDENTS KANSAS - 2 SC HOOLS, 124 STUDENTS KENTUCKY - 2 SCHOOLS, 333 STUDENTS LOUISIANA - 1 SCHOOL, 107 STUDENTS MARYLAND - 25 SCHOOLS, 1,418 STUDENTS MASSACHUSETTS - 1 SCHOOL, 16 STUDENTS MICHIGAN - 3 S CHOOLS, 613 STUDENTS MINDESOTA - 3 SCHOOLS, 210 STUDENTS MISSISSIPPI - 1 SCHOOL, 145 STUDENTS MISSOURI - 1 SCHOOL, 12 STUDENTS MONTANA - 1 SCHOOL, 29 STUDENTS NEVADA - 5 SCHOOLS, 48 0 STUDENTS SEW JERSEY - 5 SCHOOLS, 423 STUDENTS SEW MEXICO - 1 SCHOOL, 40 STUDENTS NEW YOR K - 5 SCHOOLS, 273 STUDENTS NORTH CAROLINA - 5 SCHOOLS, 263 STUDENTS NOHO - 3 SCHOOLS, 249 STUDENTS OREGON - 1 SCHOOL, 80 STUDENTS PENNSYLVANIA - 7 SCHOOL, 595 STUDENTS RHODE ISLAN D - 1 SCHOOL, 54 STUDENTS SOUTH CAROLINA - 1 SCHOOL, 45 STUDENTS SUTTENTS SHORE SHOW AND STUDENTS WASHINGTON, DC - 1 SCHOOL, 78 S TUDENTS TENNESSEE - 1 SCHOOL, 180 STUDENTS UTAH - 1 SCHOOL, 75 STUDENTS VIRGINIA - 10 SCHOOLS, 398 STUDENTS WASHINGTON - 2 SCHOOLS, 180 STUDENTS WASHINGTON, DC - 1 SCHOOL, 78 S TUDENTS BELOW ARE SAMPLES OF BUDDY BISON SCHOOL EVENTS IMPLEMENTED BY THE PARK TRUST: CALI FORNIA: FEBRUARY 2020: 47 4TH GRADERS FROM CLIFFORD ELEMENTARY PARTICIPATED IN THE BATTLES HIP IOWA MUSESCHOS OF BUDDY BISON SCHOOL EVENTS IMPLEMENTED BY THE PARK TRUST: CALI FORNIA: FEBRUARY 2020: 47 4TH GRADERS FROM CLIFFORD ELEMENTARY PARTICIPATED IN THE BATTLES HIP IOWA MUSECHOS O

Return Reference	Explanation
PROGRAM SERVICE ACCOMPLISHMENTS	FESTYLE OF LOCAL AND REGIONAL HISTORIC NATIVE AMERICAN CULTURES. ILLINOIS: NOVEMBER 2019: 35 4TH GRADE STUDENTS FROM HAMMOND ELEMENTARY WENT ON THE MILLER WOODS HIKE AT INDIANA DUN ES NATIONAL PARK, WHERE THEY LEARNED ABOUT NATIVE PLANTS AND INVASIVE SPECIES. THEY ALSO L EARNED ABOUT THE ECOSYSTEM OF THE DUNES, WHY THE PLANTS ARE IMPORTANT, AND WHAT THEY CAN D O TO HELP WITH PROTECTING THE ENVIRONMENT. TO SUPPLEMENT THE ANIMALS IN THE ECOSYSTEM THAT THEY LEARNED ABOUT, STUDENTS HAD THE CHANCE TO INTERACT WITH PELTS AND BONES FROM VARIOUS ANIMALS AND ASK QUESTIONS. KANSAS: OCTOBER 2019: 60 4TH GRADERS FROM BUCKNER ELEMENTARY V ISITED TALLGRASS PRAIRIE NATIONAL PRESERVE. STUDENTS STARTED THE DAY BY ENGAGING IN AMERIC AN BISON AND FIRE ECOLOGY ACTIVITIES. AFTER THAT STUDENTS TOURED THE HISTORIC BARN, RANCH HOUSE, AND OUTBUILDINGS, AND THE TEPEE TO EXPLORE HOW DIFFERENT PEOPLE HAVE LIVED ON THE P LAINS. THE FINAL ACTIVITY WAS A RIDE ON THE HISTORICALLY ACCURATE HORSE-DRAWN WAGON. DURIN G THE RIDE, STUDENTS LEARNED ABOUT WESTWARD EXPANSION AND TOOK IN THE AMAZING VIEWS OF THE PLAINS. MARYLAND: NOVEMBER 2019: 140 4TH GRADERS FROM GAITHERSBURG ELEMENTARY PARTICIPATE D IN THE "ECO-EXPLORERS" PROGRAM AT THE NATIONAL COLONIAL FARM WITH THE ACCOKEEK FOUNDATION. THROUGH INTERACTIVE EXPERIENCE-BASED TOURS, STUDENTS EXAMINED THE DIFFERENCES BETWEEN THE PAST (COLONIAL MD IN THE 1770S) AND PRESENT TIME AND LEARNED HOW DECISIONS ABOUT OUR DA ILY LIVES CAN IMPACT THE ENVIRONMENT. THESE PROGRAMS HELPED TO SHOW THE EFFECTS OF HUMAN I NTERACTION WITH THE LAND WHILE ENCOURAGING PHYSICAL ACTIVITY IN AN OUTDOOR LIVING CLASSROO M. FEBRUARY 2020: 76 5TH GRADERS FROM COMMODORE JOHN ROGERS ELEMENTARY VISITED OREGON M. FEBRUARY 2020: 76 5TH GRADERS FROM COMMODORE JOHN ROGERS ELEMENTARY VISITED DRAFE WAY ARCH NATIONAL PARK. STUDENTS WISITED THE NEWLY RENOVATED MUSEUM UNDER THE GATEWAY ANCH TO EXPLORE WHY ST. LOUIS IS CONSIDERED THE "GATEWAY TO THE WEST". STUDENTS DIVIDED INTO TWO O GROUPS AND TO TAKE PART IN THE MAPLE SUGARING PROGRAMS AND

Return Reference	Explanation
PROGRAM SERVICE ACCOMPLISHMENTS	LY AND COMMUNITY MEMBERS DEPENDED ON EACH OTHER AND THEIR FOREST RESOURCES WHILE MAKING CO MPARISONS TO THEIR OWN LIVES. PENNSYLVANIA: NOVEMBER 2019: 130 5TH GRADE STUDENTS FROM CHE STER COMMUNITY CHARTER SCHOOL VISITED INDEPENDENCE NATIONAL HISTORICAL PARK AND THE MUSEUM OF THE AMERICAN REVOLUTION. TEXAS: MARCH 2020: 77 7TH AND 8TH-GRADE STUDENTS FROM THE EHR HART SCHOOL STARTED THE DAY AT SAM HOUSTON PARK, WHERE THE HERITAGE SOCIETY GAVE STUDENTS A TOUR OF THE HISTORIC BUILDINGS AND DISCUSSED HOUSTON'S DEVELOPMENT FROM THE 1800S TO THE PRESENT. AFTERWARD, STUDENTS WENT TO THE HOUSTON MUSEUM OF NATURAL SCIENCE TO EXPLORE THE EXHIBITS. VIRGINIA: NOVEMBER 2019: DREW ELEMENTARY'S 60 2ND GRADERS STARTED THEIR DAY BY PARTICIPATING IN A "WEB OF LIFE" PROGRAM AT THE WATKINS NATURE CENTER, WHERE THEY LEARNED ABOUT DIFFERENT TROPHIC LEVELS AND THE ROLE OF ANIMALS IN THEIR ECOSYSTEMS. AFTERWARD, PAR K TRUST STAFF LED THE STUDENTS ON A HIKE THROUGH THE WOODS AND LET THE KIDS PLAY ON THE WI ZARD OF OZ-THEMED PLAYGROUND. WASHINGTON, DC: NOVEMBER 2019: 32 3RD GRADE STUDENTS FROM NE VAL THOMAS ELEMENTARY STUDENTS WENT ON A TOUR OF THE NATIONAL MALL AND MEMORIAL PARKS WITH RANGER BETHANY, STARTING AT THE JEFFERSON MEMORIAL, AND CONTINUING THROUGH FDR, MLK, AND LINCOLN. SHE PROVIDED HISTORICAL CONTEXT AND ASSIGNED "CHALLENGE QUESTIONS" TO THE STUDENTS AT THE BEGINNING OF EACH MONUMENT TOUR, HELPING BRING THESE SPACES TO LIFE. JANUARY 2020: 45 4TH-GRADERS FROM CESAR CHAVEZ PUBLIC CHARTER SCHOOL VISITED KENILWORTH PARK AQUATIC G ARDENS TO PARTICIPATE IN THE "BE A JUNIOR RANGER" PROGRAM. STUDENTS LEARNED ABOUT THE ADA PTATIONS OF AQUATIC PLANTS, HOW THE GARDENS CHANGE WHEN THE SEASONS DO, AND WHAT ANIMALS M AKE THE GARDENS THEIR HOME. THEY SAW TROPICAL PLANTS IN THE GREENHOUSE AS WELL. EACH STUDE NT WORKED ON THEIR JUNIOR RANGER BOOKLET, COMPLETING ACTIVITIES THAT HELPED THEM LEARN ABO UT THE GARDENS, AND WAS INDUCTED AS JUNIOR RANGERS WITH A PLEDGE AND A BADGE. KIDS TO PARK DAY AS A PUBLIC EXTENSION OF OUR RAPIDLY GROWING BUDDY

	
Return Reference	Explanation
PROGRAM SERVICE ACCOMPLISHMENTS	HOME RESOURCES WERE DOWNLOADED BY THOUSANDS OF KIDS AND FAMILIES NATIONWIDE. TO COMPLEMENT THE PIVOT TO PARKS TO KIDS DAY, NATIONAL PARK TRUST UPDATED ITS FREE MOBILE PARKPASSPORT APP WITH 500 VIRTUAL EXPERIENCES AT 180 DIFFERENT PARK SITES AND FUN DIGITAL BADGES AVAILA BLE THROUGH THE APPLE APP STORE AND GOOGLE PLAY. THE APP ALLOWS USERS TO EXPLORE PARKS ACR OSS THE COUNTRY IN-PERSON OR FROM HOME. THEY CAN DISCOVER NEW PARKS, EARN BADGES, SHARR PH OTOS, CONNECT WITH FRIENDS, TRACK PARK VISTS, AND SHARE EXPERIENCES WITH A COMMUNITY OF O UTDOOR ENTHUSIASTS. MILITARY FAMILY PROGRAMS THE NATIONAL PARK TRUST IN PARTNERSHIP WITH B LUE STAR FAMILIES (BSF), NATIONAL PARK SERVICE, TRAGEDY ASSISTANCE PROGRAM FOR SURVIVORS (TAPS), AND THE U.S. FOREST SERVICE PROVIDES MEANINGFUL AND IMPACTFUL PARK EXPERIENCES FOR NEARLY 1500 ACTIVE MILITARY AND GOLD STAR FAMILIES ACROSS THE COUNTRY. THE GOAL OF THESE C OLLABORATIONS IS TO ENCOURAGE MILITARY-CONNECTED MEN AND WOMEN AND THEIR CHILDREN TO DISCO VER AND EXPLORE THEIR LOCAL, STATE, AND NATIONAL PARKS AND TO EXPERIENCE THE EDUCATIONAL A NO HEALTH BENEFITS OF THE GREAT OUTDOORS WHILE DEVELOPING LIFELONG OUTDOOR RECREATION HAB ITS. LAND AND PARK PESERVATION PROGRAMS THE PARK TRUST CONTINUES TO MAKE GREAT PROGRESS WI TH OUR PARK CONSERVATION EFFORTS. IN THE LATE 1990S, WE WERE THE LEAD ORGANIZATION TO CREA TE A NEW UNIT OF THE NATIONAL PARK SYSTEM DEDICATED TO PRESERVING ONC COUNTRY'S PRAIRIE EC OSYSTEM. THE TALLGRASS PRAIRIE NATIONAL PRESERVE. THE PARK TRUST CONTINUES TO BE INSTRUME NTALI IN ADDING CRITICAL PRIVATE LANDS TO OTHER PARKS INCLUDING MOST RECENTLY IN ROCKY MOUN TAIN NATIONAL PARK, CC; CLYMPIC NATIONAL PARK, CA; APPALACHIAN NATIONAL HISTORIC SITE, KS INDIANA DUNICE PRESERVATION PROJECTS INCLUDING: FORT SCOTT NATIONAL HISTORIC SITE, KS INDIANA DUNICE PRESERVATION PROJECTS INCLUDING: FORT SCOTT NATIONAL HISTORIC SITE, KS INDIANA DUNICE PRESERVATION PROJECTS INCLUDING: FORT SCOTT NATIONAL HISTORIC SITE, KS INDIANA DUNICE PRESE RVATION PROJECTS INCLUDING: FORT SCOTT NATION

Return Reference	Explanation
PROGRAM SERVICE ACCOMPLISHMENTS	AL LAKESHORE (2017-2019) THANKS TO GENEROUS SUPPORT FROM THE CARLS FOUNDATION, THE PARK TR UST PURCHASED AN IMPORTANT HISTORIC PROPERTY TO BENEFIT PICTURED ROCKS NATIONAL LAKESHORE (MI). IN OCTOBER 2019, THE FINAL REMOVAL OF A NON-HISTORIC HOUSE ON THE PROPERTY IMPROVED THE HISTORIC SCENE AND PROVIDED PARKING FOR THE SITE: VIRGINIA: APPALACHIAN NATIONAL SCENI C TRAIL (AT)- (2018-2020) THE PARK TRUST WORKED WITH THE APPALACHIAN TRAIL CONSERVANCY AND THE NATIONAL PARK SERVICE TO PROTECT 239 ACRES ALONG THE AT. THE NPS WAS NOT AVAILABLE TO TAKE TITLE TO THE PROPERTY WITHIN A TIME FRAME ACCEPTABLE TO THE OWNER, SO THE PARK TRUST ACCEPTED THE TITLE UNTIL NPS WAS ABLE TO TAKE THE TITLE AND INCORPORATE THE LAND INTO THE AT. MANASSAS NATIONAL BATTLEFIELD PARK (2016-PRESENT) IN 1914, 3 CIVIL WAR VETERANS FORME D A TRUST AND BOUGHT 1 ACRE OF LAND ON THE HISTORIC LOCATION OF THE SECOND BATTLE OF MANAS AS. THEY PLACED A GRANITE MONUMENT ON THE LAND TO COMMEMORATE THEIR COMMANDER, FLETCHER W EBSTER, ON THE SPOT WHERE HE FELL IN BATTLE. THE THREE MEN PASSED AWAY IN THE 1920S AND MA DE NO PROVISION FOR CARE OR OWNERSHIP OF THE LAND. THE PROPERTY AROUND THE ACRE BECAME PAR T OF THE NATIONAL PARK SYSTEM IN 1936, BUT THIS ACRE WAS SPECIFICALLY LEFT OUT. THE PARK T RUST HAS BEEN WORKING WITH THE NPS AND PRO BONO ATTORNEY ASSISTANCE TO FIND A PATHWAY, UND ER VIRGINIA LAW, TO ACCEPT OWNERSHIP AND TRANSFER IT TO THE NATIONAL PARK SERVICE WAS SPECIFICALLY LEFT OUT. THE PARK T RUST HAS BEEN WORKING WITH THE NPS AND PRO BONO ATTORNEY ASSISTANCE TO FIND A PATHWAY, UND ER VIRGINIA LAW, TO ACCEPT OWNERSHIP AND TRANSFER IT TO THE NATIONAL PARK SERVICE WAS INTERESTED IN A 40-ACRE PROPERTY AND HAD LWCF MONEY IN THE AMOUNT OF THE APPRAISED VALUE, \$405,000. HOWEVER, THE OWNER FELT THE PROPERTY WAS WORTH MORE AND ASKED SSO),000, OR \$95,000 MORE THAN THE GOVERNMENT APPRAISED VALUE; THE NPS BARGAINED IT DOWN FROM A HIGHER VALUE. THE DROPERTY ON THE OPEN MARKET. THE UNIQUE S ULFUR HOT SPRING FEATURE MIGHT HAVE LENT ITSELF TO A RESORT-STYLE DEVELOP

Return Reference	Explanation
PROGRAM SERVICE ACCOMPLISHMENTS	WORKED WITH THE WISCONSIN BOARD OF COMMISSIONERS OF PUBLIC LANDS TO BUY VALUABLE TIMBERLAN D AND TRADE IT FOR THREE PARCELS OF STATE LAND ALONG THE ST. CROIX AND NAMEKAGON RIVERS. THE PARK TRUST TRANSFERRED THE THREE PARCELS TO THE NATIONAL PARK SERVICE, WHICH ARE NOW A PART OF THE RIVERER FLOW THROUGH SOME OF THE MOST SCENIC AND LEAST DEVELOPED COUNTRY IN THE UPPER MIDWEST. INDIANA INDIANA DUNES NATIONAL PARK (2020-PRESENT) THE MARQU ETTE GREENWAY IS A PROJECT TO DEVELOP A 58-MILE TRAIL ALONG THE SHORE OF LAKE MICHIGAN IN INDIANA, FROM CHICAGO, ILLINOIS TO NEW BUFFALO, MICHIGAN. THE TRAIL SPLITS INTO 20 SEGMENT S OF VARIOUS LENGTHS, AS DIVIDED BY THE JURISDICTION IN WHICH THE TRAIL SPLITS INTO 20 SEGMENT S OF VARIOUS LENGTHS, AS DIVIDED BY THE JURISDICTION IN WHICH THE TRAIL IS LOCATED. THE PARK TRUST WOULD PROVIDE FUNDS FOR DUE DILIGENCE AND QUIET TITLE ACTIONS ON 9 ABANDONED LOTS IN A SUBDIVISION. THESE LOTS WERE OWNED BY A RAILROAD COMPANY, ON THE LAND THEY OWNED FOR THEIR RAILWAY, WHICH THEY FORMALLY ABANDONED. WE ARE WORKING WITH SAVE THE DUNES, A LOCAL ATTORNEY IN GARY, AND THE CITY OF GARY ON 4 PARCELS THAT SAVE THE DUNES RECEIVED FROM LAKE COUNTY. THOUGH IT WAS DONATED, IT WAS TREATED AS A TAX SALE. THE ATTORNEY IS WORKING OSSESSION OF THE DEED AND BEGIN THE TRANSFER TO NPS. MICHIGAN RIVER RAISIN NATIONAL BATTLE FIELD (2018-PRESENT). THE PROJECT IS A \$7 MILLION PROJECT TO PURCHASE LAND IN THE CORE OF THE BATTLEFIELD, AND THERE WAS A \$535,000 FUNDING GAP. MICHIGAN DEPARTMENT OF NATURAL RESO URCES ISSUED A GRANT FOR \$4.8 MILLION, REQUIRING A 29% MATCH. THE PARK TRUST APPLIED FOR A GRANT WITH THE CARLS FOUNDATIONS; THEY SAID THEY COULD NOT FUND THE ENTIRE AMOUNT, BUT SAID THEY WERE CONSIDERING A CONTRIBUTION, SECALUSE OF THE MERITS OF THE PREDICE. PARTILL CON TRIBUTIONS CAN BE USED IMMEDIATELY; THERE ARE NUMBROUS PARCELS WITH VARIOUS OWNERS, AND NO RESTRICTIONS TO WAIT UNTIL THE ENTIRE MATCH IS AVAILABLE BEFORE PURCHASES CAN BE MADE. ALL PROPERTY OWNERS FOR THE PROJECT ARE WILLING SELLERS. THE PARK TRUST

Return Reference	Explanation
PROGRAM SERVICE ACCOMPLISHMENTS	EADMONATTORNEY IS SUPPORTING THE LEGAL PROCESS OF ELIMINATING A DEED RESTRICTION THAT SAYS THE PROPERTY CAN NEVER BE SOLD; THOUGH COMMONLY ACCEPTED TO BE A VOID CONDITION, A COURT JUDGMENT MAY BE NECESSARY TO FORMALLY REMOVE IT FROM THE DEED. THE STATE OF VERMONT HAS PAS SED LEGISLATION TO AUTHORIZE THE TRANSFER TO THE NPS. THE PROJECTS ARE ONGOING. CHESAPEAKE AND OHIO CANAL NATIONAL HISTORICAL PARK, MD (2017-PRESENT) THE C&O CANAL SUPERINTENDENT I DENTIFIED A 2-ACRE PROPERTY ADJACENT TO NPS LAND ON WHICH ARE THE RUINS OF THE SENECA STON E MILL. THE TWO ACRES APPEARED AS AN EXHIBIT ON A DEED TO THE STATE OF MARYLAND, WHICH ALS O NOTED IT WAS INTENDED TO BE TRANSFERRED TO NPS; THE TRANSFER NEVER HAPPENED. BOARD MEMBE R RAY SHERBILL ASSISTED THROUGH HIS FIRM WITH GETTING A TITLE REPORT THAT POINTED TO THE S TATE AS OWNERS OF THE PARCEL. THE ASSISTANT ATTORNEY GENERAL FOR THE STATE OF MARYLAND INI TIALLY FELT THE STATE DID NOT OWN THE PROPERTY. AFTER A REVIEW OF THE TITLE REPORT AND DEE DS. THE ASSISTANT ATTORNEY GENERAL FOR THE OPINION THAT THE STATE -OWNED THE PROPERTY, AND WOULD BE WILLING TO TRANSFER IT DIRECTLY TO THE NATIONAL PARK SER VICE. THE STATE ESTIMATED THE FIRST PHASE OF THE PROCESS WOULD BE FINISHED IN SEPTEMBER 20 19, AFTER WHICH THE MARYLAND DEPARTMENT OF GENERAL SERVICES WILL COMPLETE THE PROCESS. THE STATE FARK COMPLETED ITS PREPARATIONS AND IS AWAITING THE NPS TO COMPLETE THE PROCESS. THE STATE ARK COMPLETED ITS PREPARATIONS AND IS AWAITING THE NPS TO COMPLETE THE PROCESS. THE STATE HAS COMPLETED ITS PREPARATIONS AND IS AWAITING THE NPS TO COMPLETE THE PROCESS. THE STATE HAS COMPLETED ITS PREPARATIONS AND IS AWAITING THE NPS TO COMPLETE THE PROCESS. THE STATE HAS COMPLETED ITS PREPARATIONS AND IS AWAITING THE NPS TO COMPLETE THE PROCESS. THE STATE HAS COMPLETED ITS PREPARATIONS AND IS AWAITING THE NPS TO COMPLETE THE PROCESS. THE PRACE SWERAL PROPERTY. THE NPS TO COMPLETE THE PROCESS. THE PRACE OF ADJACENT TO THE PARK WERE ADJUSTED. THERE ARE 5 PROPERTY, OR IN THE PROPERTY DATA CONTRACT OF THE

Return Reference	Explanation
PROGRAM SERVICE ACCOMPLISHMENTS	AND OPINION THAT THE DETERMINING FACTOR IN OWNERSHIP WAS WHETHER THE LAND COULD TRANSFER TO NPS OWNERSHIP THROUGH THE PRINCIPLE OF ACCRETION OR AVULSION (COMMON LAW WHEN A RIVER C HANGES COURSE) - TWO DIFFERENT MECHANISMS. NPS AGREES WITH THE ANALYSIS AND IS REQUESTING A TECHNICAL BOUNDARY CORRECTION (A MISTAKE IN THE ORIGINAL BOUNDARY DETERMINATION) WITH THE DEPARTMENT OF THE INTERIOR (DOI)ATTORNEY'S ASSISTANCE. THE PROCESS CONTINUES. PUBLIC EDU CATION THE PARK TRUST UNDERTAKES AND CONDUCTS PROGRAMS TO EDUCATE AND RAISE THE PROFILE OF NATIONAL PARKS AND THEIR NEEDS WITH THE PUBLIC, PARK AGENCIES, AND CONGRESSIONAL DELEGATE S. THE PARK TRUST CIRCULATES ITS MONTHLY PUBLICATION, "NATIONAL PARK TRUST NEWS" (ELECTRON IC NEWSLETTER) WHICH DESCRIBES CRITICAL PARKLAND ACQUISITIONS AND RELATED ISSUES. THIS INFORMATION IS ALSO SHARED ON OUR SOCIAL MEDIA PLATFORMS (INSTAGRAM, FACEBOOK, AND TWITTER) A S WELL AS ON OUR WEBSITE, IN OUR ANNUAL REPORT, IN PRINT MAILINGS TO OUR SUPPORTERS, AND T HROUGH PRESS RELEASES. THE PARK TRUST HOSTS ITS ANNUAL BRUCE F. VENTO PUBLIC SERVICE AWARD EVENT TO HONOR A PUBLIC SERVANT FOR HIS OR HER COMMITMENT TO THE ENVIRONMENT; AND HIS OR HER SERVICE, SKILL, AND INNOVATION IN SUPPORT OF OUR PUBLIC LANDS; AND TO PROVIDE THE PUBL IC WITH INFORMATION ON SUCH SERVICE. IN 2020, THE AWARD RECIPIENT WAS SENATOR MAZIE HIRONO FROM HAWAII AND THE PROGRAM WAS DONE VIRTUALLY DUE TO THE PANDEMIC. THE PARK TRUST ALSO H OSTS ITS AMERICAN PARK EXPERIENCE AWARD EVENT TO RECOGNIZE AN INDIVIDUAL OR GROUP THAT HAS MADE OUTSTANDING CONTRIBUTIONS TO ENHANCE THE AWARENESS AND APPRECIATION OF OUR NATION'S PARKS, WILDLIFE REFUGES, AND HISTORIC LANDMARKS AND TO PROVIDE THE PUBLIC WITH INFORMATION ON SUCH CONTRIBUTIONS. IN 2020, THE AWARD RECIPIENT WAS HYDROFLASK AND WAS PROVIDED VIRTUALLY DUE TO THE PANDEMIC.

990 Schedule O, Supplemental Information

Return Explanation

Reference

LINE 4

FORM 990,	THE BOARD OF DIRECTORS SHALL CONSIST OF NO LESS THAN TEN AND NO MORE THAN TWENTY-FIVE INDIVIDUALS"
PART VI,	INCREASING FROM TWENTY-TWO.
SECTION A.	

Return Explanation

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

D - 4....

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

Evalenation

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FORM 990, PART VI, SECTION B, LINE 15

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Reference

FORM 990,	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE
PART VI,	TO THE PUBLIC UPON REQUEST.
SECTION C,	
LINE 19	

Return Explanation
Reference

FORM 990, PART XII, LINE 2C

SCHEDULE R
(Form 990)

Related

NATIONAL PARK TRUST INC.

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2019

Employer identification number

52-1691924

DLN: 93493041009751

OMB No. 1545-0047

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (b) (e) (f) Legal domicile (state Name, address, and EIN (if applicable) of disregarded entity Primary activity Total income End-of-year assets Direct controlling or foreign country) entity (1) CANONIE IDNL ACQUISITION LLC THE TAX EXEMPT PURPOSE IN NATIONAL PARK TRUST INC 401 EAST JEFFERSON STREET SUITE 207 OF ACQUIRING PARCELS OF ROCKVILLE, MD 20850 LAND. (2) NPT RANGE LIGHT ACQUISITION LLC THE TAX EXEMPT PURPOSE MΙ NATIONAL PARK TRUST INC 401 EAST JEFFERSON STREET SUITE 207 OF ACQUIRING PARCELS OF ROCKVILLE, MD 20850 LAND. THE TAX EXEMPT PURPOSE (3) NPT VIRGINIA PARKS PROJECTS LLC VA 320,000 NATIONAL PARK TRUST INC OF ACQUIRING PARCELS OF 401 EAST JEFFERSON STREET SUITE 207 ROCKVILLE, MD 20850 LAND. Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (g) Name, address, and EIN of related organization Legal domicile (state Exempt Code section Public charity status Direct controlling Primary activity Section 512(b) (13) controlled or foreign country) (if section 501(c)(3)) entity entity? No Yes For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50135Y Schedule R (Form 990) 2019

(a) Name, address, and EIN ol related organization	f	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	Disprop		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		ral or F	(k) Percenta ownersh
			1 1		,			Yes	No		Yes	No	
Identification of Related Organ because it had one or more related						ization ans	wered "Yes	s" on F	orm 9	990, Part IV	, line	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	L do (state	(c) egal micile or foreign		entity (C co	(e) e of entity orp, S corp, r trust)	(f) Share of total income	Share	(g) of end- year assets	-of- Perce owne	1) ntage rship	(13	(i) tion 5:) contr entity
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Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.	
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	
During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		
b	Gift, grant, or capital contribution to related organization(s)	1 b		
С	Gift, grant, or capital contribution from related organization(s)	1c		
d	Loans or loan guarantees to or for related organization(s)	1 d		
е	Loans or loan guarantees by related organization(s)	1e		
f	Dividends from related organization(s)	1f		
g	Sale of assets to related organization(s)	1 g		
h	Purchase of assets from related organization(s)	1h		
i	Exchange of assets with related organization(s)	1 i		
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		
I	Performance of services or membership or fundraising solicitations for related organization(s)	11		
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		
o	Sharing of paid employees with related organization(s)	10		
n	Reimbursement paid to related organization(s) for expenses	1p		
_	Reimbursement paid by related organization(s) for expenses	1q		
ч	Reimbursement paid by related organization(s) for expenses			
r	Other transfer of cash or property to related organization(s)	1r		
s	Other transfer of cash or property from related organization(s)	1s		

р	Reimbursement paid to related organization(s) for expenses				1 p	
q	Reimbursement paid by related organization(s) for expenses				1q	
r	Other transfer of cash or property to related organization(s)				1r	
s	Other transfer of cash or property from related organization(s)				1s	
	If the answer to any of the above is "Yes," see the instructions for information on who must complete this lin	e including covered	relationships and tran	eaction thresholds	_	
	If the answer to any of the above is res, see the mistractions for milorination on who must complete this in	c, melaanig covered	relationships and trai	isaction thresholds.		
	The answer to any or the above is Tes, see the instructions for information on who must complete this inf	- meraamig covered	relationships and trai	isaction timesholds.		
	(a)	(b)	(c)	(d)	mount involve	
					mount involve	ed
	(a)	(b) Transaction	(c)	(d)	mount involve	ed
	(a)	(b) Transaction	(c)	(d)	mount involve	ed
	(a)	(b) Transaction	(c)	(d)	mount involve	ed

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

Part VI 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.

was not a related organization. See instructions regarding exclusion for certain investment partnerships.													
(a) Name, address, and EIN of entity	(b) Primary activity	domicilo	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)		(e) e all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ite	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General c managin partner?	or 'g ?	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
													_
												П	
				_						Schedul	e R (Form	1990)) 2019

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Part VII	Supplemental Information						
Provide additional information for responses to questions on Schedule R. (see instructions).							
Retu	ırn Reference	Explanation					