

Return of Organization Exempt From Income Tax

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public.

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

A For the 2014 calendar year, or tax year beginning 07/01, 2014, and ending 06/30, 20 15

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization NATIONAL TRUST FOR HISTORIC PRESERVATION IN THE UNITED STATES
 Doing business as _____
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
2600 Virginia Avenue NW Suite 1100
 City or town, state or province, country, and ZIP or foreign postal code
Washington, DC, 20037

D Employer identification number
53-0210807

E Telephone number
202-588-6000

F Name and address of principal officer: National Trust for Historic Preservation Inc
2600 Virginia Avenue NW, Suite 1100, Washington, DC 20037

G Gross receipts \$ 59,415,309

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

H(c) Group exemption number ▶ _____

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ savingplaces.org

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1949 **M** State of legal domicile: DC

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>The National Trust for Historic Preservation protects significant places representing our diverse cultural experiences by taking direct action and inspiring broad public support.</u>		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	29
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	29
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	478
	6	Total number of volunteers (estimate if necessary)	6	385
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	259,161
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	-584,675
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 26,392,308	Current Year 24,924,529
	9	Program service revenue (Part VIII, line 2g)	5,401,573	4,438,682
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	15,536,125	14,862,645
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,985,866	3,576,801
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	50,315,872	47,802,657
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	3,795,158	4,275,792
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	23,611,062	23,959,303
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	340,178	251,096
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>7,629,366</u>		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	24,357,955	24,837,982
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	52,104,353	53,324,173
	19	Revenue less expenses. Subtract line 18 from line 12	-1,788,481	-5,521,516
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 330,728,418	End of Year 307,425,707
	21	Total liabilities (Part X, line 26)	36,156,885	36,361,547
	22	Net assets or fund balances. Subtract line 21 from line 20	294,571,533	271,064,160

Part II Signature Block

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

Sign Here

Signature of officer _____ Date _____
Stephanie Meeks, President and CEO
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name _____ Preparer's signature _____ Date _____ Check if self-employed PTIN _____
 Firm's name ▶ _____ Firm's EIN ▶ _____
 Firm's address ▶ _____ Phone no. _____

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III Yes No

1 Briefly describe the organization's mission:

The National Trust for Historic Preservation protects significant places representing our diverse cultural experience by taking direct action and inspiring broad public support.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 18,352,716 including grants of \$ 2,063,627) (Revenue \$ 5,785,791)

Historic Sites - The National Trust and its partners are the stewards of 27 National Trust Historic Sites, a nationally significant collection of historic places that represent a wide variety of architectural styles and structures, magnificent landscapes, remarkable object collections and diverse stories that bring American history to life. In 2015 the National Trust owned and managed 12 of these sites (one through a long-term lease): owned 9 sites that are managed by independent local organizations; and provided limited support to six other sites that are owned and managed by other entities. These historic sites are open to the public with more than 900,000 visitors annually. The history, stories, people, collections, architecture and landscapes of these sites are interpreted to on-site visitors, and through social media, websites and written communication to many more people. The sites serve their communities by providing educational programs, events and unique gathering places for community residents. The National Trust and its partner organizations maintain the sites as good models for historic preservation, collections management, interpretation and comprehensive stewardship.

4b (Code:) (Expenses \$ 12,132,230 including grants of \$ 2,230,838) (Revenue \$ 1,210,724)

Historic Preservation & Conservation: Preservation Services includes 1) Work to save threatened historic places of national significance and where the preservation implications are national in scope; 2) Information and technical assistance to members, private and public organizations, and government bodies with respect to contemporary preservation issues and rehabilitation projects related to important historic buildings and landmarks; 3) Financial assistance to organizations to facilitate preservation education programs, conferences and retention of professional consultants; 4) Partnerships with state and local private nonprofit preservation groups to stimulate and retain their field services capacity, professionalism, leadership in their geographical location, financial strength, and ability to save historic resources; 5) Technical assistance and information to communities in all parts of the country working to revitalize their historic Main Street neighborhoods; 6) Operations of thirteen field offices including Boise, ID., Boston, Charleston, S.C., Chicago, Denver, Houston, Los Angeles, Nashville, New York City, Portland, OR, San Francisco, Seattle, and Washington, D. C., that work closely with organizations and governments at all levels to save historic places.

4c (Code:) (Expenses \$ 5,924,784 including grants of \$ 103,831) (Revenue \$ 1,833,286)

Historic Preservation & Conservation: Education - Communicates the benefits of historic preservation, threats to historic places, and achievements in saving historic places to members and the public. Provides a quarterly magazine, professional journal, niche audience newsletters and a website to highlight important preservation issues, communicates preservation successes and stimulates new interest in historic preservation. To mobilize action by the public, stages media campaigns such as the 11 Most Endangered Historic Places list and the Dozen Destinations list. Provides information about the legal and policy aspects of historic preservation. Develops and provides 78 tours to important destinations in the US and internationally.

4d Other program services (Describe in Schedule O.) See Schedule O, Statement 1
(Expenses \$ 3,188,841 including grants of \$ 0) (Revenue \$ 1,276,877)

4e Total program service expenses **▶** 39,598,571

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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? <i>If "Yes," complete Schedule C, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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, Part I</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<input type="checkbox"/>	<input type="checkbox"/>

Part IV Checklist of Required Schedules *(continued)*

	Yes	No
21 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? <i>If "Yes," complete Schedule I, Parts I and II</i>	✓	
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		✓
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>	✓	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		✓
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		✓
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>		✓
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		✓
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		✓
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		✓
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		✓
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		✓
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	✓	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	✓	
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		✓
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		✓
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	✓	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	✓	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	✓	
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	✓	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		✓
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		✓
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	✓	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

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

		Yes	No		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	361		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	✓		
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	2a	478		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	✓		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	✓		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			✓
b	If "Yes," enter the name of the foreign country: ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	✓		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	✓		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	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	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
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	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state?	13a			
Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b			

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
 Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	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.		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		<input checked="" type="checkbox"/>
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?		<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<input checked="" type="checkbox"/>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		<input checked="" type="checkbox"/>
6	Did the organization have members or stockholders?	<input checked="" type="checkbox"/>	
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?	<input checked="" type="checkbox"/>	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		<input checked="" type="checkbox"/>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	<input checked="" type="checkbox"/>	
b	Each committee with authority to act on behalf of the governing body?	<input checked="" type="checkbox"/>	
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		<input checked="" type="checkbox"/>

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		<input checked="" type="checkbox"/>
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<input checked="" type="checkbox"/>	
11b	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	<input checked="" type="checkbox"/>	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<input checked="" type="checkbox"/>	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<input checked="" type="checkbox"/>	
13	Did the organization have a written whistleblower policy?	<input checked="" type="checkbox"/>	
14	Did the organization have a written document retention and destruction policy?	<input checked="" type="checkbox"/>	
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?		
15a	The organization's CEO, Executive Director, or top management official	<input checked="" type="checkbox"/>	
15b	Other officers or key employees of the organization	<input checked="" type="checkbox"/>	
	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?	<input checked="" type="checkbox"/>	
16b	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?	<input checked="" type="checkbox"/>	

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ► [See Schedule O, Statement 2](#)
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 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: ►
[Denise Wise, \(202\)588-6192](#)

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

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

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

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

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

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

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

(A) Name and Title	(B) 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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Victor Ashe Trustee	2 0	<input checked="" type="checkbox"/>						0	0	0
Leslie Greene Bowman Trustee	2 0	<input checked="" type="checkbox"/>						0	0	0
Laura W Bush Trustee	2 0	<input checked="" type="checkbox"/>						0	0	0
Susan Chapman Hughes Trustee	2 0	<input checked="" type="checkbox"/>						0	0	0
Lawrence H Curtis Trustee	2 0	<input checked="" type="checkbox"/>						0	0	0
Kevin D Daniels Trustee	2 0	<input checked="" type="checkbox"/>						0	0	0
Gloria Estefan Trustee	2 0	<input checked="" type="checkbox"/>						0	0	0
Kevin Gover Trustee	2 0	<input checked="" type="checkbox"/>						0	0	0
Joe Grills Trustee	2 0	<input checked="" type="checkbox"/>						0	0	0
F Sheffield Hale Trustee	2 0	<input checked="" type="checkbox"/>						0	0	0
Marilyn Wood Hill Trustee	2 0	<input checked="" type="checkbox"/>						0	0	0
Luis G Hoyos Trustee	2 0	<input checked="" type="checkbox"/>						0	0	0
Fernando Lloveras San Miguel Vice-Chairman of the Board of Trustees	2 0	<input checked="" type="checkbox"/>						0	0	0
Marcia V Mayo Trustee	2 0	<input checked="" type="checkbox"/>						0	0	0

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

(A) Name and Title	(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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Vincent L Michael	2									
Trustee	0	✓					0	0	0	
F Joseph Moravec	2									
Trustee	0	✓					0	0	0	
Martha Nelson	2									
Trustee	0	✓					0	0	0	
Marita Rivero	2									
Chairman of the Board of Trustees	0	✓		✓			0	0	0	
Charles Morgan Royce	2									
Trustee	0	✓					0	0	0	
G Jackson Tankersley Jr	2									
Trustee	0	✓					0	0	0	
Mary M Thompson	2									
Trustee	0	✓					0	0	0	
Kenneth R Woodcock	2									
Trustee	0	✓					0	0	0	
Stephanie Toothman	2									
Statutory Ex-Officio Trustee, Representative of the	0	✓					0	0	0	
Edward Passarelli	2									
Statutory Ex-Officio Trustee, Representative of the	0	✓					0	0	0	
Earl A Powell	2									
Ex-Officio Trustee, Director of the National Gallery	0	✓					0	0	0	
Lester G Fant	2									
Non-Statutory Trustee, Representative of the Histo	0	✓					0	0	0	
K Vance Kelley AIA	2									
Non-Statutory Trustee, Representative of the Advis	0	✓					0	0	0	
Mark McDonald	2									
Non-Statutory Trustee, Representative of the State	0	✓					0	0	0	

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

(A) Name and Title	(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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Timothy P Whalen	2									
Vice-Chairman of the Board of Trustees	0	✓		✓			0	0	0	
Stephanie Meeks	39									
President and Chief Executive Officer	1			✓			444,570	0	56,028	
Paul Edmondson	39									
Chief Legal Officer	1			✓			250,610	0	17,300	
Michael Forster	39									
Chief Financial and Administrative Officer-Partial Y	1			✓			149,910	0	22,877	
Carla Washinko	39									
Chief Financial/Administrative - OfficerPartial Year	1			✓			0	0	0	
David Brown	40									
Chief Preservation Officer	0				✓		313,991	0	35,713	
Amy Maniatis	40									
Chief Marketing Officer - Partial Year	0				✓		54,014	0	70	
Robert Bull	40									
Chief Development Officer	0				✓		277,985	0	12,694	
Terry Richey	40									
Chief Marketing Officer - Partial Year	0				✓		186,428	0	26,502	
Tom Cassidy	40									
Vice President for Government Relations & Policy	0					✓	175,950	0	38,476	
Estevan Rael-Galvez	40									
Vice President for Historic Sites	0					✓	174,398	0	6,794	
Kim Tran	40									
Senior Director of Finance	0					✓	167,327	0	12,262	
Sam Kilpatrick	40									
Controller	0					✓	165,950	0	24,143	
Barbara Pahl	40									
Vice President for Western Field Offices	0					✓	158,712	0	19,204	

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

(A) Name and title	(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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-total							2,519,845	0	272,063	
1c Total from continuation sheets to Part VII, Section A										
1d Total (add lines 1b and 1c)							2,519,845	0	272,063	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶ 34**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		✓
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	✓	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		✓

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
Cambridge Associates LLC, 125 High Street, Boston, MA 01220-2112	Investment Advisor	419,715
Viget Labs LLC, 105 West Broad Street, 4th Floor, Falls Church, VA 22046	Consulting Services	276,560
Barker & Scott Consulting LLC, 1901 Quincy Street NW, Washington, DC 20011	Consulting Services	228,950
BDO USA LLP, 8401 Greensboro Drive, McLean, VA 22102	Audit and Tax Services	228,902
Oak Grove Restoration Company, 5815 Riggs Road, Laytonsville, MD 20882	Construction	204,452

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 **▶ 8**

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a 29,380				
	b Membership dues	1b 1,106,092				
	c Fundraising events	1c 455,841				
	d Related organizations	1d 0				
	e Government grants (contributions)	1e 715,023				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 22,618,193				
	g Noncash contributions included in lines 1a-1f: \$	3,829,842				
	h Total. Add lines 1a-1f	▶ 24,924,529				
Program Service Revenue	Business Code					
	2a <u>Contract services/commissions</u>	900099	278,442	278,442	0	
	b <u>Admissions and special events</u>	900099	3,276,246	3,047,617	228,629	
	c <u>Advertising</u>	541800	619,729	0	619,729	
	d <u>Reimbursement of expenses</u>	900099	264,265	264,265	0	
	e					
	f All other program service revenue		0	0	0	
g Total. Add lines 2a-2f	▶ 4,438,682					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	▶ 4,884,415	0	-976,941	5,861,356	
	4 Income from investment of tax-exempt bond proceeds ▶	0	0	0	0	
	5 Royalties	▶ 1,673,855	0	248,280	1,425,575	
	6a Gross rents	(i) Real	3,167,139	0		
		(ii) Personal	0			
		b Less: rental expenses	2,533,433	0		
	c Rental income or (loss)	633,706	0			
	d Net rental income or (loss)	▶ 633,706	633,706	0	0	
	7a Gross amount from sales of assets other than inventory	(i) Securities	18,448,931	0		
		(ii) Other	0			
		b Less: cost or other basis and sales expenses	8,470,701	0		
	c Gain or (loss)	9,978,230	0			
	d Net gain or (loss)	▶ 9,978,230	0	0	9,978,230	
	8a Gross income from fundraising events (not including \$ <u>455,841</u> of contributions reported on line 1c). See Part IV, line 18	a 69,478				
	b Less: direct expenses	b 194,137				
	c Net income or (loss) from fundraising events	▶ -124,659		0	-124,659	
	9a Gross income from gaming activities. See Part IV, line 19	a 0				
		b Less: direct expenses	b 0			
		c Net income or (loss) from gaming activities	▶ 0	0	0	0
	10a Gross sales of inventory, less returns and allowances	a 773,226				
b Less: cost of goods sold		b 414,381				
c Net income or (loss) from sales of inventory		▶ 358,845	219,381	139,464	0	
Miscellaneous Revenue		Business Code				
11a <u>Insurance repayments</u>	900099	183,273	183,273	0		
b <u>Sale of property and miscellaneous ir</u>	900099	1,579,755	1,579,755	0		
c <u>Transfer endowemnt to another orgar</u>	900099	-913,112	-913,112	0		
d All other revenue		185,138	185,138	0		
e Total. Add lines 11a-11d	▶ 1,035,054					
12 Total revenue. See instructions.	▶ 47,802,657	5,478,465	259,161	17,140,502		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	4,240,640	4,240,640		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	35,152	35,152		
4 Benefits paid to or for members	0	0		
5 Compensation of current officers, directors, trustees, and key employees	845,087	395,396	259,334	190,357
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7 Other salaries and wages	19,056,637	13,475,453	2,355,354	3,225,830
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	923,798	643,702	121,369	158,727
9 Other employee benefits	1,541,519	820,556	450,606	270,357
10 Payroll taxes	1,592,262	1,109,488	209,193	273,581
11 Fees for services (non-employees):				
a Management	0	0	0	0
b Legal	82,507	42,730	27,288	12,489
c Accounting	228,416	2,462	213,251	12,703
d Lobbying	0	0	0	0
e Professional fundraising services. See Part IV, line 17	251,096			251,096
f Investment management fees	919,137	579,056	340,081	0
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	5,147,327	4,171,028	276,559	699,740
12 Advertising and promotion	0	0	0	0
13 Office expenses	157,551	133,201	12,838	11,512
14 Information technology	794,708	426,086	336,290	32,332
15 Royalties	0	0	0	0
16 Occupancy	3,125,172	2,108,676	581,379	435,117
17 Travel	1,443,640	1,139,684	79,982	223,974
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19 Conferences, conventions, and meetings	0	0	0	0
20 Interest	232,112	73,163	158,949	0
21 Payments to affiliates	132,656	132,656	0	0
22 Depreciation, depletion, and amortization	538,180	282,783	170,417	84,980
23 Insurance	698,956	624,279	49,318	25,359
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 <u>Printing</u>	1,684,091	1,074,152	17,549	592,390
b <u>Real estate</u>	3,464,222	3,463,460	0	762
c <u>Maintenance</u>	1,003,930	987,201	3,553	13,176
d <u>Property development</u>	1,893,589	1,893,589	0	0
e All other expenses	3,291,788	1,743,978	432,926	1,114,884
25 Total functional expenses. Add lines 1 through 24e	53,324,173	39,598,571	6,096,236	7,629,366
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	0	1	0
	2 Savings and temporary cash investments	1,846,984	2	2,117,720
	3 Pledges and grants receivable, net	14,412,764	3	11,704,585
	4 Accounts receivable, net	522,670	4	1,465,369
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	614,388	8	618,576
	9 Prepaid expenses and deferred charges	751,200	9	740,475
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	12,280,110		
	b Less: accumulated depreciation	3,613,199	10c	8,666,911
	11 Investments—publicly traded securities	97,488,514	11	84,628,218
	12 Investments—other securities. See Part IV, line 11	204,135,424	12	194,246,944
	13 Investments—program-related. See Part IV, line 11	195,479	13	305,642
	14 Intangible assets	0	14	0
	15 Other assets. See Part IV, line 11	2,363,530	15	2,931,267
16 Total assets. Add lines 1 through 15 (must equal line 34)	330,728,418	16	307,425,707	
Liabilities	17 Accounts payable and accrued expenses	7,814,537	17	5,590,950
	18 Grants payable	0	18	0
	19 Deferred revenue	1,288,757	19	1,631,641
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	4,474,080	24	6,450,616
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	22,579,511	25	22,688,340
	26 Total liabilities. Add lines 17 through 25	36,156,885	26	36,361,547
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	110,143,348	27	103,932,976
	28 Temporarily restricted net assets	97,352,485	28	80,284,338
	29 Permanently restricted net assets	87,075,700	29	86,846,846
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	294,571,533	33	271,064,160
34 Total liabilities and net assets/fund balances	330,728,418	34	307,425,707	

Part XI Reconciliation 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	47,802,657
2	Total expenses (must equal Part IX, column (A), line 25)	2	53,324,173
3	Revenue less expenses. Subtract line 2 from line 1	3	-5,521,516
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	294,571,533
5	Net unrealized gains (losses) on investments	5	-17,985,857
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	271,064,160

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		✓
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	✓	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	✓	
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.	✓	

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2014

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

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization NATIONAL TRUST FOR HISTORIC PRESERVATION IN THE UNITED STATES	Employer identification number 53-0210807
--	---

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 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 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vii)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	32,697,211	10,206,904	27,738,980	26,392,308	24,924,529	121,959,932
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4 Total. Add lines 1 through 3	32,697,211	10,206,904	27,738,980	26,392,308	24,924,529	121,959,932
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						13,451,643
6 Public support. Subtract line 5 from line 4.						108,508,289

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	32,697,211	10,206,904	27,738,980	26,392,308	24,924,529	121,959,932
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,559,300	1,454,847	5,426,389	6,412,395	7,285,099	24,138,030
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	5,141,188	33,925	197,926	156,350	1,035,054	6,564,443
11 Total support. Add lines 7 through 10						152,662,405
12 Gross receipts from related activities, etc. (see instructions)					12	39,078,832
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, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	71.08 %
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	76.1 %
16a 33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2014. 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 organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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 under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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						
c 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 (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 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, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests—2014.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- b 33 1/3% support tests—2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
3b	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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
3c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
4b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
4c	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)? <i>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.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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 amendment to the organizing document).</i>		
5b	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?		
5c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a	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))? <i>If "Yes," provide detail in Part VI.</i>		
9b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
9c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer (b) below.</i>		
10b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	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	
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>	11c	

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>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.</i>	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? <i>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.</i>	2	

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>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).</i>	1	

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	3	

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test. Answer (a) and (b) below.		
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? <i>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.</i>	2a	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>	2b	
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	3b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c 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		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 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 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year		
1	Amounts paid to supported organizations to accomplish exempt purposes			
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.			
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a				
b				
c				
d				
e	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7	Excess distributions carryover to 2015. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
b				
c				
d	Excess from 2013			
e	Excess from 2014			

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2014

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

Open to Public Inspection

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization NATIONAL TRUST FOR HISTORIC PRESERVATION IN THE UNITED STATES	Employer identification number 53-0210807
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$
- 3 Volunteer hours ▶

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	48,953													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	477,250													
c	Total lobbying expenditures (add lines 1a and 1b)	526,203													
d	Other exempt purpose expenditures	45,168,604													
e	Total exempt purpose expenditures (add lines 1c and 1d)	45,694,807													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000													
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000
c Total lobbying expenditures	131,287	319,761	409,244	526,203	1,386,495
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures	364	1,318	5,077	48,953	55,712

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

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**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization NATIONAL TRUST FOR HISTORIC PRESERVATION IN THE UNITED STATES	Employer identification number 53-0210807
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	8	1
2 Aggregate value of contributions to (during year)	20,000	0
3 Aggregate value of grants from (during year)	310,234	7,500
4 Aggregate value at end of year	8,000,071	167,150
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements.
Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a 114
b Total acreage restricted by conservation easements	2b 817
c Number of conservation easements on a certified historic structure included in (a)	2c 96
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d 1

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 1

4 Number of states where property subject to conservation easement is located ▶ 24

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ 3,617

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ 234,810

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included in Form 990, Part VIII, line 1 ▶ \$ 0

(ii) Assets included in Form 990, Part X ▶ \$ 0

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included in Form 990, Part VIII, line 1 ▶ \$ 3,567,500

b Assets included in Form 990, Part X ▶ \$ 2,107,300

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? **Yes** **No**

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	291,685,068	261,829,310	214,323,028	207,739,528	222,398,439
b Contributions	-63,855	803,634	35,418,617	42,735	1,144,422
c Net investment earnings, gains, and losses	-4,930,949	43,987,167	23,822,209	12,411,881	-1,387,967
d Grants or scholarships	1,372,952	1,221,096	1,049,822	464,012	861,308
e Other expenditures for facilities and programs	13,831,414	12,221,232	9,418,813	4,822,285	11,989,512
f Administrative expenses	1,375,507	1,492,715	1,265,909	584,819	1,564,546
g End of year balance	270,110,391	291,685,068	261,829,310	214,323,028	207,739,528

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment **▶** 36 %
- b** Permanent endowment **▶** 32 %
- c** Temporarily restricted endowment **▶** 32 %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(ii) related organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	<input type="checkbox"/>	<input type="checkbox"/>

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	0	0	0
b Buildings	0	5,240,418	1,277,821	3,962,597
c Leasehold improvements	0	3,264,435	334,576	2,929,859
d Equipment	0	3,775,257	2,000,802	1,774,455
e Other	0	0	0	0
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				8,666,911

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives	0	
(2) Closely-held equity interests	0	
(3) Other Investments in subsidiaries	8,764,771	Cost
(A) Other non-publically held investments	185,482,173	End-of-Year Market Value
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►	194,246,944	

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) -----		
(2) -----		
(3) -----		
(4) -----		
(5) -----		
(6) -----		
(7) -----		
(8) -----		
(9) -----		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) -----	
(2) -----	
(3) -----	
(4) -----	
(5) -----	
(6) -----	
(7) -----	
(8) -----	
(9) -----	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ►	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) Gift annuities	1,370,982
(3) Endowment for Congressional Cemetery	4,898,439
(4) Endowment for Val-Kil	113,939
(5) Endowment for Montpelier	9,044,245
(6) Endowment for Belle Grove	255,808
(7) Endowment for Cliveden	601,135
(8) Charitable Remainder Trusts	534,433
(9) Sch D, Stmt 1	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►	22,688,340

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	30,416,289
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-17,985,859
b	Donated services and use of facilities	2b	910,108
c	Recoveries of prior year grants	2c	0
d	Other (Describe in Part XIII.)	2d	0
e	Add lines 2a through 2d	2e	-17,075,751
3	Subtract line 2e from line 1	3	47,492,040
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	919,137
b	Other (Describe in Part XIII.)	4b	-608,520
c	Add lines 4a and 4b	4c	310,617
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	47,802,657

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	53,923,662
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	910,108
b	Prior year adjustments	2b	0
c	Other losses	2c	0
d	Other (Describe in Part XIII.)	2d	608,518
e	Add lines 2a through 2d	2e	1,518,626
3	Subtract line 2e from line 1	3	52,405,036
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	919,137
b	Other (Describe in Part XIII.)	4b	0
c	Add lines 4a and 4b	4c	919,137
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	53,324,173

Part XIII Supplemental Information.

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

Schedule D, Part II, Line 3 - One conservation easement was amended during 2015. The easement was transferred from another easement holding organization and was amended, consistent with the conversation easement's preservation and conservation's purposes, in accordance with the National Trust's Easement Amendment Policy. The amendment increased the amount of property protected by the easement and added additional restrictions on the property.

Schedule D, Part II, Line 4 - Number of states where properties subject to conservation easements are located was 24 plus the District of Columbia for a total of 25.

Schedule D, Part II, Line 5 - The National Trust's Board-established easement policy sets out general standards for acquisition, inspection and enforcement. These policies are reflected in easement deeds, authorizing inspection rights and full enforcement powers. The National Trust physically inspects its easements on a regular basis. In addition to physical monitoring, the National Trust also monitors properties through the provision of technical advice to property owners related to the care and maintenance of their property. Also, the National Trust using the Secretary of the interior's Standards for the Treatment of Historic Properties, reviews the existing condition of a property whenever it receives a request to make a change or alteration from a property owner. The National Trust enforces restrictions in easements, including through legal action when necessary.

Schedule D, Part II, Line 9 - Expenses relating to the administration of the National Trust's easement program are included as program-related expenses on the Statement of Functional Expenses. The value of easements is not included on the Statement of Financial Position.

Schedule D, Part III, Line 1 - The Trust follows the accounting practice of not including in its assets the cost or appraised value of any of its historic sites, which upon receipt may be retained by the Trust. Related expenditures for restoration, stabilization, reconstruction and development are charged to expense as incurred. Properties accepted with the intent of sale are recognized as revenue at the time of receipt at the estimated fair value less costs for historic evaluation, repair, maintenance costs and impact of the easement. The historic sites, including objects and furnishings owned by the Trust with the intent of retention are not reported in the accompanying balance sheets

Part XIII - Supplemental Information (Continued)

under the accounting policy stated above.

Schedule D, Part III, Line 4 - The National Trust owns certain historic sites that are operated as museums or are otherwise integral to the Trust's charitable and educational preservation program. These historic sites, most of which contain significant collections of furnishings, are regularly open to the public.

Schedule D, Part V, Line 4 - The National Trust's endowment funds are used to support the costs of maintaining its historic sites, for grants to preservation organizations and similar purposes and to support the variety of National Trust's charitable and educational programs and activities. A portion of the endowment is unrestricted and used for general operating support for the organization.

Schedule D, Part X, Line 2 - The Trust accounts for uncertain tax positions in accordance with FASB Accounting Standards Codification (ASC) 740, Income Taxes (ASC-740), which requires that a tax position be recognized or de-recognized based on a "more likely than not" threshold. This applies to positions taken or expected to be taken in a tax return. The Trust does not believe its financial statements include any material uncertain tax positions. The Trust is still open to examination by taxing authorities from fiscal year ended June 30, 2012 forward.

Schedule D, Part XI, Line 4b - Cost of goods sold of 414,383 plus special event expenses of 194,137 for a total of 608,520.

Schedule D, Part XII, Line 2d - Cost of goods sold of 414,381 plus special event expenses of 194,137 for a total of 608,518.

Form: Schedule D

Page: 3

Line Number: Part X

Other Liabilities

Description	Amount
Emerson School Depoist Reserve	9,816
Deferred Rent	5,531,009
357b Plan Balance	328,534
Total:	5,869,359

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2014

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization

NATIONAL TRUST FOR HISTORIC PRESERVATION IN THE UNITED STATES

Employer identification number

53-0210807

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) Central America and the Caribbean	0	0	Investments		49,970,930
(2) Europe (including Iceland and Greenland)	0	0	Grantmaking		35,152
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total					
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	0	0			50,006,082

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			Europe (including Iceland)	Preservation	35,152	Wire transfer	0		
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **▶ 1**

3 Enter total number of other organizations or entities **▶ 1**

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
 Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1** Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2** Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)* Yes No

- 3** Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4** Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)*. Yes No

- 5** Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6** Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)* Yes No

Part V Supplemental Information

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

Schedule F, Part I, Line 2 - The International Organization of National Trusts (INTO) is an association of National Trusts from throughout the world. As one of the oldest and largest National Trusts, NTHP plays a leadership role in the oversight and management of INTO. David J Brown, Executive Director and Chief Preservation Officer with NTHP, sits on the Executive Committee of INTO, where NTHP has a permanent seat. In that capacity, he reviews budgets and expenditures of the INTO Secretariat and works closely with the Head of the Secretariat on INTO issues of special interests in the United States.

Multiple horizontal dashed lines for supplemental information.

**SCHEDULE G
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

NATIONAL TRUST FOR HISTORIC PRESERVATION IN THE UNITED STATES

Employer identification number

53-0210807

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a** Mail solicitations
 - b** Internet and email solicitations
 - c** Phone solicitations
 - d** In-person solicitations
 - e** Solicitation of non-government grants
 - f** Solicitation of government grants
 - g** Special fundraising events
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 See Schedule G, Part IV, Statement 1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total				0	251,096	-251,096

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

AK, AR, AZ, CA, CO, CT, FL, GA, HI, IL, IN, KS, KY, LA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		Shadows Special Event (event type)	Wilson House Spring Event (event type)	5 (total number)	
Revenue	1 Gross receipts	38,740	25,060	461,539	525,339
	2 Less: Contributions	33,200	13,643	408,998	455,841
	3 Gross income (line 1 minus line 2)	5,540	11,417	52,541	69,498
Direct Expenses	4 Cash prizes	0	0	0	0
	5 Noncash prizes	0	0	0	0
	6 Rent/facility costs	0	0	0	0
	7 Food and beverages	0	0	0	0
	8 Entertainment	0	0	0	0
	9 Other direct expenses	8,328	12,993	172,816	194,137
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				194,137
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-124,639

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
7 Direct expense summary. Add lines 2 through 5 in column (d) ▶					
8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶					

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Form: Schedule G

Page: 1

Line Number: Part I Line 2b

Fundraiser Activity Information

Name and Address	Activity	C1	Gross Receipts	C2	C3
Avalon Consulting 2300 M Street NW Suite 700 Washington, DC 20036	Telemarketing Services	No	0	243,647	-243,647
Public Interest Communications Inc 7700 Leesburg Pike Suite 301 North Falls Church, VA 22043	Telemarketing Services	No	0	7,449	-7,449
Total:			0	251,096	-251,096

C1 = Fundraiser control of funds?

C2 = Amount paid to (or retained by) fundraiser

C3 = Amount paid to (or retained by) organization

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

Employer identification number

NATIONAL TRUST FOR HISTORIC PRESERVATION IN THE UNITED STATES

53-0210807

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (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 non-cash assistance	(h) Purpose of grant or assistance
(1) <u>Sch I, Stmt 1</u>							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 74
- 3 Enter total number of other organizations listed in the line 1 table ▶ 8

Form: Schedule I

Page: 1

Line Number: Part II

Description of Grants and Other Assistance to Governments and Organizations in the United States

		Recipient EIN	Amt. of cash grant	Amt. of non-cash asst.
Name and address	Archaeological Conservancy 1717 Firard Boulevard NE Albuquerque, NM 87106	95-3403273	10,000	
IRC code section	501(c)3			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant				
Name and address	Ashkenaz Music and Dance Center 1317 San Pablo Avenue Berkeley, CA 94702	94-3268992	27,000	
IRC code section	501(c)3			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant				
Name and address	Association for Preservation of Congressional Cemetery 1801 E Street SE Washington, DC 20003	52-1071828	206,818	
IRC code section	501(c)3			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant				
Name and address	Association for Preservation of Natchitoches PO Box 2248 Natchitoches, LA 71457	23-7125857	7,500	
IRC code section	501(c)3			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant				
Name and address	Atomic Heritage Foundation 910 17th Street NW No 408 Washington, DC 20006	03-0380408	15,000	
IRC code section	501(c)3			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant				
Name and address	Auditorium Theatre of Roosevelt University Inc 50 East Congress Parkway Chicago, IL 60605	36-3145476	10,000	
IRC code section	501(c)3			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant				
Name and address	Berkeley Architectural Heritage Association PO Box 1137	51-0180759	10,000	

	Berkeley, CA 94701		
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Building Energy Inc 1338 Warrington Road Deerfield, IL 60015	45-4819239	49,200
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Campti Field of Dreams Inc 211 Edenborn Street Campti, LA 71411	72-1489375	8,500
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Capital Hill Housing Improvement 1620 12th Avenue Suite 205 Seattle, WA 98122	91-0979968	20,500
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Central City Opera House Association 400 South Colorado Blvd No 530 Denver, CO 80246	84-6002285	7,438
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Christ United Methodist Church 401 High Street Chestertown, MD 21620	52-1264025	8,420
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Church of the Good Shepherd 1823 Ninth Street Berkeley, CA 94710	94-1156840	25,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	City Wide Mortgage & Credit Counseling 8 N Main Street Dayton, OH 45402	31-1462024	12,000

IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Cliveden Inc 6401 Germantown Avenue Philadelphia, PA 19144	23-2232675	65,603
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Columbus Landmark Foundation 61 Jefferson Avenue Columbus, OH 43215	31-0914612	10,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Danville Business Alliance 346 Mill Street Danville, PA 17821	23-3076617	8,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Drayton Hall Preservation Trust 3380 Ashley River Road Charleston, SC 29414	45-4938941	1,887,412
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Dumbarton House NSCDA 2715 Q Street NW Washington, DC 20007	53-0224364	7,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Dunbarton Town Hall & Theater RestorProj 88 Twist Hill Road Dunbarton, NH 03046	45-2595332	6,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Eleanor Roosevelt Val-Kill Partnership Inc 4097 Albany Post Road Hyde Park, NY 12538	46-4020564	86,574
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			

Purpose of grant

Name and address	Energy Center of Wisconsin 749 University Row Suite 320 Madison, WI 53705	39-1656021	63,042
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Energy Resource Management 1331 Lovejoy Street No 850 Portland, OR 97209	27-0716667	30,439
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Filoli Center Inc 86 Canada Road Woodside, CA 94062	95-2996648	25,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Friends of Cedar Mesa PO Box 338 Bluff, UT 84512	35-2426283	15,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Friends of Mount Auburn Cemetery 580 Mount Auburn Street Cambridge, MA 02138	22-3084639	9,350
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Friends of Petrified National Forest Box 2217 Petrified Forest, AZ 86028	46-5506774	11,300
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Friends of the Natatorium PO Box 25715 Honolulu, HI 96825	99-0250247	7,500
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			

Name and address	Galveston Historical Foundation Inc 502 20th Street Galveston, TX 77550	74-1487824	10,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Georgia Trust for Historic Preservation 934 Georgia Avenue Macon, GA 31201	23-7357226	19,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Goucher College 1021 Dulaney Valley Road Baltimore, MD 21204	52-0691613	7,500
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Historic Charles Foundation PO Box 1120 Charleston, SC 29402	57-6000599	6,135
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Historic Kansas City Foundation 234 West 10th Street Kansas City, MO 64105	23-7368504	6,195
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Land Heritage Institute Foundation 114 East Cevallos San Antonio, TX 78204	30-0067383	15,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Lend Lease Construction One North Wacker Drive No 870 Chicago, IL 60606	56-0315630	20,198
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Lifelong Medical Care	94-2502308	25,000

	PO Box 11247 Berkeley, CA 94712		
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Lower East Side Tenement Museum 91 Orchard Street New York, NY 10002	13-3475390	30,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Mason City Downtown Association 9 North Federal Avenue Mason City, IA 50401	48-1256121	10,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Merchant's House Museum 29 East 4th Street New York, NY 10003	23-7186077	10,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Milwaukee Preservation Alliance PO Box 510642 Milwaukee, WI 53202	43-2026706	10,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Model T Auto Heritage Complex Inc 461 Piquette Avenue Detroit, MI 48202	38-3455896	6,500
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Mokuaikaua Church 75-5713 Alii Drive Kailua Kona, HI 96740	99-0113266	5,800
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Montpelier Foundation PO Box 67 13384 Laundry Road Montpelier Station, VA 22957	31-1620682	38,100

IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	New Hampshire Preservation Alliance PO Box 268 Concord, NH 03302	22-2603277	8,700
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	New York Landmarks Conservancy Inc One Whitehall Street Bowling Green, NY 10004	23-2603277	10,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Oatlands Inc 20850 Oatlands Plantation Lane Leesburg, VA 20175	54-1118635	19,748
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Ohio Historical Society 800 E 17th Street Columbus, OH 43211	31-4389673	10,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Paleocultural Research Group PO Box 745309 Arvada, CO 80006	86-0840634	10,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Panida Theater 300 N First Avenue Sandpoint, ID 83864	82-0233559	5,500
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Preservation America Trust 7342 Linton Road Sparta, GA 31087	31-1584853	9,333
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			

Purpose of grant

Name and address	Preservation North Carolina PO Box 27644 Raleigh, NC 27611	56-1145386	10,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Preservation Society of Charleston Inc PO Box 521 Charleston, SC 29402	57-0439524	20,500
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Preservation Trust of Vermont Inc 104 Church Street Burlington, VT 05401	03-0281195	6,022
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Preservation Virginia 204 West Franklin Street Richmond, VA 23220	54-0568800	8,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Preserve Rhode Island 957 North Main Street Providence, RI 02904	05-6012417	7,500
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Queen Anne's County Historical Society PO Box 62 Centerville, MD 21617	52-6049578	10,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	San Francisco Heritage 2007 Franklin Street San Francisco, CA 94109	23-7135037	251,500
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	San Juan Mountain Association	23-7437775	5,308

	PO Box 2261 Durango, CO 81302		
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Save the Star House PO Drawer 1447 Shawnee, OK 74802	47-4977786	15,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Seventh Regiment Armory Conservancy 643 Park Avenue New York, NY 10065	13-4086800	10,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Shrewsbury Parish Route 213 Kennedyville, MD 21619	52-1956132	15,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	St Mary Church Dubuque Iowa Corp 1229 Mt Loretta Avenue Dubuque, IA 52004	42-0741001	10,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	St John the Divine Community Art & Education Center PO Box 6415 Kansas City, KS 66103	45-4935865	10,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Sweet Home Alumni Seguin 3340 Sweet Home Road Seguin, TX 78155	47-1823326	6,578
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			
Name and address	Telluride Council for the Arts & Humanities 283 S Fir Street Telluride, CO 81435	84-0712952	10,000
IRC code section	501(c)3		

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant

Name and address	Trustees of the Mercer Fonthill Museum 84 South Pine Street Doylestown, PA 18901	23-1976299	5,150
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IRC code section	501(c)3
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Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant

Name and address	United States Lightship Museum Inc 1 Melvin Avenue Beverly, MA 01915	26-4349122	250,000
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IRC code section	501(c)3
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Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant

Name and address	Utah Heritage Foundation PO Box 28 Salt Lake City, UT 84110	81-0272392	5,652
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IRC code section	501(c)3
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Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant

Name and address	Waterfront Historic Area League 128 Union Street New Bedford, MA 02740	94-6130520	16,763
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IRC code section	501(c)3
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Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant

Name and address	Wayfarers Chapel 5755 Palos Verdes Drive South Rancho Palos Verdes, CA 90275	04-6002669	10,000
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IRC code section	501(c)3
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Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant

Name and address	West End Citizens Association Inc PO Box 13 Cambridge, MD 21613	52-2028162	25,000
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IRC code section	501(c)3
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Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant

Name and address	Wisconsin Historical Foundation 816 State Street Madison, WI 53706	39-0921093	58,520
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IRC code section	501(c)3
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Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant

Name and address	World Conference of Mayors Inc PO Box 6491 San Antonio, TX 78209	52-1373507	10,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			

Name and address	York Country Heritage Trust 250 East Market Street York, PA 17403	23-1352323	10,000
IRC code section	501(c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			

Name and address	Bureau of Land Management Utah State Office 440 West 200 South Suite 500 Salt Lake City, UT 84145	84-0437540	6,000
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			

Name and address	City of San Marcos 630 E Hopkins San Marcos, TX 78666	74-6002238	7,500
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			

Name and address	Dept of the Interior NPS Jefferson National Expansion Memorial 11 N 4th Street St Louis, MO 63102	53-0197094	10,000
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			

Name and address	Harris County Sports & Convention Corp One NRG Park Houston, TX 77054	76-0604222	25,000
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			

Name and address	Mayor & Council of Snow Hill 103 Bank Street Snow Hill, MD 21863	52-6000807	6,000
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant			

Name and address	San Miguel County Colorado	84-6000806	10,000
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POB 1170
 333 West CO Avenue
 Telluride, CO 81435

IRC code section
 Method of valuation
 Desc. of Non-Cash Asst.
 Purpose of grant

Name and address	Town of Aquinnah 65 State Road Aquinnah, MA 02535	04-6001154	10,000
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IRC code section
 Method of valuation
 Desc. of Non-Cash Asst.
 Purpose of grant

Name and address	US Forest Service-Black Hills National Forest C/O Citibank PO Box 301550 Los Angeles, CA 90030	30-0155563	10,000
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IRC code section
 Method of valuation
 Desc. of Non-Cash Asst.
 Purpose of grant

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

NATIONAL TRUST FOR HISTORIC PRESERVATION IN THE UNITED STATES

53-0210807

Part I Questions Regarding Compensation

	Yes	No
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <p> <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Housing allowance or residence for personal use <input checked="" type="checkbox"/> Travel for companions <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) </p>		
<p>b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	✓	
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	✓	
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <p> <input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Form 990 of other organizations <input checked="" type="checkbox"/> Approval by the board or compensation committee </p>		
<p>4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p>		
<p>a Receive a severance payment or change-of-control payment?</p>	✓	
<p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>	✓	
<p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.</p>		✓
<p>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.</p>		
<p>5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p>		
<p>a The organization?</p>		✓
<p>b Any related organization?</p> <p>If "Yes" to line 5a or 5b, describe in Part III.</p>		✓
<p>6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p>		
<p>a The organization?</p>		✓
<p>b Any related organization?</p> <p>If "Yes" to line 6a or 6b, describe in Part III.</p>		✓
<p>7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>		✓
<p>8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>		✓
<p>9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	Stephanie Meeks, President and Chief Executive Officer	(i) 444,570	0	0	36,500	19,528	500,598	0
		(ii) 0	0	0	0	0	0	0
2	Paul Edmondson, Chief Legal Officer	(i) 250,610	0	0	13,000	4,300	267,910	0
		(ii) 0	0	0	0	0	0	0
3	Michael Forster, Chief Financial and Administrative Officer - Partial Year	(i) 149,907	0	0	7,914	14,963	172,784	0
		(ii) 0	0	0	0	0	0	0
4	David Brown, Chief Preservation Officer	(i) 313,991	0	0	13,000	22,713	349,704	0
		(ii) 0	0	0	0	0	0	0
5	Amy Maniatis, Chief Marketing Officer - Partial Year	(i) 54,014	0	0	0	47	54,061	0
		(ii) 0	0	0	0	0	0	0
6	Terry Richey, Chief Marketing Officer - Partial Year	(i) 186,428	0	0	9,572	16,930	212,930	0
		(ii) 0	0	0	0	0	0	0
7	Robert Bull, Chief Development Officer	(i) 277,985	0	0	12,694	0	290,679	0
		(ii) 0	0	0	0	0	0	0
8	Tom Cassidy, Vice President for Government Relations & Policy	(i) 175,950	0	0	9,437	29,039	214,426	0
		(ii) 0	0	0	0	0	0	0
9	Estevan Rael-Galvez, Vice President for Historic Sites	(i) 174,398	0	0	0	6,794	181,192	0
		(ii) 0	0	0	0	0	0	0
10	Kim Tran, Senior Director of Finance	(i) 167,327	0	0	8,542	3,720	179,589	0
		(ii) 0	0	0	0	0	0	0
11	Sam Kilpatrick, Controller	(i) 165,949	0	0	8,560	15,543	190,052	0
		(ii) 0	0	0	0	0	0	0
12	Barbara Pahl, Vice President for Western Field Offices	(i) 158,712	0	0	8,152	11,052	177,916	0
		(ii) 0	0	0	0	0	0	0
13		(i)						
		(ii)						
14		(i)						
		(ii)						
15		(i)						
		(ii)						
16		(i)						
		(ii)						

Part III Supplemental Information

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

Schedule J, Part I, Line 1a - Travel for Companions: Travel for the President's spouse to NTHP meetings was authorized and treated as taxable income, in accordance with standard operating procedures.

Schedule J, Part I, Line 3 - The National Trust did not rely on a related organization to establish the top management's official's compensation and the National Trust's top management official (President) received no compensation from a related organization.

Schedule J, Part I, Line 4 - Employees who received severance payments were Cynthia Malinick (30,870), Mark Harmon (7,000), James Blackerby (4,000) and Tanya Bowers(15,850). Contributions to 457b Plan accounts were made by employees Paul Edmondson (22,800) and Carla Washinko (833.36).

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2014

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number

NATIONAL TRUST FOR HISTORIC PRESERVATION IN THE UNITED STATES

53-0210807

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1				
2				
3				
4				
5				
6				
7				
8				
9	✓	42	262,342	Net proceeds, stock gifts
10				
11				
12				
13				
14				
15	✓	2	3,567,500	Sale of property
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** **0**

	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 is not required to be used for exempt purposes for the entire holding period?		✓
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	✓	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		✓
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

NATIONAL TRUST FOR HISTORIC PRESERVATION IN THE UNITED STATES

Employer identification number

53-0210807

Form 990, Part III, Line 4b - Historic Preservation & Conservation: Membership Outreach - Educate the general public on the importance of and techniques of preserving the nation's architectural and cultural heritage.

Form 990, Part VI, Section A, Line 6 - The National Trust for Historic Preservation in the United States is a member organization with 154,874 members.

Form 990, Part VI, Section A, Line 7a - The Organization's members have the right to elect the members of the Board of Trustees (other than statutory ex-officio Trustees). Elections are conducted at an annual membership meeting held in conjunction with an annual conference in the Fall.

Form 990, Part VI, Section B, Line 11b - A copy of the Organization's 990 was provided to all members of the Organization's Board of Trustees before it was filed. The process for review was as follows: The form is prepared by staff and reviewed by management and the independent accounting firm BDO. The draft is then made available to the Audit Committee and all board members (either digitally or in hard copy, depending on their preference). Any changes following these reviews were again reviewed by BDO before the final 990 was filed.

Form 990, Part VI, Section B, Line 12c - The Organization's conflict of interest policy is sent to the board members once a year with a disclosure form that asks Trustees to describe interest in or relationships with both for-profit entities and to describe any transactions (direct or indirect) with the Organization. Trustees are also required to disclose annually any business or family relationships with other Trustees and with Officers and Key Employees of the Organization (identified by name), consistent with the disclosure obligation of Part VI, Line 2. Trustees are regularly reminded of their obligation under the policy for potential transactions. The policy also provides a process for review of potential conflicts.

Form 990, Part VI, Section B, Line 15 - The Organization's Compensation Subcommittee of the Executive Committee reviews compensation of the President and top management staff (including Officers and Key Employees). All members of the Compensation Subcommittee are independent members of the Board of Trustees. The Organization regularly engages with an independent consultant to prepare a compensation study and comparability analysis, and such information for the Officers and Key Employees is made available to the Compensation Subcommittee. The Compensation Subcommittee approves compensation of the President in advance and in writing. Compensation of the other Officers and Key Employees is reviewed by the Compensation Subcommittee but is set by the President.

Form 990, Part VI, Section C, Line 19 - The Organization makes digital copies of the Statutory Charter, Bylaws, Conflict of Interest Policy, Whistleblower Policy, Audit Committee Charter, Form 990, Form 990-T and current Audited Financial Statements available on its website, www.savingplaces.org under "about us/governance." These documents are also made available to any person in hard copy upon request.

Form 990, Part VII, Section A, Line 1a - Carla Washinko, the current Chief Financial and Administrative Officer, was not hired until after 12/31/14, therefore no compensation is reported in Part VII, Section A, Line 1a.

Form 990, Part IX, Line 11g - Other fees for service includes: 1) Consulting fees of 2,491,639, 2) Architect fees of 45,719, 3) Commissions of 319,349, 4) Telemarketing fees of 55,319, 5) Technology consulting of 263,231, 6) catering and special events of 1,125,315, 7) Data management fees of 112,818, 8) Credit card fees of 224,791, 9) Temporary employment fees of 65,367, 10) Other miscellaneous of 443,779 for a total of 5,147,327.

Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	Historic Preservation & Conservation: Membership Outreach - Educate the general public on the importance of and techniques for preserving the nation's architectural and cultural heritage.	1,685,455	0	721,199
	Historic Preservation & Conservation: Publications include: 1) "Preservation" the quarterly magazine chronicling individuals and programs working to save historic places; 2) "Forum Journal", a scholarly journal serving a network of preservation professionals, students and volunteers; 3) SavingPlaces.org and Preservation Leadership Forum offer online content and email communications that inspire and educate preservationists at all levels.	1,503,386	0	555,678
Total:		3,188,841	0	1,276,877

Form: 990

Page: 6

Line Number: Part VI Section C Line 17

States Where Copy Of Return Is Filed

States

AK

AR

AZ

CA

CO

CT

DC

FL

GA

HI

IL

KS

KY

LA

MA

MD

ME

MI

MN

MS

NC

ND

NH

NJ

NM

NY

OH

OK

OR

PA

RI

SC

TN

UT

VA

WA

WI

WV

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Employer identification number

53-0210807

NATIONAL TRUST FOR HISTORIC PRESERVATION IN THE UNITED STATES

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) <u>Heritage Travel LLC (26-1983358)</u> <u>1155 15th Street NW Suite 300, Washington, DC 20005</u>	Travel	DE	1,249,739	1,946,216	National Trust Community
(2) _____					
(3) _____					
(4) _____					
(5) _____					
(6) _____					

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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) <u>NT CDFI Inc (41-2138426)</u> <u>2600 Virginia Avenue NW Suite 1100, Washington, DC 20037</u>	Community Development	DE	501 (c) (3)	11 Type 1	NTHP	✓	
(2) <u>National Main Street Center Inc (46-1405965)</u> <u>2600 Virginia Avenue NW Suite 1100, Washington, DC 20037</u>	Historic Preservation, Revitalize Downtown	DE	501 (c) (3)	509 (a) (2)	NTHP	✓	
(3) _____							
(4) _____							
(5) _____							
(6) _____							
(7) _____							

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(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	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) National Trust Insurance Serv 24 Commerce Street, Baltimore, M	Insurance Agency	MD	National Trust Community	Unrelated	429,282	63,147		✓				99%
(2) -----												
(3) -----												
(4) -----												
(5) -----												
(6) -----												
(7) -----												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) Charitable Remainder Unitrusts - 4 NTHP (53-021 2600 Virginia Avenue NW Suite 1100, Washington, D	Charitable Trusts	DC	N/A	T	-143,647	983,942	100%		✓
(2) National Trust Community Investment Corporatio 1155 15th Street NW Suite 300, Washington, DC 2000	Community Investments	DE	NTHP	C	5,101,622	11,100,259	100%		✓
(3) -----									
(4) -----									
(5) -----									
(6) -----									
(7) -----									

Part V 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.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	✓	
b Gift, grant, or capital contribution to related organization(s)	✓	
c Gift, grant, or capital contribution from related organization(s)		✓
d Loans or loan guarantees to or for related organization(s)	✓	
e Loans or loan guarantees by related organization(s)		✓
f Dividends from related organization(s)	✓	
g Sale of assets to related organization(s)		✓
h Purchase of assets from related organization(s)		✓
i Exchange of assets with related organization(s)		✓
j Lease of facilities, equipment, or other assets to related organization(s)	✓	
k Lease of facilities, equipment, or other assets from related organization(s)		✓
l Performance of services or membership or fundraising solicitations for related organization(s)	✓	
m Performance of services or membership or fundraising solicitations by related organization(s)	✓	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		✓
o Sharing of paid employees with related organization(s)	✓	
p Reimbursement paid to related organization(s) for expenses		✓
q Reimbursement paid by related organization(s) for expenses	✓	
r Other transfer of cash or property to related organization(s)	✓	
s Other transfer of cash or property from related organization(s)	✓	

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) National Trust Community Investment Corporation	a-iii	564,846	Book Value
(2) National Trust Community Investment Corporation	d	194,404	Book Value
(3) National Trust Community Investment Corporation	f	2,785,000	Book Value
(4) National Trust Community Investment Corporation	l	30,000	Book Value
(5) National Trust Community Investment Corporation	m	3,000	Book Value
(Continued on Schedule R, Part VII, Statement 1)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Form: Schedule R

Page: 3

Line Number: Part V Line 2

Description of Covered Relationships and Transaction Thresholds

		Amt. involved
Name	National Trust Community Investment Corporation	61,300
Transaction type	o	
Method of determining amt. involved	Book Value	
Name	National Trust Community Investment Corporation	344,363
Transaction type	q	
Method of determining amt. involved	Book Value	
Name	National Trust Community Investment Corporation	810,183
Transaction type	s	
Method of determining amt. involved	Book Value	
Name	National Trust Insurance Services Inc	59
Transaction type	o	
Method of determining amt. involved	Book Value	
Name	National Trust Insurance Services Inc	395
Transaction type	s	
Method of determining amt. involved	Book Value	
Name	NT CDFI Inc	585
Transaction type	d	
Method of determining amt. involved	Book Value	
Name	NT CDFI Inc	5,080
Transaction type	o	
Method of determining amt. involved	Book Value	
Name	NT CDFI Inc	1,377
Transaction type	q	
Method of determining amt. involved	Book Value	
Name	NT CDFI Inc	6,118
Transaction type	s	
Method of determining amt. involved	Book Value	
Name	National Main Street Center Inc	57,391
Transaction type	a-iv	
Method of determining amt. involved	Book Value	
Name	National Main Street Center Inc	132,656
Transaction type	b	
Method of determining amt. involved	Book Value	
Name	National Main Street Center Inc	144,873
Transaction type	e	
Method of determining amt. involved	Book Value	
Name	National Main Street Center Inc	70,265
Transaction type	l	
Method of determining amt. involved	Book Value	
Name	National Main Street Center Inc	1,262,649
Transaction type	q	
Method of determining amt. involved	Book Value	
Name	National Main Street Center Inc	822,381

Transaction type	s
Method of determining amt. involved	Book Value
