orm 990

Return of Organization Exempt From Income Tax

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

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

2018 Open to Public

Decartment of the Treasury ► Go to www irs gov/Form990 for instructions and the latest information Inspection For the 2018 calendar year, or tax year beginning , and ending C Name of organization NATIONAL PARK COMMUNITY COLLEGE D Employer identification number В Check if applicable FOUNDATION, INC Address change Do ng bus ness as 71-0559526 Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite 501-760-4215 101 COLLEGE DR Initial return Final return/ City or fown state or province country and ZIP or foreign postal code HOT SPRINGS AR 71913 1,316,453 G Gross receipts \$ Amended return Name and address of principal officer H(a) Is this a group return for subordinates? Yes Application pending DENICE DAVIS PO BOX 368 H(b) Are all subordinales included? AR 71964 If No attach a list (see instructions) PEARCY X 501(c)(3) Tax exempt status 501(c) N/A Website 🕨 H(c) Group exemption number Year of formation 1982 X Corporation AR Form of organization M State of legal domicile Trust Association Other > Part I Summary 1 Briefly describe the organization's mission or most significant activities PROVIDING EDUCATION OPPORTUNITIES FOR THOSE THAT ARE SELECTED Activities & Governance if the organization discontinued its operations or disposed of more than 25% of its net assets 18 3 Number of voting members of the governing body (Part VI, line 1a) 18 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 0 5 0 6 Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part Vill column (C) line 12 7a b Net unrelated business taxable income from Form 990-T, line 38 7b Prior Year **Current Year** 1,192,330 398.414 8 Contributions and grants (Part VIII, line 1h) Revenue RECEIVED 9 Program service revenue (Part VIII, line 2g) 129,682 145,420 10 Investment income (Part VIII, column (A), lines 3, 4, and 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c. 248,611 -132,502|10q\pmq193e1 7019 12 Total revenue – add lines 8 through 11 (must equal | VIII column (A) line 12) 1,570,623 411,332 604,619 470,259 13 Grants and similar amounts paid (Part IX, column (A), lines 14 Benefits paid to or for members (Part IX, column (A) line 4 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 b Total fundraising expenses (Part IX, column (D) line 25) ▶ 313,733 250,648 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 855,267 783,992 18 Total expenses Add lines 13-17 (must equal Part IX column (A), line 25) -372,660 715,356 19 Revenue less expenses Subtract line 18 from line 12 Assets or Balances Beginning of Current Year End of Year 3,125,283 3,434,643 20 Total assets (Part X, line 16) 72,708 9,408 21 Total liabilities (Part X, line 26) 425,235 3,052,575 22 Net assets of fund balances Subtract line 21 from line 20 Signature Block Under penalties of partiry. 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 . V hice Sign DENICE DAVIS CHAIR Here Type or print name and title PTIN Print/Type preparer's name Check Paid COURTMEY W MOORE 11/06/19 self employed P00748693 Preparer CRONE 71-0465329 JORDAN, WOOSLEY, Firm's EIN Firm s name Use Only PO BOX 909

71902-0909

HOT SPRINGS, AR

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

For Paperwork Reduction Act Notice, see the separate instructions DAA

Form **990** (2018)

501-624-5788

X Yes

Phone no

No

Page 3

Part IV Checklist of Required Schedules

Га	it iv Checkhat of Reduired Schedules			
	1		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,'	1	x	
2	complete Schedule A	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	-		
J	candidates for public office? If Yes," complete Schedule C. Part I	3		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities or have a section 501(h)			
•	election in effect during the tax year? If "Yes " complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
•	assessments or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C. Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
_	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	ŀ		
	custodian for amounts not listed in Part X or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If 'Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X. line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	- 1		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		_X
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes " complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	Topoliton III all 7 III	11d		X
е	Did the organization report an amount for other liabilities in Part X. line 25? If "Yes," complete Schedule D, Part X.	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	, , , , , , , , , , , , , , , , , , , ,	11f		X
12a				
	Constant D, 1 are many	12a	X	
b	Was the organization included in consolidated independent audited financial statements for the tax year? If			•
	"Yes " and if the organization answered "No' to line 12a, then completing Schedule D. Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Eld the organization manner and property as a specific property as a	14a		_
Ь				
	fundraising business, investment, and program service activities outside the United States, or aggregate	4.415		x
	foreign investments valued at \$100,000 or more? If 'Yes, 'complete Schedule F, Parts I and IV	14b		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	4.6		x
4.0	for any foreign organization? If 'Yes," complete Schedule F, Parts II and IV	15		
16 /	Did the organization report on Part IX, column (A), line 3 more than \$5,000 of aggregate grants or other	16		х
4-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	10		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	17		х
40	Part IX, column (A), lines 6 and 11e? If "Yes ' complete Schedule G, Part I (see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
18		18		x
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			<u> </u>
19	If "Yes," complete Schedule G Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
zva b	If 'Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	-	
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 12 if "Ves." complete Schedule 1. Parts Land II	21		x

Pa	art IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	1		
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes' to Part VII, Section A line 3 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d		2 4d		
25a	The state of the s			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
~	year and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
20	current or former officers, directors, trustees, key employees, highest compensated employees, or		,	
	disqualified persons? If "Yes " complete Schedule L, Part II	26	•	x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee	-		
Li	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes,' complete Schedule L. Part III	27		x
20	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	 -		 -
28				
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	28a		x
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	204		
b	A family member of a current or former officer director, trustee, or key employee? If "Yes," complete	28b		x
	Schedule L, Part IV	200	<u> </u>	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)		ļ	x
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	x	
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			v
	conservation contributions? If 'Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization self-exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			₩.
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			- T
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes " complete Schedule R, Part II, III			
	or IV and Part V, line 1	34		X
35a		35a	<u> </u>	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes" complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable			
	related organization? If 'Yes," complete Schedule R. Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If 'Yes," complete Schedule R, Part VI	37	ļ. —	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note All Form 990 filers are required to complete Schedule O	38	X	<u>l</u>
Pa	art 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			, ' -'- -
_	f I		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			1
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	1	<u> </u>
		Fo	ա 99	0 (2018)

Pa	art VStatements Regarding Other IRS Filings and Tax Compliance (continued)	-		ugo (
			Yes	No
2 a	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
	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		X
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)?	4 a		X
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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c)			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
_	and services provided to the payor?	7a		X
b	If 'Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization self exchange, or otherwise dispose of tangible personal property for which it was	- <u></u> -		
•	required to file Form 8282?	7c		X
d	If Yes,' Indicate the number of Forms 8282 filed during the year 7d	١.,		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	If the organization, during the year, pay premiums, directly of indirectly, on a personal scrient contract. If the organization received a contribution of qualified intellectual property did the organization file Form 8899 as required?	7g		
g 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	├ ゜		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10		130		
	Section \$01(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12	1 .		
a 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 Gross income from members or shareholders 11a			
a	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources	-		
b	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If 'Yes," enter the amount of tax exempt interest received or accrued during the year 12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers	╡		
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note See the instructions for additional information the organization must report on Schedule O	100		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
D.		-	!	
С	the organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13b	7	}	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	 	X
14a b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
ມ 15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000 000 in remuneration or	1-15	\vdash	
10	excess parachute payment(s) during the year?	15	1	x
	If 'Yes," see instructions and file Form 4720, Schedule N	"	\vdash	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O	'	<u> </u>	
	100, Simpleto Form 4720, Galedate O			<u> </u>

orn	990 (2018) NATIONAL PARK COMMUNITY COLLEGE 71-0559526					P	age 6
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 throug	h 7b	belo	ow, and f	or a "N	o"	
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in S	Chec	dule	O See i	nstruci	ions	
	Check if Schedule O contains a response or note to any line in this Part VI						_X_
Sec	tion A. Governing Body and Management						
				_		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	 1	.8			
	If there are material differences in voting rights among members of the governing body or						
	if the governing body delegated broad authority to an executive committee or similar						
	committee, explain in Schedule O			_			
b	Enter the number of voting members included in line 1a, above who are independent	1b	<u> </u>	.8	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with						
	any other officer, director trustee, or key employee?				2		_ X _
3	Did the organization delegate control over management duties customarily performed by or under the direct						
	supervision of officers, directors, or trustees, or key employees to a management company or other person?				3		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?				4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?				5		X
6	Did the organization have members or stockholders?				6		<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint						
	one or more members of the governing body?				7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,						
	stockholders, or persons other than the governing body?				7b		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	by the	e foll	lowing]]		
а	The governing body?				8a	<u> </u>	
b	Each committee with authority to act on behalf of the governing body?				8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at						
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		_ X _
sec	tion B. Policies (This Section B requests information about policies not required by the Inter-	nai F	<u>keve</u>	enue Co	ae)		г
_					-	Yes	No
0a	Did the organization have local chapters branches, or affiliates?				10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,				l l		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		_		10b	v	
_	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	ie tot	m z		11a	<u> </u>	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990						v
2a	Did the organization have a written conflict of interest policy? If 'No," go to line 13		. £1 4	. 2	12a	_	_X_
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	о соп	ITHCES		12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"				40-		
	describe in Schedule O how this was done				12c		
3	Did the organization have a written document retention and destruction pales?				13		X
4	Did the organization have a written document retention and destruction policy?				14		
5	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?						
	The organization's CEO, Executive Director, or top management official				450		x
a b	Other officers or key employees of the organization				15a 15b		X
U	If 'Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)				190		
6a	Did the organization invest in contribute assets to, or participate in a joint venture or similar arrangement						
Ųā	with a taxable entity during the year?				16a		x
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its				104		
Ŋ	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the						
	organization's exempt status with respect to such arrangements?				16b		}
Sec	tion C. Disclosure				1 100		Ь
7	List the states with which a copy of this Form 990 is required to be filed AR						
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 6104 requires and organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 6104 requires and organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 6104 requires and organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 6104 requires and organization to make its Forms 1024 requires and organization to make it	ion 5	01/6	١			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply	.011 0	J 1 (U	,			
	Own website Another's website X Upon request Other (explain in Schedule O)						
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents conflict of interes	bolic	cv a	nd			
•	financial statements available to the public during the tax year	. pone	., ui				
20	State the name, address, and telephone number of the person who possesses the organization's books and record	s. >					

101 COLLEGE DRIVE

AR 71913

501-760-4129 Form **990** (2018)

NICOLE HERNDON HOT SPRINGS

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 fable 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.

X 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	(C) Position (do not check more than one boy unless person is both an officer and a director/trustee)				Position Reportable Reportable Estin eck more than one compensation compensation related of it a director/trustee) the organizations compe			Position Reportable Reportable (do not check more than one box unless person is both an officer and a director/trustee) Reportable compensation compensation related organizations				(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employes	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W 2/1099 MISC)	from the organization and related organizations			
(1) DENICE DAVIS	2.00												
CHAIR	0.00			X				0	o	0			
(2) GARY TROUTMAN	0.00	\dagger			_								
	1 00												
VICE-CHAIR	0 00	<u> </u>	<u> </u>	Х	<u> </u>			0	0	0			
(3) SCOTT DEWS	2 00												
SECRETARY/TREASURER	2 00 0.00		1	x				0	0	0			
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Part VIII Statement of Revenue

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c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a MISCELLANEOUS REVENUE 900099 11,092 11,092 211,092 11,092 11-49,560 11-KIND USAGE 11-49,560	nue		(not including \$				[
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c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a MISCELLANEOUS REVENUE 900099 11,092 11,092 211,092 11,092 11-49,560 11-KIND USAGE 11-49,560	2		See Part IV, line	18	a						
c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a MISCELLANEOUS REVENUE 900099 11,092 11,092 211,092 11,092 11-49,560 11-KIND USAGE 11-49,560	ξĺ	ь	Less direct ex	penses	_b_			İ	,		
See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busin Code 11a MISCELLANEOUS REVENUE 900099 211,092 b IN-KIND USAGE -49,560 c UNREALIZED GAIN - INVESTMENTS -294,034 d All other revenue e Total Add lines 11a-11d -132,502	٦	¢	Net income or	(loss) from fund	raising e	vents	>				
b Less direct expenses b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Bush Code 11a MISCELLANEOUS REVENUE 900099 211,092 211,092 211,092 211,092 b IN-KIND USAGE -49,560 c UNREALIZED GAIN - INVESTMENTS -294,034 d All other revenue e Total Add lines 11a-11d -132,502		9a	Gross income fro	om gaming activities	;						
c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Bush Code 11a MISCELLANEOUS REVENUE 900099 211,092 211,092 211,092 b IN-KIND USAGE -49,560 c UNREALIZED GAIN - INVESTMENTS -294,034 d All other revenue e Total Add lines 11a-11d -132,502			See Part IV, line	19	a						
10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a MISCELLANEOUS REVENUE 900099 211,092 b IN-KIND USAGE -49,560 c UNREALIZED GAIN - INVESTMENTS -294,034 d All other revenue e Total Add lines 11a-11d -132,502		b	Less direct ex	penses	ьL						
10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a MISCELLANEOUS REVENUE 900099 211,092 b IN-KIND USAGE -49,560 c UNREALIZED GAIN - INVESTMENTS -294,034 d All other revenue e Total Add lines 11a-11d -132,502		С	Net income or	(loss) from game	ing activ	ities	•				
b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Bush Code 11a MISCELLANEOUS REVENUE 900099 211,092 211,092 b IN-KIND USAGE -49,560 c UNREALIZED GAIN - INVESTMENTS All other revenue e Total Add lines 11a-11d -132,502							Ī				
C Net income or (loss) from sales of inventory Miscellaneous Revenue Bush Code 11a MISCELLANEOUS REVENUE 900099 211,092 211,092 b IN-KIND USAGE -49,560 -49,560 c UNREALIZED GAIN - INVESTMENTS -294,034 -294,034 d All other revenue -132,502			returns and all	owances	a			1			
C Net income or (loss) from sales of inventory Miscellaneous Revenue Bush Code 11a MISCELLANEOUS REVENUE 900099 211,092 211,092 b IN-KIND USAGE -49,560 -49,560 c UNREALIZED GAIN - INVESTMENTS -294,034 -294,034 d All other revenue -132,502		b	Less cost of g	oods sold	b					1	
Miscellaneous Revenue Bush Code					of inve	ntory					
b IN-KIND USAGE -49,560 -49,560 c UNREALIZED GAIN - INVESTMENTS -294,034 d All other revenue e Total Add lines 11a-11d -132,502							Busn Code				
b IN-KIND USAGE -49,560 -49,560 c UNREALIZED GAIN - INVESTMENTS -294,034 d All other revenue e Total Add lines 11a-11d -132,502	Ī	11a	MISCELLAN	EOUS REVENUE	;		900099	211,092			211,092
c UNREALIZED GAIN - INVESTMENTS -294,034 -294,034 d All other revenue -132,502	J	b				J					-49,560
d All other revenue e Total Add lines 11a–11d ▶ −132,502	į	С			ESTMEN	ITS					
e Total Add lines 11a–11d ► -132,502		ď									<u> </u>
		е	Total Add line	es 11a–11d			▶	-132,502			
		12	Total revenue	See instruction	ns		▶ 「		0	0	12,918

Part IX Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must co Check if Schedule O contains a resp			lete column (A)	
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV. line 21				
2	Grants and other assistance to domestic		T		•
	ındıvıduals See Part IV, line 22	470,259	470,259		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include		1		
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
ā					
t	5				
C	· ·				
C	, ,				
6	,				
f					
Q	· · ·				
47	(A) amount, list line 11g expenses on Schedule O)		 +		
12	• •		~		
13 14	Office expenses Information technology				
15	Royalties				
16	Occupancy				
17	Travel	-			
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest		- ·		
21	Payments to affiliates				•
22	Depreciation, depletion, and amortization	2,580		2,580	
23	Insurance				
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	SALARIES AND WAGES	157,507		157,507	
b	INVESTMENT ADVISORY	40,694		40,694	
С	PRINTING AND SUPPLIES	28,242		28,242	
d	BOARD MEETING/RECEPTIONS	18,638		18,638	
е	All other expenses	66,072		66,072	
25	Total functional expenses Add lines 1 through 24e	783,992	470,259	313,733	0
26	Joint costs Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicifation. Check here ∫ if following SOP 98-2 (ASC 958 720)				

Part X Balance Sheet

	Check if Schedule O contains a response or not	e to any line in this Part X			
	One at I ocheque o contains a jesponac of the	e to any line art this i sat X	(A) Beginning of year		(B) End of year
1	1 Cash—non-interest bearing			1	
2	2 Savings and temporary cash investments		136,112	2	198,777
1 3	3 Pledges and grants receivable, net		158,730	3	158,730
4	4 Accounts receivable, net			4	21,924
{	5 Loans and other receivables from current and former	officers, directors			
	trustees, key employees, and highest compensated er	· · · · · · · · · · · · · · · · · · ·			
	Complete Part II of Schedule L			5	
6	6 Loans and other receivables from other disqualified pe	ersons (as defined under section			
	4958(f)(1)), persons described in section 4958(c)(3)(B	· ·			
İ	sponsoring organizations of section 501(c)(9) voluntar	, i			
_{so}	organizations (see instructions) Complete Part II of Sc	· · · ·	i	6	
Assets	7 Notes and loans receivable, net	Siledule 2		7	
S S	8 Inventories for sale or use	<u> </u>	·	8	-
	9 Prepaid expenses and deferred charges	-	10,592	9	74
	Qa Land, buildings, and equipment cost or	1 1 E	10,332	_	
"	other basis Complete Part VI of Schedule D	10a 160,735	•	ĺ	
-	b Less accumulated depreciation	10b 156,068	7,247	40.	1 667
11	·	130,000	2,967,005	10c	<u>4,667</u> 2,737,326
		-	2,901,003	11	2,131,320
12		-		12	
13		}-		_13	
14		F	164 057	14	2 705
15	.,		154,957	15	3,785
16		34)	3,434,643 9,408	16	3,125,283
17		}-	9,408	17	72,708
18	1 /	-		18	
19		<u> </u>		19	
20				20	
21				_21	
22	• •	· ' !			
Liabilities	trustees, key employees highest compensated employ	yees, and			
ğ	disqualified persons Complete Part II of Schedule L	-		_22	
23	. ,			_23	
24		·		_24	
25					
	parties, and other liabilities not included on lines 17-24	i) Complete Part X			
	of Schedule D	-		25	
26			9,408	26	72,708
,	Organizations that follow SFAS 117 (ASC 958), che	- 1	1		
3	complete lines 27 through 29, and lines 33 and 34	İ	E0 - 405		
27 28 28		<u> </u>	525,437	_27	334,123
ŭ 28		<u> </u>	1,550,812	_28	1,369,508
29	,	_	1,348,986	29	1,348,944
-	Organizations that do not follow SFAS 117 (ASC 9	58), check here ► and			
29 30 31 32	complete lines 30 through 34	İ			
ភ្នំ 30		Ļ		30	
ੂੰ 31				_31	
		or other funds		32	
33	3 Total net assets or fund balances		3,425,235 3,434,643	33 34	3,052,575 3,125,283
34	Total liabilities and net assets/fund balances				

Form:	1 990 (2018) NATIONAL PARK COMMUNITY COLLEGE /1-0559526			Pag	ge 12
Pa	rt 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		11,	
2	Total expenses (must equal Part IX, column (A), line 25)	2		83,	
3	Revenue less expenses Subtract line 2 from line 1	3			<u>660</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,42	25,:	<u> 235</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	3,0	52,	<u> 575</u>
Pa	nrt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual 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?		2a		X
	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				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	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				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If 'Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		İ		
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		X
	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?		3a		X
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		3b		<u> </u>

Form **990** (2018)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ

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

2018

Open to Public Inspection

Name of the organization

NATIONAL PARK COMMUNITY COLLEGE FOUNDATION, INC

Employer identification number 71-0559526

Reason for Public Charity Status (All organizations must complete this part) See instructions Part I The organization is not a private foundation because it is. (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i) 1 2 A school described in section 170(b)(1)(A)(ii) (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state 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) A federal state, or local government or governmental unit described in section 170(b)(1)(A)(v) |X| An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or university 10 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4) 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g 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 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 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 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 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 Enter the number of supported organizations Provide the following information about the supported organization(s)

(I) Name of supported organization	(II) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in yo	organization (v) Amount of monetary ur governing support (see ment? 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 I f the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support				:===::::/:::		<u> </u>
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	560,572	706,711	<u>5</u> 22,793	1,192,330	559,947	3,542,353
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total Add lines 1 through 3	560,572	706,711	522,793	1,192,330	559,947	3,542,35
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)						1 200 456
6	Public support Subtract line 5 from line 4	·-·	- 				1,320,456 2,221,897
_	tion B. Total Support	l					2,221,897
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Totai
7	Amounts from line 4	560,572	706,711	522,793	1,192,330	559,947	3,542,353
8	Gross income from interest, dividends payments received on securities loans, rents royalties, and income from similar sources	99,358	-22,964	145,240	378,293	-148,615	451,312
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support Add lines 7 through 10		l				3,993,665
12	Gross receipts from related activities, etc. ('				12	
13	First five years If the Form 990 is for the		second, third, four	th, or fifth tax year	as a section 501(c)(3)	_
800	organization, check this box and stop here					<u> </u>	
	tion C Computation of Public Su	 					
14	Public support percentage for 2018 (line 6,		•	(f))		14	<u>55 64%</u>
15	Public support percentage from 2017 Sche			0 11 44 06		15	53 07%
IDa	33 1/3% support test—2018 If the organi				3 1/3% or more che	eck this	L V
b	box and stop here. The organization quali				ig 22 1/20/ or man	بام مطم	► <u>×</u>
i.	33 1/3% support test—2017 If the organithis box and stop here. The organization of) IS 33 1/376 OF MON	e, check	▶ [=
17a	10%-facts-and-circumstances test-—201	•			a or 16h and line 1	IA ie	
•••	10% or more, and if the organization meets						
	Part VI how the organization meets the "fac						
	organization			422	o a passion, suppo.		▶ [
b	10%-facts-and-circumstances test—201	7 If the organization	on did not check a	box on line 13 16a	a 16b or 17a, and	line	· L_
	15 is 10% or more, and if the organization	_				-	
	Explain in Part VI how the organization me					ıcly	
	supported organization			_	•	-	▶
18	Private foundation If the organization did	l not check a box o	n line 13, 16a, 16b	17a, or 17b chec	k this box and see		
_	instructions						▶ [

Schedule A (For	m 990 or 990-EZ) 2018	NATIONAL	PARK	COMMUNITY	COLLEGE
Part III	Support Schedule	for Organizatı	ons Des	cribed in Section	on 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II

	If the organization fails to	qualify under th	ne tests listed b	<u>elow, please c</u>	omplete Part II)			
Sec	tion A. Public Support								
Caler	ndar year (or fiscal year beginning in) 🔪 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018		/ (f) Total	1
1	Giffs grants contributions and membership fees received (Do not include any unusual grants *)						_4	<i>,</i> 	
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								
С	Add lines 7a and 7b							<u>.</u>	
8	Public support (Subtract line 7c from line 6)					:			
Sec	tion B. Total Support								
Caler	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	, (c) 2016	(d) 2017	(e) 2018		(f) Total	1
9	Amounts from line 6								
1 0a	Gross income from interest, dividends, payments received on securities loans rents, royalties, and income from similar sources								
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975								
С	Add lines 10a and 10b				-		\dashv		
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)			. <u> </u>					
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, fou	rth, or fifth tax yea	r as a section 501	(c)(3)			
	organization check this box and stop here								▶ _
Sec	tion C. Computation of Public St	upport Percen	tage						
15	Public support percentage for 2018 (line 8	, column (f), divide	d by line 13 colum	n (f))		Ţ	15	_	%
16	Public support percentage from 2017 School						16		%_
Sec	tion D. Computation of Investme					1		,	
17	Investment income percentage for 2018 (li	ine 10c, column (f)	, divided by line 13	column (f))		-	17		%
18	Investment income percentage from 2017					L	18		%
19a	33 1/3% support tests2018 If the orga								
	17 is not more than 33 1/3%, check this bo						_1]	>
Ь	33 1/3% support tests—2017 If the orga						d	` !	_ [
20	line 18 is not more than 33,1/3%, check the Private foundation. If the organization did							j	

Part IV **Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A. and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A. D. and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A.	All Sup	porting Or	ganizations
------------	---------	------------	-------------

ect	ion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation if historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section \$09(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination	_3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes " describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations	4b		
C	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes	_4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"		·	
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action			
	was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only Was any added or substituted supported organization part of a class already			-
	designated in the organization's organizing document?	_5b		
С	Substitutions only Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the chantable class benefited			
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity			
	with regard to a substantial contributor? If 'Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	_ 7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?		•	
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	_8_		L
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			
	ın section 509(a)(1) or (2))? If "Yes," provide detail in Part VI	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			ĺ
	the supporting organization had an interest? If "Yes," provide detail in Part VI	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI	9c		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below	10a		_
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to			I

determine whether the organization had excess business holdings)

1

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a b, or c provide detail in Part VI	11c		
	on 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? 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 lax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes " explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised or controlled the supporting organization	2		
Sect	ion C. Type II Supporting Organizations			
	71 71 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		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)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		
Sect	ion D. All Type III Supporting Organizations			
	71. 11. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.		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 (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	i		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	·		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a		-	
3	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Sect	ion 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	The organization satisfied the Activities Test. Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
c	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instruction)	ns)		
·	The organization supported a governmental entity besome art are tribby you supported a government entity (see more also	,		
2 /	Activities Test Answer (a) and (b) below		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	i '		
	that these activities constituted substantially all of its activities	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? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below	-		 -
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors or			
u	trustees of each of the supported organizations? Provide details in Part VI	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			<u> </u>
	of its supported organizations? If "Yes " describe in Part VI the role played by the organization in this regard	3b		
	11 Manage			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	anıza	tions	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov	20, 19	370 (explain in Part VI) See	•
instructions All other Type III non-functionally integrated supporting organizations mus	compl	ete 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)	<u> </u>		
a Average monthly value of securities	1a		
b Average monthly cash balances	1 b		
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			<u>. </u>
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally integrated T	ype III	supporting organization (se	e

instructions)

Par	IV Type III Non-Functionally Integrated 509(a)(3) Supporting Organiza	tions (continued)	
Sect	ion D - Distributions			Current Year
_ 1 _	Amounts paid to supported organizations to accomplish exempt purp	ooses	<u> </u>	
2	Amounts paid to perform activity that directly furthers exempt purpos	es of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of sup	ported 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 organ	ization is responsive		
	(provide details in Part VI) See instructions		·	
9	Distributable amount for 2018 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-2018	(III) Distributable Amount for 2018
1	Distribulable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required-explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
С	From 2015			
d	From 2016			
e	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
	Carryover from 2013 not applied (see instructions)			
	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2018 from			
	Section D, line 7 \$			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
С	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2018, if	ļ		
	any Subtract lines 3g and 4a from line 2 For result			
	greater than zero, explain in Part VI See instructions			
6	Remaining underdistributions for 2018 Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in	i :		
	Part VI See instructions			
7	Excess distributions carryover to 2019 Add lines 3j			1
	and 4c		·	
. 8	Breakdown of line 7			ļ
a	Excess from 2014			
b	Excess from 2015			
С	Excess from 2016			
d	Excess from 2017		<u> </u>	-
е	Excess from 2018			<u> </u>

Part VI Suppleme

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete If the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990

Open to Public

OMB No 1545 0047

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

Name of the organization NATIONAL PARK COMMUNITY COLLEGE Employer identification number

F(OUNDATION, INC		71-0559526
	ort I Organizations Maintaining Donor Advised Fu	inds or Other Similar Funds or	
	Complete if the organization answered "Yes" on	Form 990. Part IV. line 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	1-7-	
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year	t the exects hold in donor advised	<u> </u>
5	Did the organization inform all donors and donor advisors in writing tha		You I No
_	funds are the organization's property, subject to the organization s excl		Yes _ No
6	Did the organization inform all grantees, donors, and donor advisors in		
	only for charitable purposes and not for the benefit of the donor or dono	or advisor or for any other pulpose	_ Yes No
	conferring impermissible private benefit?		Yes No
Pa	It II Conservation Easements Complete if the organization answered "Yes" on	Form 990 Part IV line 7	
			
1	Purpose(s) of conservation easements held by the organization (check	¬	
	Preservation of land for public use (e.g. recreation or education)	Preservation of a historically imp	
	Protection of natural habitat	Preservation of a certified histori	c structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conse	rvation contribution in the form of a conse	
	easement on the last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic structure incl	uded in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/	06 and not on a	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, ex	tinguished, or terminated by the organizati	ion during the
	tax year ▶		
4	Number of states where property subject to conservation easement is I	ocaled ►	
5	Does the organization have a written policy regarding the periodic mon	itoring, inspection, handling of	_ ,
	violations and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of	f violations, and enforcing conservation ea	asements during the year
	>		
7	Amount of expenses incurred in monitoring inspecting, handling of vio	lations, and enforcing conservation easem	nents during the year
	▶ \$		
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 easem	ents in its revenue and expense statemen	t, and
	balance sheet, and include, if applicable, the text of the footnote to the	organization's financial statements that de	escribes the
	organization's accounting for conservation easements		
Pa	rt III Organizations Maintaining Collections of Art		Similar Assets
	Complete if the organization answered "Yes" on	Form 990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), n		
	works of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthe	erance of
	public service provide in Part XIII, the text of the footnote to its financial		
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to	report in its revenue statement and balar	nce sheet
	works of art historical treasures, or other similar assets held for public	exhibition, education, or research in furthe	erance of
	public service, provide the following amounts relating to these items		
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990 Part X		▶ \$
2	If the organization received or held works of art, historical treasures, or	other similar assets for financial gain, pro	vide the

a Revenue included on Form 990, Part VIII, line 1

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

▶ \$

cne	dule D (Form 990) 2018 NATIONAL 1	PARK COMMO	MITI COLLEG	<u> </u>	71-03	339326			Pa	ige Z
Pa	rt III Organizations Maintaining	Collections of	Art, Historical Tr	easures, e	or Other	Sımılar A	sse t s (continue	ed)	
3	Using the organization's acquisition, accession collection items (check all that apply)	n, and other records	, check any of the follo	wing that are	a significa	int use of its			-	
а	Public exhibition	ď ' í	Loan or exchange prog	jrams						
b	Scholarly research	e	Other							
C	Preservation for future generations									
4	Provide a description of the organization's coll-	ections and explain	how they further the or	ganization's	exempt pu	rpose in Part				
	XIII	•	-	•		•				
5	During the year, did the organization solicit or	receive donations of	art, historical treasure	s, or other si	mılar					
	assets to be sold to raise funds rather than to t							' Yes	_	No
Pa	ort IV Escrow and Custodial Arra		<u></u>							
	Complete if the organization 990, Part X, line 21	_	on Form 990, Pa	rt IV, line 9	, or repo	orted an am	ou nt o	n Form		
1a	Is the organization an agent, trustee, custodiar	or other intermedia	ary for contributions or	other assets	not					
	included on Form 990, Part X?		,					Yes	Γ	No
b	If 'Yes," explain the arrangement in Part XIII ar	nd complete the folio	owing table						'_ '	
~	a region the analysment arrown a	ia complete and folia	oming toolo					Amount		
c	Beginning balance					1c				
	Additions during the year					1d				
	Distributions during the year					1e				
	Ending balance					1f				
	•	m 900 Bart Y line 1	21 for occrow or custo	dial account	liability2			Yes		No
	Did the organization include an amount on For If 'Yes," explain the arrangement in Part XIII C							168	'	NO
	irt V Endowment Funds.	Meck here ii the exp	nanation has been pro	vided on Par	<u> </u>					
1 0	Complete if the organization	anewered "Vee"	on Form 990 Pa	rt IV. line 1	Λ					
	Complete ii the organization	(a) Current year	(b) Prior year	(c) Two year		(d) Three years	s back	(e) Four y	agre he	
1	Pographing of the scholarses	1,348,986	1,323,510		9,500		7,140			140
	Beginning of year balance	-42	25,476		4,010		2,360			000
	Contributions	-42	25,476		54,01 ₀		2,360		29,	000
C	Net investment earnings, gains, and									
_	losses									
	Grants or scholarships									
е	Other expenditures for facilities and		ı		1		}			
	programs									
Ť	Administrative expenses	1 240 044	1 240 006	1 20	2 510	1 000		1 01		1.40
g	End of year balance	1,348,944	1,348,986		3,510	1,28	500	1,2	o / , .	140
2	Provide the estimated percentage of the current	=	(line 1g, column (a)) h	eid as						
	Board designated or quasi-endowment	%								
D	Permanent endowment ▶ %	0.4								
C	Temporarily restricted endowment ▶	%								
٥.	The percentages on lines 2a, 2b, and 2c should		ur i la lita a al a		4L -					
Ja	Are there endowment funds not in the possess	sion of the organizat	ion that are neid and a	aministerea	or the				, <u> </u>	NI -
	organization by								'es	No X
	(i) unrelated organizations							3a(ı)	_	X
	(ii) related organizations		d an Oak adula DO					3a(II)	-	
4	If 'Yes" on line 3a(ii), are the related organizati							3b		
<u>4</u>	Describe in Part XIII the intended uses of the c		ment tunas							
Pa	ort VI Land, Buildings, and Equip		on Form 000 Do	et IV June 1	10 800	Corm 000	Dort V	lino 10		
	Complete if the organization						rail A			
	Description of property	(a) Cost or other b. (investment)	asis (b) Cost or o	1		cumulated preciation		(d) Book va	iue	
10	Land	, , , , , , , , , , , , , , , , , , ,	(5.1.1)	•		<u> </u>	 			
							~			
	Buildings									
	Leasehold improvements Equipment			60,735		156,06	8		4 6	567
ū	Equipment			00,700		130,00			<u> </u>	<i>,</i> , ,

4,667

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

Part VII	Investments—Other Securities		
	Complete if the organization answered "Ye	es" on Form 990, Part IV, line	e 11b See Form 990, Part X, line 12
	(a) Description of security or calegory	(b) Book value	(c) Method of valuation
	(including name of security)	_	Cost or end-of year market value
(1) Financial	derivatives		
(2) Closely-h	eld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total (Colum	n (b) must equal Form 990, Part X, col (B) line 12) ▶		
Part VIII	Investments—Program Related		
Part VIII	Investments—Program Related Complete if the organization answered "Ye	es" on Form 990, Part IV, line	e 11c See Form 990, Part X, line 13
Part VIII		es" on Form 990, Part IV, line (b) Book value	e 11c See Form 990, Part X, line 13 (c) Method of valuation Cost or end-of-year market value
(1)	Complete if the organization answered "Ye		(c) Method of valuation
	Complete if the organization answered "Ye		(c) Method of valuation
(1)	Complete if the organization answered "Ye		(c) Method of valuation
(1) (2) (3)	Complete if the organization answered "Ye		(c) Method of valuation
(1) (2) (3) (4)	Complete if the organization answered "Ye		(c) Method of valuation
(1) (2) (3) (4)	Complete if the organization answered "Ye		(c) Method of valuation
(1) (2) (3) (4) (5)	Complete if the organization answered "Ye		(c) Method of valuation
(1) (2) (3) (4) (5) (6) (7)	Complete if the organization answered "Ye		(c) Method of valuation
(1) (2) (3) (4) (5) (6) (7)	Complete if the organization answered "Ye		(c) Method of valuation
(1) (2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization answered "Ye		(c) Method of valuation
(1) (2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization answered "Ye		(c) Method of valuation

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

Part X Other Liabilities

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

1	(a) Description of hability	(b) Book value	
(1)	Federal income taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Tota	Column (b) must equal Form 990, Part X, col (B) line 25) ▶		

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 XIII Supplemental Information.

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

Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)

Subtract line 2e from line 1

b Other (Describe in Part XIII)c Add lines 4a and 4b

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

PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS

PROGRAMS

783,992

783,992

3

4c

5

Part XIII Supplemental Information (continued)

Open to Public OMB No 1545 0047 2018 Inspection Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, (h) Purpose of grant or assistance Employer identification number X Yes 71-0559526 (g) Description of noncash assistance Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (f) Method of valuation (book FMV appraisal other) Does the organization maintain records to substantiate the amount of the grants or assistance the grantees' eligibility for the grants or assistance and Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22 Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ▶ Go to www irs gov/Form990 for the latest information (e) Amount of noncash assistance ▶ Attach to Form 990 (d) Amount of cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States grant (c) IRC section (if applicable) NATIONAL PARK COMMUNITY COLLEGE General Information on Grants and Assistance (b) EIN the selection criteria used to award the grants or assistance? (a) Name and address of organization FOUNDATION, or government Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE (Form 990) Part Part € $\overline{2}$ ල 4 ŝ 9 6 8 6

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Schedule I (Form 990) (2018)

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

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

71-0559526

Grants and Other Assistance to Domestic Individuals Complete if the organization answered. Yes, on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2018) NATIONAL PARK COMMUNITY COLLEGE Part III Grants and Other Assistance to Domestic Individuals Commit

	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book	(e) Method of valuation (book (f) Description of noncash assistance
ļ		recipients	cash grant	noncash assistance	FMV appraisal other)	
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Part IV	Supplemental Information Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	rovide the information re-	quired in Part I, line	2, Part III, column (b)	, and any other additional	nformation

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

INSPECTION

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30

► Attach to Form 990

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

OMB No 1545 0047

2018

Open To Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the Organization

NATIONAL PARK COMMUNITY COLLEGE

FOUNDATION, INC 71-0559526 Part I Types of Property (c) (b) (a) (d) Noncash contribution Check if Method of determining Number of contributions or amounts reported on applicable ilems contributed noncash contribution amounts Form 990 Part VIII line 1g Art -- Works of art 2 Art -- Historical treasures 3 Art -- Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities — Publicly traded 10 Securities — Closely held stock 11 Securities — Partnership, LLC, or trust interests 12 Securities --- Miscellaneous 13 Qualified conservation contribution — Historic structures Qualified conservation contribution - Other 15 Real estate -- Residential 16 Real estate — Commercial 17 Real estate — Other 18 Collectibles 19 Food inventory 20 Drugs and medical supplies Taxidermy 21 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts X 1 49,560 Other ▶ (25 26 Other ▶ (Other ► (27 28 Other ▶ (Number of Forms 8283 received by the organization during the tax year for contributions for 29 29 which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required X to be used for exempt purposes for the entire holding period? 30a If "Yes," describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard X 31 contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X contributions? 32a If 'Yes," describe in Part II If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

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

SCHEDULE O

(Form 990 or 990-EZ)

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

2018

OMB No 1545 0047

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Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ
► Go to www urs gov/Form990 for the latest information

Employer identification number 71–0559526

Name of the organization NATIONAL PARK COMMUNITY COLLEGE FOUNDATION, INC

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 BOARD REVIEWS FORM 990 BEFORE FILING.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION AVAILABLE UPON REQUEST