

Return of Organization Exempt From Income Tax

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

Department of the Treasury
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2004 calendar year, or tax year beginning **NOV 1, 2004** and ending **OCT 31, 2005**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization EASTERN NATIONAL Number and street (or P.O. box if mail is not delivered to street address) Room/suite 470 MARYLAND DRIVE STE. 1 City or town, state or country, and ZIP + 4 FORT WASHINGTON, PA 19034	D Employer identification number 23-1401703 E Telephone number (215) 283-6900 F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶
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• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

Hand I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶
H(c) Are all affiliates included? **N/A** Yes No
 (If "No," attach a list.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

G Website: ▶ **WWW.EASTERNATIONAL.ORG**

J Organization type (check only one) 501(c) (**3**) ◀ (insert no.) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

I Group Exemption Number ▶
M Check if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **29,499,967.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

		1 Contributions, gifts, grants, and similar amounts received:		
	1a	Direct public support		
	1b	Indirect public support		
	1c	Government contributions (grants)		
	1d	Total (add lines 1a through 1c) (cash \$ _____ noncash \$ _____)		0.
	2	Program service revenue including government fees and contracts (from Part VII, line 93)		
	3	Membership dues and assessments		
	4	Interest on savings and temporary cash investments		69,167.
	5	Dividends and interest from securities		
	6a	Gross rents		
	6b	Less: rental expenses		
	6c	Net rental income or (loss) (subtract line 6b from line 6a)		
	7	Other investment income (describe ▶ _____)		
	8a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other
	8b	Less: cost or other basis and sales expenses		
	8c	Gain or (loss) (attach schedule)		
	8d	Net gain or (loss) (combine line 8c, columns (A) and (B))		
	9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>		
	9a	Gross revenue (not including \$ _____ of contributions reported on line 1a)		
	9b	Less: direct expenses other than fundraising expenses		
	9c	Net income or (loss) from special events (subtract line 9b from line 9a)		
	10a	Gross sales of inventory, less returns and allowances	28,938,976.	
	10b	Less: cost of goods sold	14,168,490.	
	10c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	STMT 1	14,770,486.
	11	Other revenue (from Part VII, line 103)		491,824.
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)		15,331,477.
	13	Program services (from line 44, column (B))		11,567,872.
	14	Management and general (from line 44, column (C))		3,271,951.
	15	Fundraising (from line 44, column (D))		
	16	Payments to affiliates (attach schedule)		
	17	Total expenses (add lines 16 and 44, column (A))		14,839,823.
	18	Excess or (deficit) for the year (subtract line 17 from line 12)		491,654.
	19	Net assets or fund balances at beginning of year (from line 73, column (A))		6,436,017.
	20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 2		193,760.
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)		7,121,431.

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ 2320904 . noncash \$ _____)	22 2,320,904.	2,320,904.	STATEMENT 5	
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc.	25 296,247.	0.	296,247.	0.
26	Other salaries and wages	26 8,078,775.	6,593,542.	1,485,233.	
27	Pension plan contributions	27			
28	Other employee benefits	28			
29	Payroll taxes	29			
30	Professional fundraising fees	30			
31	Accounting fees	31 105,000.		105,000.	
32	Legal fees	32 54,380.		54,380.	
33	Supplies	33 650,992.	543,064.	107,928.	
34	Telephone	34			
35	Postage and shipping	35 782,461.	708,958.	73,503.	
36	Occupancy	36 158,496.	31,135.	127,361.	
37	Equipment rental and maintenance	37 19,545.		19,545.	
38	Printing and publications	38 12,173.		12,173.	
39	Travel	39 376,228.	179,424.	196,804.	
40	Conferences, conventions, and meetings	40 26,960.		26,960.	
41	Interest	41			
42	Depreciation, depletion, etc. (attach schedule) ...	42 395,123.	150,480.	244,643.	
43	Other expenses not covered above (itemize):				
a	_____	43a			
b	_____	43b			
c	_____	43c			
d	_____	43d			
e	SEE STATEMENT 3	43e 1,562,539.	1,040,365.	522,174.	
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	44 14,839,823.	11,567,872.	3,271,951.	0.

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? **SEE STATEMENT 4**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)

a	INTERPRETIVE PROGRAMS, MUSEUM ACTIVITIES, RESEARCH ACTIVITIES FREE PUBLICATIONS AND LIBRARY, EQUIPMENT DONATIONS, ADMINISTRATIVE AID TO SERVICE, OTHER DONATIONS. (Grants and allocations \$ _____)	2,320,904.
b	OPERATION OF SALES OUTLETS, PRIMARILY BOOKSTORES, LOCATED IN NATIONAL AND STATE PARKS IN THE EASTERN SECTION OF THE UNITED STATES. (Grants and allocations \$ _____)	9,246,968.
c	_____ (Grants and allocations \$ _____)	
d	_____ (Grants and allocations \$ _____)	
e	Other program services (attach schedule) (Grants and allocations \$ _____)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	11,567,872.

Part IV Balance Sheets

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year
Assets	45 Cash - non-interest-bearing	118,170.	119,519.
	46 Savings and temporary cash investments	6,848,739.	7,094,568.
	47 a Accounts receivable	108,921.	
	b Less: allowance for doubtful accounts	16,000.	92,921.
	48 a Pledges receivable		
	b Less: allowance for doubtful accounts		
	49 Grants receivable		
	50 Receivables from officers, directors, trustees, and key employees		
	51 a Other notes and loans receivable		
	b Less: allowance for doubtful accounts		
	52 Inventories for sale or use	5,173,526.	5,187,185.
	53 Prepaid expenses and deferred charges	260,990.	244,944.
	54 Investments - securities STMT 9 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	2,008,491.	2,098,305.
	55 a Investments - land, buildings, and equipment: basis		
	b Less: accumulated depreciation		
	56 Investments - other		
	57 a Land, buildings, and equipment: basis	3,712,810.	
	b Less: accumulated depreciation STMT 6	2,503,888.	1,208,922.
	58 Other assets (describe SEE STATEMENT 7)	251,768.	188,974.
59 Total assets (add lines 45 through 58) (must equal line 74)	16,091,138.	16,235,338.	
Liabilities	60 Accounts payable and accrued expenses	3,172,381.	2,810,477.
	61 Grants payable		
	62 Deferred revenue		
	63 Loans from officers, directors, trustees, and key employees		
	64 a Tax-exempt bond liabilities		
	b Mortgages and other notes payable		
	65 Other liabilities (describe SEE STATEMENT 8)	6,482,740.	6,303,430.
66 Total liabilities (add lines 60 through 65)	9,655,121.	9,113,907.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
	67 Unrestricted	6,436,017.	7,121,431.
	68 Temporarily restricted		
	69 Permanently restricted		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.		
	70 Capital stock, trust principal, or current funds		
	71 Paid-in or capital surplus, or land, building, and equipment fund		
	72 Retained earnings, endowment, accumulated income, or other funds		
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	6,436,017.	7,121,431.
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	16,091,138.	16,235,338.	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part VI Other Information		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.		X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	X	
b	If "Yes," enter the name of the organization SEE STATEMENT 11 and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81 a	Enter direct or indirect political expenditures. See line 81 instructions 81a 0.		
b	Did the organization file Form 1120-POL for this year?		X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members 85c N/A		
d	Section 162(e) lobbying and political expenditures 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b N/A		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 0.; section 4912 0.; section 4955 0.		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.
90 a	List the states with which a copy of this return is filed PENNSYLVANIA		
b	Number of employees employed in the pay period that includes March 12, 2004 90b 454		
91	The books are in care of JOHN F. RYAN, CONTROLLER Telephone no. (215) 283-6900		
	Located at 470 MARYLAND DRIVE, SUITE #1, FORT WASHINGTON, PA ZIP + 4 19034		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A		

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
Note: Enter gross amounts unless otherwise indicated.					
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments ...			14	69,167.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					14,770,486.
103 Other revenue:					
a TAPE TOUR INCOME					3,237.
b OTHER INCOME					41,676.
c NET FEE COLLECTION					414,911.
d MANAGEMENT FEE INCOME					32,000.
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		69,167.	15,262,310.
105 Total (add line 104, columns (B), (D), and (E))					15,331,477.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	SEE STATEMENT 12

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Please Sign Here

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.

Signature of officer _____ Date _____ Type or print name and title _____

Paid Preparer's Use Only

Preparer's signature: **RSM MCGLADREY, INC.** Date _____ Check if self-employed Preparer's SSN or PTIN _____
 Firm's name (or yours if self-employed), address, and ZIP + 4: **660 AMERICAN AVENUE, SUITE 101**
KING OF PRUSSIA, PA 19406 EIN: _____
 Phone no.: **610-337-8811**

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2004

Name of the organization EASTERN NATIONAL	Employer identification number 23 1401703
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Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
<u>RICHARD CREIGHTON</u> 470 MARYLAND DR, FORT WASHINGTON, PA 19034	OPER. MGR 40 HRS/WEEK	85,987.	29,492.	
<u>BARBARA BELL</u> 470 MARYLAND DR, FORT WASHINGTON, PA 19034	HR MGR 40 HRS/WEEK	90,711.	17,515.	
<u>PETER MILOVICH</u> 470 MARYLAND DR, FORT WASHINGTON, PA 19034	SYS. ANALYST 40 HRS/WEEK	60,164.	10,066.	
<u>JASON SCARPELLO</u> 470 MARYLAND DR, FORT WASHINGTON, PA 19034	PRODUCTION MG 40 HRS/WEEK	59,709.	10,801.	
<u>STEPHANIE MADALENA</u> 470 MARYLAND DR, FORT WASHINGTON, PA 19034	REGIONAL MNGR 40 HRS/WEEK	64,008.	5,781.	
Total number of other employees paid over \$50,000 ▶	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
<u>MANTAS, OHLIGER, MCGARY & QUINN, P.C.</u> 660 AMERICAN AVE #101 KING OF PRUSSIA, PA 19406	ACCOUNTING AND AUDITING	127,730.
<u>DUANE, MORRIS, HECKSCHER, ATTORNEYS AT LAW</u> ONE LIBERTY PLACE, PHILADELPHIA, PA 19103	LEGAL	52,590.

Total number of others receiving over \$50,000 for professional services ▶	0	

Part III Statements About Activities (See page 2 of the instructions.)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.) SEE STATEMENT 13		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	X	
e Transfer of any part of its income or assets?		X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)		X
b Do you have a section 403(b) annuity plan for your employees?		X
4 a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5** A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6** A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7** A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8** A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9** A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state ►** _____
- 10** An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b** A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12** 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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)
- 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: **(1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2).** (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)					
16 Membership fees received		250.	625.	825.	1,700.
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	27,085,136.	27,832,939.	28,112,415.	25,196,290.	108,226,780.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	36,127.	51,849.	88,897.	229,681.	406,554.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	318,959.	200,274.	SEE STATEMENT 14 85,785.	83,814.	688,832.
23 Total of lines 15 through 22	27,440,222.	28,085,312.	28,287,722.	25,510,610.	109,323,866.
24 Line 23 minus line 17	355,086.	252,373.	175,307.	314,320.	1,097,086.
25 Enter 1% of line 23	274,402.	280,853.	282,877.	255,106.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a N/A
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b N/A
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c N/A
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____					26d N/A
e Public support (line 26c minus line 26d total)					26e N/A
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f N/A %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2003) 0. (2002) 0. (2001) 0. (2000) 0.					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2003) 0. (2002) 0. (2001) 0. (2000) 0.					
c Add: Amounts from column (e) for lines: 15 _____ 16 1,700. 17 108,226,780. 20 _____ 21 _____					27c 108,228,480.
d Add: Line 27a total 0. and line 27b total 0.					27d 0.
e Public support (line 27c total minus line 27d total)					27e 108,228,480.
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f 109,323,866.
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g 98.9980%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h .3719%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

NONE

Part V Private School Questionnaire (See page 7 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) _____ _____ _____		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) _____ _____		
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities?		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) _____ _____		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended?		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

N/A

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table -			
If the amount on line 40 is -	The lobbying nontaxable amount is -		
Not over \$500,000	20% of the amount on line 40		
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	41	
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		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h .)			
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 other means			
i Total lobbying expenditures (Add lines c through h .)			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Asset Number	Description of property							
	Date placed in service	Method/IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
	PROGRAM SERVICES							
1	SALES EQUIPMENT							
	VARIES	VAR	.000	16	365,182.		363,656.	1,524.
3	GETTYSBURG MAP							
	VARIES	VAR	.000	16	16,974.		15,620.	929.
6	FEE COLLECTION							
	VARIES	VAR	.000	16	747.		747.	0.
12	TABLE ROCK RESERVATION							
	VARIES	VAR	.000	16	5,231.		5,231.	0.
13	GETTYSBURG CYCLORAMA							
	VARIES	VAR	.000	16	9,929.		9,929.	0.
14	EQUIPMENT - WAREHOUSE							
	VARIES	VAR	.000	16	19,879.		14,094.	3,851.
15	EQUIPMENT - SALES TREDEGAR							
	VARIES	VAR	.000	16	3,134.		2,821.	313.
25	OFFICE EQUIPMENT - MIS							
	VARIES	VAR	.000	16	8,042.		1,931.	1,286.
26	OFFICE EQUIPMENT - ACCOUNTING							
	VARIES	VAR	.000	16	5,918.		3,916.	990.
27	OFFICE EQUIPMENT - HR							
	VARIES	VAR	.000	16	1,100.		623.	220.
29	SALES EQUIPMENT - GETTYSBURG							
	VARIES	VAR	.000	16	5,998.		1,023.	1,102.
31	OFFICE EQUIPMENT - OPERATIONS							
	VARIES	VAR	.000	16	930.		579.	286.
32	POS SYSTEM							
	VARIES	VAR	.000	16	210,535.		36,147.	39,838.
33	SALES EQUIPMENT - WB PAVILION							
	VARIES	VAR	.000	16	10,318.		1,892.	2,064.
35	OFFICE EQUIPMENT - NCR REGION							
	VARIES	VAR	.000	16	2,845.		169.	569.
37	POS SYSTEM-SALES							
	VARIES	VAR	.000	16	422,264.		69,981.	82,724.
38	LEASEHOLD IMPROVEMENTS-NCR							
	VARIES	VAR	.000	16	5,694.			335.
39	EQUIPMENT - GETTYSBURG JANITORIAL							
	VARIES	VAR	.000	16	2,099.			140.
40	SALES EQUIPMENT-REFRIGERATOR IVC							
	VARIES	VAR	.000	16	1,182.			99.
41	PO SERVER&SOFTWARE							
	VARIES	VAR	.000	16	187,568.			12,590.
42	PO PHONE SYSTEM							
	VARIES	VAR	.000	16	24,949.			1,620.
	* 990 PAGE 2 TOTAL PROGRAM SERVICES							
					1,310,518.	0.	528,359.	150,480.
	MANAGEMENT AND GENERAL							
2	AUTO EQUIPMENT							
	VARIES	VAR	.000	16	91,974.		91,128.	1,199.
4	OFFICE EQUIPMENT							
	VARIES	VAR	.000	16	74,835.		72,165.	707.
5	COMPUTER							
	VARIES	VAR	.000	16	756,393.		748,306.	2,574.

Asset Number	Description of property							
	Date placed in service	Method/IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
7	CAPITAL LEASES							
	VARIABLE	VAR	.000	16	46,697.		46,697.	0.
8	LEASEHOLD IMPROVEMENTS							
	VARIABLE	VAR	.000	16	364,589.		304,577.	39,134.
9	AGENCY IMPROVEMENTS							
	VARIABLE	VAR	.000	16	20,209.		20,209.	0.
10	LEASEHOLDS - EL PORTAL							
	VARIABLE	VAR	.000	16	6,620.		6,620.	0.
11	SECURITY							
	VARIABLE	VAR	.000	16	7,397.		7,397.	0.
16	OFFICE EQUIPMENT-METRO NY							
	VARIABLE	VAR	.000	16	1,699.		1,502.	198.
17	FIELD COMPUTERS							
	VARIABLE	VAR	.000	16	258,243.		151,595.	45,656.
18	OFFICE EQUIPMENT- WAREHOUSE							
	VARIABLE	VAR	.000	16	4,594.		3,676.	919.
19	OFFICE EQUIPMENT - WESTERN PA							
	VARIABLE	VAR	.000	16	1,495.		797.	299.
20	OFFICE EQUIPMENT - NEW ENGLAND							
	VARIABLE	VAR	.000	16	1,194.		617.	238.
21	OPERATION SECURITY EQUIPMENT							
	VARIABLE	VAR	.000	16	1,377.		711.	276.
22	EQUIPMENT - EL PORTAL							
	VARIABLE	VAR	.000	16	5,710.		5,710.	0.
23	EQUIPMENT - TRADESHOW BOOTH							
	VARIABLE	VAR	.000	16	6,550.		3,474.	1,304.
24	GLASSHOUSE PRODUCTION STARTUP							
	VARIABLE	VAR	.000	16	94,685.		62,171.	27,828.
28	OFFICE EQUIPMENT - PRESIDENT							
	VARIABLE	VAR	.000	16	8,326.		907.	1,665.
30	OFFICE EQUIPMENT - PURCHASING							
	VARIABLE	VAR	.000	16	869.		261.	174.
34	OFFICE EQUIPMENT - STEAMTOWN							
	VARIABLE	VAR	.000	16	10,000.		167.	2,000.
36	POS SYSTEM							
	VARIABLE	VAR	.000	16	638,836.		51,719.	120,472.
	* 990 PAGE 2 TOTAL MANAGEMENT AND GENERAL							
					2,402,292.	0.	1,580,406.	244,643.
	* GRAND TOTAL 990 PAGE 2 DEPR							
					3,712,810.	0.	2,108,765.	395,123.

FORM 990

INCOME AND COST OF GOODS SOLD
INCLUDED ON PART I, LINE 10

STATEMENT 1

INCOME

1. GROSS RECEIPTS	28,938,976	
2. RETURNS AND ALLOWANCES		
3. LINE 1 LESS LINE 2		28,938,976
4. COST OF GOODS SOLD (LINE 13)	14,168,490	
5. GROSS PROFIT (LINE 3 LESS LINE 4)		14,770,486

COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR	5,173,526	
7. MERCHANDISE PURCHASED	14,182,149	
8. COST OF LABOR		
9. MATERIALS AND SUPPLIES		
10. OTHER COSTS		
11. ADD LINES 6 THROUGH 10		19,355,675
12. INVENTORY AT END OF YEAR	5,187,185	
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12).		14,168,490

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT	2
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DESCRIPTION	AMOUNT
DECREASE IN ADDITIONAL MINIMUM PENSION LIABILITY	193,760.
TOTAL TO FORM 990, PART I, LINE 20	193,760.

FORM 990	OTHER EXPENSES	STATEMENT	3
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DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
INSURANCE	178,038.	178,038.		
BANK CHARGES	517,069.	479,882.	37,187.	
MISCELLANEOUS	37,531.	19,288.	18,243.	
TRAINING	123,459.	123,459.		
COMPUTER COSTS	407,515.		407,515.	
TELEPHONE & UTILITIES	341,488.	239,698.	101,790.	
NET RECLASS TO COST OF SALES	<42,561.>	0.	<42,561.>	
TOTAL TO FM 990, LN 43	1,562,539.	1,040,365.	522,174.	

FORM 990	STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE PART III	STATEMENT	4
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EXPLANATION

THE PURPOSE OF THE ASSOCIATION IS TO PROMOTE THE HISTORICAL, SCIENTIFIC, EDUCATIONAL, AND INTERPRETIVE ACTIVITIES OF THE NATIONAL PARK SERVICE PRINCIPALLY IN THE NATIONAL PARK SYSTEM IN THE EASTERN HALF OF THE UNITED STATES. THE ASSOCIATION SEEKS TO COOPERATE WITH THE NATIONAL PARK SERVICE IN THE FOLLOWING ACTIVITIES.

1. PUBLISH AND MAKE AVAILABLE TO PARK VISITORS, BY SALE OR FREE DISTRIBUTION, SUITABLE HISTORICAL AND OTHER LITERATURE INTERPRETING THE AREA IN QUESTION AND THE EVENTS IN OUR HISTORY WHICH THEY COMMEMORATE.
2. HANDLE REPRODUCTIONS AND PRODUCTS CALCULATED TO INTERPRET OR SYMBOLIZE THE HISTORICAL SIGNIFICANCE OF EVENTS, CULTURAL DEVELOPMENTS AND PERSONAGES ASSOCIATED WITH THE AREAS TO STIMULATE PUBLIC INTEREST IN OUR NATION'S HISTORY.
3. ACQUIRE HISTORICAL MATERIAL AND OBJECTS PERTAINING TO THE HISTORY OF SEVERAL AREAS FOR THE PURPOSE OF ADDING THEM TO THE MUSEUM COLLECTIONS OF THE PARKS.
4. DEVELOP SUITABLE PARK LIBRARIES.
5. DEVELOP AND IMPROVE INTERPRETIVE FEATURES WITHIN THE PARKS,

INCLUDING SIGNS, MARKERS, AND MUSEUMS.

6. ACQUIRE THE LANDS NEEDED TO PRESERVE AND PROTECT HISTORICALLY IMPORTANT FEATURES WITHIN OR ADJACENT TO THE PARKS, SUCH AS LANDS TO BE ADDED TO THE PARKS.

7. TO DO ALL POSSIBLE THAT IS CALCUALTED TO CONSERVE, DEVELOP, AND INTERPRET THE NATIONAL PARKS, MONUMENTS, AND HISTORIC SHRINES FOR THE BENEFIT OF THE PUBLIC AND POSTERITY.

FORM 990 CASH GRANTS AND ALLOCATIONS STATEMENT 5

CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
INTERPRETIVE PROGRAMS	NATIONAL PARK SERVICE	NATIONAL PARKS	NONE	1208633.
MUSEUM ACTIVITIES	DEPARTMENT OF THE INTERIOR	SERVICE SITES	NONE	141,409.
RESEARCH ACTIVITIES	DEPARTMENT OF THE INTERIOR	VARIOUS	NONE	67,027.
FREE PUBLICATIONS & LIBRARY	DEPARTMENT OF THE INTERIOR	VARIOUS	NONE	145,274.
EQUIPMENT DONATIONS	DEPARTMENT OF THE INTERIOR	VARIOUS	NONE	91,975.
ADMINISTRATIVE AID TO SERVICE	DEPARTMENT OF THE INTERIOR	VARIOUS	NONE	138,340.
OTHER DONATIONS	DEPARTMENT OF THE INTERIOR	VARIOUS	NONE	528,246.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				2320904.

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 6

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
SALES EQUIPMENT	365,182.	365,180.	2.
AUTO EQUIPMENT	91,974.	92,327.	<353.>
GETTYSBURG MAP	16,974.	16,549.	425.
OFFICE EQUIPMENT	74,835.	72,872.	1,963.
COMPUTER	756,393.	750,880.	5,513.

FEE COLLECTION	747.	747.	0.
CAPITAL LEASES	46,697.	46,697.	0.
LEASEHOLD IMPROVEMENTS	364,589.	343,711.	20,878.
AGENCY IMPROVEMENTS	20,209.	20,209.	0.
LEASEHOLDS - EL PORTAL SECURITY	6,620.	6,620.	0.
TABLE ROCK RESERVATION	7,397.	7,397.	0.
GETTYSBURG CYCLORAMA	5,231.	5,231.	0.
EQUIPMENT - WAREHOUSE	9,929.	9,929.	0.
EQUIPMENT - SALES TREDEGAR	19,879.	17,945.	1,934.
OFFICE EQUIPMENT-METRO NY	3,134.	3,134.	0.
FIELD COMPUTERS	1,699.	1,700.	<1.>
OFFICE EQUIPMENT- WAREHOUSE	258,243.	197,251.	60,992.
OFFICE EQUIPMENT - WESTERN PA	4,594.	4,595.	<1.>
OFFICE EQUIPMENT - NEW ENGLAND	1,495.	1,096.	399.
OPERATION SECURITY EQUIPMENT	1,194.	855.	339.
EQUIPMENT - EL PORTAL	1,377.	987.	390.
EQUIPMENT - TRADESHOW BOOTH	5,710.	5,710.	0.
GLASSHOUSE PRODUCTION STARTUP	6,550.	4,778.	1,772.
OFFICE EQUIPMENT - MIS	94,685.	89,999.	4,686.
OFFICE EQUIPMENT - ACCOUNTING	8,042.	3,217.	4,825.
OFFICE EQUIPMENT - HR	5,918.	4,906.	1,012.
OFFICE EQUIPMENT - PRESIDENT	1,100.	843.	257.
SALES EQUIPMENT - GETTYSBURG	8,326.	2,572.	5,754.
OFFICE EQUIPMENT - PURCHASING	5,998.	2,125.	3,873.
OFFICE EQUIPMENT - OPERATIONS	869.	435.	434.
POS SYSTEM	930.	865.	65.
SALES EQUIPMENT - WB PAVILION	210,535.	75,985.	134,550.
OFFICE EQUIPMENT - STEAMTOWN	10,318.	3,956.	6,362.
OFFICE EQUIPMENT - NCR REGION	10,000.	2,167.	7,833.
POS SYSTEM-SALES	2,845.	738.	2,107.
LEASEHOLD IMPROVEMENTS-NCR	638,836.	172,191.	466,645.
EQUIPMENT - GETTYSBURG	422,264.	152,705.	269,559.
JANITORIAL	5,694.	335.	5,359.
SALES EQUIPMENT-REFRIGERATOR	2,099.	140.	1,959.
IVC	1,182.	99.	1,083.
PO SERVER&SOFTWARE	187,568.	12,590.	174,978.
PO PHONE SYSTEM	24,949.	1,620.	23,329.
TOTAL TO FORM 990, PART IV, LN 57	<u>3,712,810.</u>	<u>2,503,888.</u>	<u>1,208,922.</u>

FORM 990	OTHER ASSETS	STATEMENT	7
DESCRIPTION		AMOUNT	
INTANGIBLE PENSION ASSET		110,736.	
DEPOSIT		78,238.	
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B		<u>188,974.</u>	

FORM 990	OTHER LIABILITIES	STATEMENT	8
<u>DESCRIPTION</u>		<u>AMOUNT</u>	
MONIES DUE NATIONAL PARK SERVICE		4,409,090.	
PAYROLL AND SALES TAX PAYABLE		139,476.	
RESERVE FOR VACATION ACCRUAL		382,818.	
RESERVE FOR HEALTH INSURANCE FASB 106		842,699.	
ADDITIONAL MINIMUM PENSION LIABILITY		529,347.	
TOTAL TO FORM 990, PART IV, LINE 65, COLUMN B		<u>6,303,430.</u>	

FORM 990	OTHER SECURITIES	STATEMENT	9
<u>SECURITY DESCRIPTION</u>	<u>COST/FMV</u>	<u>OTHER SECURITIES</u>	
RESTRICTED INVESTMENTS	FMV	2,098,305.	
TO FORM 990, LINE 54, COL B		<u>2,098,305.</u>	

FORM 990

PART V - LIST OF OFFICERS, DIRECTORS,
TRUSTEES AND KEY EMPLOYEES

STATEMENT 10

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
MELODY WEBB 470 MARYLAND DRIVE, SUITE 1 FORT WASHINGTON, PA 19034	CHAIR 7 HRS/WEEK	10,000.	0.	0.
JOHN COOK 470 MARYLAND DRIVE, SUITE 1 FORT WASHINGTON, PA 19034	VICE CHAIR 9 HRS/WEEK	2,875.	0.	0.
JAMES DRAPER 470 MARYLAND DRIVE, SUITE 1 FORT WASHINGTON, PA 19034	SECRETARY/TREASURER 1 HRS/WEEK	5,000.	0.	0.
GERALD HALPIN 470 MARYLAND DRIVE, SUITE 1 FORT WASHINGTON, PA 19034	DIRECTOR 1 HRS/WEEK	250.	0.	0.
GARY EVERHARDT 470 MARYLAND DRIVE, SUITE 1 FORT WASHINGTON, PA 19034	DIRECTOR 4 HRS/WEEK	1,750.	0.	0.
BOB REYNOLDS 470 MARYLAND DRIVE, SUITE 1 FORT WASHINGTON, PA 19034	DIRECTOR 2 HR/WEEK	1,000.	0.	0.
BOB STANTON 470 MARYLAND DRIVE, SUITE 1 FORT WASHINGTON, PA 19034	DIRECTOR 1 HRS/WEEK	875.	0.	0.
RON TYLER 470 MARYLAND DRIVE, SUITE 1 FORT WASHINGTON, PA 19034	DIRECTOR 1 HRS/WEEK	1,000.	0.	0.
MARYE WELLS-HARLEY 470 MARYLAND DRIVE, SUITE 1 FORT WASHINGTON, PA 19034	DIRECTOR 2 HRS/WEEK	1,500.	0.	0.
GEORGE R. LAMB 470 MARYLAND DRIVE, SUITE 1 FORT WASHINGTON, PA 19034	DIRECTOR 1 HR/WEEK	500.	0.	0.
CHESLEY A. MOROZ 470 MARYLAND DRIVE, SUITE 1 FORT WASHINGTON, PA 19034	PRESIDENT 40 HRS/WEEK	178,005.	27,312.	0.

JOHN F. RYAN 470 MARYLAND DRIVE, SUITE 1 FORT WASHINGTON, PA 19034	CONTROLLER 40 HRS/WEEK	93,492.	28,200.	0.
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TOTALS INCLUDED ON FORM 990, PART V		<u>296,247.</u>	<u>55,512.</u>	<u>0.</u>
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FORM 990 IDENTIFICATION OF RELATED ORGANIZATIONS STATEMENT 11
PART VI, LINE 80B

NAME OF ORGANIZATION	EXEMPT	NONEXEMPT
EMPLOYEE & ALUMNI ASSOCIATION OF THE NATIONAL PARK SERVICE	X	

FORM 990 PART VIII - RELATIONSHIP OF ACTIVITIES TO ACCOMPLISHMENT OF EXEMPT PURPOSES STATEMENT 12

LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
102	SALES OF EDUCATIONAL AND INTERPRETIVE SALES ITEMS TO VISITORS OF NATIONAL PARKS.
103A	INCOME PRODUCED FROM RENTAL OF TAPE RECORDERS & INTERPRETIVE TAPES, THAT VISITORS OF NATIONAL PARKS CAN USE TO TOUR A SITE.
103B	MISCELLANEOUS INCOME FROM VISITOR SERVICE EVENTS.
103C	EASTERN NATIONAL COLLECTS FEES ON BEHALF OF THE NPS FOR VARIOUS PROGRAMS. THE NPS PAYS EASTERN NATIONAL A PERCENTAGE OF THE FEES COLLECTED.
103D	FEE RECEIVED FOR ADMINISTRATIVE SERVICES PROVIDED TO A RELATED PARTY.

SCHEDULE A STATEMENT REGARDING ACTIVITIES WITH SUBSTANTIAL CONTRIBUTORS, TRUSTEES, DIRECTORS, CREATORS, KEY EMPLOYEES, ETC,. PART III, LINE 2 STATEMENT 13

CERTAIN OFFICERS WERE PAID IN EXCESS OF \$1,000 DURING THE YEAR, SEE STATEMENT 11 FOR DETAILS.

SCHEDULE A	OTHER INCOME			STATEMENT 14
DESCRIPTION	2003 AMOUNT	2002 AMOUNT	2001 AMOUNT	2000 AMOUNT
TAPE TOUR INCOME	4,856.	18,820.	18,966.	18,694.
OTHER INCOME	31,554.	25,098.	66,819.	65,120.
FEE COLLECTION INCOME	9,611.	77,599.	0.	0.
COMMISSION INCOME	0.	19,962.	0.	0.
GUIDED TOUR INCOME	0.	58,795.	0.	0.
CONCESSION INCOME	20,938.	0.	0.	0.
MANAGEMENT FEE INCOME	32,000.	0.	0.	0.
ADMINISTRATIVE FEE INCOME	220,000.	0.	0.	0.
TOTAL TO SCHEDULE A, LINE 22	318,959.	200,274.	85,785.	83,814.