

Cooperating Association On-line Form

Add New Association

Manage Existing Cooperating Associations

* Required

Name of Association * ?

Street Address 1 * ?

Street Address 2 Street Address (second line) ?

City/State/Zip * ?

Phone ?

Website ? [View](#)

Title Executive Director ?

Name First Last ?

Email ?

Associated NPS Units ?

- Yellowstone National Park
- Yucca House National Monument
- Zion National Park
- MIDWEST REGION**
- Agate Fossil Beds National Monument
- Apostle Islands National Lakeshore
- Arkansas Post National Memorial
- Badlands National Park

Financial Reporting

Annual Report

Save Association **Clear Association Data**

Financial Reporting

Name of Organization ?		Badlands Natural History Association					
Organization Function		<input type="checkbox"/> Cooperating Association/Interpretive Association Selling Education Materials <input type="checkbox"/> Friends Group-Fundraising <input type="checkbox"/> Membership Organization <input type="checkbox"/> Institute/Field School <input type="checkbox"/> Other					
Fiscal Year End ?		2014					
STATEMENT OF OPERATIONS							
Agencies Served		NPS	USDAFS	ACOE	BLM	Other Agencies	Total Agencies
Revenue (2010 IRS Form 990 Part VIII)							
Line #							
1.	Contributions, Gifts, Grants						
a.	Donations from Outside Sources	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$
b.	Membership Income	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$
c.	Fundraising Events	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$
d.	Government Grants	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$
e.	All Other Contributions, Gifts, Grants	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$
	Total	\$0	\$0	\$0	\$0	\$0	\$
2.	Program Service Revenue						
a.	Sales						
i.	Interpretive Materials	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$0
ii.	Visitor Convenience Items	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$0
iii.	Other	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$0
iv.	Total Sales	\$0	\$0	\$0	\$0	\$0	\$0
b.	Cost of Goods Sold	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$0
c.	Gross Profit	\$0	\$0	\$0	\$0	\$0	\$0
d.	Interpretive/Cooperative Programs	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$0
3.	Other Revenue	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$0
4.	Total Net Revenue	\$0	\$0	\$0	\$0	\$0	\$0
Functional Expenses (2010 IRS Form 990 Part IX)							
5.	Program Service (Column (B), Lines 4-24)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$0