SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Internal Revenue Service Name of the organization

Employer identification number Historic Transport Preservation, Inc. 20 5008784 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: (Please check only one organization.) ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 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). 6 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3 % 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 331/3 % 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). (see instructions) 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 that describes the type of supporting organization and complete lines 11e through 11h. a Type I **b** Type II **c** Type III–Functionally integrated **d** Type III–Other e Dy checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). f If the organization received a written determination from the IRS that it is a Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i) 11g(ii) (ii) A family member of a person described in (i) above? 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the organizations the organization supports. (ii) EIN (iii) Type of organization (iv) Is the organization (i) Name of supported (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col. (i) listed in your the organization in organization in col. support above or IRC section governing document? col. (i) of your (i) organized in the U.S.? (see instructions)) support? Yes Nο Yes No Yes Nο Total

Schedule A (Form 990 or 990-EZ) 2008 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge **Total.** Add lines 1-3 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) Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or 10 loss from the sale of capital assets (Explain in Part IV.) Total support. Add lines 7 through 10 . 11 1

12	Gross receipts from related activities, etc. (see instructions)	12							
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here								
Sec	tion C. Computation of Public Support Percentage								
14	Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	%						
15	Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	15 %						
16a	33 ½ % support test—2008. If the organization did not check the box on line 13, and line 14 is 33½ % or more, check this box and stop here. The organization qualifies as a publicly supported organization								
b	33⅓% support test—2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33⅓% or more, check this box and stop here. The organization qualifies as a publicly supported organization								
17a	10%-facts-and-circumstances test — 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ □								
b 18	10%-facts-and-circumstances test—2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ □ Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ □								
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Support Schedule for Organizations Described in Section 509(a)(2)

	(Complete only if you checke				(-)				
	tion A. Public Support			,					
Ca	ılendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	NA	NA	\$1,402	\$580	\$845	\$2,827		
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	NA	NA	\$7,284	\$62,650	\$40,661	\$110,595		
3	Gross receipts from activities that are not an unrelated trade or business under section 513	NA	NA	0	0	0	0		
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	NA	NA	0	0	0	0		
5	The value of services or facilities furnished by a governmental unit to the organization without charge	NA	NA	0	0	0	0		
6	Total. Add lines 1-5	NA	NA	\$8,686	\$63,230	\$41,506	\$113,422		
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	NA	NA	\$650	\$5,575	\$4,612	\$10,837		
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000	NA	NA	0	0	0	0		
С	Add lines 7a and 7b			\$650	\$5,575	\$4,612	\$10,837		
8	Public support (Subtract line 7c from line 6.)						\$102,585		
	tion B. Total Support								
Ca	llendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total		
9 10a	Amounts from line 6	NA NA	NA NA	\$8,686	\$63,230 12	\$41,506 0	\$113,422 14		
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	NA	NA	0	0	0	0		
c 11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	NA NA	NA NA	0	0	0	0		
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	NA	NA	0	0	0			
13	Total support. (Add lines 9, 10c, 11, and 12.)						\$113,436		
14	First five years. If the Form 990 is for toganization, check this box and stop I	_		d, third, fourth	-				
Sec	tion C. Computation of Public Sup								
15 16	Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) Public support percentage from 2007 Schedule A, Part IV-A, line 27g					15 16	% %		
Sec	tion D. Computation of Investmen	t Income Pe	rcentage						
17 18	Investment income percentage for 2008 Investment income percentage from 20	•	. ,	•	lumn (f)) .	17 % 18 %			
19a	33\% % support tests—2008. If the organ 17 is not more than 33\% %, check this be 33\% % support tests—2007. If the organ	anization did no ox and stop he	ot check the bore. The organize	ox on line 14, a zation qualifies	as a publicly s	supported orga	nization 🕨 🗌		

line 18 is not more than 331/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization ightharpoonupPrivate foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ □

Part IV	Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)							