

Form 8879-EO

IRS e-file Signature Authorization
for an Exempt Organization

OMB No. 1545-1878

2014

For calendar year 2014, or fiscal year beginning 2014, and ending 2014, information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.

Do not send to the IRS. Keep for your records.

Department of the Treasury
Internal Revenue Service

FRIENDS OF RADNOR LAKE

JAMES WEINBERG

TREASURER

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a Form 990 check here ☒ b Total revenue, if any (Form 990, Part VIII, column (A), line 12) 680,728

2a Form 990-EZ check here ☐ b Total revenue, if any (Form 990-EZ, line 9)

3a Form 1120-POL check here ☐ b Total tax (Form 1120-POL, line 22)

4a Form 990-PF check here ☐ b Tax based on investment income (Form 990-PF, Part VI, line 5)

5a Form 8868 check here ☐ b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2014 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund, if applicable. I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

☒ I authorize

Judy Tygard

ERO firm name

to enter my PIN

12321

as my signature

Enter five numbers, but

do not enter all zeros

on the organization's tax year 2014 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2014 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

62040398789

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2014 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-file (MeF) Information for Authorized IRS e-file Providers for Business Returns.

Judy Tygard

ERO's signature

Date

08/13/15

ERO Must Retain This Form—See Instructions

Do Not Submit This Form To the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c)(3), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.OMB No. 1545-0047
2014
Open to Public Inspection

A For the 2014 calendar year, or tax year beginning , and ending	
C Name of organization FRIENDS OF RADNOR LAKE	
D Employer identification number 23-7322143	
E Telephone number 615-256-7141	
F Name and address of principal officer: JAMES WEINBERG 1160 OTTER CREEK RD NASHVILLE TN 37220	
G Gross receipts \$ 680,728	
H(a) Is this a group return for subsidiaries? ☒ Yes ☐ No H(b) Are all subsidiaries included? ☐ Yes ☐ No If "No," attach a list (see instructions)	
I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527	
J Website: WWW.RADNORLAKE.ORG	
K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other	
L Year of formation: 1973 M State of legal domicile: TN	
H(c) Group exemption number	

1 Briefly describe the organization's mission or most significant activities: PROTECTION, MAINTENANCE, AND IMPROVEMENT OF RADNOR LAKE STATE NATURAL AREA--ITS NATURAL ENVIRONMENT, FACILITIES, AND EQUIPMENT AND TO EDUCATE THE GENERAL PUBLIC ON THE IMPORTANCE OF THE AREA.	
2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.	
3 Number of voting members of the governing body (Part VI, line 1a) 24	
4 Number of independent voting members of the governing body (Part VI, line 1b) 24	
5 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 1	
6 Total number of volunteers (estimate if necessary) 0	
7a Total unrelated business revenue from Part VIII, column (C), line 12 0	
7b Net unrelated business taxable income from Form 990-T, line 34 0	
8 Contributions and grants (Part VIII, line 1h) 815,588	
9 Program service revenue (Part VIII, line 2g) 1,085,281	
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 20	
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 69,247	
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 884,855	
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0	
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) 54,191	
16a Professional fundraising fees (Part IX, column (A), line 11e) 0	
16b Total fundraising expenses (Part IX, column (D), line 25) 21,340	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 737,898	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 792,089	
19 Revenue less expenses. Subtract line 18 from line 12 92,766	
20 Total assets (Part X, line 16) 3,087,341	
21 Total liabilities (Part X, line 26) 31,173	
22 Net assets or fund balances. Subtract line 21 from line 20 3,056,168	
Beginning of Current Year 2,602,887	
End of Year 2,616,447	

Sign Here		Signature of officer JAMES WEINBERG		Date	
Paid		Print/Type preparer's name		Preparer's signature	
Preparer		Firm's name Accurate Income Tax Service		Firm's EIN 62-1293274	
Use Only		Firm's address 2606-C Eugenia Ave Nashville, TN 37211		Phone no. 615-256-7146	
		May the IRS discuss this return with the preparer shown above? (see instructions)		Yes ☐ No ☐	
		For Paperwork Reduction Act Notice, see the separate instructions.		Form 990 (2014)	

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

PROTECTION, MAINTENANCE, AND IMPROVEMENT OF RADNOR LAKE STATE NATURAL AREA--ITS NATURAL ENVIRONMENT, HABITAT, FACILITIES, AND EQUIPMENT AND TO EDUCATE THE GENERAL PUBLIC ON THE IMPORTANCE OF THE AREA.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

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

4a (Code:) (Expenses \$ 830,849 including grants of \$) (Revenue \$)
 MAINTENANCE, PROTECTION IMPROVEMENT OF NATURAL ENVIRONMENT, HABITAT, FACILITIES ON PARK PROPERTY VIA LAND ACQUISITION OF SURROUNDING LOTS

4b (Code:) (Expenses \$ 9,314 including grants of \$) (Revenue \$)
 EDUCATIONAL & ENVIRONMENTAL STUDIES--EAGLE SCOUT PROJECTS, ENVIRONMENTAL ED, AND NEWSLETTER

4c (Code:) (Expenses \$ 223,842 including grants of \$) (Revenue \$)
 CONTINUE TO SUPPORT RADNOR LAKE STATE PARK WITH PROGRAMS STATE DOES NOT FUND. JUNIOR RANGER PROGRAMS AND OTHER PARK SUPPORT

4d Other program services (Describe in Schedule O.)

(Expenses \$)

including grants of \$

(Revenue \$)

1,064,005

4e Total program service expenses

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

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Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and II	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		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 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?	25b	X	
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 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, 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	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28a	X	
		28b	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30	X	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31	X	
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	32	X	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1	33	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34	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	35a	X	
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	35b		
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	36	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	37	X	
		38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	7
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	2a	1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X
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," provide an explanation in Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country: ►	4a	
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
c	If "Yes" to line 5a or 5b, did the organization file Form 8866-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).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8822?	7c	X
d	If "Yes," indicate the number of Forms 8822 filed during the year	7d	
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
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section A. Governing Body and Management

1a	Enter the number of voting members of the governing body at the end of the tax year	1a	24
	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	24

9		the organization's mailing address? If "Yes," provide the names and addresses in Schedule O
9		Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at
0	8b	Each committee with authority to act on behalf of the governing body?
a	8a	The governing body?
8		Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
	7b	stockholders, or persons other than the governing body?
b		Are any governance decisions of the organization reserved to (or subject to approval by) members,
7a	7a	one or more members of the governing body?
		Did the organization have members, stockholders, or other persons who had the power to elect or appoint
6	6	Did the organization have members or stockholders?
5	5	Did the organization become aware during the year of a significant diversion of the organization's assets?
4	4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?
	3	supervision of officers, directors, or trustees, or key employees to a management company or other person?
3		Did the organization delegate control over management duties customarily performed by or under the direct
	2	any other officer, director, trustee, or key employee?
X		
	9	

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

Yes		No	
10a	X	10b	
11a	X	11b	
12a	X	12b	
13	X	14	X
15a	X	15b	X
16a	X	16b	

Section C. Disclosure

- List the states with which a copy of this Form 990 is required to be filed: **None**

available for public inspection. Indicate how you made these available. Check all that apply.

- ☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

financial statements available to the public during the tax year.

- 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶

GRETCHEN PRITCHETT

2606-C EUGENIA AVENUE

NI 37211

615-587-8149

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and**Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the

organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Former Highest compensated employee	Key employee	Officer	Institutional trustee	Individual trustee or director			
(1) ANN TIDWELL BOARD MEMBER	0.00					X	0	0	0
(2) CHARLEY HANKLA BOARD MEMBER	0.00					X	0	0	0
(3) AMY ATKINSON BOARD MEMBER	0.00					X	0	0	0
(4) GREER TIDWELL BOARD MEMBER	0.00					X	0	0	0
(5) ANDREW AMONETTE PRESIDENT	0.00					X	0	0	0
(6) KIM BARRICK BOARD MEMBER	0.00					X	0	0	0
(7) KAREN BIRD BOARD MEMBER	0.00					X	0	0	0
(8) GRETCHEN PRITCHETT OPERATIONS MANAGER	0.00			X		X	0	0	0
(9) PAUL BUCHANAN VICE PRES	0.00				X	X	0	0	0
(10) DOUGLASS JOHNSON BOARD MEMBER	0.00					X	0	0	0
(11) BEV LEISER BOARD MEMBER	0.00					X	0	0	0
BOARD MEMBER	0.00					X	0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for organizations related below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)	Former	Highest compensated employee	Key employee	Officer	Institutional trustee	Individual trustee or director	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from organizations related (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
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(12) ROBIN CONOVER	0.00	X							0	0	0
BOARD MEMBER	0.00										
(13) MARTHA COOPER	0.00	X							0	0	0
BOARD MEMBER	0.00										
(14) KIMBERLY BELL	0.00	X							0	0	0
BOARD MEMBER	0.00										
(15) JEFF KING	0.00	X							0	0	0
BOARD MEMBER	0.00										
(16) JANET MILLER	0.00	X							0	0	0
BOARD MEMBER	0.00										
(17) TATIANA PATERNO	0.00	X							0	0	0
BOARD MEMBER	0.00										
(18) MARC STENGEL	0.00	X							0	0	0
BOARD MEMBER	0.00										
(19) CHARLIE WRAY	0.00	X							0	0	0
BOARD MEMBER	0.00										
Sub-total											
Total from continuation sheets to Part VII, Section A											
Total (add lines 1b and 1c)											
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization										
	0										

3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual				
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual				
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person				
		3	4	5	
		X	X	X	

Section B. Independent Contractors

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.	(A) Name and business address	(B) Description of services	(C) Compensation
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization			0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
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(12) JENNY VAZQUEZ	0.00	X			0	0
(13) BILLY LEAVELL	0.00				0	0
BOARD MEMBER	0.00	X			0	0
(14) JAMES WEINBERG	0.00				0	0
TREASURER	0.00	X			0	0
(15) LINDY MANESS	0.00	X			0	0
VOLUNTEER COORDINATOR	0.00	X			0	0
(16) KARA JACOBS	0.00				0	0
YOUNG LEADER INTERN	0.00	X			0	0
(17) NAN ADAMS	0.00				0	0
PRESIDENT	0.00		X		0	0
(18) LESTER TURNER JR	0.00		X		0	0
SECRETARY		X				
(19)						
1b Sub-total						
c Total from continuation sheets to Part VII, Section A						
d Total (add lines 1b and 1c)						
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization						

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization		

Part VIII
Statement of Revenue

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

[illegible]

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21						
2	Grants and other assistance to domestic individuals. See Part IV, line 22						
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	51,496	25,748	20,598	5,150		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)						
9	Other employee benefits						
10	Payroll taxes	3,939	1,970	1,575	394		
11	Fees for services (non-employees):						
a	Management						
b	Legal						
c	Accounting	8,650		8,650			
d	Lobbying						
e	Professional fundraising services. See Part IV, line 17						
f	Investment management fees						
g	Other: (if line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1,069,924	1,036,287	17,841	15,796		
12	Advertising and promotion						
13	Office expenses						
14	Information technology						
15	Royalties						
16	Occupancy						
17	Travel						
18	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						
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							
b							
c							
d							
e	All other expenses						
25	Total functional expenses. Add lines 1 through 24e	1,134,009	1,064,005	48,664	21,340		
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)						

Part X Balance Sheet

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

		(A) Beginning of year	(B) End of year
1	Cash—non-interest bearing	1,358,163	661,536
2	Savings and temporary cash investments	2	75,535
3	Pledges and grants receivable, net	218,750	21,179
4	Accounts receivable, net	9,091	4
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees.	5	
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	6	
7	Notes and loans receivable, net	7	
8	Inventories for sale or use	333	6,095
9	Prepaid expenses and deferred charges	9	
10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	
b	Less: accumulated depreciation	10b	
11	Investments—publicly traded securities	1,501,004	1,751,935
12	Investments—other securities. See Part IV, line 11	12	
13	Investments—program-related. See Part IV, line 11	13	
14	Intangible assets	14	
15	Other assets. See Part IV, line 11	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	3,087,341	2,616,447
17	Accounts payable and accrued expenses	31,173	13,560
18	Grants payable	18	
19	Deferred revenue	19	
20	Tax-exempt bond liabilities	20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D	21	
22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	22	
23	Secured mortgages and notes payable to unrelated third parties	23	
24	Unsecured notes and loans payable to unrelated third parties	24	
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	25	
26	Total liabilities. Add lines 17 through 25	31,173	13,560
27	Unrestricted net assets	2,246,799	2,047,900
28	Temporarily restricted net assets	809,369	554,987
29	Permanently restricted net assets	29	
30	Capital stock or trust principal, or current funds	30	
31	Paid-in or capital surplus, or land, building, or equipment fund	31	
32	Retained earnings, endowment, accumulated income, or other funds	32	
33	Total net assets or fund balances	3,056,168	2,602,887
34	Total liabilities and net assets/fund balances	3,087,341	2,616,447

Organizations that follow SFAS 117 (ASC 958), check here ☒ and ☐
 complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and ☐
 complete lines 30 through 34.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	680,728
2	Total expenses (must equal Part IX, column (A), line 25)	1,134,009
3	Revenue less expenses. Subtract line 2 from line 1	-453,281
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3,056,168
5	Net unrealized gains (losses) on investments	
6	Donated services and use of facilities	
7	Investment expenses	
8	Prior period adjustments	
9	Other changes in net assets or fund balances (explain in Schedule O)	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	2,602,887

Part XII Financial Statements and Reporting

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

1	Accounting method used to prepare the Form 990: ☒ Cash ☐ Accrual ☐ Other				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			X	
2b	Were the organization's financial statements audited by an independent accountant?			X	
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?				
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.				

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

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.

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

Open to Public
Inspection

2014

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

FRIENDS OF RADNOR LAKE

Employer identification number

23-7322143

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

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

- 1 ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 ☐ A school described in section 170(b)(1)(A)(iii). (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 ☒ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 1a through 1d that describes the type of supporting organization and complete lines 1e, 1f, and 1g.

a ☒ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.

b ☐ Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.

c ☐ Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.

d ☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
(A) RADNOR LAKE NATURAL AREA	62-6001445	6	X	202,820	0
(B)					
(C)					
(D)					
(E)					
Total				202,820	

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2014

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

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

Section A. Public Support

1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
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						
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 1, column (f)						
6	Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4					
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					
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					
12	Gross receipts from related activities, etc. (see instructions)					
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					

Section C. Computation of Public Support Percentage

14	Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	%
15	Public support percentage from 2013 Schedule A, Part II, line 14	15	%

16a **33 1/3% support test—2014.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here.

b **33 1/3% support test—2013.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a **10%-facts-and-circumstances test—2014.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b **10%-facts-and-circumstances test—2013.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1						
Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2						
Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3						
Gross receipts from activities that are not an unrelated trade or business under section 513						
4						
Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5						
The value of services or facilities furnished by a governmental unit to the organization without charge						
6						
Total. Add lines 1 through 5						
7a						
Amounts included on lines 1, 2, and 3 received from disqualified persons						
b						
Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c						
Add lines 7a and 7b						
8						
Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9						
Amounts from line 6						
10a						
Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b						
Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c						
Add lines 10a and 10b						
11						
Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12						
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13						
Total support. (Add lines 9, 10c, 11, and 12.)						
14						
First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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

Part IV Supporting Organizations

(Complete only if you checked 1a of Part I. If you checked 1a of Part I, complete Sections A and B. If you checked 1b of Part I, complete Sections A and C. If you checked 1c of Part I, complete Sections A, D, and E. If you checked 1d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

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	X	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(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	X	
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	X	
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		
c	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 1a or 1b in Part I, answer (b) and (c) below.	4a	X	
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. 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	X	
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		
c	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 (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6	X	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	X	
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).	8	X	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a	X	
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	X	
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	X	
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.	10a	X	
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Part IV Supporting Organizations (continued)

11	a Has the organization accepted a gift or contribution from any of the following persons? 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	X
		11b	X
		11c	X
		Yes	No

Section B. Type I Supporting Organizations

1	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 tax year.	1	X
		2	X
		Yes	No

Section C. Type II Supporting Organizations

1	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).	Yes	No

Section D. All Type III Supporting Organizations

1	1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 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).	1	
2	2 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	2	
3	3 Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3	
		Yes	No

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the integral Part Test during the year (see instructions):

☐ **a** The organization satisfied the Activities Test. Complete **line 2** below.

☐ **b** The organization is the parent 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 instructions).

2 Activities Test. Answer (a) and (b) below.

a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a	
	2b	
b Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .	3a	
	3b	
		Yes
		No

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

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

other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income

(B) Current Year	(A) Prior Year
------------------	----------------

1 Net short-term capital gain

2 Recoveries of prior-year distributions

3 Other gross income (see instructions)

4 Add lines 1 through 3

5 Depreciation and depletion

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)

7 Other expenses (see instructions)

8 **Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)

Section B - Minimum Asset Amount

(B) Current Year	(A) Prior Year
------------------	----------------

1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):

a Average monthly value of securities

b Average monthly cash balances

c Fair market value of other non-exempt-use assets

d **Total** (add lines 1a, 1b, and 1c)

e **Discount** claimed for blockage or other factors (explain in detail in Part VI):

2 Acquisition indebtedness applicable to non-exempt-use assets

3 Subtract line 2 from line 1d

4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).

5 Net value of non-exempt-use assets (subtract line 4 from line 3)

6 Multiply line 5 by .035

7 Recoveries of prior-year distributions

8 **Minimum Asset Amount** (add line 7 to line 6)

Section C - Distributable Amount

1 Adjusted net income for prior year (from Section A, line 8, Column A)

2 Enter 85% of line 1

3 Minimum asset amount for prior year (from Section B, line 8, Column A)

4 Enter greater of line 2 or line 3

5 Income tax imposed in prior year

6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)

7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2014

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)			
Section D - Distributions			
1	Amounts paid to supported organizations to accomplish exempt purposes		Current Year
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
3	Administrative expenses paid to accomplish exempt purposes of supported organizations		
4	Amounts paid to acquire exempt-use assets		
5	Qualified set-aside amounts (prior IRS approval required)		
6	Other distributions (describe in Part VI). See instructions.		
7	Total annual distributions. Add lines 1 through 6.		
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.		
9	Distributable amount for 2014 from Section C, line 6		
10	Line 8 amount divided by Line 9 amount		
Section E - Distribution Allocations (see instructions)			
(i)	Excess Distributions	(iii)	Underdistributions
Distributable amount for 2014 from Section C, line 6			
1			
2	Underdistributions, if any, for years prior to 2014		
3	Excess distributions carryover, if any, to 2014:		
a			
b			
c			
d			
e	From 2013,		
f	Total of lines 3a through e		
g	Applied to underdistributions of prior years		
h	Applied to 2014 distributable amount		
i	Carryover from 2009 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4	Distributions for 2014 from Section D, line 7:		
	\$		
a	Applied to underdistributions of prior years		
b	Applied to 2014 distributable amount		
c	Remainder. Subtract lines 4a and 4b from 4.		
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).		
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).		
7	Excess distributions carryover to 2015. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a			
b			
c			
d	Excess from 2013,		
e	Excess from 2014,		

Supplemental information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions.)

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

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

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

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes ☐ No
Part IV Escrow and Custodial Arrangements.

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes ☐ No

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

	1c	1d	1e	1f
Beginning balance				
Additions during the year				
Distributions during the year				
Ending balance				
Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial liability?				
If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII				

☐ Yes ☐ No
Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

a Board designated or quasi-endowment %b Permanent endowment %c Temporarily restricted endowment %

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

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

(i) unrelated organizations

(ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

3a(i)	
3a(ii)	
3b	
Yes	
No	

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)	1,745,154			1,745,154

Part VII Investments—Other Securities.

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments—Program Related.

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.	
(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.	
(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (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 XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

1	Total revenue, gains, and other support per audited financial statements	1	680,728
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	680,728
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	680,728

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

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

1	Total expenses and losses per audited financial statements	1	1,134,009
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,134,009
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		
b	Other (Describe in Part XIII.)		
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,134,009

Part XIII Supplemental Information.

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

Supplemental information area with horizontal lines for text entry.

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 M - Supplemental Information	
In Kind Professional Services:	
Robin Conover-Marketing and Calendar	20,000
Karin Bird-Marketing/graphic design	10,000
Patt St Clair-PR Services	8,000
Charley Hankla-Real estate brokerage	2,500
Jeff King-Legal services	12,000
Kent Blaze-Event music	1,500
Other In-Kind Contributions:	
NES-Utility Poles	47,950
Structural Engineering	2,500
Site Clearing	10,000
Stansell Electric	7,000
Nashville Wire Products	20,000
Granny White Market, Dan Smith: Food	3,840
TOTAL	145,290

SCHEDULE O (Form 990 or 990-EZ)		FRIENDS OF RADNOR LAKE	
Department of the Treasury Internal Revenue Service		Name of the organization	
Complete to provide information for responses to specific questions on Form 990 or 990-EZ. Attach to Form 990 or 990-EZ.		Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 .	
OMB No. 1545-0047		2014	
Open to Public Inspection		Employer identification number 23-7322143	

Form 990, Part I, Line 6 Fundraising help, trail clearing, publicity, cleanup, hosting

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

Form 990, Part IX, Line 11g - Other Fees for Services

Description

Program Service Mgt & General Fundraising

COST OF SALES-DONATED

\$ 0 \$ 0 \$ 0 12,000

PROMOTIONAL GIFTS

\$ 0 \$ 0 \$ 0 2,644

COMPUTER MAINTENANCE

\$ 0 \$ 0 \$ 0 638

DEPRECIATION

\$ 0 \$ 0 \$ 0 657

DUES & SUBSCRIPTIONS

\$ 0 \$ 0 \$ 0 1,280

MERCHANDISE-COST OF SALES

\$ 0 \$ 0 \$ 0 6,109

EVENTS

FRIENDS OF RADNOR LAKE

Employer identification number
23-7322143

COMPUTER SOFTWARE & DATABASE	\$	152	\$	0	\$	152
INSURANCE	\$	0	\$	2,675	\$	0
MARKETING ACTUAL	\$	0	\$	2,109	\$	0
JR RANGER PROGRAM	\$	8,844	\$	0	\$	0
LAND ACQUISITION COSTS-ACTUAL	\$	13,803	\$	0	\$	0
LAND ACQUISITION COSTS-DONATE	\$	750,398	\$	0	\$	0
GENERAL OFFICE PRINTING	\$	14,500	\$	0	\$	0
MEETINGS & TRAINING	\$	0	\$	219	\$	0
NEWSLETTER	\$	1,290	\$	1,290	\$	3,870
GENERAL OFFICE POSTAGE	\$	6,931	\$	0	\$	2,971
GIFTS & ENVIRONMENTAL AWARDS	\$	162	\$	243	\$	404
PROPERTY TAX	\$	943	\$	943	\$	0
PARK SUPPORT	\$	2,099	\$	0	\$	0
PARK SUPPORT	\$	202,820	\$	0	\$	0

FRIENDS OF RADNOR LAKE

Employer identification number

23-7322143

BANK FEES

\$	0	\$	351	\$	1,987
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GENERAL OFFICE SUPPLIES

\$	0	\$	1,113	\$	1,112
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TELEPHONE & INTERNET

\$	1,106	\$	1,292	\$	1,292
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WEB SITE MAINTENANCE

\$	1,126	\$	141	\$	141
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CONTRACT LABOR

\$	6,113	\$	4,890	\$	1,223
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MARKETING DONATED

\$	26,000	\$	0	\$	0
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COST OF SALES ACTUAL

\$	0	\$	0	\$	6,313
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LESS EXP INCLUDED W REV

\$	0	\$	0	\$	-24,422
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