OMB No. 1545-0047

Form **990**

Return of Organization Exempt From Income Tax

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

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

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2010 calendar year, or tax year beginning , 2010, and ending , 20

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending

C Name of organization: CUMBERLAND REGION TOMORROW

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address): P.O. BOX 150902 | Room/suite

City or town, state or country, and ZIP + 4: NASHVILLE, TN 37215

D Employer identification number: 62-1836825

E Telephone number: (615) 986-2699

G Gross receipts $ 228,635.

F Name and address of principal officer: BRIDGET JONES
P.O. BOX 150902 NASHVILLE, TN 37215

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates 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.CUMBERLANDREGIONTOMORROW.ORG

H(c) Group exemption number ▶

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶ | L Year of formation: 2000 | M State of legal domicile: TN

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
TO ORGANIZE CITIZENS DEDICATED TO REASONED GROWTH PLANNING, WITH EM-
PHASIS ON LAND USE, TRANSPORTATION, AND PRESERVATION OF THE RURAL LAND
SCAPE AND THE CHARACTER OF COMMUNITIES.

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)	3	54.
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	54.
5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	2.
6 Total number of volunteers (estimate if necessary)	6	12.
7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	
b Net unrelated business taxable income from Form 990-T, line 34	7b	

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	Prior Year	Current Year
Revenue		
8 Contributions and grants (Part VIII, line 1h)	296,818.	225,584.
9 Program service revenue (Part VIII, line 2g)		3,035.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	156.	16.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	296,974.	228,635.
Expenses		
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)	131,818.	127,065.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	190,006.	75,634.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	321,824.	202,699.
19 Revenue less expenses. Subtract line 18 from line 12	-24,850.	25,936.

Net Assets or Fund Balances	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	143,842.	168,976.
21 Total liabilities (Part X, line 26)	4,660.	3,858.
22 Net assets or fund balances. Subtract line 21 from line 20	139,182.	165,118.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here
▶ Signature of officer | Date
▶ Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: Richard M. Winstead | Preparer's signature: Richard M. Winstead | Date: 6-21-11 | Check if self-employed ▶ ☐ | PTIN

Firm's name ▶ CROSSLIN & ASSOCIATES, P.C. | EIN ▶

Firm's address ▶ 2525 WEST END, SUITE 1100 NASHVILLE, TN 37203 | Phone no. ▶ 615-320-5500

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** (2010)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . ☐

1 Briefly describe the organization's mission:
TO ORGANIZE CITIZENS DEDICATED TO REASONED GROWTH PLANNING, WITH EMPHASIS ON LAND USE, TRANSPORTATION, AND PRESERVATION OF THE RURAL LAND SCAPE AND THE CHARACTER OF COMMUNITIES. SEEKING TO UNITE DIVERSE INTERESTS THROUGH EDUCATION, RESEARCH, DISCUSSION AND ADVOCACY.

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 ☒ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 $ 28,765. including grants of $ ______) (Revenue $ 125.)
ATTACHMENT 1

4b (Code: ______) (Expenses $ 107,277. including grants of $ ______) (Revenue $ 2,910.)
ATTACHMENT 2

4c (Code: ______) (Expenses $ ______ including grants of $ ______) (Revenue $ ______)

4d Other program services. (Describe in Schedule O.)
(Expenses $ ______ including grants of $ ______) (Revenue $ ______)

4e Total program service expenses ▶ 136,042.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	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*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21; 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*	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		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*	11a	X	
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*	11b		X
c	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	16		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 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17		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*	18		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*	19		X
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States 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 and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25*	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) and 501(c)(4) 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? *If "Yes," complete Schedule L, Part I*	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *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 a grant selection committee member, or to a person related to such an individual? *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 current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
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*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		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*	32		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*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
a	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* ☐ Yes ☒ No			
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V [ ]

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable (1a) 0			
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?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return (2a) 2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file.* (see instructions)	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: ▶ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
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 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?	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 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 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 and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		X
9	**Sponsoring organizations maintaining donor advised funds.**			
a	Did the organization make any taxable distributions under section 4966?	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
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? **Note.** See the instructions for additional information the organization must report on Schedule O.	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 to any question in this Part VI . . . . . . [X]

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	54		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	54		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Does the organization have members or stockholders?		6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		9		X

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

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this is done*	12c	X	
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ TN,

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

[ ] Own website [X] Another's website [X] Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ BRIDGET JONES 511 UNION STREET, SUITE 1400 NASHVILLE, TN 37219
615-986-2699

Part VII **Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII . . . . [X]

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.

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
(1) BRIDGET JONES EXECUTIVE DIRECTOR	40.00	X		X				71,206.		8,796.
(2) DARWIN NEWTON DIRECTOR	.25	X								
(3) GARY SCOTT DIRECTOR	.25	X								
(4) MARION FOWLKES DIRECTOR	.25	X								
(5) STEPHEN BETTS DIRECTOR	.25	X								
(6) EVERETT COWAN DIRECTOR	.25	X								
(7) PATRICK EMERY CO-CHAIRMAN	.25	X								
(8) DEWITT EZELL DIRECTOR	.25	X								
(9) DR BOB FISHER DIRECTOR	.25	X								
(10) KIM HAWKINS DIRECTOR	.25	X								
(11) BERT MATHEWS DIRECTOR	.25	X								
(12) MARIAN OTT VICE-CHAIRMAN	.25	X								
(13) ANN SHAYNE DIRECTOR	.25	X								
(14) KEITH SIMMONS DIRECTOR	.25	X								
(15) JOHN STERN DIRECTOR	.25	X								
(16) STEVE TURNER DIRECTOR	.25	X								

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
(17) QUENTON WHITE DIRECTOR	.25	X								
(18) ELEANOR WILLIS DIRECTOR	.25	X								
(19) JOHN WINGO DIRECTOR	.25	X								
(20) JULIUS JOHNSON CO-CHAIRMAN	.25	X								
(21) JAMES CHAVEZ DIRECTOR	.25	X								
(22) LANE LYLE DIRECTOR	.25	X								
(23) JACK B TURNER DIRECTOR	.25	X								
(24) JOE ELLIOT DIRECTOR	.25	X								
(25) MARGOT FOSNES DIRECTOR	.25	X								
(26) KAY GASTON DIRECTOR	.25	X								
(27) JOHN L BATEY DIRECTOR	.25	X								
(28) LYNNISSE ROEHRICH-PATRICK DIRECTOR	.25	X								
1b Sub-total								71,206.		8,796.
c Total from continuation sheets to Part VII, Section A ATTACHMENT 3										
d Total (add lines 1b and 1c)								71,206.		8,796.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 0

		Yes	No
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		X
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		X
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		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.

(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 in compensation from the organization ▶ 0

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts						
1a	Federated campaigns	1a				
b	Membership dues	1b				
c	Fundraising events	1c				
d	Related organizations	1d				
e	Government grants (contributions)	1e				
f	All other contributions, gifts, grants, and similar amounts not included above	1f 225,584.				
g	Noncash contributions included in lines 1a-1f: $ 2,229.					
h	**Total.** Add lines 1a-1f ▶		225,584.			
Program Service Revenue		Business Code				
2a	SUMMIT REGISTRATION		2,910.	2,910.		
b	TOOLBOX SALES		125.	125.		
c						
d						
e						
f	All other program service revenue					
g	**Total.** Add lines 2a-2f ▶		3,035.			
Other Revenue						
3	Investment income (including dividends, interest, and other similar amounts) ATTACHMENT 4 ▶		16.	16.		
4	Income from investment of tax-exempt bond proceeds ▶		0.			
5	Royalties ▶		0.			
		(i) Real / (ii) Personal				
6a	Gross Rents					
b	Less: rental expenses					
c	Rental income or (loss)					
d	Net rental income or (loss) ▶		0.			
		(i) Securities / (ii) Other				
7a	Gross amount from sales of assets other than inventory					
b	Less: cost or other basis and sales expenses					
c	Gain or (loss)					
d	Net gain or (loss) ▶		0.			
8a	Gross income from fundraising events (not including $ ______ of contributions reported on line 1c). See Part IV, line 18	a				
b	Less: direct expenses	b				
c	Net income or (loss) from fundraising events ▶		0.			
9a	Gross income from gaming activities. See Part IV, line 19	a				
b	Less: direct expenses	b				
c	Net income or (loss) from gaming activities ▶		0.			
10a	Gross sales of inventory, less returns and allowances	a				
b	Less: cost of goods sold	b				
c	Net income or (loss) from sales of inventory ▶		0.			
	Miscellaneous Revenue	Business Code				
11a						
b						
c						
d	All other revenue					
e	**Total.** Add lines 11a-11d ▶		0.			
12	**Total revenue.** See instructions ▶		228,635.	3,051.		

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) but are not required to complete columns (B), (C), and (D).

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 governments and organizations in the U.S. See Part IV, line 21	0.			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	0.			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	80,001.	64,001.	16,000.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	38,529.	30,823.	7,706.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0.			
9 Other employee benefits	306.	245.	61.	
10 Payroll taxes	8,229.	6,583.	1,646.	
11 Fees for services (non-employees):				
a Management	0.			
b Legal	0.			
c Accounting	15,749.	827.	14,922.	
d Lobbying	0.			
e Professional fundraising services. See Part IV, line 17	0.			
f Investment management fees	0.			
g Other	0.			
12 Advertising and promotion	0.			
13 Office expenses	197.		197.	
14 Information technology	1,596.	798.	798.	
15 Royalties	0.			
16 Occupancy	0.			
17 Travel	2,137.		2,137.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	0.			
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	991.	297.	694.	
23 Insurance	2,890.		2,890.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a LICENSES & PERMITS	250.		250.	
b DUES & SUBSCRIPTIONS	1,795.		1,795.	
c BANK SERVICE FEES	110.		110.	
d PARKING	3,567.		3,567.	
e MEALS	31.		31.	
f All other expenses	46,321.	32,468.	13,853.	
25 **Total functional expenses.** Add lines 1 through 24f	202,699.	136,042.	66,657.	0.
26 **Joint Costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	112,660.	1	98,017.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	28,674.	3	67,588.
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	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)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 23,632.			
	b	Less: accumulated depreciation — 10b: 20,545.	2,224.	10c	3,087.
	11	Investments - publicly traded securities		11	
	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	284.	15	284.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	143,842.	16	168,976.
Liabilities	17	Accounts payable and accrued expenses	4,660.	17	3,858.
	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	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. Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	4,660.	26	3,858.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	131,247.	27	98,152.
	28	Temporarily restricted net assets	7,935.	28	66,966.
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.			
	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	139,182.	33	165,118.
	34	Total liabilities and net assets/fund balances	143,842.	34	168,976.

Part XI **Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI . . . ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	228,635.
2	Total expenses (must equal Part IX, column (A), line 25)	2	202,699.
3	Revenue less expenses. Subtract line 2 from line 1	3	25,936.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	139,182.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	165,118.

Part XII **Financial Statements and Reporting**

Check if Schedule O contains a response to any question in this Part XII . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.** ▶ **See separate instructions.**

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization
CUMBERLAND REGION TOMORROW

Employer identification number
62-1836825

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)(ii).** (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 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 ☐ By 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 I, Type II, or Type III supporting organization, check this box . . . . . . ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the 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)		X
(ii) A family member of a person described in (i) above?	11g(ii)		X
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		X

h 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 in col. (i) listed in your governing document? Yes	No	(v) Did you notify the organization in col. (i) of your support? Yes	No	(vi) Is the organization in col. (i) organized in the U.S.? Yes	No	(vii) Amount of support
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)** (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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 11, column (f)						
6 **Public support.** Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 IV.)						
11 **Total support.** Add lines 7 through 10						

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** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) . . . 14 %

15 Public support percentage from 2009 Schedule A, Part II, line 14 . . . 15 %

16a **33 1/3% support test - 2010.** 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.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support test - 2009.** 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 - 2010.** 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 **10%-facts-and-circumstances test - 2009.** 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 organzation 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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	231,598.	254,929.	264,775.	296,818.	225,584.	1,273,704.
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					2,910.	2,910.
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	231,598.	254,929.	264,775.	296,818.	228,494.	1,276,614.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons				22,722.	33,548.	56,270.
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				22,722.	33,548.	56,270.
8 **Public support** (Subtract line 7c from line 6.)						1,220,344.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	231,598.	254,929.	264,775.	296,818.	228,494.	1,276,614.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,310.	630.	212.	156.	16.	2,324.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	1,310.	630.	212.	156.	16.	2,324.
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 IV.) ATCH 1	0.	6,771.	21,160.		125.	28,056.
13 **Total support.** (Add lines 9, 10c, 11, and 12.)	232,908.	262,330.	286,147.	296,974.	228,635.	1,306,994.

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 2010 (line 8, column (f) divided by line 13, column (f))	15	93.37 %
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	95.33 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2010** (line 10c, column (f) divided by line 13, column (f))	17	.18 %
18 Investment income percentage from **2009** Schedule A, Part III, line 17	18	.30 %

19a **33 1/3% support tests - 2010.** 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 - 2009.** 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 **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

ATTACHMENT 1

SCHEDULE A, PART III - OTHER INCOME

DESCRIPTION	2006	2007	2008	2009	2010	TOTAL
TOOL BOX TRAINING	0.	6,625.	21,035.			27,660.
TOOL BOX SALES	0.	146.	125.		125.	396.
TOTAL	0.	6,771.	21,160.		125.	28,056.

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	**Schedule of Contributors** ▶ Attach to Form 990, 990-EZ, or 990-PF.	OMB No. 1545-0047 **2010**

Name of the organization	Employer identification number
CUMBERLAND REGION TOMORROW	62-1836825

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

[ ] For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than $1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of $5,000 or more during the year . . . . ▶ $ ____________

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization CUMBERLAND REGION TOMORROW

Employer identification number 62-1836825

Part I **Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		$ 7,500.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
2		$ 48,646.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
3		$ 20,199.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
4		$ 6,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
5		$ 10,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
6		$ 100,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

Name of organization CUMBERLAND REGION TOMORROW

Employer identification number 62-1836825

Part I **Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		$ 5,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
8		$ 15,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
9		$ 5,010.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
10		$ 6,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization: CUMBERLAND REGION TOMORROW

Employer identification number: 62-1836825

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ________

4 Number of states where property subject to conservation easement is located ▶ ________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ ________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ________

(ii) Assets included in Form 990, Part X ▶ $ ________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ________

b Assets included in Form 990, Part X ▶ $

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 XIV.

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 XIV and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? . . . . ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if 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 year end balance held as:

a Board designated or quasi-endowment ▶ _________ %

b Permanent endowment ▶ _________ %

c Term endowment ▶ _________ %

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

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(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		23,632.	20,545.	3,087.
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				3,087.

Part VII Investments - Other Securities. 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)		
(I)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 13.)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	

2. FIN 48 (ASC 740) Footnote. In Part XIV, 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).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	228,635.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	202,699.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	25,936.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	25,936.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	243,016.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b	14,381.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d			
e	Add lines **2a** through **2d**			2e	14,381.
3	Subtract line **2e** from line **1**			3	228,635.
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	4a			
b	Other (Describe in Part XIV.)	4b			
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	228,635.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	217,080.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	14,381.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV.)	2d			
e	Add lines **2a** through **2d**			2e	14,381.
3	Subtract line **2e** from line **1**			3	202,699.
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	4a			
b	Other (Describe in Part XIV.)	4b			
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	202,699.

Part XIV Supplemental Information

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

DONATED USE OF BUILDING

SCHEDULE D, PARTS XII & XIII, LINES 2B & 2A, RESPECTIVELY

RECEIVED USE OF OFFICE SPACE AS IN-KIND CONTRIBUTION IN THE AMOUNT OF $14,381, COURTESY OF THE LAW FIRM BONE MCASSESTER NORTON, PLLC AND THE ARCHITECTURE COMPANY GRESHAM, SMITH & PARTNERS.

Part XIV Supplemental Information *(continued)*

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization	Employer identification number
CUMBERLAND REGION TOMORROW	62-1836825

CONFLICT OF INTEREST DISCLOSURE PROCEDURE

PART VI, LINE 12C

AT THE TIME OF AN INDIVIDUAL'S INITIAL APPOINTMENT OR ELECTIONS TO ANY POSITION COVERED BY THE CONFLICT OF INTEREST POLICY (THE POLICY), AND THEREAFTER AT THE BEGINNING OF EACH FISCAL YEAR, CUMBERLAND REGION TOMORROW SHALL DISTRIBUTE A DISCLOSURE FORM TO EACH INDIVIDUAL WHO FALLS UNDER THE POLICY. THE DISCLOSURE SHALL BE FILED WITH A COMMITTEE COMPOSED OF THE CO-CHAIRMEN AND VICE CHAIRMAN AND WITHIN THIRTY DAYS FOLLOWING DISTRIBUTION OF THE DISCLOSURE FORM. SHOULD MATERIAL FACTS ARISE FOLLOWING SUBMISSION OF THE DISCLOSURE FORM, OR SHOULD THERE BE ANY MATERIAL CHANGES IN CIRCUMSTANCES OR ANY NEW MATTERS REQUIRING DISCLOSURE, THE INDIVIDUAL SHALL SUBMIT A SUPPLEMENTAL STATEMENT SETTING FORTH THE RELEVANT INFORMATION.

PUBLIC INSPECTION

PART VI, SECTION C, LINE 19

ALL CUMBERLAND REGION TOMORROW POLICIES AND PROCEDURES ARE APPROVED BY THE CUMBERLAND REGION TOMORROW BOARD OF DIRECTORS. ALL POLICIES AND PROCEDURES ARE OBTAINABLE UPON REQUEST. CUMBERLAND REGION TOMORROW'S ANNUAL FINANCIAL INFORMATION IS MADE AVAILABLE THROUGH WWW.NETWORKFORGOOD.ORG AND THE TENNESSEE SECRETARY OF STATE'S CHARITABLE ORGANIZATIONS DIVISION.

ORGANIZATION COMPENSATION PROCESS

Name of the organization: CUMBERLAND REGION TOMORROW

Employer identification number: 62-1836825

PART VI, SECTION B, LINE 15A

CUMBERLAND REGION TOMORROW'S BOARD OF DIRECTORS, AND EXECUTIVE COMMITTEE HIRES AND SETS THE SALARY FOR THE EXECUTIVE DIRECTOR, WHICH IS REVIEWED ANNUALLY. UPON HIRE OF THE EXECUTIVE DIRECTOR, A REVIEW OF SALARY RANGES FOR LIKE POSITIONS IS COMPLETED AND THE SALARY IS SET WITHIN THOSE RANGES.

990 BOARD APPROVAL PROCESS

PART VI, SECTION B, LINE 11A

CUMBERLAND REGION TOMORROW'S BOARD IS PRESENTED THE FORM 990 AT ITS REGULARLY SCHEDULED BOARD MEETING. AT THE MEETING, THE MEMBERS HAVE THE OPPORTUNITY TO REVIEW AND ASK QUESTIONS REGARDING THE INFORMATION PRESENTED. IF APPROVED THE RETURN IS FILED.

ATTACHMENT 1

FORM 990, PART III - PROGRAM SERVICE, LINE 4A

QUALITY GROWTH TOOL BOX:

CUMBERLAND REGION TOMORROW (CRT) CONTINUED TO PROVIDE LIMITED TECHNICAL ASSISTANCE TO COMMUNITIES IN OUR TEN-COUNTY REGION WHO ARE IN PROCESS WITH QUALITY GROWTH PILOT PROJECTS THAT BEGAN IN PREVIOUS PROGRAM YEARS. WE DID COMPLETE AND PUBLISH UPDATED CASE STUDIES IN THE SUMMER OF 2010 THAT CAPTURED CURRENT PROGRESS AND SUCCESSES IN SIX COMMUNITIES IN MIDDLE TENNESSEE. WE ALSO ASSISTED ROBERTSON COUNTY IN MAKING APPLICATION FOR GRANT FUNDING FOR PLANNED 2011 COMPREHENSIVE PLANNING PROJECT WORK. CUMBERLAND REGION TOMORROW DID NOT REQUEST OR RECEIVE ANY GRANT OR PROJECT FUNDING IN 2010 FOR THESE EFFORTS.

Name of the organization: CUMBERLAND REGION TOMORROW

Employer identification number: 62-1836825

ATTACHMENT 1 (CONT'D)

CUMBERLAND REGION TOMORROW INCLUDED LIMITED QUALITY GROWTH PROGRAM GOALS AND WORK TASKS IN THE BOARD APPROVED 2010 STRATEGIC PLAN OF WORK, BUT INTENDS TO EXPAND THESE EFFORTS IN THE THIRD AND FOURTH QUARTERS OF 2011 AS OUTLINED IN THE BOARD APPROVED 2011 STRATEGIC PLAN OF WORK.

ATTACHMENT 2

FORM 990, PART III - PROGRAM SERVICE, LINE 4B

THE POWER OF TEN REGION SUMMIT:

CUMBERLAND REGION TOMORROW (CRT) CONTINUED TO FOCUS CONSIDERABLE STAFF AND FUNDING EFFORTS ON REGIONALISM MISSION IN 2010 BY EXPANDING THE ANNUAL POWER OF TEN CONVENTION , CONVENING THE REGION SUMMIT, AND REGIONAL COMMUNICATIONS OUTREACH EFFORTS IN THE FIRST, SECOND, AND THIRD QUARTERS OF 2010. SPECIFIC ACCOMPLISHMENTS FOLLOW.

CONVENING THE REGION SUMMIT: A REGION PULLS TOGETHER THROUGH THE POWER OF TEN

THE 2010 CUMBERLAND REGION TOMORROW REGIONAL SUMMIT WAS HELD IN NASHVILLE TENNESSEE ON MAY 26TH, 2010 AT THE WAR MEMORIAL AUDITORIUM. AT THIS EVENT, OVER 450 REGIONAL AND STATE LEADERS THAT REPRESENTED KEY PARTNERS ORGANIZATIONS GATHERED TO FOCUS ON OUR KEY REGIONAL TOPICS OF TRANSPORTATION/TRANSIT, OPEN SPACE

Name of the organization
CUMBERLAND REGION TOMORROW

Employer identification number
62-1836825

ATTACHMENT 2 (CONT'D)

CONSERVATION, INFRASTRUCTURE AND ECONOMIC COMPETITIVENESS.

THE 2010 REGIONAL SUMMIT PROVIDED THE REGIONAL FORUM FOR THE PUBLIC UNVEILING OF THE NASHVILLE METROPOLITIAN PLANNING ORGANIZATION (MPO)2035 REGIONAL TRANSPORTATION PLAN AND BEGAN THE PUBLIC INPUT PERIOD FOR THIS IMPORTANT REGIONAL PLANNING EFFORT.

OUR DEPARTMENT OF TRANSPORTATION, HOUSING AND URBON DEVELOPMENT, AND ENVIRONMENTAL PROTECTION AGENCY FEDERAL AND STATE INITIATIVES FOR THE FUTURE PANEL SEGMENT PROVIDED UP-TO-DATE INFORMATION ON NEW POLICY AND FUNDING OPPORTUNITIES THAT CAN SUPPORT OUR REGIONAL PLANNING, VISIONING, AND IMPLEMENTATION EFFORTS. WE ALSO HEARD FROM TECD COMMISSIONER, MATT KISBER; NASHVILLE MAYOR, KARL DEAN; TENNESSEE DEPARTMENT OF TRANSPORTATION COMMISSIONER, GERALD NICELY; MIDDLE TENNESSEE MAYORS CAUCUS CHAIR, JO ANN GRAVES; THE TRANSIT ALLIANCE OF MIDDLE TENNESSEE EXECUTIVE DIRECTOR, ED COLE; LAND TRUST FOR TENNESSEE PRESIDENT, JEANIE NELSON; AND CRT DIRECTOR, JULIAN BIBB, ABOUT CURRENT EFFORTS IN TENNESSEE THAT ARE ADVANCING OUR SIX ISSUES OF REGIONAL IMPORTANCE.

THE EVENT BROUGHT TOGETHER CO-HOSTS CUMBERLAND REGION TOMORROW, THE NASHVILLE AREA METROPOLITAN PLANNING ORGANIZATION, AND TENNESSEE DEPARTMENT OF TRANSPORTATION; IN ADDITIONS TO A BEVY OF OTHER PARTNER ORGANIZATIONS. IN ALL, THIRTY-SIX PLUS PUBLIC AND PRIVATE ORGANIZATIONS PROVIDED DIRECT OR IN-KIND SUPPORT THAT MADE

Name of the organization
CUMBERLAND REGION TOMORROW

Employer identification number
62-1836825

ATTACHMENT 2 (CONT'D)

THE EVENT EXTREMELY SUCCESSFUL. THE 2010 SUMMIT LEADERSHIP TEAM CONSISTED OF GARY SCOTT - CRT SUMMIT CHAIR, SAM HATCHER - CRT REGIONAL COMMUNICATIONS CHAIR, MICHAEL SKIPPER - NASHVILLE AREA MPO, ED COLE - TDOT/TRANSIT ALLIANCE OF MIDDLE TENNESSEE, CHARLES BONE - CRT/TRANSIT ALLIANCE OF MIDDLE TENNESSEE , AND BRIDGET JONES - CRT EXECUTIVE DIRECTOR.

KEY 2010 SUMMIT EVENT RESULTS INCLUDED:

- PROVIDED A HISTORICAL CONTEXT FOR ADVANCES IN REGIONALISM AND CUMBERLAND REGION TOMORROW'S TEN YEAR ANNIVERSARY

- INFORMED THE REGION'S GOVERNMENT AND NON-PROFIT LEADERS OF THE CURRENT PHILOSOPHY AND OPPORTUNITY FOR NEW FEDERAL FUNDING THROUGH THE DOT, HUD, EPA SUSTAINABLE COMMUNITIES PARTNERSHIP INITIATIVE
- ATTAINED COMMITMENT OF SUPPORT FROM A LARGE CORE GROUP OF REGIONAL LEADERS FOR ON-GOING BEST PRACTICES FOR REGIONAL TRANSIT AND THE 2010 PLANNING PROCESS FOR THE NASHVILLE AREA MPO 2035 REGIONAL TRANSPORTATION PLAN

- GAINED REGIONAL CONSENSUS AND COMMITMENT AMONG PUBLIC AND PRIVATE LEADERS AND THE REGIONS 54 UNITS OF LOCAL GOVERNMENT TO

Name of the organization
CUMBERLAND REGION TOMORROW

Employer identification number
62-1836825

ATTACHMENT 2 (CONT'D)

WORK COLLABORATIVELY ON DEFINED STEPS FOR PLANNING REGIONAL TRANSPORTATION/TRANSIT SYSTEM DEVELOPMENT

- BUILT UPON POWER TO TEN BRANDING FOR CRT AND THE TEN-COUNTY REGION AND ENJOYED GREAT MEDIA COVERAGE IN PARTNERSHIP WITH DYE VAN MOL LAWRENCE

- COLLABORATED WITH AND MANAGED AN IMPRESSIVE GROUP OF 36 REGIONAL SPONSORS AND PARTNERS THAT CONTRIBUTED TO THE SUCCESS OF THE 2010 SUMMIT

- PROVIDED A GREAT EDUCATIONAL PROGRAM TO 450+ ATTENDEES THAT RECEIVED PROFESSIONAL DEVELOPMENT CREDIT THROUGH STRATEGIC PARTNERSHIPS WITH AIA MIDDLE TENNESSEE, NASHVILLE AREA MPO/APA, AND UT INSTITUTE OF PUBLIC SERVICE MTAS/CTAS

- HOSTED THREE REGIONAL EXPERTS FROM SMART GROWTH AMERICA, EPA AND FHA THAT CREATED GREAT INTEREST AND MOMENTUM TOWARD A REGIONAL APPLICATION FOR FUTURE PLANNING, VISIONING AND IMPLEMENTATION FUNDING

- PROVIDED A GREAT PLATFORM FOR REGIONAL AND NATIONAL POLITICAL

Name of the organization: CUMBERLAND REGION TOMORROW

Employer identification number: 62-1836825

ATTACHMENT 2 (CONT'D)

LEADERS TO SHARE THEIR VIEWS AND SUPPORT FOR REGIONAL COLLABORATION AND REGIONAL TRANSIT SYSTEM DEVELOPMENT

- PRESENTED THE 2010 AWARDS FOR REGIONAL THINKING AND ACTION TO MAYOR KARL DEAN AND SAM HATCHER, FOR THEIR PROFESSIONAL AND PERSONAL CONTRIBUTIONS TO SUCCESSFUL REGIONALISM

- CONTINUED USE OF OUR CRT POWER OF TEN WEBSITE TO SUPPORT THE PROMOTION, MARKETING AND COMMUNICATIONS EFFORTS FOR THE 2010 SUMMIT AND MAXIMIZED USE OF POWER OF TEN REGIONAL UPDATE E-NEWSLETTER TOOL FOR PRE AND POST SUMMIT REGIONAL WEB-BASED COMMUNICATION EFFORTS

- POSITIONED CRT TO BECOME A LEAD REGIONAL ORGANIZATION TO COORDINATE THE DISTRIBUTION OF REGIONAL INFORMATION IN OUR AREAS OF INTEREST, THROUGH OUR NETWORK OF PARTNER ORGANIZATIONS

- AS A RESULT OF THE 2009 AND 2010 REGIONAL SUMMITS, CUMBERLAND REGION TOMORROW CONTINUES OUR PUBLIC/PRIVATE PARTNERSHIP WITH THE NASHVILLE AREA MPO AND OTHER KEY REGIONAL ORGANIZATIONS

ATTACHMENT 3

PART VII - CONTINUATION OF OFFICERS, DIRECTORS, TRUSTEES, KEY EMPLOYEES AND HIGHEST COMPENSATED EMPLOYEES

(1)=IND.TRUSTEE/DIR. (2)=INS.TRUSTEE (3)=OFFICER (4)=KEY EMP. (5)=HIGHEST COMP. (6)=FORMER

(A) NAME AND TITLE	(B) HOURS	(C) POSITION (1)(2)(3)(4)(5)(6)	COMPENSATION FROM (D) ORG.	(E) REL. ORG.	(F) OTHER
29 STEVE SCHROEDER DIRECTOR	.25	X			
30 CHARLES BONE					

Name of the organization
CUMBERLAND REGION TOMORROW

Employer identification number
62-1836825

ATTACHMENT 3 (CONT'D)

	DIRECTOR	.25	X
31	REGGIE MUDD		
	DIRECTOR	.25	X
32	BRENDA PAYNE		
	DIRECTOR	.25	X
33	JULIAN BIBB		
	DIRECTOR	.25	X
34	ROBERT P MURPHY		
	DIRECTOR	.25	X
35	MARY PEARCE		
	DIRECTOR	.25	X
36	KEITH PYLE		
	DIRECTOR	.25	X
37	FLEMING SMITH III		
	DIRECTOR	.25	X
38	SEAB TUCK		
	DIRECTOR	.25	X
39	SAM HATCHER		
	DIRECTOR	.25	X
40	JERE MCCULLOCH		
	DIRECTOR	.25	X
41	JOHN MCDEARMAN		
	TREASURER	.25	X
42	JASON BACH		
	DIRECTOR	.25	X
43	WILLIAM BARNES		
	DIRECTOR	.25	X
44	CHRISTINE BRADLEY		
	DIRECTOR	.25	X
45	MARTIN BROWN, JR.		
	DIRECTOR	.25	X
46	LAUREL CREECH		
	DIRECTOR	.25	X
47	CYRIL EVERS		
	DIRECTOR	.25	X
48	SAM FRANKLIN, III		
	DIRECTOR	.25	X
49	JANET MILLER		
	DIRECTOR	.25	X
50	BETTY NIXON		
	DIRECTOR	.25	X

Name of the organization: CUMBERLAND REGION TOMORROW

Employer identification number: 62-1836825

ATTACHMENT 3 (CONT'D)

51 BOB PARKS		
DIRECTOR	.25	X
52 ALLEN PATTON		
DIRECTOR	.25	X
53 WAYNE RILEY		
DIRECTOR	.25	X
54 ELEANOR WILLIS		
DIRECTOR	.25	X
55 JOHN WINGO		
DIRECTOR	.25	X

ATTACHMENT 4

FORM 990, PART VIII - INVESTMENT INCOME

DESCRIPTION	(A) TOTAL REVENUE	(B) RELATED OR EXEMPT REVENUE	(C) UNRELATED BUSINESS REV.	(D) EXCLUDED REVENUE
INTEREST	16.	16.		
TOTALS	16.	16.		