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.

OMB No. 1545-0047 2008

Department of the Treasury
Internal Revenue Service

A For the 2008 cale

Open to Public Inspection

		2006 Calendar year, or tax year beginning		ending			
_	Check if ap	use IRS Territoria Territoria de la companya de la	s Four	ndation	D Employer	identific	ation number
=	Address o	Tabel of Taking Training of the Table of Table o			62-1557574	1	
닏╹	Name cha	nge print or type. Number and street (or P.O. box if mail is not delivered to street address)	R	Room/suite	E Telephone	number	
ıل∐	nitial retu	^{rn} See 1205-A Linden Avenue			615-386-31	71	
1	Termination	on Specific Instruc- City or town, state or country, and ZIP + 4			0.0000.	• •	
	Amended	manue-	7212		G Gross reco	eiots \$	5,302,881
♬≠	Applicatio	n pending F Name and address of principal officer:		1			
_		Trains and address of principal officer.	_	1	his a group retu		liates? Yes X No
	·	Ms. Kathleen Williams 1205-A Linden Avenue, Nashville, TN 3721	2	H(b) Are	e all affiliates inc	cluded?	Yes No
I T	ax-exen	npt status: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527			If "No," attach a	ı list. (see	instructions)
JV	Vebsite:	▶ www.tenngreen.org		H(c) Gr	oup exemption i	number	•
		panization: X Corporation	I. v.	ar of forma			
	art l	Summary	L TE	al ol lornia	tion: 1997	INI SI	ate of legal domicile: TN
	'	Briefly describe the organization's mission or most significant activities: The	ne org	anizatio	n's primary i	nission	is to preserve and
4		support parks, greenways and open spaces in Tennessee.					
Ę.							
Activities & Governance			L				
8	2	Check this box ▶ ☐ if the organization discontinued its operations or dis	posed	d of more	than 25%	of its as	ssets.
φ.	3	Number of voting members of the governing body (Part VI, line 1a)				3	22
6S		Number of independent voting members of the governing body (Part VI, line				4	21
Σ	5	Total number of employees (Part V, line 2a)				5	6
Act	6	Total number of volunteers (estimate if necessary)				6	50
-	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C) .				7a	0
	b	Net unrelated business taxable income from Form 990-T, line 34		. , ,		7b	0
					Prior Year	1.2	Current Year
	8	Contributions and grants (Part VIII, line 1h)				8,392	1,562,900
ë		Program service revenue (Part VIII, line 2g)		· · · · · · · · · · · · · · · · · · ·		0	1,002,000
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)			1	0,813	-709,791
8		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				-519	-108,181
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), lines			1 25		050.400
	-	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	12)		1,23	8,686	853,109
			•			0	<u> </u>
		Benefits paid to or for members (Part IX, column (A), line 4)					0
es		Salaries, other compensation, employee benefits (Part IX, column (A), lines		"	20	0,561	238,068
ens	16a	Professional fundraising fees (Part IX, column (A), line 11e)				0	0
Expenses			14,49	8			2007 2008
		Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)			46	3,986	327,038
		Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25).				4,547	565,106
	19	Revenue less expenses. Subtract line 18 from line 12			59	4,139	288,003
Net Assets or Fund Balances				Be	ginning of Yea	ır	End of Year
set	20	Total assets (Part X, line 16)			3,50	5,677	2,085,066
A P	21	Total liabilities (Part X, line 26)			1,70	0,000	0
		Net assets or fund balances. Subtract line 21 from line 20			1,80	5,677	2,085,066
Pa	rt II	Signature Block					
		Under penalties of perjury, I declare that I have examined this return, including accompanying	sched	ules and st	atements, and t	o the bes	t of my knowledge
		and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is base	d on all	l informatio	n of which prep	arer has a	any knowledge.
		Karla 1110			19.1	\sim	
Sig	n	- Curve a Co	ļ		101	1M	
Hei		Signature of officer			Date		
	. •	Kathleen Williams	Exec	cutive Di	rector and P	resider	nt
		Type or print name and title					
	_	Preparer's Date	: .	Check if			er's identifying number
Pai		signature Vallet Aly Day (FA 8/10/2009		self-	► X	1	ructions)
	parer's		7 5	employed		1409-3	7-1961
Use	Only	if self-employed), valerie Kemp Dreier, CPA			EIN •		
	, , .	address, and ZIP + 4 106 Spring Street, Suite 101, Ashland City, TN 3			Phone no.	615-7	92-1766
May	the IR	S discuss this return with the preparer shown above? (see instructions)					. Yes No
		Act and Paperwork Reduction Act Notice, see the separate instructions.		-			Form 990 (2008)
(HTA		, and the second of the second					. 51111 \$ \$ \$ (2000)

4c	(Code:) (Expenses \$ 0	including grants of \$	0) (Revenue \$	0)
				
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				- AM-D -
4d	Other program services. (Describe in Schedule O.)			
	(Expenses \$ 0 including grants of	f \$ 0) (Revenue \$ 0)	
<u>4e</u>	Total program service expenses ► \$	479,609 (Must	equal Part IX, Line 25, column (B).)	
				Form 990 (2008

Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Is the organization required to complete Schedule B, Schedule of Contributors? 2 2 Х Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Χ Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 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," Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V Χ 10 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, 11 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 12 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . 13 13 14a 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16 to individuals located outside the United States? If "Yes," complete Schedule F, Part III 16 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I 17 18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 20 20 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 21 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . 22 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete 23 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 questions 24a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a 25a Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II. 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

Checklist of Required Schedules (continued) Part IV Yes No During the tax year, did any person who is a current or former officer, director, trustee, or key employee: Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, 28a Χ Have a family member who had a direct or indirect business relationship with the organization? If "Yes," 28b Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV . . . 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? 32 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 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 Χ Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 35 Х Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 Х 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

Page 5

Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0 - if not applicable. Benefit the number of Forms W.2G included in line 1a. Enter -0 - if not applicable. C. U.S. Information Returns. Enter -0 - if not applicable. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? Saming (gambling) winnings to prize winners? Saming (gambling) winnings to prize winners? Enter the number of employees reported on Form W.3. Transmittal of Waga and Tax. Statements, filed for the calendar year anding with or within the year covered by this ratum. If if a least one is reported on line 2a, did the organization life all required federal employment tax returns? 2a		90 (2008) Tennessee Parks and Greenways Foundation		62-1557574	P	age 5
1a Eller the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0 - If not applicable 1.5	Par	t V Statements Regarding Other IRS Filings and Tax Compliance		02 1001011		age C
U.S. Information Returns. Enter -0- if not applicable					Yes	No
b Enter the number of Forms W-26 included in line 1a. Enter-0- if not applicable. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? Statements, flied for the calendar year ending with or within the year covered by this return. If a least one is reported on line 2a, did the organization flie 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-flie this return (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? If Yes,* has it flied a Form 990-T for this year? If *No.* provide an explanation in Schedule O. 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: ■ If *Yes,* enter the name of the foreign country: ■ Yes,* enter the name of the foreign name the name the name the name the name the name t	1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			100	
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4a Araly 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) in a foreign country. ▶ b If "Yes," enter the name of the foreign country. ▶ See the instructions for exceptions and 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 If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5b X If "Yes," id did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 6c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 6c Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 6c Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 6c Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 6c Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7d Did the organization and the property, did the organization file a Form 8899 as required? 7d Did the organization and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization or a fu	b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3h		
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509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9	8		nd section	711		
organization, have excess business holdings at any time during the year? 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9a X 9b X Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12. b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders. 5 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a		509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by	a sponsoring			
Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12. Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. Section 501(c)(12) organizations. Enter: Gross income from members or shareholders. Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.). Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a				. 8		Х
a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12. b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders. b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a		Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		***************************************		
Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12		Did the organization make any taxable distributions under section 4966?				Χ
a Initiation fees and capital contributions included on Part VIII, line 12		Did the organization make a distribution to a donor, donor advisor, or related person?		. 9b		X
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities						
Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders		Initiation rees and capital contributions included on Part VIII, line 12			100	
a Gross income from members or shareholders	D 1	Section 501(a)(42) associations. First VIII, line 12, for public use of club facilities	10b			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)				100		
against amounts due or received from them.)			11a			
2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a			445			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12h			11D Form 10442	40-		
	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1			

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sect	ion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, describe the			
	circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent		: 17	
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			<u> </u>
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	_	X
6	Does the organization have members or stockholders?	6		$\frac{\hat{x}}{x}$
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	-		^
	of the governing body?	7a		х
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		$\frac{\hat{x}}{x}$
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	70		$\hat{}$
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9a	Does the organization have local chapters, branches, or affiliates?	9a	^	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	Ja		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations	30		
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10		х
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at	-10		
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	ļ	Х
Sect	ion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
þ	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	х	
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:			
а	The organization's CEO, Executive Director, or top management official?	15a	Х	
b	Other officers or key employees of the organization?	15b	X	
	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	and a		
	with a taxable entity during the year?	16a		Χ
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 safequard			
	the organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s or	nly)		
	available for public inspection. Indicate how you make these available. Check all that apply.	,,		
	X 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 interesting the second control of the conflict of interesting the conflict of the	est		
	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	e		
	organization: ► Kathleen Williams 615-386-317			
	1205-A Linden Avenue, Nashville, TN 37212			

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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 the organization did not compe (A)	(B)					.50, (l		4=-
		(C) Position (check all that apply)						(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Ms. Kathleen Williams President	30.			х				59,203	0	0
See attached list	0.							0		0
	0.							0		0
	0.							0	0	0
	0.							0	0	0
	0.							0	0	0
	0.							0	0	. 0
	0.							0	0	0
	0.							0	0	0
	0.							0	0	0
	0.							0	0	0
	0.							0	0	0
	0.							0	0	0
	0.							0	0	. 0
	0.							0	0	0
	0.	,						0	0	0
	0.) ,					0	0	0

Ms. Mary Lynn Dobson	Board member,	-0-	-0-	-0-
209 Cove Point Road	As required			
Rockwood, TN 37854-5603				
Mr. Jim Emison	Board member,	-0-	-0-	-0-
P.O. Box 13	As required			
Alamo, TN 38001				
Secretary Tre Hargett	Board member,	-0-	-0-	-0-
Secretary of State	As required			
State Capitol, 1st Floor				
600 Charlotte Avenue				
Nashville, TN 37243-0235				
Mr. Brock Hill	Board member,	-0-	-0-	-0-
Cumberland County Mayor	As required		·	
2 North Main Street, Suite 203				
Crossville, TN 38555				
Mr. David Lillard, Jr.	Board member,	-0-	-0-	-0-
State Treasurer	As required		V	-0-
1st Floor State Capitol Building	, no required			
600 Charlotte Avenue				
Nashville, TN 37243				
Mr. Scott May	Board member,	-0-	-0-	-0-
1850 Poplar Crest Cove, Suite 200	As required	-0-	-0-	-0-
Memphis, TN 38119	As required			
Director Gary Myers	Board member,	-0-	-0-	
1110 Twin Springs Drive	As required	-0-	-0-	-0-
Brentwood, TN 37027	As required			
Mr. Doyle Newburry	Board member,	-0-	-0-	
1243 Blackhouse Mt. Road	· · · · · · · · · · · · · · · · · · ·	-0-	-0-	-0-
Jamestown, TN 38556	As required			
Mr. John Noel III	D. d. d.		^	
3810 Bedford Avenue, Suite 300	Board member,	-0-	-0-	-0-
Nashville, TN 37215	As required			
Mr. Marshall Peterson				
	Board member,	-0-	-0-	-0-
Holbrook & Peterson, PLLC	As required			
Tyson Place, Suite 150				
2607 Kingston Pike				
Knoxville, TN 37919				
Mr. Robert Philp, Jr.	Board member,	-0-	-0-	-0-
Philp & Associates, PLLC	As required			
4803 Quail Hollow				
Old Hickory, TN 37138				
Mr. Sam Powell	Board member,	-0-	-0-	-0-
506 Brady Point	As required			
Signal Mountain, TN 37377				
Mr. Mack Prichard	Board member,	-0-	-0-	-0-
1828 River Drive	As required			
Nashville, TN 37218				
Ms. Elizabeth Queener	Board member,	-0-	-0-	-0-
6416 Brownlee Drive	As required			
Nashville, TN 37205				

Lt. Gov. Ron Ramsey	Board member,	-0-	-0-	-0-
State Senate	As required			
1 Legislative Plaza				
Nashville, TN 37243-0219				
Mr. Will Skelton	Board member,	-0-	-0-	-0-
4064 Kingston Park Drive	As required	•		
Knoxville, TN 37919				
Mr. Alan Sparkman	Board member,	-0-	-0-	-0-
Tennessee Concrete Association	As required		•	
705 Ft. Negley Court				
Nashville, TN 37203-4811				
Ms. Ann Tidwell	Board member,	-0-	-0-	-0-
306 Mountainside Drive	As required			
Nashville, TN 37215				
Mr. Bob Tuke	Board member,	-0-	-0-	-0-
Trauger & Tuke	As required			
The Southern Turf Building			:	
222 Fourth Avenue North				
Nashville, TN 37219-2117				
Ms. Kathleen Williams	Board member,	-0-	-0-	-0-
TN Parks and Greenways Foundation	As required			
1205-A Linden Avenue				
Nashville, TN 37212				
Speaker Kent Williams	Board member,	-0-	-0-	-0-
TN House of Representatives	As required			
19 Legislative Plaza				
Nashville, TN 37243-0181				
Dr. Chuck Womack	Board member,	-0-	-0-	-0-
859 Loweland Road	As required			
Cookeville, TN 38501				

Pa	rt VII Section A. Officers, Directors, Tru	ıstees, Key Em	ploy	/ees	, and	Hig	hes	t Co	mpensated Em	ployees (contir	nued)
	(A)	(B)			(C)			(D)	(E)	(F)
	Name and title	Average	Po	sition	(chec	,			Reportable	Reportable	Estimated
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
		0.							0	C	0
		0.							0	C	0
		0.							0	C	0
		0. 0				C	0				
		0.							0	C	0
0.								0			
		0.							0	C	0
		0.						ļ.,	0	С	0
		0.			ļ				0	C	0
		0.							0	C	0
		0.							0	c	0
		0.							0	c	0
4h	Tatal	0.							0	-	
1b 2	Total number of individuals (including these	· · · · · · · · · · · · · · · · · · ·			- 41			. •	59,203		0
	Total number of individuals (including those organization ► 0	704000									Yes No
3	Did the organization list any former officer, employee on line 1a? <i>If "Yes," complete Sci</i>	director or truste hedule J for suc	ee, k h ind	ey e lividu	mplo <i>ıal</i> .	yee,	- 1	-	st compensated		3 X
4	For any individual listed on line 1a, is the su the organization and related organizations gindividual	reater than \$15		0? <i>If</i>						uch	4 X
5	Did any person listed on line 1a receive or a services rendered to the organization? If "Ye										5 X
Sec	tion B. Independent Contractors										
1	Complete this table for your five highest con compensation from the organization.	npensated inde	pend	ent d	contr	acto	rs th	at re	ceived more tha	n \$100,000 of	
	(A) (B) Name and business address Description of services							vices	(C) Compensation		
								<u> </u>			0
							-				0
									· · · · · · · · · · · · · · · · · · ·		0
								 			<u>0</u>
2	Total number of independent contractors (in compensation from the organization ▶	cluding those in 0		vho r	ecei	ved i	nore	tha	n \$100,000 in		Jan 1997

Business Code

0

ol

853,109

returns and allowances

Net income or (loss) from sales of inventory

Miscellaneous Revenue

Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c,

b Less: cost of goods sold . .

d All other revenue

9c, 10c, and 11e.

Total. Add lines 11a-11d . .

11a b

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).										
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses		(B) rogram service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to governments and				general expenses	CAPETISES					
_	organizations in the U.S. See Part IV, line 21	0			200 mg	Special Control					
2	Grants and other assistance to individuals in					427					
2	the U.S. See Part IV, line 22	0			44.0						
3	Grants and other assistance to governments,				100						
	organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				200	50					
4	Benefits paid to or for members	0			200 E						
5	Compensation of current officers, directors,	0	-			1675 A					
-	trustees, and key employees	59,203		50,323	0 000						
6	Compensation not included above, to disqualified	39,203		30,323	8,880						
	persons (as defined under section 4958(f)(1)) and										
	persons described in section 4958(c)(3)(B)	152,039		129,233	22,806						
7	Other salaries and wages	0			22,000						
8	Pension plan contributions (include section 401(k)										
_	and section 403(b) employer contributions)	10,666		9,066	1,600						
9	Other employee benefits	0									
10	Payroll taxes	16,160	L	11,312	4,848						
11	Fees for services (non-employees):										
a	Management	0									
b	Legal	7 200									
d	Lobbying	7,000			7,000						
e	Professional fundraising services. See Part IV, line 17			1000000							
f	Investment management fees	0		l de la companya de	1,175 1,175						
g	Other	0									
12	Advertising and promotion	3,462	-			3,462					
13	Office expenses	17,785		16,472	1,313	0,402					
14	Information technology	0									
15	Royalties	0									
16	Occupancy	8,123		7,067	1,056						
17	Travel	8,263	<u> </u>	7,850	413						
18	Payments of travel or entertainment expenses										
19	for any federal, state, or local public officials	0									
20	Conferences, conventions, and meetings	66,695		60 605							
21	Payments to affiliates	00,083		66,695 0	0						
22	Depreciation, depletion, and amortization	4,367		3,057	1,310	0					
23	Insurance	29,813		22,338	7,475	<u> </u>					
24	Other expenses. Itemize expenses not	1.		,000	7,170	200					
	covered above. (Expenses grouped together	The second secon			- Pag	and the second					
	and labeled miscellaneous may not exceed	3.00				ere illi					
	5% of total expenses shown on line 25 below.)	7			100						
a	Accredidation	3,000			3,000						
D	Telephone	5,850	-	5,557	293						
d	Printing and reproduction Repairs and maintenance	5,925		5,155	770						
u e	Annual Report/Newsletter	3,366 1,984		2,978	388						
_	All other expenses See attached schedule	161,405		1,786	198	44.000					
25	Total functional expenses. Add lines 1 through 24f	565,106		140,720 479,609	9,649	11,036					
26	Joint Costs. Check here ▶ if following	303,100		418,009	70,999	14,498					
	SOP 98-2. Complete this line only if the organization										
	reported in column (B) joint costs from a combined										
	educational campaign and fundraising										
	solicitation										
				 							

Page 1

Pa	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash–non-interest-bearing	61,828	1	67,906
	2	Savings and temporary cash investments	600,886		794,344
	3	Pledges and grants receivable, net	47,000		29,300
	4	Accounts receivable, net	0		0
	5	Receivables from current and former officers, directors, trustees, key			
		employees, or other related parties. Complete Part II of Schedule L	0	5	1
	6	Receivables from other disqualified persons (as defined under section			250 SEE
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete		335	Executive Control of the Control of
		Part II of Schedule L	0	6	0
sts	7	Notes and loans receivable, net	75,000		0
Assets	8	Inventories for sale or use		8	
A	9	Prepaid expenses and deferred charges		9	
	10a		7746		770
	b	The second secon	70 P		And the second s
		Part VI of Schedule D	2,648,714	10c	1,147,979
	11	Investments-publicly traded securities	0		0
	12	Investments-other securities. See Part IV, line 11	0	12	0
	13	Investments-program-related. See Part IV, line 11	0	13	0
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	72,249	15	45,537
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,505,677	16	2,085,066
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
Liabilities	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	0		0
	21	Escrow account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key	STEELS AS		DESCRIPTION OF THE PROPERTY OF
Lia		employees, highest compensated employees, and disqualified	CARCOLOUS .		Property Commencer
_	23	persons. Complete Part II of Schedule L	1 700 000		0
	24	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable	1,700,000		0
	25	Other liabilities. Complete Part X of Schedule D	0	24	0
	26	Total liabilities. Add lines 17 through 25	1,700,000		0
			1,700,000	20	0
S		Organizations that follow SFAS 117, check here and	384		orders dispersed of the control of t
Net Assets or Fund Balances		complete lines 27 through 29, and lines 33 and 34.	The Backware		State Section 1
ala	27	Unrestricted net assets	783,142	27	1,122,392
B	28	Temporarily restricted net assets	987,905		930,674
ŭ	29	Permanently restricted net assets	32,000	29	32,000
L		Organizations that do not follow SFAS 117, check here▶	200 April 1990 April 1		CHAPTER
S O		and complete lines 30 through 34.			22.2
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Z	33	Total net assets or fund balances	1,803,047	33	2,085,066
Б.	34	Total liabilities and net assets/fund balances	3,503,047	34	2,085,066
Pa	rt XI	Financial Statements and Reporting			
4	۸	socienting method wood to recover the Form 600.			Yes No
1 2a		ccounting method used to prepare the Form 990: Cash X Accru			4.2
		Vere the organization's financial statements compiled or reviewed by an independent accou			
		"Yes" to lines 2a or 2b, does the organization have a committee that assume			
•		udit, review, or compilation of its financial statements and selection of an inde		igiil O	2c X
38		s a result of a federal award, was the organization required to undergo an au		 n	
		ne Single Audit Act and OMB Circular A-133?			. 3a X
		"Ves " did the organization undorgo the required guidit or guidite?"			26

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

2008

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

Inspection Employer identification number

			<u>Greenways Fou</u>						62-1557				
Pai				harity Status (All or					rt.) (see i	nstructio	ns)		
The	orgai			ation because it is: (P									
1	Щ	A church, co	envention of chu	rches, or association	of church	es describ	ed in se c	tion 170	(b)(1)(A)(i	i).			
2				on 170(b)(1)(A)(ii). (A		•							
3	Щ	A hospital or	a cooperative l	nospital service organi	ization de	scribed in	section	170(b)(1)	(A)(iii). (A	Attach Sc	hedule I	1.)	
4	Ш		esearch organiza me, city, and st	ation operated in conju ate:	unction wi	th a hosp	ital descri	bed in se	ection 170)(b)(1)(A)	(iii). Ent	er the	
5				r the benefit of a colle (Complete Part II.)	ge or univ	ersity owi	ned or op	erated by	a govern	mental ur	nit descr	ibed	
6				ernment or governme	ntal unit o	lescribed	in sectio i	n 170(b)(1)(A)(v).				
7	X	An organizat	tion that normal	ly receives a substanti (1)(A)(vi). (Complete	ial part of					or from th	e gener	al publi	ic
8				in section 170(b)(1)		Complete I	Part II.)						
9	同			ly receives: (1) more the				om contri	hutions n	nembereb	in fees	and a	roce
		receipts from support from	n activities relate n gross investme	ed to its exempt function ent income and unrela an after June 30, 1975.	ons—sub ted busin	ject to cer ess taxab	tain <mark>e</mark> xce le income	ptions, ar (less sec	nd (2) no r	nore thar	33 1/39	% of its	
10		An organizat	tion organized a	and operated exclusive	ely to test	for public	safety. S	ee sectic	n 509(a)(4). (see ii	nstructio	ns)	
11		An organizat	tion organized a	and operated exclusive	ely for the	benefit of	, to perfo	rm the fur	nctions of,	or to car	ry out th	e	
	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												
е	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).												
£				•	6 41	IDO (5-1							
f			zation received : , check this box	a written determination	n trom the	RS that	itis a Typ	oe I, Type	ell, or Typ	e III supp	orting		
g		_	•	the organization acce	epted anv	aift or cor	itribution i	· · · · · from anv	of the				
		following per			 ,	g c. cc.			00				
				or indirectly controls,								Yes	No
				verning body of the su							11g(i)		
		(ii) A fami	ly member of a	person described in (i	i) above?	 . (ii) abass					11g(ii)		
h				y of a person describe ation about the organi							11g(iii)		
	Name	of supported	(ii) EIN	(iii) Type of organization				ou notify	(vi)	ls the	(vii)	Amount	of
(1)		anization	(ii) EiiV	(described on lines 1–9 above or IRC section		sted in your document?		nization in	_	tion in col.	` `	support	
				(see instructions))	governing	document		of your port?	1	ized in the S.?			
					Yes	No	Yes	No	Yes	No			
							!						
						 			1				0
													0
													0
													0
	-												
													0
-			P (30)	1	**************************************	and the second second				E A SECTION OF THE SE	15		

14	Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	98.48%
15	Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	97.31%

the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

10%-facts-and-circumstances test-2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

20

Par				on 509(a)(2)			
Sec	(Complete only if you checked t tion A. Public Support	ne box on line	9 of Part I.)				
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and	17-33	<u> </u>	(4) = 333	(4) 2001	(0) 2000	(i) rotal
	membership fees received. (Do not						
	include any "unusual grants.")	0	0	o			0
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	l ol	o	o			0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513		`				0
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
_	its behalf	0	0	0			0
5	The value of services or facilities						
	furnished by a governmental unit to the						
•	organization without charge	0	0	0			0
6 70	Total. Add lines 1-5	0	0	0	0	0	0
<i>i</i> a	• •						_
h	received from disqualified persons Amounts included on lines 2 and 3						0
	received from other than disqualified						
	persons that exceed the greater of 1%						
	of the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						0
С	Add lines 7a and 7b	0	0	o	0	0	0
8	Public support (Subtract line 7c from						
	line 6.)		200		43000	100	0
	tion B. Total Support						
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
10a	Gross income from interest, dividends,						,
	payments received on securities loans,						
	rents, royalties and income from similar						
b	sources						0
D	section 511 taxes) from businesses						
	acquired after June 30, 1975						0
c	Add lines 10a and 10b	o	0	0	0	0	0 0
11	Net income from unrelated business				U		
	activities not included in line 10b,						
	whether or not the business is regularly			:			
	carried on						0
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)	0	0	0			0
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	1000 m				-	0
14	First five years. If the Form 990 is for the org						
	organization, check this box and stop here.		· · · · · ·				<u> ▶ </u>
	tion C. Computation of Public Support						
15	Public support percentage for 2008 (line 8, co	olumn (f) divided	d by line 13, co	lumn (f))		15	0.00%
16	Public support percentage from 2007 Schedu	<u>ule A, Part IV-A,</u>	line 27g			16	0.00%
	tion D. Computation of Investment Inc	<u>ome Percenta</u>	ige				
17	Investment income percentage for 2008 (line	10c, column (f)	divided by line	13, column (1))	17	0.00%
18	Investment income percentage from 2007 Sc					18	0.00%
19a	33 1/3% support tests-2008. If the organiza	tion did not che	ck the box on I	ine 14, and lin	e 15 is more th	nan 33 1/3% an	d line 17 is
	not more than 33 1/3%, check this box and s						▶
D	33 1/3% support tests-2007. If the organization d	id not check a hor	c on line 14 or lin	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

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions .

Schedule A (Form	990 or 990-EZ) 2008	Tennessee Parks ar	nd Greenways Foundation		62-1557574	Page 4
Part IV	Supplemental	Information . Comp	lete this part to provide	the explanation required	by Part II line 10:	
	Part II, line 17a	or 17b; or Part III, lii	ne 12. Provide any othe	r additional information. (see instructions)	
						- -
						·
						·
				·- -		
				: 		
					 	
				-4		
	-			Schedu	lle A (Form 990 or 990-E	Z) 2008

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047
2008
Open to Public

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Employer identification number

Tenr	nessee Parks and Greenways Foundation	le	62-1557574	
Par	rt I Organizations Maintaining Donor Advised Funds or Other Si	milar Fund	s or Accounts.	Complete if
	the organization answered "Yes" to Form 990, Part IV, line 6.			
	(a) Donor advised funds		(b) Funds and other	er 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 as	sets held in	donor advised	
	funds are the organization's property, subject to the organization's exclusive le	egal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing	that grant fu	nds may be	
	used only for charitable purposes and not for the benefit of the donor or donor			
	impermissible private benefit?		[Yes No
Par	rt II Conservation Easements. Complete if the organization answere	ed "Yes" to f	Form 990 Part IV	
1	Purpose(s) of conservation easements held by the organization (check all that		omi coo, i die i	7, 11110 7.
•	X Preservation of land for public use (e.g., recreation or pleasure) X Pres	apply).		
		servation of c	ertified historic str	ucture
	X Preservation of open space			
2	Complete lines 2a-2d if the organization held a qualified conservation contribu	ution in the fo	orm of a conservati	on easement
	on the last day of the tax year.		***************************************	
			Held at th	e End of the Year
a	Total number of conservation easements		2a	20
b	Total acreage restricted by conservation easements		. 2b	3,326.00
C	Number of conservation easements on a certified historic structure included in			0
d	Number of conservation easements included in (c) acquired after 8/17/06.			11
3	Number of conservation easements modified, transferred, released, extinguish	ned, or termir	nated by the organ	ization
4	during the taxable year 0	_		
4 5	Number of states where property subject to conservation easement is located	. •	<u> </u>	
5	Does the organization have a written policy regarding the periodic monitoring,	inspection, v	riolations, and	
6	enforcement of the conservation easements it holds?		[X Yes No
6 7	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing ease	ments during	the year 💆	149.83
8	Amount of expenses incurred in monitoring, inspecting, and enforcing easeme	ents during th	e year ► \$	4,980
u	Does each conservation easement reported on line 2(d) above satisfy the requ	uirements of	section	
9	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?			X Yes ∐ No
	In Part XIV, describe how the organization reports conservation easements in	its revenue a	ind expense stater	ment, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's accounting for conservation easements.	ation's financ	ciai statements tha	it describes
Par	Organizations Maintaining Collections of Art, Historical Treasures,	or Other Sin	nilar Assats	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8		ımdı Assels.	
10				
ıa	If the organization elected, as permitted under SFAS 116, not to report in its re	evenue stater	ment and balance	sheet works of
	art, historical treasures, or other similar assets held for public exhibition, educa service, provide, in Part XIV, the text of the footnote to its financial statements	ation, or rese	arch in furtherance	e of public
b	If the organization elected, as permitted under SFAS 116, to report in its reven			
	historical treasures, or other similar assets held for public exhibition, education	iue statemen	t and balance sne	et works of art,
	service, provide the following amounts relating to these items:	i, or research	i in luttiletance of	public
			. .	
	(i) Revenues included in Form 990, Part VIII, line 1		🟲 🕏	
2	(ii) Assets included in Form 990, Part X	tantina a s	· · · · • \$	
_	If the organization received or held works of art, historical treasures, or other s		•	•
а	following amounts required to be reported under SFAS 116 relating to these its	ems:	▶ ♠	
b	Revenues included in Form 990, Part VIII, line 1		• •	

Land

Leasehold improvements .

Buildings .

Other

b

e

62-1557574 Schedule D (Form 990) 2008 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply): Public exhibition а d Loan or exchange programs b Scholarly research Other C Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in 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? . . . Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not Yes No If "Yes," explain the arrangement in Part XIV and complete the following table: Amount Beginning balance C 1c Additions during the year d 1d Distributions during the year . . 1e Ending balance 1f 0 2a Did the organization include an amount on Form 990, Part X, line 21?. Yes X No If "Yes," explain the arrangement in Part XIV. Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10 (b) Prior year (a) Current year (e) Four years back Beginning of year balance . . . 1a 80,650 Contributions b Investment earnings or losses. C Grants or scholarships Other expenditures for facilities and programs Administrative expenses . . . f g End of year balance 143,150 2 Provide the estimated percentage of the year end balance held as: Board designated or quasi-endowment а ▶ 100% Permanent endowment b 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 3a(i) related organizations 3a(ii) If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?. 3b Describe in Part XIV the intended uses of the organization's endowment funds. Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (b) Cost or other (c) Depreciation (d) Book value (investment) basis (other)

0

0

0

0

Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)

2,629,700

0

33,375

Schedule D (Form 990) 2008

n

0

0

18,728

1,133,332

O

0

0

14,647

1,147,979

Part VII Investments—Other Securities	S. See Form 990. Part X. line	Page •
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives and other financial products	0	
Closely-held equity interests	0	
Other	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12.)	0	and the second of the second of
Part VIII Investments—Program Relate	d. See Form 990, Part X, line	e 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13.)	0	
Part IX Other Assets. See Form 990, P.		
) Description	(b) Book value
Beneficial Interest in Perpetual Trusts		45,012
Deposits		525
		C
		0
		C
Total. (Column (b) should equal Form 990, Part X, Part X Other Liabilities. See Form 990		
(a) Description of liability	, Part A, line 25.	1
Federal income taxes	(b) Amount	The Control of the Co
20,000	0	The second secon
	0	
	0	- 100 (100 (100 (100 (100 (100 (100 (100
	0	
	0	200 (191) 1910 - 1910 (191)
	0	And the second s
	0	Sport of the second
	0	No. No.
	∩ I	

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.

•

Total. (Column (b) should equal Form 990, Part X, col. (B) line 25.)

	tule D (Form 990) 2008		Page 4
	Reconciliation of Change in Net Assets from Form 990 to Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	853,109
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	565,106
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	288,003
4	Net unrealized gains (losses) on investments	. 4	-5,984
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 4–8	9	-5,984
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		282,019
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	ner	Poturn
1	Total revenue, gains, and other support per audited financial statements		1 847,125
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		1 047,125
а		004	
b		104	
C	Donated services and use of facilities		
_	Recoveries of prior year grants		
d	Other (Describe in Part XIV)	——	
е	Add lines 2a through 2d	<u> _</u> 2	2e -5,984
3	Subtract line 2e from line 1		3 853,109
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	. 4	4c 0
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)		5 853,109
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expens	es po	er Return
1	Total expenses and losses per audited financial statements		1 565,106
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d		20
3	Subtract line 2e from line 1	, ,	2e 0
4	Amounts included on Form 000 Deat IV line 25 hours on line 4.		3 565,106
	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)		
_C	Add lines 4a and 4b		1c 0
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)		5 565,106
Par	t XIV Supplemental Information		
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4 P	art IV lines 1h
and 2	2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	,	
	Il Line 9 Conservation easements are not reflected in our monthly revenue and expense statemen	te Ho	wever they are
	sate ner	13. 110	wever, they are
footn	oted in our annual audit as follows: " The organization is involved in receiving donations of conser		
10010	otes in our difficult addit as follows. The organization is involved in receiving donations of conser	valior	i easements. A
auali	fied conservation accompant is a restriction (that is granted in normaticity) and the conservation of the second section (section of the second section of the sec		
<u> </u>	fied conservation easement is a restriction (that is granted in perpetuity) on the use of land granted	d to a	qualified charitable
dono	o ovaluatively for concentration numbers. These first statements to the first statement of the statement of		
done	e exclusively for conservation purposes. These financial statements do not reflect their value, but	appro	oximately 3,326 acres
<u>are c</u>	urrently protected with an appraised value at the date of donation of \$9,148,424.		
Part '	V Line 4 The Foundation's Board of Directors adopted an endowment goal of \$10,000 per easeme	nt pro	perty at the inception
of the	program in 1999. This goal is evaluated with the acceptance of each easement on a case-by-case	e bas	sis. Stewardship
goals	for contiguous properties or small acreage properties adjacent to road access are discounted on	a cas	e-by-case basis
	The state of the s	~ 000	,

Tennessee Parks and Greenways Foundation 62-1557574 Schedule D (Form 990) 2008 Part XIV Supplemental Information (continued) but not below a minimum of \$5,000 per easement project. If endowment funds are not secured at or before the completion of the transaction, the Foundation has a plan to secure these funds and has a policy committing the funds to this purpose. The Foundation's conservation easements provide guidance for arbitration and violation enforcement. However, should legal enforcement be required, the full Board of Directors will approve the process and budget. Restricted accounts are established for each easement and reflected on our monthly balance sheet and reported to the board. Note: Contribution to an endowment fund is not required from the easement donor. The land gift is the real gift to conservation and stewardship funding is sought from general membership or bequests.

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990

Attach to Form 990. To be completed by organizations to provide

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service
Name of the organization

Tennessee Parks and Greenways Foundation

additional information for responses to specific questions for the Form 990 or to provide any additional information.

Inspection **Employer identification number**

62-1557574

F	
Form 990 Part VI Section B Line 12 Our conflict, whether real or the appearance	thereof, is avoided or appropriately managed
through disclosures, recusal or other means. This policy applies to insiders, inclu	ding board members, substantial contributors,
parties related to the aforementioned, those who have an ability to influence deci	sions of the organization, and those with access
to information not available to the general public. Federal and state conflict discl	osure laws are followed.
The Foundation developed a Disclosure Statement which is signed by each Boar	d member, staff member, and volunteer
acknowledging their understanding of the policy and making the appropriate dislo	sures of affiliations and associations to the
President and Executive Director and to the Chairman of the Board of Directors.	This is reviewed and updated annually, or more
freguently as needed.	
Form 990 Part VI Section B Line 15 Persons employed by the Tennessee Parks	and Greenways Foundation in a part-time or
full-time capacity, except those persons in non-exempt positions, will receive a sa	lary negotiated at the time of recruitment that
will not be based upon an hourly wage. The magnitude of the work assignments	and the full scope of responsibility for the
position will be fully discussed at time of hire. In setting compensation, the Tenne	essee Parks and Greenways Foundation may
consider, among other things, external labor market rates, equitable relationship	with other jobs within the organization, and the
organization's ability to pay. Each employee may be eligible for a salary review a	t the beginning of each fiscal year. The Board of
Directors will determine the Executive Director's salary.	
Form 990 Part VI Section C Line 19 The Tennessee Parks and Greenways Four	idation is committed to operate in ethical, legal,
and technically sound manner to ensure long-term protection of land in public inte	erest. Our entire Standards and Practices
Manual is available for download on our website. In addition, our profile on Givin	gMatters.org and Guidestar.org websites
includes financial statements. Our governing documents, policies and financial st	atements are also available by request.

Tennessee Parks and Greenways Foundation **Easement Monitoring Costs, 2008**

Easement	Date of	Staff	Time On	Travel	Total	Total Value	Miles	Cost of	Other	Other	Total
	Travel	Member	Property	Time (r/t	Staff	(at hourly	Traveled	Mileage at	Travel	Expenses	Expenses
	- Are		(hours)	total	Time	rate)	(round trip)	Established	Expenses	(legal fees,	
				hours)				Rate		etc.)	
Blackburn Fork	Dec. 13	NB	4.00	3.50	7.50	126.38	178	104.13			230.51
Charles Russell Preserve	Sept. 27	SW	1.33	2.50	3.83	99.29	135	78.98			178.27
Clear Fork/Crooked Creek -	Aug. 18	DN	4.00	3.00	7.00	175.00	145	84.83	55		314.83
Clear Fork/Crooked Creek -	Aug. 19	DN	5.00	3.00	8.00	200.00	145	84.83			284.83
Clear Fork/Shoal Creek - Berg	Aug. 28	NB	2.00	3.50	5.50	92.68	158	92.43			185.11
Devilstep Hollow	Jan. 18-20	RM	10.00	3.00	13.00	325.00	128	64.64			389.64
Devilstep Hollow	Feb. 1-2	RM	9.00	2.00	11.00	275.00	67	33.84			308.84
Devilstep Hollow	Oct. 8	KW	2.00	5.00	7.00	263.41	200	117.00			380.41
Hawkins Cove - Fesmire	Feb. 11	RM	7.00	3.00	10.00	250.00	175	88.38	17.88		356.26
Kingstree Preserve	Aug. 19	NB	3.50	2.00	5.50	92.68					92.68
Marys Creek	Oct.10	SW	1.00	3.00	4.00	103.72	160	93.60			197.32
Morgan Farm	Oct. 3	SW	1.00	3 hr. 20 m.	4 hr. 20	108.02	202	118.17			226.19
Neill Farm	Oct. 3	DN	3.00	4.50	7.50	187.50	264	154.44	5.00		346.94
Osborn Preserve	May 8*	NB	n/a	n/a	1.00	16.85	n/a	n/a			16.85
Potters Farm	June. 6	RM	2.00	3.50	5.50	137.50	195	98.48	8.23		244.21
Ravens Den	Nov. 19	RM	2.00	3.00	5.00	125.00	203	118.76	16.75		260.51
Ruleman	Oct. 3	SW	2.00	3 hr. 40 m	5 hr. 40	146.85	215	125.78			272.63
Solomon Hollow	Aug. 28	NB	6.00	2.25	8.25	139.00	83	48.56			187.56
Twin Creek Farms	Sept. 30	DN	3.00	1.00	4.00	100.00	56	32.76			132.76
Vest Farm	Sept. 29	SW	1.00	2.50	3.50	90.76	110	64.35			155.11
Wildwoods	Apr. 7	NB	3.75	4.00	7.75	130.59	175	88.38			218.97
TOTALS			81.08	68.75	149.83	3,185.23	3,443.00	1,692.34	102.86	0.00	4,980.43