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)

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Α			endar year, or tax year b	eginning	, ar	nd ending				
В	Check if	applicable:	C Name of organization	Tennessee Parks and G	Breenways Foundation	on	D Employer	Identification	on numbe	er
<u> </u>	Address	change	Doing Business As				62-1557574			
	Name ch	ange	Number and street (or P.O.), box if mail is not delivered to	street address) Room/su	ile	E Telephone	number		
	Initial retu	urn	1205-A Linden Avenue							
Ħ.	Terminat	ed	City or town, state or count				615-386-31	/ 1		
=	Amended		Nashville	,, ====================================	TN 372	10	G Gross rece	sinta C		IA INTO
=		- 1	F Name and address of princ	ainel officer	110 312					1,168,345
	Application	on pending	·				is this a group retu		tes?	Yes X No
				1205-A Linden Avenue, I	Nashville, IN 37212	2 H(b)	Are all affiliates in			Yes No
IT	ax-exem	ipt status;	X 501(c)(3) 501(c)	() ◀ (insert no.)	4947(a)(1) or 5	527	If "No," attach a lis	st. (see instri	uctions)	
JΙ	Website	: Nwv	v.tenngreen.org			H(c)	Group exemption i	number >		
		rganization		st Association Oth	ner 🕨					9
				at Association Off	161	- Teal Of It	rmation: 1997	M State	of legal do	omicile: TN
	art		nmary							
	1			n's mission or most signif		he orga	nization's prima	ary missio	n is to	
_		preserve	and support parks, gre	enways and open space	es in Tennessee.					
nce										
rna	1									
Activities & Governance	2	Check th	nis box 🕨 if the organ	nization discontinued its opera	ations or disposed of mo	re than 25	% of its net assets	S.		
9	3			ne governing body (Part				3		23
63	4	Number	of independent voting n	nembers of the governin	g body (Part VI, line	1b)		4		22
₹	5	Total nu	mber of individuals emp	oloyed in calendar year 2	011 (Part V. line 2a)			5		9
Act	6	Total nui	mber of volunteers (esti	mate if necessary)				6		50
	7a			ie from Part VIII, column				7a	_	
	b	Net unre	lated business taxable	income from Form 990-7	Γ. line 34			7b		0
					,		Prior Year	,,,	Curren	nt Year
	8	Contribu	tions and grants (Part V	/III, line 1h)				,729		964,256
Revenue	9			VIII, line 2g)				0		
e Ve	10			olumn (A), lines 3, 4, and			17	,520		4,046 -70,539
ĕ	11			(A), lines 5, 6d, 8c, 9c,				0	_	-70,539
	12	Total reve	enue—add lines 8 through	11 (must equal Part VIII, o	column (A) line 12)	·	700	,249		907 700
	13		nd similar amounts paid		0		897,763			
	14			(Part IX, column (A), line			0			0
	15			loyee benefits (Part IX, col			201			000.000
Expenses	16a			art IX, column (A), line 1				,182	_	292,083
90	1			t IX, column (D), line 25)				0		0
ă	17			n (A), lines 11a-11d, 11f				200		100 101
	18			7 (must equal Part IX, co			202		_	199,461
	7.7			ct line 18 from line 12 .	, , ,	_		488	_	491,544
_ (1	19	nevenue	less expenses. Subila	cimie io nom me 12.	· · · · · · · · · · · · · · · · · · ·			761		406,219
Net Assets or Fund Balances	20	Total ace	cote (Part V line 16)			Dey	inning of Current		End o	f Year
Bal	20						2,897	 -		3,299,802
Pun	21			htenst line Of from line O		-	404,			400,000
				btract line 21 from line 2		•	2,493,	583[2,899,802
	rt I		nature Block	- d (b)					_	
una	er penalli helief it i	ies or perjury	y, I declare that I have examin	ed this return, including accom of preparer (other than officer)	panying schedules and si is based on all information	atements, in of which	and to the best of n	ny knowledg	e	
			T HAD	200	A		proparet rias arry k	114/1		
Sig	jn	P -	Signature of officer			<u>-</u>		17/1	/	
He	re	l .	- /		r	a constitue	Date			
			Kathleen Williams			xeculive	Director and P	resident		
			Type or print name and title Type preparer's name	Preparer's sign	nature /	. 1	Dale		I per int	
Pai	id	[11110	1 JPD Proportion a name	Floparet S sign		TA		eck X i	PTIN	
		Vale	rie Kemp Dreier, CPA	Yalte	TTYS De	LY		f-employed	P0107	76025
	parer	G: 1		p Dreier, Certified Public	Accountant		Firm's EIN ► 2			
US	e Only	_		Street, Suite 101, Ashland			- Section - N	North Colonial Coloni	N. Carrier	
							Phone no. (615) 792-	1/66	
May	y the IH	S discus	s this return with the pre	eparer shown above? (se	ee instructions) :	ê			Ye	S X No
_	_									

	990 (2011)	rennessee Parks and Greenways Foundation	62-1557574	Page 2
Pa	rt III	Statement of Program Service Accomplishments		
		Check if Schedule O contains a response to any question in this Part III	<u> </u>	
1		escribe the organization's mission:		
	The mis	sion of this organization is to identify, preserve and protect the		
	ecologic	ally-rich, historically-significant and incredibly beautiful places in Tennessee in		
	order to	protect wildlife, improve water and air quality, provide close-to-home recreation		
	opportu	nities and create sustainable communities and regions.		
2	Did the	organization undertake any significant program services during the year which were not listed or		
	the prior	Form 990 or 990-EZ?	· · Yes	X No
		describe these new services on Schedule O.		_
3	Did the	organization cease conducting, or make significant changes in how it conducts, any program		
	services	?	· · · L Yes	X No
		describe these changes on Schedule O.		_
4	Describe	e the organization's program service accomplishments for each of its three largest program servi	ces, as measured	by
	expense	s. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to re-	port the amount o	f
	grants a	nd allocations to others, the total expenses, and revenue, if any, for each program service report	ted.	
4a	(Code:) (Expenses \$ 401,746 including grants of \$ 0) (Reven	ue \$	0)
	To prese	erve Tennessee scenic beauty by creating an interconnected system of parks, greenways and		
	wildlife a	reas.		
			• • • • • • • • • • • • • • • • • • • •	
4b	(Codo:	\/Evnoppes © O including events of ©		
40) (Expenses \$ 0 including grants of \$ 0) (Reven		
4c	(Code:) (Expenses \$ 0 including grants of \$ 0) (Revenue	10 \$	0)
	(/ (= p	ΙΟ Ψ	/

		,		
4d	Other pro	ogram services. (Describe in Schedule O.)		
	(Expense		0)	
4e		ogram service expenses 401,746		

			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			<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	1	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	2	X	-
4	Section 501(c)(3) organizations. Did the organization	3	ļ.,	X
·	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		×
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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I			X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space	6		X
_	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		Х
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			
10		9	_	_X
	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI			
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	11a	X	
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		_ X
	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		Х
	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	х	-
е	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 FtN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	111		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			<u>X</u>
h	Schedule D, Parts XI, XII, and XIII	12a		<u>X</u>
D	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.			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b	-	X
	Did the organization maintain an office, employees, or agents outside of the United States?	13		X
h	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking.	14a		_X_
	fundraising, business, investment, and program service activities outside the United States, or aggregate	1 [
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV			
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	14b	-	<u> </u>
13	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV			
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	15		<u>X</u>
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
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)			
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17	-	<u> </u>
40	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 hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A) line 13, 14 "Year" approved to Select IV, 18, 19, 19, 19, 19, 19, 19, 19, 19, 19, 19			
22	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants and other assistance to individuals in the	21		X
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	22		X
	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			
h	24b through 24d and complete Schedule K. If "No," go to line 25	24a		Х
C	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
Ū	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	;		
26	990-EZ? If "Yes," complete Schedule L, Part I	25b		_X
20	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.			
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	26		X
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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):			
а	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			
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	28b	-	_X
·	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		^
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
20	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			
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		X
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
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		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within			
00		35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	0.5		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		X
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		Х
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	
			000	

C

Form 990 (2011) Tennessee Parks and Greenways Foundation 62-1557574 Page 5 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 Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable 1c X Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a Statements, filed for the calendar year ending with or within the year covered by this return . . . | 2a If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . . 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? За 3a Χ Ь 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 4a Х 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 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? b 5b С 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the If "Yes," did the organization include with every solicitation an express statement that such contributions or h 6b 7 Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 7c d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? е 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **7**f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting В 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? 9 Sponsoring organizations maintaining donor advised funds. а 9a b 9b Section 501(c)(7) organizations. Enter: 10 Initiation fees and capital contributions included on Part VIII, line 12 а 10b Section 501(c)(12) organizations. Enter: 11 а Gross income from other sources (Do not net amounts due or paid to other sources Ь Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year Ь 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which

Did the organization receive any payments for indoor tanning services during the tax year?

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a

Х

20

Tennessee Parks and Greenways Foundation Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year . . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent . . . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Χ Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint Χ b Are any governance decisions of the organization reserved to (or subject to approval by) members, Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 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 Χ If "Yes," did the organization have written policies and procedures governing the activities of such chapters. affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13....... 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." 12c 13 13 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 15b 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 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website X Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest 19 policy, and financial statements available to the public.

State the name, physical address, and telephone number of the person who possesses the books and records of the

1205-A Linden Avenue, Nashville, TN 37212

organization: ► Kathleen Williams 615-386-3171

Form 990 (2011) Tennessee Parks and Greenways									62-1557	574	Page 7
Part VII Compensation of Officers, Dire Employees, and Independent C Check if Schedule O contains a re	ontractors									-	
Section A. Officers, Directors, Trustees, Key										· · · ·	
1a Complete this table for all persons required to be organization's tax year.									ng with or within	the	
 List all of the organization's current officers, of compensation. Enter -0- in columns (D), (E), and List all of the organization's current key emple. List the organization's five current highest compensation (Box 5 of Foorganization and any related organizations. 	(F) if no comper loyees, if any. S impensated emp	nsatio ee in: ploye	on w stru es (/as ction othe	paic ns f er th	i. or dei an ar	initi n off	on of "key empl icer, director, tr	oyee." ustee. or kev en	nplovee)	
 List all of the organization's former officers, k \$100,000 of reportable compensation from the orga List all of the organization's former directors organization, more than \$10,000 of reportable comp List persons in the following order: individual trustee 	nization and any or trustees that pensation from t	y rela at rec he or	ted eive gan	orga ed, ii izati	aniz n th ion	ation e cap and a	s. acit ny r	y as a former di elated organiza	irector or truslee		
compensated employees; and former such persons		.01.10		L. L.	4010	,00, 0		no, noy cripicy	ees, mgnest		
Check this box if neither the organization nor ar	ny related organ	izatio	n c	omp	ens	sated	any	current officer,	director, or trus	lee.	
(A) Name and Tille	(B) Average hours per week (describe hours for related organizations in Schedule O)	box,	unle: er an	heck ss pe	mor ersor	e than is bot tor/trus	n an lee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estima amour othe compen from organiz and rel organiza	ated nt of er sation the tation
(1) Ms. Kathleen Williams											

P	art VII	Section A. Officers, Directors, To	rustees. Kev Ei	olam	vee	s. a	nd	High	est	Compensated	Employees (co	ntinuodi	Page
-		(A) Name and litte	(B) Average	(do i	not cl	Pos heck	C) sition more		one	(D)	(E) Reportable	(F	F)
			hours per week (describe hours for related organizations in Schedule O)		er an		lirect	Highest compensated employee	tee)	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amou oth comper from organi and re	ent of ner nsation the zation
(15)													
(16)							_						
(17).													
(18)													
(19)													
(20)					_	_							
(21)	••												
(22)													_
(23)			-										
(24)													
(25)													
С	Total fro	l	Section A							58,703 0 58,703	0		0
2	Total nun	nber of individuals (including but not less compensation from the organization	imited to those I	isted	abo	ve) 0	wh	o rec		ed more than \$1			0
	Did the o	rganization list any former officer, dir	ector, or trustee		em	plo						Ye	s No
	the organ	ndividual listed on line 1a, is the sum ization and related organizations gre	ater than \$150,0									4	X
5	Did any p	erson listed on line 1a receive or acces rendered to the organization? If "\)	rue compensati	on fre	om a	any	unr	elate	d o	rganization or inc	dividual		
		lependent Contractors	es, complete s	oune	Jule	JI)I St	исп р	1615	011		5	<u> </u>
1	Complete	this table for your five highest composition from the organization. Report co	ensated indeper ompensation for	ndent	t cor cale	ntra	ctor r ye	s tha	t re	ceived more thang	n \$100,000 of he organization	s tax	
		(A) Name and business add	ress					_		(B) Description of serv	rices C	(C) ompensatio	on .
													0
													0
													0
_								-					0
		ber of independent contractors (inclu		ited t	to th	ose	list	ed al	bov	e) who received		_	

Business Code

0

0.

0

897,763

c Net income or (loss) from sales of inventory .

Miscellaneous Revenue

d All other revenue

11a

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).

	Check if Schedule O contains a response to any	question in this Part	:IX		
	not include amounts reported on lines 6b, 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			general expenses	expenses
	organizations in the United States. See Part IV, line 21	0			
2	Grants and other assistance to individuals in the				
	United States. See Part IV, line 22	0			
3	Grants and other assistance to governments,		T	The second second	
	organizations, and individuals outside the				
	United States. 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	0			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	255,786	217,418	38,368	
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	10,974	9,328	1,646	
9	Other employee benefits	0			
10	Payroll taxes	25,323	18,544	6,779	
11	Fees for services (non-employees):				
a	Management	0			
b	Legal	0			
C	Accounting	7,000		7,000	
d	Lobbying	0			
е	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	14,107	12,885	1,222	
14	Information technology	0			
15	Royalties	0			
16	Occupancy	8,400	7,308	1,092	
17	Travel	6,183	5,874	309	
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	4,108	2,876	1,232	0
23	Insurance	32,914	25,668	7,246	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
_	Telephone	6,780	6,441	339	
b	Printing and reproduction	4,701	4,090	611	
C	Annual report/Newsletter	3,851	3,466	385	
d	All all and an arrangement of the state of th	0			
	All other expenses See attached schedule	111,417	87,848	8,924	14,645
25	Total functional expenses. Add lines 1 through 24e .	491,544	401,746	75,153	14,645
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				

Balance Sheet

(A) Beginning of year End of year 1,264,980 1 751,551 2 2 3 258,653 3 210,014 4 0 4 0 Receivables from current and former officers, directors, trustees, key 5 employees, and highest compensated employees. Complete Part II of 5 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) Assets 6 7 0 7 0 8 9 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2,311,843 b Less: accumulated depreciation 10b 21,801 924,366 10c 2,290,042 11 620 11 551 Investments—other securities. See Part IV, line 11 12 12 0 Investments—program-related. See Part IV, line 11 13 0 13 0 14 ol 14 0 15 448.964 15 47,644 Total assets. Add lines 1 through 15 (must equal line 34) 16 2,897,583 16 3,299,802 17 17 18 18 19 19 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D. . . 21 21 Payables to current and former officers, directors, trustees, key 22 Liabilities employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties 400,000 23 400,000 Unsecured notes and loans payable to unrelated third parties 24 0 24 0 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete 4.000 25 0 26 404,000 26 400,000 Organizations that follow SFAS 117, check here X and or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 1,275,073 27 1,796,433 28 1,166,469 28 1,051,328 29 52,041 29 52,041 Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. Net Assets 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds. 32 32 33 2,493,583 33 2,899,802 2,897,583 34 3,299,802

Form	990 (2011) Tennessee Parks and Greenways Foundation	62.	1557574	D-	age 12
Par	Reconciliation of Net Assets		100101 1	Pa	ige_12
	Check if Schedule O contains a response to any question in this Part XI				\Box
					_=
1	Total revenue (must equal Part VIII, column (A), line 12)	1		897	7,763
2	Total expenses (must equal Part IX, column (A), line 25)	2			1,544
3	Revenue less expenses. Subtract line 2 from line 1	3			6,219
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			3,583
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,	i l			
Company of	column (B))	6		2,899	9,802
Fair	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 X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.				
0-					
2a b	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X_
C	Were the organization's financial statements audited by an independent accountant?		2b	X	
L	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight the audit, review, or compilation of its financial statements and selection of an independent accountant?	ot			
	If the organization changed either its oversight process or selection process during the tax year, explain in		. 2c	X	
	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		1 2		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
Ju	the Single Audit Act and OMB Circular A-133?				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3a	_	_ <u>X</u> _
~	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		:
	i stopo and to and go such addits.			ggn	(2011)
			rom	330	(2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete If the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► See separate Instructions.

	OMB No 1545-0047
	2011
	Open to Public Inspection
yer Identifi	callon number

		e organization							Employ	er Identifica	flou unu		L
			Greenways Four						<u> </u>	62-1	<u>557574</u>		
[#] Pal				arity Status (All org						nstructio	ns		
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2	Ħ			on 170(b)(1)(A)(ii). (At			,a		(=)()(\(\(\(\))	.17-			
3	Ħ			ospital service organiz			section 1	(70/b)/1)	(A)/iii				
4	Ħ			tion operated in conju						1/h\/1\/A\	VIII) En	tor the	
•			me, city, and sta			a 1100pi				J(D)(1)(A)	i(iii). Lii	iei liie	•
5				the benefit of a colleg (Complete Part II.)	e or unive	ersity own	ed or ope	rated by	a govern	mental ur	it descr	ibed	
6		A federal, st	ate, or local gove	ernment or governmen	ntal unit de	escribed in	n section	170(b) (1)(A)(v).				
7	X	An organization described in	tion that normall section 170(b)	y receives a substantia (1)(A)(vi). (Complete F	al part of i Part II.)	ts support	from a go	overnme	ntal unit o	or from the	e genera	al publ	ic
8		A community	y trust described	in section 170(b)(1)((A)(vi) . (C	omplete F	art II.)						
9		An organiza	tion that normall	y receives: (1) more th	an 33 1/3	% of its s	upport fro	m contrib	utions, m	embersh	ip fees,	and gr	oss
		support from	n gross investme	d to its exempt function t income and unrelate after June 30, 1975.	ed busine	ess taxable	e income	(less sec	tion 5111	nore than ax) from l	33 1/39 ousines	6 of its ses	
10			_	nd operated exclusive				•	,	(4)			
11	H			nd operated exclusive						• •	ar out th	0	
••				olicly supported organi									on
				t describes the type o									
		а Туре	i b	Type II c	Туре	e III-Funct	tionally int	egrated		d 🔲 1	ype III-	Olher	
е				that the organization									
				n managers and othe	r than one	e or more	publicly s	upported	organiza	tions des	cribed in	n section	on
f			section 509(a)(2	z). a written determination	from the	IDS that i	tic o Tue	o I. Typo	11 Tom	- 10			
'								e i, Type	n, or ryp	e iii suppi	orung		
g		-	•	the organization accep				om any c	of the				L
		following per											
				or indirectly controls, e								Yes	No
				rerning body of the sup person described in (i)							11g(i) 11g(ii)		
			-	y of a person describe							11g(iii)		
<u>h</u>		Provide the	following informa	tion about the suppor	ted organ	ization(s)	•						
(I)		e of supported anization	(ii) EIN	(ill) Type of organization (described on lines 1-9		organization sted in your		ou nolify		ls the		Amoun	l of
	urg	anzanon		above or IRC section		document?	col. (i)	of your		tion in col. ized in the		support	
				(see Instructions))	Yes	No	Yes	oort? No	Yes	S?	-		
(A)	_				163	140	165	140	Tes	No			
\~\/ 									1				0
(B)													
						-	_		-	 -			0
(C)													0
(D)								-					
(E)					_			_					0
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Tota	<u> </u>												0

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) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 1,248,392 1,562,900 541,790 770,729 964,256 5,088,067 2 Tax revenues levied for the organization's benefit and either paid to or expended on 0 3 The value of services or facilities furnished by a governmental unit to the organization without charge 0 Total. Add lines 1 through 3 4 1,248,392 1,562,900 541,790 770,729 964,256 5,088.067 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, Public support. Subtract line 5 from line 4. 5,088,067 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total 7 1,248,392 1,562,900 541,790 770,729 964,256 5,088,067 8 Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar 10,813 33,707 14,355 15,976 8,442 83,293 9 Net income from unrelated business activities, whether or not the business is regularly carried on 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 0 0 11 Total support. Add lines 7 through 10. . . 5,171,360 12 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) 13 Section C. Computation of Public Support Percentage Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 14 98.39% 15 15 33 1/3% support test-2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box 16a 33 1/3% support test-2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 10%-facts-and-circumstances test—2011. 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 10%-facts-and-circumstances test-2010. 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 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

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.)

payments received on securities loans, rents, royalties and income from similar sources b. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c. Add lines 10a and 10b. o. 0 0 0 0 0 0 0 0 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.). 13. Total support. (Add lines 9, 10c, 11, and 12.). 14. First flive 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 2011 (line 8, column (f) divided by line 13, column (f)). 16. Public support percentage from 2010 Schedule A, Part III, line 15. 17. Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)). 18. Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)). 19. Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)). 18. Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)). 19. Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)). 10. Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)). 10. Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)). 10. Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)). 11. Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)). 12. Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)). 13. Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)). 14. Investment income percentage for 2011 (tion A. Public Support		notou boloti	picade comp	noto i ait ii.)	<u></u> _	
Gills, grants, contributions, and membership fixes received, (bo not include any musual grants ?) Gilds received, (bo not include any musual grants ?) Gilds received, (bo not include any musual grants ?) Gilds received, (bo not include any musual grants ?) Gilds received, (bo not include any musual grants ?) Gilds received, (both received strained in any activity that is related to the organizations is accessing the grant and received programs. (both received strained any activity that are not an unrelated trade or business what ear of an unrelated trade or business in the second or its behalf.	Cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
solid or services performed, or facilities furnished in any actify that is related to the organization's tax-exempl purpose and continued that is a second to the organization's tax-exempl purpose and the second to the organization's benefit and either pald to or expended on its behalf. 1 Tax revinues levied for the organization's benefit and either pald to or expended on its behalf. 5 The value of services or facilities furnished by a governmental multo the organization without charge. 6 Total. Add ines 1 through 5. 7 Announts included on lines 1, 2, and 3 received from discipalified persons. 6 Announts included on lines 2, 2, and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1's of the annount on line 13 for the year. 6 Add lines 7 and 70. 8 Public support (Subtrad line 7c from line 6.) 9 Announts from line 6. 9 Calcelindar year (or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total lines (c) 1's and the annount of lines (c) 1's and the annount of lines (c) 1's and the annount of lines (c) 1's annount	1							
In any activity that is related to the organization's tax-exempt purpose. 3 Gross receipts from activities that are not an unrelated trade of 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 sarvices or facilities furnished by a governmental unit to the organization without charge. 6 Totals. Add lines 1 through 5. 7 To Announts included on lines 2, 2, and 3 received from discrete mid-greaten at the sarvices on times 1, 2, and 3 received from discrete mid-greaten at the sarvices on times 1, 2, and 3 received from discrete mid-greaten at the sarvices of the sarvices on times 2, 2, and 3 received from discrete mid-greaten at the sarvices of the sarvices of the sarvices on times 2, 2, and 3 received from discrete mid-greaten at the sarvices of the sarvices	2	Gross receipts from admissions, merchandise						0
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amount on line 13 for the year. c Add lines 7 a and 7 b. 8 Public support (Subtract line 7c from line 6.). Section B. Total Support Calendar year (or fiscal year beginning in) 9 Amounts from line 6. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								
c Add lines 7a and 7b. 8 Public support (Subtract line 7c from line 6.) 9 Amounts from line 6. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses activities not included gain or loss from the sale of capital assets (Explain in Parl IV.) 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 included gain or loss from the sale of capital assets (Explain in Parl IV.). 13 Total support. (Add lines 9, 10c, 11, and 12.). 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501 (c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f)). 16 Public support percentage for 2011 (line 10c, column (f) divided by line 13, column (f)). 17 In lowestment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)). 16 Onomputation of Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)). 17 In lowestment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)). 18 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, 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. 19 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 18 is more than 33 1/3%, and line 18 is more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.								
Public support (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total 9 Amounts from line 6. 0 0 0 0 0 0 0 0 0 10 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . 0 c Add lines 10a and 10b . 0 0 0 0 0 0 0 0 0 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). 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					-			
Section B. Total Support Calendar year (or fiscal year beginning in) Amounts from line 6. O O O O O O O O O O O O O O O O O O O				0		0	0	0
Section B. Total Support Calendar year (or fiscal year beginning in) Amounts from line 6. Amounts from line 6. O O O O O O O O O O O O O								
Amounts from line 6. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		tion B. Total Support			-			
9 Amounts from line 6. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not Included gian or loss from the sale of capital assets (Explain in Part IV). 12 Other income. Do not include gian or loss from the sale of capital assets (Explain in Part IV). 13 Total support. (Add lines 9, 10c, 11, and 12). 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f)). 16 Public support percentage for 2011 (line 10c, column (f) divided by line 13, column (f)). 17 Investment income percentage for 2010 Schedule A, Part III, line 15 18 0.00% 19 33 1/3% support tests—2011. 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. 19 33 1/3% support tests—2010. If the organization did not check the box on line 14 or line 16 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.	9	Amounts from line 6	n	0	0			
payments received on securities loans, rents, royalties and income from similar sources b. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c. Add lines 10a and 10b	10a							0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. c Add lines 10a and 10b. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0							ľ	
b Unrelated business (axable income (less section 511 taxes) from businesses acquired after June 30, 1975. c Add lines 10a and 10b. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								0
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c Add lines 10a and 10b. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		•						
Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		· · · · · · · · · · · · · · · · · · ·			_			0
activities not included in line 10b, whether or not the business is regularly carried on			0	0	0	0	0	0
or not the business is regularly carried on	11					1		
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). Total support. (Add lines 9, 10c, 11, and 12.). Place of 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 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f)). Public support percentage from 2010 Schedule A, Part III, line 15. Section D. Computation of Investment Income Percentage Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)). Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage		· · · · · · · · · · · · · · · · · · ·						_
(Explain in Part IV.)	12	}						0
Total support. (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f)). 15 0.00% Public support percentage from 2010 Schedule A, Part III, line 15. Section D. Computation of Investment Income Percentage Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)). 17 0.00% Investment income percentage from 2010 Schedule A, Part III, line 17. 18 0.00% 19 33 1/3% support tests—2011. 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. 10 0.00% 11 0.00% 12 0.00% 13 1/3% support tests—2010. 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.		loss from the sale of capital assets	1					
Total support. (Add lines 9, 10c, 11, and 12.) O O O O O O O O O O O O O O O O O O O								0
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 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f)). Public support percentage from 2010 Schedule A, Part III, line 15. Section D. Computation of Investment Income Percentage Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 17. Investment income percentage from 2010 Schedule A, Part III, line 18. Investment income percentage from 2010 Schedule A, Part III, line 19. Investment income percentage from 2010 Schedule A, Part III, line 19. Investment income percentage from 2010 Schedule A, Part III, line 19. Investment income percentage from 2010 Schedule A, Part III, line 19. Investment income percentage from 2010 Schedule A, Part III, line 19. Investment income percentage from 2010 S	13	and 12.)				0	0	
Section C. Computation of Public Support Percentage Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	14	First five years. If the Form 990 is for the organiza organization, check this box and stop here	tion's first, secor	nd, third, fourth,	or fifth tax year a	s a section 501(c)(3)	
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Public support percentage from 2010 Schedule A, Part III, line 15. 16 0.00%	15	Public support percentage for 2011 (line 8, column	(f) divided by lin	e 13, column (f))		15	0.00%
Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	16	Public support percentage from 2010 Schedule A, I	Part III, line 15.	<u> </u>		<u> </u>	16	
Investment income percentage from 2010 Schedule A, Part III, line 17. 18 0.00% 33 1/3% support tests—2011. 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—2010. 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.								
19a 33 1/3% support tests—2011. 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—2010. 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.		Investment income percentage for 2011 (line 10c, o	column (f) divided	by line 13, colu	ımn (f))		17	0.00%
not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		investment income percentage from 2010 Schedule	A, Part III, line	17		· · · . L	18	0.00%
b 33 1/3% support tests—2010. 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	ıJd	not more than 33 1/3%, check this hay and stop be	iiu not check the	box on line 14,	and line 15 is mo	ore than 33 1/3%,	and line 17 is	. \Box
line 18 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—2010. If the organization of	id not check a b	ox on line 14 or	ine 19a and line	organization	20 1/20/	•
		line 18 is not more than 33 1/3%, check this box an	d stop here. The	organization of	ualifies as a publ	licly supported or	oo 1/0%, and Janizalion	ightharpoons
	20							

	1990 or 990-E2) 2011 Tennessee Parks and Greenways Foundation	62-1557574	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations required Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional instructions).	d by Part II line 1	U·

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		•	

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate Instructions.

2011
Open to Public Inspection

Department of the Treasury internal Revenue Service

Name of the organization

Employer identification number

Tenr	essee Parks and Greenways Foundation			62-1557574
Par	Organizations Maintaining Don	or Advised Funds or O	ther Similar Funds	s or Accounts Complete if
	the organization answered "Yes"	to Form 990, Part IV. line	÷ 6.	
		(a) Donor advised ((b) Funds and other accounts
1	Total number at end of year	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(b) I diles and dile accounts
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 o	ionor advisors in writing tha	t the assets held in de	onor advised
_	funds are the organization's property, subje	ct to the organization's excl	usive legal control?	· · · · · Yes No
6	Did the organization inform all grantees, do	nors, and donor advisors in	writing that grant fund	ds can be
	used only for charitable purposes and not for	or the benefit of the donor o	r donor advisor, or for	r any other
	purpose conferring impermissible private be	enefit?		Yes No
Par	Conservation Easements. Com	plete if the organization a	nswered "Yes" to F	orm 990, Part IV, line 7
1	Purpose(s) of conservation easements held			
'	X Preservation of land for public use (e.g., red			- 1
		realion or education)		n historically important land area
	X Protection of natural habitat	Ĺ	Preservation of a	certified historic structure
	X Preservation of open space			
2	Complete lines 2a through 2d if the organiza	ation held a qualified conse	rvation contribution in	the form of a conservation
	easement on the last day of the tax year.			the form of a conservation
	,,,,			11.12 (1) = 1 (1)
а	Total number of conservation easements .			Held at the End of the Tax Year
b	Total acreage restricted by conservation ea	samente		2a 23
C	Number of conservation easements on a ce	erified historic structure incl	udod in /o\	2b 3,598.97
d				2c 0
u	Number of conservation easements include			1
	historic structure listed in the National Regis			2d 12
3	Number of conservation easements modifie	d, transferred, released, ex	linguished, or termina	ited by the organization
	during the tax year			
4	Number of states where property subject to			2
5	Does the organization have a written policy	regarding the periodic mon	itoring, inspection, ha	ndling of
	violations, and enforcement of the conserva	tion easements it holds?.		X Yes No
6	Staff and volunteer hours devoted to monitor	ring, inspecting, and enforc	ing conservation ease	ements during the year
	112.00			
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing of	conservation easemer	nts during the year
	▶ \$ 3,426			3 ,
8	Does each conservation easement reported	I on line 2(d) above satisfy	the requirements of se	ection
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?			
9	In Part XIV, describe how the organization r	eports conservation easem	ents in its revenue an	d evnense statement and
-	balance sheet, and include, if applicable, the			
	the organization's accounting for conservati		or garnization o miancie	a statements that describes
Part			ISURES OF Other Sim	ilar Accate
Si Sell	Complete if the organization answere			ilai Assets.
1a	If the organization elected, as permitted und	ler SFAS 116 (ASC 958), n	ot to report in its rever	nue statement and balance sheet
	works of art, historical treasures, or other si	milar assets held for public	exhibition, education,	or research in furtherance
	of public service, provide, in Part XIV, the te	ext of the footnote to its final	ncial statements that o	lescribes these items.
b	If the organization elected, as permitted und	ler SFAS 116 (ASC 958), to	report in its revenue	statement and balance sheet
	works of art, historical treasures, or other sit	milar assets held for public	exhibition, education,	or research in furtherance
	of public service, provide the following amou	unts relating to these items:		
	(i) Revenues included in Form 990, Part VII	l, line 1		▶ \$
	(ii) Assets included in Form 990, Part X			▶ S
2	If the organization received or held works of			
-	following amounts required to be reported u			
_	Personne included in Form 000, Part VIII II	11401 OI MO 110 (MOU 906).	relating to these tems	o.
a	Revenues included in Form 990, Part VIII, li	III C I		5 \$
b	Assets included in Form 990, Part X			▶ \$

Total. (Column (b) must equal Form 990, Part X,	col. (B) line 15.)	
Part X Other Liabilities. See Form 9		
1. (a) Description of liability	(b) Book value	
(1) Federal income taxes	0	
(2) Accrued payroll taxes	0	
(3)	0	
(4)	0	
	0	
(6)	.0	
(7)	0	
(8)	0	
(9)	0	
(10)	0	
(11)	0	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	0	

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).

Schedule D (Form 990) 2011 Page 4 Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements Part XI 897,763 2 2 491,544 3 3 <u>406,219</u> 4 4 5 5 6 6 7 7 8 8 9 9 0 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9. 10 10 406,219 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 897,763 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: а 2b C 2c ď 2d е 2e 0 3 3 897,763 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b a **4**a 4c 0 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 897,763 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Part XIII 491,544 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: а 2a C 2c 2d 2e 3 3 491,544 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b. . . . 4a 4c 0 5 491.544 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. Part II Line 9 Conservation easements are not reflected in the financial statements. However, they are footnoted in the annual audit as follows: " ... A qualified conservation easement is a restriction (that is granted in perpetuity) on the use of land granted to a qualified charitable donee exclusively for conservation purposes. These financial statements do not reflect their value, but approximately 3,598.97 acres are currently protected with an appraised value at the date of donation of \$9,829,408. Part V Line 4 The Foundation's Board of Directors adopted an endowment goal of \$10,000 per easement property at inception of the program in 1999. This goal is evaluated with the

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

ns on 2

62-1557574

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Tennessee Parks and Greenways Foundation

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.

Inspection
Employer identification number

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 salary negotiated at the time fo recruitment that will not be based upon an
hourly wage. The magnitude of the work assignments and the full scope and responsibility of
the posistion will be fully disclosed at time of hire. In setting compensation, the Tennessee
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 at 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 Foundation is committed
to operating in ethical, legal and technically sound manner to ensure long-term protection of
the land in public interest. Our entire Standards and Practices Manual is available for
download on our website. In addition, our profile on GivingMatters.com and Guidstar.org
websites includes financial statement. Our governing documents, policies and financial
statements are also available by request.

Schedule O (Form 990 or 990-EZ) (2011)	
Name of the organization	Employer Identification number
Tennessee Parks and Greenways Foundation	62-1557574

Supplemental Schedule Form 990, Part IX, Line 24(f) Other expenses

	(A)	(B)	(C)	(D)
		PROGRAM	MANAGEMENT	
	TOTAL	SERVICES	& GENERAL	FUNDRAISING
Board meeting expense	814	-	814	
Commission and fees	425	-	425	-
Computer	7,575	6,590	985	-
Conferences and workshops	1,542	1,542	-	-
Copies and faxes	2,477	2,155	322	_
Cummins Falls	52,123	52,123	-	_
Environment education services	475	475	_	_
Forever Green	474	474	-	_
Fundraising	14,645	**	-	14,645
Land Protection	5,404	5,404	-	-
Licenses and fees	6,223	-	6,223	-
Memberships	2,834	2,834	-	-
Mississippi River	4,271	4,271	-	-
Solar array expense	4,046	4,046		-
SPC	237	237	-	-
SPC Grants	4,750	4,750	-	-
Temporary Staffing	1,044	992	52	-
Utilities	2,058	1,95 5	103	-
TOTAL	111,417	87 ,848	8,924	14,645

Tennessee Parks and Greenways Foundation BOARD MEMBERS AND ADVISORS, 2011

Officers:

Chairman of the Board

President

Executive Vice President

Treasurer Secretary

Regional Vice Presidents

Dr. Chuck Womack Kathleen Williams John Noel III Ann Tidwell Doyle Newburry

East: Mary Lynn Dobson Middle: Bob Philp West: VACANT

Ex Officio Members (4):

Lt. Governor Ron Ramsey, Blountville House Speaker Beth Harwell, Nashville Secretary of State Tre Hargett, Hendersonville State Treasurer David H. Lillard, Jr., Memphis

Designee: Andrew Merritt

Designee: Joy H. Harris and Josh Stites

Board Members (18):

Mary Lynn Dobson, Rockwood	2012
Jim Emison, Alamo	2011
Janie Finch, Cookeville	2012
Norm Miede, Brentwood*	2014
Scott May, Memphis	2012
Gary Myers, Nashville	2011
Doyle Newburry, Jamestown	2012
John Noel, Nashville	2012
Bob Philp, Brentwood	2011
Sam Powell, Signal Mountain	2011
Mack Prichard, Nashville	2013
Frank Ricks, Memphis	2011
Estie Sheahan, Collierville	2013
Will Skelton, Knoxville	2011
Alan Sparkman, Nashville	2013
Ann Tidwell, Nashville	2012
Bob Tuke, Nashville	2013
Kathleen Williams, Nashville	2011
Dr. Chuck Womack, Cookeville	2011

East West Middle Middle West Middle Middle Middle Middle East Statewide West West East Statewide Middle Middle Statewide Middle

Advisors to the Board (43):

Joe Allen, Nashville Neal Appelbaum, Woodbury Lee Blackburn, Hendersonville Dwight Barnett, Smyma Allen Branton, Cookeville Penny Brooks, Ashland City Bill Bruce, St. Marys, GA Shirley Caldwell-Patterson, Nashville Brenda Cardwell, Sparta Ross Cardwell, Sparta Mike Carlton, Nashville Director Ed Carter, Nashville Bruce Clarke, Mountain Home Bill Coble, Nashville Mary Ann Crowe, Crossville Dr. David Dye, Memphis

John Fenderson, Statewide

Dr. Ric Finch, Cookeville Frank Fiss, Nashville Dr. Mark Fly, Knoxville* Mike Foster, Smithville Mark Fraley, Nashville Elaine Gordon, Nashville Randy Hedgepath, Burns Frank Hensley, Oak Ridge Rob Karwedsky, Nashville Gary Kimsey, Sweetwater Bill Lawrence, Union City Mary Mastin, Cookeville Robert McCaleb, Cleveland Phillip Miller, Nashville Keith Moorman, Nashville Patrick Morales, Townsend Bill Neal, Murfreesboro

Cyrus Rhode, Jr., Spencer Bob Richards, Nashville Axel Ringe, New Market Sam Rogers, Knoxville Wayne Russell, Crossville Del Truitt, Nashville Greg Wathen, Nashville Melinda Welton, Franklin