

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.

2008Open to Public
Inspection**A** For the 2008 calendar year, or tax year beginning **APR 1, 2008** and ending **MAR 31, 2009**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization THE LAND TRUST FOR TENNESSEE, INC. Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 209 10TH AVENUE SOUTH 530 City or town, state or country, and ZIP + 4 NASHVILLE, TN 37203	D Employer identification number 62-1770549
F Name and address of principal officer: JEAN C. NELSON 209 10TH AVENUE SOUTH STE. 530, NASHVILLE, TN			E Telephone number (615) 244-5263
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			G Gross receipts \$ 1,409,380.
J Website: ▶ WWW.LANDTRUSTTN.ORG			H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
K Type of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1999 M State of legal domicile: TN

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO PRESERVE THE UNIQUE CHARACTER OF TENNESSEE'S NATURAL AND HISTORIC LANDSCAPES AND SITES FOR FUTURE 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of employees (Part V, line 2a) 15 6 Total number of volunteers (estimate if necessary) 75 7a Total gross unrelated business revenue from Part VIII, line 12, column (C) 0. b Net unrelated business taxable income from Form 990-T, line 34 0.	
Revenue	8 Contributions and grants (Part VIII, line 1h) 1,826,120. 9 Program service revenue (Part VIII, line 2g) 1,205,685. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 49,780. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 17,200. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 134,053. 2,009,953.	Current Year 1,205,685. 17,200. 105,189. 1,328,074.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 515,110. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 184,491. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 808,600. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 494,544. 19 Revenue less expenses. Subtract line 18 from line 12 1,323,710. 686,243.	610,480. 494,544. 1,105,024. 223,050.
Net Assets or Fund Balances	20 Total assets (Part X, line 16) 7,716,761. 21 Total liabilities (Part X, line 26) 41,439. 22 Net assets or fund balances. Subtract line 21 from line 20 7,675,322.	Beginning of Year 7,938,303. 39,931. 7,898,372.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.				
Sign Here	Signature of officer JEAN C. NELSON, PRESIDENT & EXECUTIVE DIRECTOR Type or print name and title	Date		
Paid Preparer's Use Only	Preparer's signature ▶ Firm's name (or yours if self-employed), address, and ZIP + 4 KRAFTCPAS PLLC 555 GREAT CIRCLE ROAD, SUITE 200 NASHVILLE, TN 37228-1310	Date 12/18/09	Check if self-employed <input checked="" type="checkbox"/> <input type="checkbox"/> Preparer's identifying number (see instructions) EIN ▶ Phone no. ▶ (615) 242-7351	

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

TO PRESERVE THE UNIQUE CHARACTER OF TENNESSEE'S NATURAL AND HISTORIC
LANDSCAPES AND SITES FOR FUTURE GENERATIONS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes", describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes", describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code:) (Expenses \$ 821,010. including grants of \$) (Revenue \$ 105,189.)

1. EDUCATIONAL OUTREACH TO THE GENERAL PUBLIC RELATING TO THE
CONSERVATION OF LAND AND NATURAL RESOURCES SUCH AS PRODUCTIVE
AGRICULTURAL AND FOREST LANDS; RECREATIONAL, SCENIC, ECOLOGICAL AND
HISTORICALLY SIGNIFICANT LANDS; PRESERVATION OF VALUABLE WILDLIFE
HABITAT; WATERSHED AND WATER QUALITY LANDS; AND URBAN OPEN SPACE.

2. THE ACQUISITION THROUGH GIFT, DEVISE, BEQUEST, PURCHASE, THROUGH FEE
SIMPLE ACQUISITION OR OTHERWISE, REAL AND PERSONAL PROPERTY AND
INTERESTS THEREIN, INCLUDING WITHOUT LIMITATION, THE ACQUISITION OF
PERMANENT CONSERVATION EASEMENTS IN REAL PROPERTY IN ORDER TO PRESERVE
THE ABOVE-CITED TYPES OF LAND.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

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

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

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► \$ 821,010. (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	X	
5 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		
6 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 Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	X	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	X	
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
12 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	X	
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I		X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J		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 questions 24b-24d and complete Schedule K. If "No," go to question 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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		X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27 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		X

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Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a 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)? <i>If "Yes," complete Schedule L, Part IV</i>	28a X	
b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c 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? <i>If "Yes," complete Schedule L, Part IV</i>	28c X	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29 X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30 X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X

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Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	38	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	15	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed 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 (such as a bank account, securities account, or other financial account)?		X
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?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Did the organization solicit any contributions that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 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	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?		
10	Section 501(c)(7) organizations. Enter: N/A		
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		
11	Section 501(c)(12) organizations. Enter: N/A		
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.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A		

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

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.

	Yes	No
1a Enter the number of voting members of the governing body	31	
b Enter the number of voting members that are independent	30	
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?	X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9a Does the organization have local chapters, branches, or affiliates?		X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
11 Is there any officer, director or 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		X

Section B. Policies

	Yes	No
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a The organization's CEO, Executive Director, or top management official?	X	
b Other officers or key employees of the organization?	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 with a taxable entity during the year?		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☒ Another's website ☒ Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ►
JANET HENDERSON - (615) 244-5263
209 10TH AVENUE SOUTH #530, NASHVILLE, TN 37203

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated 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 compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JEAN NELSON PRESIDENT/EXEC. DIRECTOR	60.00	X		X				74,083.	0.	14,017.
DOYLE R. RIPPEE CHAIRMAN OF THE BOARD OF	10.00	X		X				0.	0.	0.
ORVILLE KRONK TREASURER OF THE BOARD O	2.00	X		X				0.	0.	0.
MARY BROCKMAN SECRETARY OF THE BOARD O	2.00	X		X				0.	0.	0.
GENTRY BARDEN VICE-PRES OF THE BOARD O	2.00	X		X				0.	0.	0.
ROBERT S. BRANDT VICE-PRES OF THE BOARD O	2.00	X		X				0.	0.	0.
E. WARNER BASS DIRECTOR	1.00	X						0.	0.	0.
JULIAN BIBB DIRECTOR	5.00	X						0.	0.	0.
MARTIN S. BROWN DIRECTOR	1.00	X						0.	0.	0.
DOUG CAMERON DIRECTOR	1.00	X						0.	0.	0.
G. WILLIAM COBLE DIRECTOR	1.00	X						0.	0.	0.
DOUG CRUICKSHANKS DIRECTOR	1.00	X						0.	0.	0.
ESLICK DANIEL DIRECTOR	1.00	X						0.	0.	0.
BOB DAVEE DIRECTOR	1.00	X						0.	0.	0.
CATHY ELLIS DIRECTOR	1.00	X						0.	0.	0.
SARA FINLEY DIRECTOR	1.00	X						0.	0.	0.
DEBBIE B. FRANK DIRECTOR	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
STEVE FRIDRICH DIRECTOR	1.00	X						0.	0.	0.
MICHELLE HAYNES DIRECTOR	1.00	X						0.	0.	0.
ALICE HOOKER DIRECTOR	1.00	X						0.	0.	0.
SALLY HUSTON DIRECTOR	1.00	X						0.	0.	0.
STEVEN MASON DIRECTOR	1.00	X						0.	0.	0.
ROB MCNEILLY DIRECTOR	1.00	X						0.	0.	0.
JENNIE D. RENWICK DIRECTOR	1.00	X						0.	0.	0.
BRAD SOUTHERN DIRECTOR	1.00	X						0.	0.	0.
BYRON R. TRAUGER DIRECTOR	1.00	X						0.	0.	0.
CHARLES A. TROST DIRECTOR	1.00	X						0.	0.	0.
1b Total								126,541.	0.	14,017.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization 0

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization 0

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Form 990 (2008)

Part VIII Statement of Revenue				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	15,800.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	305,088.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	884,797.				
	g Noncash contributions included in lines 1a-1f: \$		46,861.				
	h Total. Add lines 1a-1f		1,205,685.				
Program Service Revenue	Business Code						
	2 a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			17,200.			17,200.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross Rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ 15,800. of contributions reported on line 1c). See Part IV, line 18	a		186,495.			
	b Less: direct expenses	b		81,306.			
	c Net income or (loss) from fundraising events			105,189.	105,189.		
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
	10 a Gross sales of inventory, less returns and allowances	a					
b Less: cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue		Business Code					
11 a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e			1,328,074.	105,189.	0.	17,200.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	143,286.	78,967.	46,328.	17,991.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	391,395.	290,814.	25,383.	75,198.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,367.	941.	284.	142.
9 Other employee benefits	34,422.	23,944.	4,807.	5,671.
10 Payroll taxes	40,010.	27,874.	5,201.	6,935.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	27,592.	22,790.	1,947.	2,855.
14 Information technology				
15 Royalties				
16 Occupancy	45,731.	35,774.	4,805.	5,152.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	14,516.	10,113.	2,516.	1,887.
23 Insurance	12,320.	8,983.	1,610.	1,727.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a PROFESSIONAL SERVICES	119,715.	113,605.	2,948.	3,162.
b TRANSACTION ASSISTANCE	73,468.	73,468.	0.	0.
c EDUCATION & OUTREACH	41,249.	39,182.	625.	1,442.
d EVENTS	38,690.	0.	0.	38,690.
e GLEN LEVEN ESTATE PROPE	32,249.	32,249.	0.	0.
f All other expenses	89,014.	62,306.	3,069.	23,639.
25 Total functional expenses. Add lines 1 through 24f	1,105,024.	821,010.	99,523.	184,491.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,651,753.	1	1,686,120.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	65,197.	3	165,918.
	4 Accounts receivable, net	3,252.	4	95,065.
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	17,001.	9	15,696.
	10a Land, buildings, and equipment: cost basis ... 10a 6,018,896.			
	b Less: accumulated depreciation. Complete Part VI of Schedule D ... 10b 54,932.	5,974,507.	10c	5,963,964.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	5,051.	15	11,540.
16 Total assets. Add lines 1 through 15 (must equal line 34)	7,716,761.	16	7,938,303.	
Liabilities	17 Accounts payable and accrued expenses	36,388.	17	28,391.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D	5,051.	25	11,540.
	26 Total liabilities. Add lines 17 through 25	41,439.	26	39,931.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	2,760,805.	27	2,695,890.
	28 Temporarily restricted net assets	4,914,517.	28	5,202,482.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	7,675,322.	33	7,898,372.
	34 Total liabilities and net assets/fund balances	7,716,761.	34	7,938,303.

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b	Were the organization's financial statements audited by an independent accountant?	X	
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b	If "Yes," did the organization undergo the required audit or audits?		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

THE LAND TRUST FOR TENNESSEE, INC.

Employer identification number

62-1770549

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

The organization is not a private foundation because it is: (Please check only **one** organization.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete the Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? _____
- (ii) A family member of a person described in (i) above? _____
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? _____
- h Provide the following information about the organizations the organization supports.

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule A (Form 990 or 990-EZ) 2008

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	627,853.	550,428.	4603671.	1826120.	1205685.	8813757.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 - 3	627,853.	550,428.	4603671.	1826120.	1205685.	8813757.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4.						8813757.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	627,853.	550,428.	4603671.	1826120.	1205685.	8813757.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	5,166.	18,242.	36,370.	49,780.	17,200.	126,758.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						8940515.
12 Gross receipts from related activities, etc. (see instructions)					12	853,158.

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	98.58	%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	98.99	%
16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>			
b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
b 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 <input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>			

Schedule A (Form 990 or 990-EZ) 2008

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.)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 - 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3% support tests - 2008. 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 - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

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

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

2008

Name of the organization

THE LAND TRUST FOR TENNESSEE, INC.

Employer identification number

62-1770549

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

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

General Rule

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

Special Rules

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

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

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

Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions
for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization

Employer identification number

THE LAND TRUST FOR TENNESSEE, INC.

62-1770549

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	I : : (\$ 84,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	I : : I	\$ 74,600.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	I : : I	\$ 60,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	I : : I	\$ 36,603.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	I : : I	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	I : : I	\$ 41,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

THE LAND TRUST FOR TENNESSEE, INC.

62-1770549

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

► **To be completed by organizations described below.**

► **Attach to Form 990 or Form 990-EZ.**

OMB No. 1545-0047

2008

**Open to Public
Inspection**

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

THE LAND TRUST FOR TENNESSEE, INC.

Employer identification number

62-1770549

Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.

See the instructions for Schedule C for details.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures ► \$ **0.**

3 Volunteer hours

Part I-B To be completed by all organizations exempt under section 501(c)(3).

See the instructions for Schedule C for details.

1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$ **0.**

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► \$ **0.**

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).

See the instructions for Schedule C for details.

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527
exempt function activities ► \$

3 Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and enter here and on
Form 1120-POL, line 17b ► \$

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made.
Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and
promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC).
If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

- A** Check ☐ if the filing organization belongs to an affiliated group.
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)			
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)			
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 25% of line 1f)			
h Subtract line 1g from line 1a. Enter -0- if line g is more than line a			
i Subtract line 1f from line 1c. Enter -0- if line f is more than line c			
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			

☐ Yes ☐ No
4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2008

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a	Volunteers?	X		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c	Media advertisements?		X	
d	Mailings to members, legislators, or the public?		X	
e	Publications, or published or broadcast statements?		X	
f	Grants to other organizations for lobbying purposes?		X	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X		784.
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		X	
i	Other activities? If "Yes," describe in Part IV		X	
j	Total lines 1c through 1i			784.
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		
		4	
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5	

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ 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.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

THE LAND TRUST FOR TENNESSEE, INC.

Employer identification number

62-1770549

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

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

<input checked="" type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input checked="" type="checkbox"/> Preservation of an historically important land area
<input checked="" type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input checked="" type="checkbox"/> Preservation of open space	

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

	Held at the End of the Year
a Total number of conservation easements	2a 122
b Total acreage restricted by conservation easements	2b 36,406.00
c Number of conservation easements on a certified historic structure included in (a)	2c 0
d Number of conservation easements included in (c) acquired after 8/17/06	2d 0

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ 0

4 Number of states where property subject to conservation easement is located ▶ 1

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

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ 510

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ 15,818.

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$
(ii) Assets included in Form 990, Part X	▶ \$

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

a Revenues included in Form 990, Part VIII, line 1	▶ \$
b Assets included in Form 990, Part X	▶ \$

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

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

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations

- d ☐ Loan or exchange programs
 e ☐ Other _____

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV 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.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

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

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	

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

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

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	614,669.				
b Contributions	102,065.				
c Investment earnings or losses	6,290.				
d Grants or scholarships					
e Other expenditures for facilities and programs	18,000.				
f Administrative expenses					
g End of year balance	705,024.				

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ☒ 100.00 %
 b Permanent endowment ☐ .00 %
 c Term endowment ☐ .00 %

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

(i) unrelated organizations

(ii) related organizations

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

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land	5,924,471.			5,924,471.
b Buildings				
c Leasehold improvements				
d Equipment	94,425.		54,932.	39,493.
e Other				
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				5,963,964.

Schedule D (Form 990) 2008

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,328,074.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,105,024.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	223,050.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4-8	9	0.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	223,050.

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

1	Total revenue, gains, and other support per audited financial statements	1	1,406,509.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	78,435.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	78,435.
3	Subtract line 2e from line 1	3	1,328,074.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	1,328,074.

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

1	Total expenses and losses per audited financial statements	1	1,183,459.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	78,435.
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	78,435.
3	Subtract line 2e from line 1	3	1,105,024.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	1,105,024.

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; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

PART II, LINE 5: EASEMENT MONITORING:

MONITORING IS THE REGULAR AND SYSTEMATIC GATHERING OF INFORMATION ABOUT A CONSERVED PROPERTY TO DETECT CHANGES AND TO ENSURE THAT THE PROPERTY IS BEING USED IN ACCORDANCE WITH THE RESTRICTIONS PLACED ON IT AND/OR MANAGEMENT PLAN. EACH PROPERTY, WHETHER PROTECTED BY A CONSERVATION EASEMENT OR OWNED BY LTTN (THE LAND TRUST FOR TENNESSEE), WILL BE MONITORED AT LEAST ONCE ANNUALLY IN A MANNER APPROPRIATE TO THE SIZE AND RESTRICTIONS OF THE PROPERTY. MONITORS MAY INCLUDE LTTN STAFF, BOARD OR

Part XIV Supplemental Information (continued)

COMMITTEE MEMBERS, TRAINED VOLUNTEERS AND RELEVANT PROFESSIONALS.

AT THE BEGINNING OF EACH CALENDAR YEAR, LTTN SENDS A LETTER TO EACH LANDOWNER NOTIFYING THEM OF THE UPCOMING MONITORING SEASON.

THE MONITOR FOLLOWS THE FOLLOWING BASIC STEPS FOR THE MONITORING VISIT:

1. CONTACT THE LANDOWNER TO INFORM HIM/HER OF THE VISIT AND TO INVITE THEM TO ACCOMPANY THE MONITOR.

2. PRIOR TO THE VISIT, REVIEW THE BASELINE DOCUMENTATION REPORT, PAST MONITORING REPORTS AND THE CONSERVATION EASEMENT OR THE MANAGEMENT PLAN, WHICHEVER IS APPLICABLE.

3. COMPLETE THE SUMMARY OF CONSERVATION EASEMENT FORM AND BRING THIS ON THE SITE VISIT TO USE AS A REFERENCE.

4. COMPLETE THE MONITORING PRE-VISIT CHECKLIST.

5. IF THE MONITOR IS A VOLUNTEER, COMPLETE THE STEWARDSHIP MONITOR RELEASE FORM.

6. INSPECT THE CONSERVED PROPERTY, EITHER FROM THE AIR OR ON THE GROUND. WHILE INSPECTING, TAKE NOTES AND PHOTOGRAPHS AND COMPLETE THE BASELINE PHOTOGRAPH INVENTORY FORM.

7. FILL OUT A STEWARDSHIP SITE VISIT MONITORING FORM PROVIDING A WRITTEN DOCUMENTATION OF WHAT WAS SEEN AND FILE IN THE PERMANENT STEWARDSHIP FILE.

8. COMPLETE THE STEWARDING POST-VISIT CHECKLIST.

IF NO ACTIVITIES THAT CONFLICT WITH THE CONSERVATION EASEMENT WERE FOUND ON THE MONITORING SITE VISIT, THEN A LAND PROTECTION STAFF MEMBER SENDS THE LANDOWNER A MONITORING COMPLIANCE LETTER.

IF THERE IS A SUSPECTED VIOLATION OF THE CONSERVATION EASEMENT, THEN THE FOLLOWING ENFORCEMENT OF EASEMENTS PROCEDURES ARE FOLLOWED.

ENFORCEMENT OF EASEMENTS:

LTTN IS COMMITTED TO PROTECTING THE CONSERVATION VALUES AND PURPOSES

Part XIV Supplemental Information (continued)

EMBODIED IN ITS CONSERVATION EASEMENTS. AS A GENERAL RULE, AND AT THE DISCRETION OF THE BOARD OF DIRECTORS, LTTN WILL ENFORCE THE TERMS OF ITS CONSERVATION EASEMENTS AND, CONSISTENT WITH SUCH TERMS, SEEK TO REMEDY VIOLATIONS THEREOF IN ORDER TO, AMONG OTHER THINGS, PROTECT THE CONSERVATION VALUES OF THE LAND, MAINTAIN PUBLIC CONFIDENCE IN LTTN'S MISSION, SUPPORT LTTN'S LEGAL AUTHORITY TO ENFORCE THE TERMS OF OTHER CONSERVATION EASEMENTS, PRESERVE THE TAX DEDUCTIBILITY OF DONATED EASEMENTS, AND MAINTAIN LTTN'S TAX-EXEMPT STATUS AS A CHARITABLE ORGANIZATION. IN CONNECTION WITH A STEWARD'S MONITORING OF A CONSERVATION EASEMENT, ANY SUSPECTED VIOLATION OF THE TERMS OF A CONSERVATION EASEMENT SHOULD BE RECORDED ON THE FORM AND IMMEDIATELY REPORTED TO THE STEWARDSHIP COORDINATOR. VIOLATIONS MAY ALSO BE REPORTED BY A RANDOM STAFF OBSERVATION OR BY AN UNRELATED THIRD PARTY, SUCH AS A NEIGHBOR, LOCAL GOVERNMENT AGENCY, OR OTHER COMMUNITY ORGANIZATION.

1. SUSPECTED VIOLATIONS, INCLUDING A DETAILED DESCRIPTION THEREOF, SHOULD BE RECORDED BY THE MONITORING STEWARD OR LTTN STAFF MEMBER RECEIVING NOTICE THEREOF. THE STEWARD OR STAFF MEMBER SHOULD, TO THE EXTENT POSSIBLE, DISCERN AND DOCUMENT WHETHER THE SUSPECTED VIOLATION HAS BEEN CAUSED BY THE LANDOWNER OR SOME OTHER PERSON. THE MONITORING STEWARD SHOULD REFRAIN FROM DISCUSSING THE SUSPECTED VIOLATION WITH THE LANDOWNER.

2. THE MONITORING STEWARD OR STAFF PERSON SHOULD IMMEDIATELY REPORT THE SUSPECTED VIOLATION TO THE STEWARDSHIP COORDINATOR, WHO, IN TURN, SHOULD IMMEDIATELY INFORM THE EXECUTIVE DIRECTOR AND OTHER APPROPRIATE MEMBERS OF LTTN STAFF.

3. THE STEWARDSHIP COORDINATOR OR DESIGNATED STAFF MEMBER THEN CONSULTS THE ORIGINAL TERMS OF THE CONSERVATION EASEMENT AND EVALUATES THE DOCUMENTATION REGARDING THE SUSPECTED VIOLATION. IN THE CASE OF A

Part XIV Supplemental Information (continued)

NON-STEWARD OBSERVER, THE STEWARDSHIP COORDINATOR SHOULD SCHEDULE A MONITORING VISIT WITH THE LANDOWNER TO INSPECT THE SITE OF THE SUSPECTED VIOLATION AND TAKE PHOTOGRAPHS (IF THE ONLY PHOTOGRAPHS TAKEN ARE DIGITAL, THEN THEY MAY NOT BE ACCEPTED IN COURT.) THIS PHYSICAL INSPECTION SHOULD BE PERFORMED BY THE STEWARDSHIP COORDINATOR, LAND PROTECTION DIRECTOR, EXECUTIVE DIRECTOR, A BOARD MEMBER, OR ANY COMBINATION THEREOF.

4. ALL DOCUMENTATION OF THE SUSPECTED VIOLATION (INCLUDING PHOTOGRAPHS, IF ANY) SHOULD BE RECORDED IN LTTN'S STEWARDSHIP FILES RELATING TO THE AFFECTED CONSERVATION EASEMENT.

5. UNLESS IT IS CLEAR THAT NO VIOLATION OF THE CONSERVATION EASEMENT HAS OCCURRED, THE STEWARDSHIP COORDINATOR WILL THEN DISCUSS POTENTIAL RESOLUTIONS WITH OTHER STAFF MEMBERS. IN ADDITION, THE LAND PROTECTION STAFF MAY DISCUSS POTENTIAL RESOLUTIONS WITH THE STEWARDSHIP COMMITTEE WHEN APPROPRIATE.

6. THE STEWARDSHIP COORDINATOR WILL CONTACT THE LANDOWNER BY TELEPHONE TO EXPLAIN THE PROBLEM AND REQUEST A CORRECTION, REPLACEMENT AND/OR CESSATION OF ACTIVITY. THE LANDOWNER WILL BE GIVEN AN APPROPRIATE DEADLINE FOR COMPLIANCE AND NOTIFIED THAT A LETTER SUMMARIZING THE CONVERSATION WILL BE SENT IMMEDIATELY.

7. A FOLLOW-UP LETTER IS SENT TO THE LANDOWNER REITERATING ORAL EXPLANATIONS, REQUESTS AND THE COMPLIANCE DEADLINE. ALL CORRESPONDENCE RELATED TO A SUSPECTED VIOLATION SHOULD BE SENT CERTIFIED MAIL, RETURN RECEIPT REQUESTED WITH A COPY SENT TO LTTN'S ATTORNEY.

8. ON THE DAY OF THE COMPLIANCE DEADLINE, THE SITE OF THE VIOLATION WILL BE INSPECTED FOR COMPLIANCE BY THE STEWARDSHIP COORDINATOR OR EXECUTIVE DIRECTOR. IF THE VIOLATION HAS BEEN CORRECTED, THEN LTTN SENDS AN OFFICIAL LETTER TO THE LANDOWNER STATING THAT THE COMPLIANCE IS

Part XIV Supplemental Information (continued)

RECOGNIZED AND THANKING THEM FOR THEIR COOPERATION. IF THE VIOLATION HAS NOT BEEN RECTIFIED, THEN A SECOND LETTER IS SENT TO THE LANDOWNER

RESTATING THE REQUIRED CORRECTION AND ESTABLISHING A NEW COMPLIANCE

DEADLINE DATE. LTTN'S ATTORNEY SHOULD BE COPIED ON THIS LETTER AS WELL.

9.ON THE SECOND DEADLINE DATE, THE STEWARDSHIP COORDINATOR OR EXECUTIVE

DIRECTOR WILL RE-INSPECT THE SITE OF THE VIOLATION. IF COMPLIANCE IS

ACHIEVED THEN LTTN WILL SEND THE OFFICIAL LETTER TO THE LANDOWNER STATING

THAT THE COMPLIANCE IS RECOGNIZED AND THANKING THEM FOR THEIR

COOPERATION. IF ON THE SECOND DEADLINE, THE LANDOWNER REMAINS

NON-COMPLIANT, THEN LTTN'S LEGAL COUNSEL AND THE STEWARDSHIP COMMITTEE

ARE CONTACTED TO DISCUSS POTENTIAL LEGAL ACTION.

10.WITH THE ADVICE OF LTTN'S LEGAL COUNSEL AND APPROVAL BY THE

STEWARDSHIP COMMITTEE, LTTN MAY CONSIDER ENFORCEMENT OF THE EASEMENT

THROUGH MEDIATION, ARBITRATION, LITIGATION, OR OTHER MEANS CONSISTENT

WITH THE TERMS OF THE CONSERVATION EASEMENT. LTTN'S RESPONSE TO A

VIOLATION SHOULD MATCH THE SEVERITY OF THE VIOLATION.

11.UNLESS OTHERWISE SPECIFIED BY THE BOARD OF DIRECTORS, LTTN'S EXECUTIVE

DIRECTOR WILL ACT AS SPOKESPERSON WITH RESPECT TO THE VIOLATION WHEN AND

IF THE MEDIA IS INVOLVED.

THE FOREGOING NOTWITHSTANDING, ANY DETERMINATION REGARDING WHETHER AND

HOW TO ENFORCE A CONSERVATION EASEMENT IS WITHIN THE DISCRETION OF LTTN'S

BOARD OF DIRECTORS, WHICH DISCRETION MAY BE EXERCISED ON A CASE-BY-CASE

BASIS.

PART II, LINE 9: THE LAND TRUST FOR TENNESSEE VALUES EASEMENTS AT ZERO.

A CONSERVATION EASEMENT PROVIDES THE LAND TRUST WITH NO AFFIRMATIVE RIGHTS

EXCEPT TO MONITOR AND ENFORCE THE EASEMENT.

FINANCIAL STATEMENT FOOTNOTE: CONSERVATION EASEMENTS HELD BY THE

Part XIV Supplemental Information (continued)

ORGANIZATION ARE NOT RECOGNIZED AS ASSETS IN THE ACCOMPANYING FINANCIAL STATEMENTS. ASSETS ARE DEFINED AS PROBABLE FUTURE ECONOMIC BENEFITS OBTAINED OR CONTROLLED BY AN ENTITY; THE ORGANIZATION DOES NOT BELIEVE THAT THE EASEMENTS MEET THE DEFINITION CRITERIA. THE COST OF OBTAINING CONSERVATION EASEMENTS IS EXPENSED WHEN THE EASEMENT IS ACQUIRED.

PART V, LINE 4: USE OF QUASI-ENDOWMENT: STEWARDSHIP FUNDS

1.ANNUAL MONITORING OF THE PROPERTY UNDER EASEMENT HELD BY THE LAND TRUST FOR TENNESSEE; EXAMPLES OF EXPENSES INCLUDE STAFF TRAVEL AND TIME, EXPENSE REIMBURSEMENTS, PHOTOGRAPHY, MAPPING, ADMINISTRATION, ASSOCIATED FOLLOW-UP REPORTS AND CORRESPONDENCE, AND MAINTAINING UP-TO-DATE RECORDS;

2.PREVENTIVE MEASURES, IN ADDITION TO MONITORING, SUCH AS ORIENTATION MEETINGS WITH NEW LANDOWNERS, SURVEYS, BOUNDARY MARKING AND ACTIVE MANAGEMENT REQUIRED TO PROTECT THE CONSERVATION VALUES OF THE PROPERTY;

3.APPROVAL OF SPECIAL ACTIONS, WHICH MAY INCLUDE THE REVIEW OF THE LOCATION OF PERMITTED STRUCTURES, LANDSCAPE ALTERATIONS, EXERCISE OF OTHER RIGHTS RESERVED BY THE OWNER, RESPONSE TO REQUESTS FOR INTERPRETATION OF EASEMENT TERMS, OR ENTERTAINING PROPOSALS BY OWNERS TO AMEND EASEMENT PROVISIONS.

IN ADDITION TO ANNUAL INCOME, THE PRINCIPAL OF THE STEWARDSHIP FUND CAN BE MADE AVAILABLE FOR ENFORCEMENT EXPENSES WITH APPROVAL OF THE BOARD OF DIRECTORS. ENFORCEMENT EXPENSES, PRIMARILY LEGAL FEES AND COURT COSTS, IN THE UNLIKELY EVENT THAT REMEDIAL MEASURES OR LEGAL ACTION ARE NEEDED TO CORRECT A MISUNDERSTANDING OR A WILLFUL VIOLATION.

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ.** Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

2008

Open To Public Inspection

Name of the organization

THE LAND TRUST FOR TENNESSEE, INC.

Employer identification number
62-1770549

Part I	Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.	
---------------	---	--

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☐ Mail solicitations
- b ☐ Email solicitations
- c ☐ Phone solicitations
- d ☐ In-person solicitations
- e ☐ Solicitation of non-government grants
- f ☐ Solicitation of government grants
- g ☐ Special fundraising events

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☒ No

- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total						

- 3** List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col. (a) through col. (c))
		ONCE IN A BLUE MOON (event type)	(event type)	NONE (total number)	
Revenue	1 Gross receipts	202,295.			202,295.
	2 Less: Charitable contributions	15,800.			15,800.
	3 Gross revenue (line 1 minus line 2)	186,495.			186,495.
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs				
	7 Other direct expenses	81,306.			81,306.
	8 Direct expense summary. Add lines 4 through 7 in column (d)				(81,306.)
	9 Net income summary. Combine lines 3 and 8 in column (d)				105,189.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
Revenue	1 Gross revenue				
	Direct Expenses	2 Cash prizes			
		3 Non-cash prizes			
		4 Rent/facility costs			
		5 Other direct expenses			
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No _____ %	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No _____ %	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No _____ %		
7 Direct expense summary. Add lines 2 through 5 in column (d)				()	
8 Net gaming income summary. Combine lines 1 and 7 in column (d)					

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states? _____

b If "No," Explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? _____

b If "Yes," Explain: _____

11 Does the organization operate gaming activities with nonmembers? _____

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? _____

	Yes	No
9a		
10a		
11		
12		

			Yes	No
13 Indicate the percentage of gaming activity operated in:				
a	The organization's facility	13a %		
b	An outside facility	13b %		
14 Provide the name and address of the person who prepares the organization's gaming/special events books and records:				
Name ►				
Address ►				
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?			15a	
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$			
c	If "Yes," enter name and address:			
Name ►				
Address ►				
16 Gaming manager information:				
Name ►				
Gaming manager compensation ► \$				
Description of services provided ►				
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor				
17 Mandatory distributions:				
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$			

Schedule G (Form 990 or 990-EZ) 2008

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Open to Public Inspection

Employer Identification number
62-1770549

[illegible]

Schedule J-2 (Form 990) 2008

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Attach to Form 990 or Form 990-EZ.
▶ To be completed by organizations that answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, lines 38a or 40b.

OMB No. 1545-0047

2008
Open To Public
Inspection

Name of the organization

THE LAND TRUST FOR TENNESSEE, INC.

Employer identification number
62-1770549

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

▶ \$
▶ \$

Part II Loans to and/or From Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No

Total ▶ \$

Part III Grants or Assistance Benefiting Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
JULIAN BIBB	DIRECTOR OF ORGANIZ	107,315.	AGGREGATE P		X

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule L (Form 990 or 990-EZ) 2008

SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

▶ To be completed by organizations that answered
"Yes" on Form 990, Part IV, lines 29 or 30.

▶ Attach to Form 990.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

THE LAND TRUST FOR TENNESSEE, INC.

Employer identification number

62-1770549

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	5	32,186.	VALUE OF STOCK
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation contribution (other) ..	X	16	0.	N/A
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X	13	14,675.	COST OF ITEMS
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (.....				
26 Other ▶ (.....				
27 Other ▶ (.....				
28 Other ▶ (.....				

29 Number of Forms 8283 received by the organization during the tax year for contributions
for which the organization completed Form 8283, Part IV, Donee Acknowledgment

29

11

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for
at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for
the entire holding period?

	Yes	No
30a		X

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31	X	
----	---	--

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

32a		X
-----	--	---

b If "Yes," describe in Part II.

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,
describe in Part II.

--	--	--

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2008

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

THE LAND TRUST FOR TENNESSEE, INC.

Employer identification number

62-1770549

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

GENERATIONS.

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

ACCOMPLISHMENTS:

WE PROTECTED OVER 10,000 ACRES BY COMPLETING 21 PROJECTS FOR THE PUBLIC GOOD OF SCENIC OPEN SPACE, HISTORICALLY SIGNIFICANT, AGRICULTURAL LANDS AND NATURAL RESOURCES PRIMARILY THROUGH CONSERVATION EASEMENTS FOR A TOTAL TO DATE OF OVER 42,000 ACRES. THESE WERE PROTECTED THROUGH THE ACCEPTANCE AND STEWARDSHIP OF PERMANENT CONSERVATION EASEMENTS AND WORKING WITH PARTNER ORGANIZATIONS ON REAL PROPERTY ACQUISITIONS. WE EXPANDED OUR LAND PROTECTION EFFORTS AND NOW HAVE PROTECTED LAND IN 6 NEW COUNTIES, FOR A TOTAL OF 38 COUNTIES THROUGHOUT THE STATE. LANDS PROTECTED INCLUDE:

OVER 2,700 ACRES OF FARMLAND LOCATED IN SEVEN COUNTIES.

OVER 6,800 ACRES OF WORKING FORESTLAND AND CRITICAL WILDLIFE HABITAT THROUGHOUT THE STATE INCLUDING KEY ADDITIONS TO OUR STATE NATURAL AREAS AND PARKS, SAVAGE GULF AND FIERY GIZZARD

A 680-ACRE PUBLIC NATURE PARK IN FAIRVIEW, WILLIAMSON COUNTY

THE COMPLETION OF OUR FIRST PROJECT IN CONJUNCTION WITH THE DEPARTMENT OF DEFENSE ARMY COMPATIBLE USE BUFFER (ACUB) PROGRAM: A 246 ACRE WORKING FARM BORDERING FORT CAMPBELL ARMY BASE IN CLARKSVILLE, TN.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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Open to Public
Inspection

Name of the organization

THE LAND TRUST FOR TENNESSEE, INC.

Employer identification number
62-1770549

THE COMPLETION OF OUR SECOND CONSERVATION EASEMENT USING FUNDS FROM
USDA'S FEDERAL FARM AND RANCHLAND PROTECTION PROGRAM: 68 ACRES OF
RIVER-BOTTOM LAND ALONG THE DESIGNATED STATE SCENIC HIWASSEE RIVER IN
HISTORIC RELIANCE, TN.

OVER 25 MILES OF RIVER AND STEAM FRONTAGE IN THE FOLLOWING CRITICAL
WATERSHEDS: ELK RIVER, TENNESSEE RIVER, OBEY RIVER, HIWASSEE RIVER,
OCOEE RIVER, DUCK RIVER, HARPETH RIVER, RED RIVER

WE PARTICIPATED IN THE MAYOR'S GREEN RIBBON COMMITTEE FOR
NASHVILLE-DAVIDSON COUNTY. THIS ENVIRONMENTAL SUSTAINABILITY COMMITTEE
"WAS CREATED TO ASSURE THAT NASHVILLE CONTINUES TO BE A LIVABLE CITY
WITH CLEAN AIR, CLEAN WATER, OPEN SPACES, TRANSPORTATION INFRASTRUCTURE
AND AN ENERGY USE PROFILE NECESSARY TO PROVIDE A PROSPEROUS COMMUNITY
FOR CURRENT AND FUTURE GENERATIONS".

WE DEDICATED PART-TIME STAFF AND A STRONG VOLUNTEER BASE TO A NORTHEAST
TENNESSEE INITIATIVE KNOWN AS "THE LANDS OF BOONE AND CROCKETT" TO
PROTECT CRITICAL FARMLANDS AND HISTORIC LANDSCAPES IN THIS REGION OF
THE STATE.

OUR STAFF ESTABLISHED ADVISORY GROUPS IN TWO NEW PROJECT AREAS: LANDS
OF BOONE AND CROCKETT AND SUMNER COUNTY AND CONTINUED TO WORK WITH OUR
ADVISORY GROUPS IN THE SOUTH CUMBERLAND AND SOUTHEAST REGIONS.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

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Inspection

THE LAND TRUST FOR TENNESSEE, INC.

Employer identification number
62-1770549

IN NOVEMBER, 2008, AFTER MONTHS OF WORK, WE SUBMITTED OUR ACCREDITATION APPLICATION TO THE LAND TRUST ALLIANCE ACCREDITATION COMMISSION. IN AUGUST, 2009, THE LAND TRUST FOR TENNESSEE BECAME ACCREDITED.

ACCREDITATION PROVIDES PUBLIC RECOGNITION OF LAND TRUSTS THAT ARE ENGAGED IN THE LONG-TERM PROTECTION OF THE LAND IN THE PUBLIC INTEREST, INCREASING PUBLIC AWARENESS OF, AND CONFIDENCE IN, LAND TRUSTS AND LAND CONSERVATION.

WE ADDED A PROJECT MANAGER FOR MIDDLE TENNESSEE TO OUR STAFF TO FOCUS ON LAND PROTECTION AND PLANNING IN DAVIDSON COUNTY AND THE SURROUNDING COUNTIES.

OUR STAFF PARTICIPATED IN THE FOLLOWING WORKING GROUPS: USDA-NRCS TECHNICAL COMMITTEE, TENNESSEE WATER GROUPS, FARMLAND LEGACY GROUP, FOREST LEGACY COMMITTEE, STATE RECREATION PLAN COMMITTEE, TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION REGIONAL PLANNING FOR WATER RESOURCES COMMITTEE, AND THE STATE FOREST RESOURCE ASSESSMENT STEERING COMMITTEE.

WE CO-HOSTED THE FIRST ANNUAL FARMLAND LEGACY CONFERENCE, THE FIRST CONFERENCE IN TENNESSEE TO BRING TOGETHER NON-PROFITS, LANDOWNERS, GOVERNMENT AGENCIES AND LOCAL OFFICIALS TO DISCUSS LONG-TERM FARMLAND PRESERVATION.

WE INTENSIFIED OUR WORK ON THE CUMBERLAND PLATEAU TO PROTECT THE CRITICAL RESOURCES OF THE SOUTHERN CUMBERLAND PLATEAU AND EXPANDED OUR

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Internal Revenue Service

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Name of the organization

THE LAND TRUST FOR TENNESSEE, INC.

Employer identification number

62-1770549

WORK INTO THE NORTHERN PLATEAU.

WE PARTICIPATED IN OVER 50 SPEAKING ENGAGEMENTS AROUND THE STATE TO
EDUCATE LANDOWNERS, COMMUNITY MEMBERS AND PROFESSIONALS AND OFFICIALS
ABOUT THE LAND TRUST FOR TENNESSEE AND CONSERVATION METHODS AND
OPPORTUNITIES.

THIS YEAR WE PROVIDED INDIVIDUAL LAND CONSERVATION EDUCATION TO
APPROXIMATELY 500 LANDOWNERS INTERESTED IN PROTECTING THEIR LANDS
THROUGH PROVIDING EDUCATIONAL MATERIALS AND/OR INDIVIDUAL ON-SITE
MEETINGS AND CONSULTATIONS.

OUR STAFF TRAINED APPROXIMATELY 25 VOLUNTEERS, INCLUDING 8 GRADUATE AND
UNDERGRADUATE INTERNS, IN LAND CONSERVATION EFFORTS INVOLVING THE
PERMANENT PROTECTION OF LAND. THESE VOLUNTEERS AND INTERNS ARE
ESSENTIAL MEMBERS OF OUR LAND PROTECTION AND LEGAL TEAMS AND PROVIDE
OTHER SUPPORT FOR EACH INDIVIDUAL LAND PROTECTION PROJECT AS WELL AS
OUR ANNUAL MONITORING VISITS.

THE LAND TRUST FOR TENNESSEE CONTINUED ITS INITIATIVE TO DETERMINE THE
FUTURE CONSERVATION PLANS FOR THE GLEN LEVEN PROPERTY. THIS PROPERTY
WAS LEFT TO THE LAND TRUST IN NOVEMBER 2006 BY WILL AND IS A HISTORIC
1857 HOME AND 65 ASSOCIATED ACRES IN THE HEART OF DAVIDSON COUNTY.

WE CONTINUED WORKING WITH PARTNERS INCLUDING THE THE HERITAGE
FOUNDATION OF FRANKLIN AND WILLIAMSON COUNTY, CUMBERLAND REGION

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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Name of the organization

THE LAND TRUST FOR TENNESSEE, INC.

Employer identification number
62-1770549

TOMORROW, NATURAL RESOURCES CONSERVATION SERVICE, TENNESSEE FARM
BUREAU, TENNESSEE PRESERVATION TRUST, THE NATIONAL PARK SERVICE, UT
AGRICULTURAL INSTITUTE, THE DEPARTMENT OF AGRICULTURE, MIDDLE
TENNESSEE STATE® CENTER FOR HISTORIC PRESERVATION, APPALACHIAN
RESOURCE CONSERVATION AND DEVELOPMENT COUNCIL, FOOD SECURITY PARTNERS,
SLOW FOOD, THE BATTLE OF NASHVILLE PRESERVATION SOCIETY, THE FRIENDS OF
WARNER PARKS, THE CONSERVATION FUND, THE FRIENDS OF THE SOUTH
CUMBERLAND RECREATION AREA, GILES COUNTY FARMLAND TRUST, THE FRIENDS OF
BOWIE PARK, THE UNIVERSITY OF THE SOUTH, FORT CAMPBELL, THE TN LAND
TRUST NETWORK, AND VARIOUS LOCAL WATERSHED ORGANIZATIONS TO FORWARD
WATER QUALITY, FARMLAND AND HISTORIC PRESERVATION AND EDUCATION
THROUGHOUT TENNESSEE.

OUR ORGANIZATION ACTIVELY PROMOTED, FOR THE BENEFIT OF THE GENERAL
PUBLIC, THE IMPORTANCE OF CONSERVATION AND THE ENHANCEMENT OF NATURAL
AND CULTURAL RESOURCES IN TENNESSEE.

FORM 990, PART VI, SECTION A, LINE 2: TWO OF OUR DIRECTORS WORK FOR THE
SAME LAW FIRM, ONE OF WHICH IS A PARTNER IN THE FIRM AND THE OTHER DIRECTOR
IS "OF COUNSEL".

FORM 990, PART VI, SECTION A, LINE 10: UPON RECEIPT OF THE FINAL FORM 990
IN ITS ENTIRETY FROM OUR TAX PREPARER, THE FINANCE/AUDIT COMMITTEE REVIEWS
AND RECOMMENDS APPROVAL TO THE FULL BOARD OF DIRECTORS. THE FORM 990 IS
THEN UPLOADED TO OUR WEBSITE ON A PASSWORD ENCRYPTED WEBPAGE AND
CORRESPONDENCE IS SENT TO THE ENTIRE BOARD ABOUT ITS AVAILABILITY FOR THEIR

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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SCHEDULE O
(Form 990)

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Supplemental Information to Form 990

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Name of the organization

THE LAND TRUST FOR TENNESSEE, INC.

Employer identification number

62-1770549

REVIEW. TEN DAYS AFTER FORM 990'S AVAILABILITY FOR BOARD MEMBER REVIEW,
THE RETURN IS FILED WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C: EACH YEAR STAFF, BOARD MEMBERS AND
VOLUNTEERS FILL OUT A FORM DISCLOSING ANY OF THEIR RELATED PARTIES OR
POTENTIAL CONFLICTS OF INTEREST AND THAT THEY HAVE A CLEAR UNDERSTANDING OF
THE ORGANIZATION'S CONFLICT OF INTEREST POLICY. ALSO, EACH STAFF MEMBER,
BOARD MEMBER AND VOLUNTEER IS EXPECTED TO DISCLOSE EITHER TO THE BOARD
CHAIRMAN OR THE EXECUTIVE DIRECTOR ANY EXISTENCE OF ANY POTENTIAL CONFLICT
OF INTEREST, TO ABSTAIN FROM PARTICIPATION OF ANY OF THE LAND TRUST'S
DISCUSSIONS, TO ABSTAIN FROM WORKING ON THE TRANSACTION AND FROM VOTING ON
THE TRANSACTION OR PROJECT GIVING RISE TO SUCH CONFLICT OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15: ON AN ANNUAL BASIS IN THE SECOND
QUARTER OF THE FISCAL YEAR, EACH EMPLOYEE IS FORMALLY REVIEWED BY THEIR
SUPERVISOR. EACH SUPERVISOR THEN CONVEYS THE RESULTS OF THE REVIEW TO
THEIR SUPERVISOR. AT THE END OF THIS PROCESS FOR ALL EMPLOYEES, THE
PRESIDENT AND EXECUTIVE DIRECTOR PRESENTS TO THE EXECUTIVE COMMITTEE THE
SALARY HISTORY AND VERBAL REVIEW SUMMATIONS FOR ALL EMPLOYEES. ALONG WITH
THE ORGANIZATION'S SALARY AND BENEFIT HISTORY THE LATEST SURVEY OF THE SAME
CONDUCTED BY THE INDUSTRY, NAMELY THE LAND TRUST ALLIANCE, IS ALSO
PRESENTED ALONG WITH AN ANALYSIS OF HOW EACH EMPLOYEE INCLUDING THE
EXECUTIVE DIRECTOR'S SALARY AND BENEFITS COMPARES TO THE NATION AS A WHOLE
AND BY REGION. AS REQUESTED FURTHER DETAILS ARE PROVIDED TO THE EXECUTIVE
COMMITTEE FOR THEIR REVIEW. IN CONJUNCTION, THE FINANCE COMMITTEE CONVEYS
TO THE EXECUTIVE COMMITTEE THE AVAILABILITY OF ANY FUNDS FOR DISTRIBUTION

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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SCHEDULE O
(Form 990)

Department of the Treasury
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Supplemental Information to Form 990

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Employer identification number
62-1770549

FOR RAISES, BONUSES OR CHANGES IN BENEFITS. AT THE CONCLUSION OF THE EXECUTIVE COMMITTEE MEETING, ANY CHANGES IN INDIVIDUAL SALARYS AND/OR BENEFITS ARE CONVEYED TO THE EXECUTIVE DIRECTOR FOR IMPLEMENTATION AND THEN TO THE FINANCE DIRECTOR.

FORM 990, PART VI, SECTION C, LINE 19: OUR GOVERNING DOCUMENT IF REFERRED TO AS OUR STANDARDS AND PRACTICES WHICH CONTAINS ALL OF OUR GOVERNING DOCUMENTS INCLUDING THE CONFLICT OF INTEREST POLICY. THIS DOCUMENT ALONG WITH OUR FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. IN ADDITION WE ARE MEMBERS OF THE COMMUNITY FOUNDATION OF MIDDLE TENNESSEE'S GIVING MATTERS WHERE OUR ONLINE PROFILE IS AVAILABLE TO ANYONE WHICH INCLUDES DETAILED INFORMATION ABOUT OUR ORGANIZATION INCLUDING A LIST OF OUR BOARD MEMBERS AND OUR FINANCIAL INFORMATION.

PART XI LINE 2C: THE PROCESS FOR SELECTION OF AN INDEPENDENT AUDITOR HAS NOT CHANGED FROM PRIOR YEARS.

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: JULIAN BIBB

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

DIRECTOR OF ORGANIZATION; IS A MEMBER OF LAW FIRM USED BY LAND TRUST FOR TN

(C) AMOUNT OF TRANSACTION \$ 107315.

(D) DESCRIPTION OF TRANSACTION: AGGREGATE PAYMENTS, AT SIGNIFICANTLY REDUCED RATES, ARE MADE TO THE LAW FIRM, WHICH HAS BEEN USED PRIOR TO MR. BIBB JOINING THE BOARD OF DIRECTORS (COMPLETED SERVICE 3/31/09), FOR

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

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Open to Public
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Name of the organization

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Employer identification number

62-1770549

LEGAL SERVICES RELATED PRIMARILY ON CONSERVATION EASEMENTS AND PURCHASED
TRANSACTIONS FOR FURTHERING THE MISSION OF THE ORGANIZATION AND TO A MUCH
LESSER DEGREE GENERAL COUNSELING.

(E) SHARING OF ORGANIZATION REVENUES? = NO

DRAFT

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).			
Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization		Employer identification number
	THE LAND TRUST FOR TENNESSEE, INC.		62-1770549
	Number, street, and room or suite no. If a P.O. box, see instructions. 209 10TH AVENUE SOUTH, NO. 530		For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NASHVILLE, TN 37203		

Check type of return to be filed (File a separate application for each return):

☒ Form 990
 ☐ Form 990-EZ
 ☐ Form 990-T (sec. 401(a) or 408(a) trust)
 ☐ Form 1041-A
 ☐ Form 5227
 ☐ Form 8870
☐ Form 990-BL
☐ Form 990-PF
☐ Form 990-T (trust other than above)
☐ Form 4720
☐ Form 6069

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

JANET HENDERSON

• The books are in the care of **209 10TH AVENUE SOUTH #530 - NASHVILLE, TN 37203**

Telephone No. **(615) 244-5263**

FAX No.

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **FEBRUARY 15, 2010**

5 For calendar year , or other tax year beginning **APR 1, 2008**, and ending **MAR 31, 2009**

6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension
AWAITING COMPLETION OF THE FINANCIAL STATEMENT AUDIT

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$ N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature

Title **PRESIDENT & EXECUTIVE DIRE** Date

Form 8868 (Rev. 4-2009)

**Power of Attorney
and Declaration of Representative**

▶ Type or print. ▶ See the separate instructions.

OMB No. 1545-0150

For IRS Use Only

Received by:

Name _____

Telephone _____

Function _____

Date ____/____/____

Part I Power of Attorney**Caution:** Form 2848 will not be honored for any purpose other than representation before the IRS.**1 Taxpayer information.** Taxpayer(s) must sign and date this form on page 2, line 9.

Taxpayer name(s) and address

THE LAND TRUST FOR TENNESSEE, INC.
209 10TH AVENUE SOUTH, NO. 530
NASHVILLE, TN 37203

Social security number(s)

Daytime telephone number
(615) 244-5263Employer identification
number

62-1770549

Plan number (if applicable)

hereby appoint(s) the following representative(s) as attorney(s)-in-fact

2 Representative(s) must sign and date this form on page 2, Part II.

Name and address

REBECCA HARRELL
555 GREAT CIRCLE ROAD
NASHVILLE, TN 37228

CAF No. 5000-86661R

Telephone No. 615-242-7351

Fax No. 615-782-4271

Check if new: Address ☒ Telephone No. ☐ Fax No. ☐

Name and address

EDMUND DUNLAVY
555 GREAT CIRCLE ROAD
NASHVILLE, TN 37228

CAF No. 5005-16924R

Telephone No. 615-242-7351

Fax No. 615-782-4271

Check if new: Address ☒ Telephone No. ☐ Fax No. ☐

Name and address

CAF No. _____

Telephone No. _____

Fax No. _____

Check if new: Address ☐ Telephone No. ☐ Fax No. ☐

to represent the taxpayer(s) before the Internal Revenue Service for the following tax matters:

3 Tax matters

Type of Tax (Income, Employment, Excise, etc.) or Civil Penalty (see the instructions for line 3)	Tax Form Number (1040, 941, 720, etc.)	Year(s) or Period(s) (see the instructions for line 3)
EXEMPT ORGANIZATION	990	MARCH 31, 2008

4 Specific use not recorded on Centralized Authorization File (CAF). If the power of attorney is for a specific use not recorded on CAF, check this box. See the instructions for Line 4. **Specific Uses Not Recorded on CAF.** ☐

5 Acts authorized. The representatives are authorized to receive and inspect confidential tax information and to perform any and all acts that I (we) can perform with respect to the tax matters described on line 3, for example, the authority to sign any agreements, consents, or other documents. The authority does not include the power to receive refund checks (see line 6 below), the power to substitute another representative, or additional representatives, the power to sign certain returns, or the power to execute a request for disclosure of tax returns or return information to a third party. See the line 5 instructions for more information.

Exceptions. An unenrolled return preparer cannot sign any document for a taxpayer and may only represent taxpayers in limited situations. See **Unenrolled Return Preparer** on page 1 of the instructions. An enrolled actuary may only represent taxpayers to the extent provided in section 10.3(d) of Treasury Department Circular No. 230 (Circular 230). An enrolled retirement plan administrator may only represent taxpayers to the extent provided in section 10.3(e) of Circular 230. See the line 5 instructions for restrictions on tax matters partners. In most cases, the student practitioner's (levels k and l) authority is limited (for example, they may only practice under the supervision of another practitioner).

List any specific additions or deletions to the acts otherwise authorized in this power of attorney:

TO SIGN ON BEHALF OF TAXPAYERS, PROTEST TO BE USED BEFORE APPEALS
CONFERENCE.**6 Receipt of refund checks.** If you want to authorize a representative named on line 2 to receive, **BUT NOT TO ENDORSE OR CASH**, refund checks, initial here _____ and list the name of that representative below.

Name of representative to receive refund check(s) ▶

7 Notices and communications. Original notices and other written communications will be sent to you and a copy to the first representative listed on line 2.

- a** If you also want the second representative listed to receive a copy of notices and communications, check this box ☐
- b** If you do not want any notices or communications sent to your representative(s), check this box ☐

8 Retention/revocation of prior power(s) of attorney. The filing of this power of attorney automatically revokes all earlier power(s) of attorney on file with the Internal Revenue Service for the same tax matters and years or periods covered by this document. If you **do not** want to revoke a prior power of attorney, check here ☐

YOU MUST ATTACH A COPY OF ANY POWER OF ATTORNEY YOU WANT TO REMAIN IN EFFECT.

9 Signature of taxpayer(s). If a tax matter concerns a joint return, **both** husband and wife must sign if joint representation is requested, otherwise, see the instructions. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, or trustee on behalf of the taxpayer, I certify that I have the authority to execute this form on behalf of the taxpayer.

▶ IF NOT SIGNED AND DATED, THIS POWER OF ATTORNEY WILL BE RETURNED.

----- Signature		----- Date		----- Title (if applicable)	
				THE LAND TRUST FOR TENNESSEE, INC.	
----- Print Name		----- PIN Number		----- Print name of taxpayer from line 1 if other than individual	
----- Signature		----- Date		----- Title (if applicable)	
----- Print Name		----- PIN Number			

Part II Declaration of Representative

Caution: Students with a special order to represent taxpayers in qualified Low Income Taxpayer Clinics or the Student Tax Clinic Program (levels k and l), see the instructions for Part II.

Under penalties of perjury, I declare that:

- I am not currently under suspension or disbarment from practice before the Internal Revenue Service;
- I am aware of regulations contained in Circular 230 (31 CFR, Part 10), as amended, concerning the practice of attorneys, certified public accountants, enrolled agents, enrolled actuaries, and others;
- I am authorized to represent the taxpayer(s) identified in Part I for the tax matter(s) specified there; and
- I am one of the following:
 - a** Attorney - a member in good standing of the bar of the highest court of the jurisdiction shown below.
 - b** Certified Public Accountant - duly qualified to practice as a certified public accountant in the jurisdiction shown below.
 - c** Enrolled Agent - enrolled as an agent under the requirements of Circular 230.
 - d** Officer - a bona fide officer of the taxpayer's organization.
 - e** Full-Time Employee - a full-time employee of the taxpayer.
 - f** Family Member - a member of the taxpayer's immediate family (for example, spouse, parent, child, brother, or sister).
 - g** Enrolled Actuary - enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Internal Revenue Service is limited by section 10.3(d) of Circular 230).
 - h** Unenrolled Return Preparer - the authority to practice before the Internal Revenue Service is limited by Circular 230, section 10.7(c)(1)(viii). You must have prepared the return in question and the return must be under examination by the IRS. See **Unenrolled Return Preparer** on page 1 of the instructions.
 - k** Student Attorney - student who receives permission to practice before the IRS by virtue of their status as a law student under section 10.7(d) of Circular 230.
 - l** Student CPA - student who receives permission to practice before the IRS by virtue of their status as a CPA student under section 10.7(d) of Circular 230.
 - r** Enrolled Retirement Plan Agent - enrolled as a retirement plan agent under the requirements of Circular 230 (the authority to practice before the Internal Revenue Service is limited by section 10.3(e)).

▶ IF THIS DECLARATION OF REPRESENTATIVE IS NOT SIGNED AND DATED, THE POWER OF ATTORNEY WILL BE RETURNED. See the Part II instructions.

Designation - Insert above letter (a-r)	Jurisdiction (state) or identification	Signature	Date
B	TENNESSEE		
B	TENNESSEE		