

Form **990**

Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

**2013**

**Open to Public Inspection**

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

**A** For the **2013** calendar year, or tax year beginning **APR 1, 2013** and ending **MAR 31, 2014**

<b>B</b> Check if applicable:	<b>C</b> Name of organization <div style="border: 1px solid black; padding: 2px;">THE LAND TRUST FOR TENNESSEE, INC.</div> <div style="border: 1px solid black; padding: 2px;">Doing Business As</div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>Number and street (or P.O. box if mail is not delivered to street address)</span> <span>Room/suite</span> </div> <div style="display: flex; justify-content: space-between;"> <span>209 10TH AVENUE SOUTH</span> <span>327</span> </div> </div> <div style="border: 1px solid black; padding: 2px;"> City or town, state or province, country, and ZIP or foreign postal code  NASHVILLE, TN 37203 </div>	<b>D</b> Employer identification number <div style="border: 1px solid black; padding: 2px; text-align: center;">62-1770549</div>
<input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>E</b> Telephone number <div style="border: 1px solid black; padding: 2px; text-align: center;">(615) 244-5263</div>	<b>G</b> Gross receipts \$ <div style="border: 1px solid black; padding: 2px; text-align: right;">8,636,645.</div>
	<b>H(a)</b> Is this a group return for subordinates? <span style="margin-left: 20px;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>	<b>H(b)</b> Are all subordinates included? <span style="margin-left: 20px;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>
	<b>H(c)</b> Group exemption number ▶	
<b>F</b> Name and address of principal officer: <div style="border: 1px solid black; padding: 2px;">JEAN C. NELSON SAME AS C ABOVE</div>		
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ <div style="border: 1px solid black; padding: 2px;">WWW.LANDTRUSTTN.ORG</div>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <div style="border: 1px solid black; padding: 2px;">1999</div>
<b>M</b> State of legal domicile: <div style="border: 1px solid black; padding: 2px;">TN</div>		

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <div style="border: 1px solid black; padding: 2px;">TO PRESERVE THE UNIQUE CHARACTER OF TENNESSEE'S NATURAL AND HISTORIC LANDSCAPES AND SITES FOR FUTURE</div>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) .....	<b>3</b>	34
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) .....	<b>4</b>	34
	<b>5</b> Total number of individuals employed in calendar year 2013 (Part V, line 2a) .....	<b>5</b>	31
	<b>6</b> Total number of volunteers (estimate if necessary) .....	<b>6</b>	150
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 .....	<b>7a</b>	0.
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34 .....	<b>7b</b>	0.
<b>Revenue</b>		<b>Prior Year</b>	<b>Current Year</b>
	<b>8</b> Contributions and grants (Part VIII, line 1h) .....	2,237,340.	3,492,363.
	<b>9</b> Program service revenue (Part VIII, line 2g) .....	0.	0.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....	41,535.	73,266.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....	60,830.	66,626.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....	2,339,705.	3,632,255.
<b>Expenses</b>			
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) .....	0.	0.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) .....	0.	0.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) .....	959,838.	1,032,200.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) .....	0.	0.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <div style="border: 1px solid black; padding: 2px;">354,222.</div>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) .....	1,238,850.	1,020,604.
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .....	2,198,688.	2,052,804.
	<b>19</b> Revenue less expenses. Subtract line 18 from line 12 .....	141,017.	1,579,451.
<b>Net Assets or Fund Balances</b>		<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>20</b> Total assets (Part X, line 16) .....	20,216,212.	17,931,664.
	<b>21</b> Total liabilities (Part X, line 26) .....	4,042,763.	53,992.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 .....	16,173,449.	17,877,672.

**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.

<b>Sign Here</b>	Signature of officer <div style="border: 1px solid black; padding: 2px; text-align: center;">JEAN C. NELSON, PRESIDENT &amp; EXECUTIVE DIRECTOR</div>	Date	
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <div style="border: 1px solid black; padding: 2px;">FRANCES E. LEAHY</div>	Preparer's signature <div style="border: 1px solid black; padding: 2px;">FRANCES E. LEAHY</div>	Date <div style="border: 1px solid black; padding: 2px;">11/05/14</div>
	Firm's name ▶ <div style="border: 1px solid black; padding: 2px;">KRAFTCPAS PLLC</div>	Firm's EIN ▶ <div style="border: 1px solid black; padding: 2px;">62-0713250</div>	PTIN <div style="border: 1px solid black; padding: 2px;">P00713593</div>
	Firm's address ▶ <div style="border: 1px solid black; padding: 2px;">555 GREAT CIRCLE ROAD NASHVILLE, TN 37228</div>	Phone no. <div style="border: 1px solid black; padding: 2px;">615-242-7351</div>	

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

**Part III** Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒ **X****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 organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: ) (Expenses \$ **1,624,572.** including grants of \$ ) (Revenue \$ **0.** )  
**DURING FY14, IN FURTHERANCE OF OUR MISSION, THE LAND TRUST PROTECTED 4,596 ACRES OF LAND THROUGHOUT TENNESSEE THROUGH 27 INDIVIDUAL PROJECTS IN 20 COUNTIES. PROTECTED LANDS INCLUDED WORKING FARMS AND FORESTS, RECREATIONAL LANDS- BOTH PRIVATE AND PUBLIC, SCENIC VIEWSHEDS, WILDLIFE HABITAT AND LANDS WITH ECOLOGICAL SIGNIFICANCE, LANDS CONTAINING SIGNIFICANT WATER RESOURCES. PROPERTIES WERE PROTECTED THROUGH DONATED CONSERVATION EASEMENTS AND PURCHASES OR FACILITATION OF PURCHASES THROUGH PARTNERSHIPS WITH THE STATE OF TENNESSEE, METRO NASHVILLE DAVIDSON COUNTY, FRIENDS OF RADNOR LAKE, THE MOUNTAIN GOAT TRAIL ALLIANCE AND OTHER PARTNERS. THE LAND TRUST ALSO SUCCESSFULLY MANAGED, MONITORED AND ENFORCED ALL PREVIOUSLY EXISTING CONSERVATION EASEMENTS AND PROPERTIES. THIS BRINGS THE TOTAL NUMBER OF LAND PROTECTION**

**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 **1,624,572.**

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<b>1</b> X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	<b>2</b> X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	<b>3</b>	X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	<b>4</b> X	
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	<b>5</b>	X
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	<b>6</b>	X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	<b>7</b> X	
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	<b>8</b>	X
<b>9</b> Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	<b>9</b>	X
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	<b>10</b> X	
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	<b>11a</b> X	
<b>b</b> Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	<b>11b</b> X	
<b>c</b> Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	<b>11c</b>	X
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	<b>11d</b>	X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<b>11e</b> X	
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	<b>11f</b> X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	<b>12a</b> X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	<b>12b</b>	X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<b>13</b>	X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b>	X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	<b>14b</b>	X
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	<b>15</b>	X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	<b>16</b>	X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	<b>17</b>	X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	<b>18</b> X	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	<b>19</b>	X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	<b>20a</b>	X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20b</b>	

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**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....		X
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....		X
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i> .....		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> 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> .....		X
<b>33</b> 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> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> 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> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	X	

**Note.** All Form 990 filers are required to complete Schedule O .....

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**Part V** Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	41	
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2a</b>	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	31	
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
<b>4a</b>	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>b</b>	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966?		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	10a	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	11a	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state?	13a	
<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.			
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
<b>c</b>	Enter the amount of reserves on hand	13c	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.Check if Schedule O contains a response or note to any line in this Part VI ☒ **X****Section A. Governing Body and Management**

	1a	1b	Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year	34			
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
<b>b</b> Enter the number of voting members included in line 1a, above, who are independent		34		
<b>2</b> 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?			<input checked="" type="checkbox"/>	
<b>3</b> 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?				<input checked="" type="checkbox"/>
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?				<input checked="" type="checkbox"/>
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?				<input checked="" type="checkbox"/>
<b>6</b> Did the organization have members or stockholders?				<input checked="" type="checkbox"/>
<b>7a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?				<input checked="" type="checkbox"/>
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?				<input checked="" type="checkbox"/>
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
<b>a</b> The governing body?			<input checked="" type="checkbox"/>	
<b>b</b> Each committee with authority to act on behalf of the governing body?			<input checked="" type="checkbox"/>	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O				<input checked="" type="checkbox"/>

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

	Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates?		<input checked="" type="checkbox"/>
<b>b</b> If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<input checked="" type="checkbox"/>	
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13	<input checked="" type="checkbox"/>	
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<input checked="" type="checkbox"/>	
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<input checked="" type="checkbox"/>	
<b>13</b> Did the organization have a written whistleblower policy?	<input checked="" type="checkbox"/>	
<b>14</b> Did the organization have a written document retention and destruction policy?	<input checked="" type="checkbox"/>	
<b>15</b> 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?		
<b>a</b> The organization's CEO, Executive Director, or top management official	<input checked="" type="checkbox"/>	
<b>b</b> Other officers or key employees of the organization	<input checked="" type="checkbox"/>	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		<input checked="" type="checkbox"/>
<b>b</b> If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard 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 (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☐ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

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

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **JEAN C. NELSON - (615) 244-5263**  
**209 10TH AVENUE SOUTH #327, NASHVILLE, TN 37203**

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BRAD SOUTHERN DIRECTOR	1.00	X						0.	0.	0.
(2) BYRON TRAUGER DIRECTOR	1.00	X						0.	0.	0.
(3) CHRIS CIGARRAN DIRECTOR	1.00	X						0.	0.	0.
(4) DEBBIE FRANK DIRECTOR	1.00	X						0.	0.	0.
(5) DONALD TAYLOR DIRECTOR	1.00	X						0.	0.	0.
(6) DOUG CAMERON DIRECTOR	1.00	X						0.	0.	0.
(7) DOYLE RIPPEE DIRECTOR	1.00	X						0.	0.	0.
(8) ELLEN MOORE DIRECTOR	1.00	X						0.	0.	0.
(9) EMILY MCALISTER DIRECTOR	1.00	X						0.	0.	0.
(10) GREG VITAL DIRECTOR	1.00	X						0.	0.	0.
(11) LYNN LASSITER KENDRICK DIRECTOR	1.00	X						0.	0.	0.
(12) MARY BROCKMAN DIRECTOR	1.00	X						0.	0.	0.
(13) MARTIN BROWN, JR. DIRECTOR	1.00	X						0.	0.	0.
(14) RICHARD BOVENDER DIRECTOR	1.00	X						0.	0.	0.
(15) RIDLEY WILLS II DIRECTOR	1.00	X						0.	0.	0.
(16) ROBERT JOHNSTON DIRECTOR	1.00	X						0.	0.	0.
(17) STEVEN MASON 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 (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) WARNER BASS DIRECTOR	1.00	X						0.	0.	0.
(19) DAPHNE BUTLER DIRECTOR	1.00	X						0.	0.	0.
(20) WILLIAM COBLE DIRECTOR	1.00	X						0.	0.	0.
(21) KIMBERLY KAEGI DIRECTOR	1.00	X						0.	0.	0.
(22) MATTHEW P. MILLER DIRECTOR	1.00	X						0.	0.	0.
(23) OPHELIA PAINE DIRECTOR	1.00	X						0.	0.	0.
(24) KAY S. SIMMONS DIRECTOR	1.00	X						0.	0.	0.
(25) SALLY HUSTON DIRECTOR	1.00	X						0.	0.	0.
(26) MARY ELLEN RODGERS DIRECTOR	2.00	X						0.	0.	0.
<b>1b Sub-total</b>								0.	0.	0.
<b>c Total from continuation sheets to Part VII, Section A</b>								108,557.	0.	12,294.
<b>d Total (add lines 1b and 1c)</b>								108,557.	0.	12,294.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any <b>former</b> 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 or individual 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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(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			
(27) ESLICK DANIEL IMMEDIATE PAST CHAIR	1.00	X		X				0.	0.	0.
(28) MICHELLE HAYNES VICE CHAIR OF LAND PROTECT	2.00	X		X				0.	0.	0.
(29) SAM BELK TREASURER	2.00	X		X				0.	0.	0.
(30) DOUG CRUICKSHANKS SECRETARY	1.00	X		X				0.	0.	0.
(31) ROBERT S. BRANDT CHAIR OF LAND PROTECTION C	2.00	X		X				0.	0.	0.
(32) JENNIE RENWICK COMMUNICATIONS CHAIR	2.00	X		X				0.	0.	0.
(33) SARA FINLEY BOARD CHAIR	8.00	X		X				0.	0.	0.
(34) JEAN C. NELSON PRESIDENT/CEO	60.00	X		X				108,557.	0.	12,294.
Total to Part VII, Section A, line 1c								108,557.		12,294.

**Part VIII Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>				
	<b>b</b> Membership dues .....	<b>1b</b>				
	<b>c</b> Fundraising events .....	<b>1c</b>	71,916.			
	<b>d</b> Related organizations .....	<b>1d</b>				
	<b>e</b> Government grants (contributions) .....	<b>1e</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .....	<b>1f</b>	3,420,447.			
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ .....		165,816.			
	<b>h Total.</b> Add lines 1a-1f .....		3,492,363.			
<b>Program Service Revenue</b>	<b>Business Code</b>					
	<b>2 a</b> .....					
	<b>b</b> .....					
	<b>c</b> .....					
	<b>d</b> .....					
	<b>e</b> .....					
	<b>f</b> All other program service revenue .....					
<b>g Total.</b> Add lines 2a-2f .....						
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		54,676.			54,676.
	<b>4</b> Income from investment of tax-exempt bond proceeds .....					
	<b>5</b> Royalties .....					
	<b>6 a</b> Gross rents .....	(i) Real (ii) Personal				
	<b>b</b> Less: rental expenses .....					
	<b>c</b> Rental income or (loss) .....					
	<b>d</b> Net rental income or (loss) .....					
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	(i) Securities (ii) Other	640,734. 4,260,838.			
	<b>b</b> Less: cost or other basis and sales expenses .....		622,144. 4,260,838.			
	<b>c</b> Gain or (loss) .....		18,590. 0.			
	<b>d</b> Net gain or (loss) .....		18,590.			18,590.
	<b>8 a</b> Gross income from fundraising events (not including \$ 71,916. of contributions reported on line 1c). See Part IV, line 18 .....	<b>a</b>	188,034.			
	<b>b</b> Less: direct expenses .....	<b>b</b>	121,408.			
	<b>c</b> Net income or (loss) from fundraising events .....		66,626.			66,626.
	<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>a</b>				
	<b>b</b> Less: direct expenses .....	<b>b</b>				
	<b>c</b> Net income or (loss) from gaming activities .....					
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>a</b>					
<b>b</b> Less: cost of goods sold .....	<b>b</b>					
<b>c</b> Net income or (loss) from sales of inventory .....						
<b>Miscellaneous Revenue</b>		<b>Business Code</b>				
<b>11 a</b> .....						
<b>b</b> .....						
<b>c</b> .....						
<b>d</b> All other revenue .....						
<b>e Total.</b> Add lines 11a-11d .....						
<b>12 Total revenue.</b> See instructions. ....			3,632,255.	0.	0.	139,892.

**Part IX Statement of Functional Expenses**

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

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

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
<b>1</b> Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
<b>2</b> Grants and other assistance to individuals in the United States. See Part IV, line 22				
<b>3</b> Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	122,294.	85,606.	12,229.	24,459.
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	774,702.	589,775.	24,194.	160,733.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	15,491.	11,664.	629.	3,198.
<b>9</b> Other employee benefits	51,077.	38,458.	2,074.	10,545.
<b>10</b> Payroll taxes	68,636.	51,679.	2,787.	14,170.
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management				
<b>b</b> Legal	62,492.	62,492.		
<b>c</b> Accounting	22,418.	14,500.	2,890.	5,028.
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	15,520.	8,938.	4,853.	1,729.
<b>12</b> Advertising and promotion				
<b>13</b> Office expenses	53,334.	41,077.	4,459.	7,798.
<b>14</b> Information technology				
<b>15</b> Royalties				
<b>16</b> Occupancy	96,027.	67,088.	10,745.	18,194.
<b>17</b> Travel				
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings				
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	18,592.	17,114.	549.	929.
<b>23</b> Insurance	51,181.	43,467.	2,864.	4,850.
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> TRANSACTION ASSISTANCE	282,566.	282,566.	0.	0.
<b>b</b> EASEMENT & LAND ACQUISITION	136,243.	136,243.	0.	0.
<b>c</b> CONTRACT LABOR	71,983.	0.	0.	71,983.
<b>d</b> COMPUTER EXPENSE	38,603.	31,767.	2,534.	4,302.
<b>e</b> All other expenses	171,645.	142,138.	3,203.	26,304.
<b>25</b> Total functional expenses. Add lines 1 through 24e	2,052,804.	1,624,572.	74,010.	354,222.
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash - non-interest-bearing .....	6,725,254.	1	4,638,029.
	2 Savings and temporary cash investments .....		2	
	3 Pledges and grants receivable, net .....	411,810.	3	442,928.
	4 Accounts receivable, net .....	153,371.	4	140,865.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L .....		6	
	7 Notes and loans receivable, net .....		7	
	8 Inventories for sale or use .....		8	
	9 Prepaid expenses and deferred charges .....	25,378.	9	22,412.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	10a 9,779,931.		
	b Less: accumulated depreciation .....	10b 106,303.	12,895,979.	10c 9,673,628.
	11 Investments - publicly traded securities .....		11	
	12 Investments - other securities. See Part IV, line 11 .....		12	3,009,382.
	13 Investments - program-related. See Part IV, line 11 .....		13	
	14 Intangible assets .....		14	
	15 Other assets. See Part IV, line 11 .....	4,420.	15	4,420.
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	20,216,212.	16	17,931,664.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses .....	169,443.	17	49,572.
	18 Grants payable .....		18	
	19 Deferred revenue .....		19	
	20 Tax-exempt bond liabilities .....		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D .....		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		22	
	23 Secured mortgages and notes payable to unrelated third parties .....	3,868,900.	23	0.
	24 Unsecured notes and loans payable to unrelated third parties .....		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	4,420.	25	4,420.
	26 <b>Total liabilities.</b> Add lines 17 through 25 .....	4,042,763.	26	53,992.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	27 Unrestricted net assets .....	8,962,816.	27	9,641,740.
	28 Temporarily restricted net assets .....	7,210,633.	28	8,235,932.
	29 Permanently restricted net assets .....		29	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	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 <b>Total net assets or fund balances</b> .....	16,173,449.	33	17,877,672.	
34 <b>Total liabilities and net assets/fund balances</b> .....	20,216,212.	34	17,931,664.	

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**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☐

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	3,632,255.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	2,052,804.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	1,579,451.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	16,173,449.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	124,772.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	0.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	17,877,672.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☒

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
<b>b</b> Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
<b>c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
<b>3a</b> 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>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Form 990 (2013)

Department of the Treasury  
Internal Revenue Service

## Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

# 2013

**Open to Public Inspection**

Name of the organization

**► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

Employer identification number
62-1770549

<b>Part I</b>	<b>Reason for Public Charity Status</b> (All organizations must complete this part.) See instructions.
---------------	--

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

- 1 ☐ A church, convention, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: \_\_\_\_\_

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I      b ☐ Type II      c ☐ Type III - Functionally integrated      d ☐ Type III - Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f ☐ If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box \_\_\_\_\_

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? _____	11g(i)	
(ii) A family member of a person described in (i) above? _____	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above? _____	11g(iii)	

h Provide the following information about the supported organization(s). \_\_\_\_\_

[illegible]

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

Schedule A (Form 990 or 990-EZ) 2013

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	1690433.	2654514.	3596229.	2237340.	3492363.	13670879.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	1690433.	2654514.	3596229.	2237340.	3492363.	13670879.
<b>5</b> 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) .....						1186191.
<b>6 Public support.</b> Subtract line 5 from line 4.						12484688.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>7</b> Amounts from line 4 .....	1690433.	2654514.	3596229.	2237340.	3492363.	13670879.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....	5,628.	20,686.	13,755.	27,535.	54,676.	122,280.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>11 Total support.</b> Add lines 7 through 10						13793159.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	1,911,467.
<b>13 First five years.</b> 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 <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	90.51	%
<b>15</b> Public support percentage from 2012 Schedule A, Part II, line 14 .....	<b>15</b>	88.11	%
<b>16a 33 1/3% support test - 2013.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....	<input checked="" type="checkbox"/>		
<b>b 33 1/3% support test - 2012.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>		
<b>17a 10% -facts-and-circumstances test - 2013.</b> 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 <b>stop here.</b> 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>b 10% -facts-and-circumstances test - 2012.</b> 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 <b>stop here.</b> 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>18 Private foundation.</b> 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) 2013

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.) .....						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) .....						

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

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2012 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2012 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2013.** 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 - 2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ..... ☐

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



## Part IV

Also complete this part for any additional information. (See instructions).

## 2013

\*\*\* Not Open to Public Inspection \*\*\*

Total Excess Contributions to Schedule A, Part II, Line 5	1,186,191.
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**Schedule B**  
(Form 990, 990-EZ, or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and  
its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2013**

Name of the organization

Employer identification number

THE LAND TRUST FOR TENNESSEE, INC.

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 foundationCheck 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 an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.**Special Rules**☒ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization	Employer identification number
THE LAND TRUST FOR TENNESSEE, INC.	62-1770549

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		\$ <u>100,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>100,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>		\$ <u>97,718.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>		\$ <u>75,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>		\$ <u>702,933.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>		\$ <u>760,350.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
THE LAND TRUST FOR TENNESSEE, INC.	62-1770549

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 154,900.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 111,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Employer identification number

62-1770549

## Part II Noncash Property

[illegible]

Name of organization	Employer identification number
THE LAND TRUST FOR TENNESSEE, INC.	62-1770549

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) ► \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

**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

- ▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **See separate instructions.** ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

OMB No. 1545-0047

**2013**

**Open to Public Inspection**

**If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, 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) or Form 990-EZ, Part V, line 35c (Proxy Tax), then**

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

Name of organization <b>THE LAND TRUST FOR TENNESSEE, INC.</b>	Employer identification number <b>62-1770549</b>
---	---

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

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

2 Political expenditures ..... ▶ \$ \_\_\_\_\_

3 Volunteer hours ..... \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ \_\_\_\_\_

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_

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 Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

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 exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ▶ \$ \_\_\_\_\_

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

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were 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-.

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

Schedule C (Form 990 or 990-EZ) 2013

LHA

332041  
11-08-13



**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- 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												
<b>1 a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) .....															
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....															
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....															
<b>d</b> Other exempt purpose expenditures .....															
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....															
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.															
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		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.		
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.														
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....															
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....															
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....															
<b>j</b> 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? .....		<input type="checkbox"/> Yes	<input type="checkbox"/> 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 on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2013

**Part II-B** Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
<b>1</b> 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:			
<b>a</b> Volunteers? .....	X		
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..	X		
<b>c</b> Media advertisements? .....		X	
<b>d</b> Mailings to members, legislators, or the public? .....		X	
<b>e</b> Publications, or published or broadcast statements? .....		X	
<b>f</b> Grants to other organizations for lobbying purposes? .....		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....	X		1,467.
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....		X	
<b>i</b> Other activities? .....		X	
<b>j</b> Total. Add lines 1c through 1i .....			1,467.
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

**Part III-A** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

**Part III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

<b>1</b> Dues, assessments and similar amounts from members .....	1	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year .....	2a	
<b>b</b> Carryover from last year .....	2b	
<b>c</b> Total .....	2c	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	3	
<b>4</b> 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	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions) .....	5	

**Part IV** Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.

**PART II-B, LINE 1, LOBBYING ACTIVITIES:**

TO PROMOTE THE ENHANCED TAX INCENTIVES AND OTHER FUNDING

MECHANISMS FOR CONSERVATION INITIATIVES RELATED TO OUR MISSION.

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

▶ **Information about Schedule D (Form 990) and its instructions is at** [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No. 1545-0047

**2013**

**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 can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <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 education)	<input checked="" type="checkbox"/> Preservation of an historically important land area
<input checked="" type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input checked="" type="checkbox"/> Preservation of open space	

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

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a 252
b Total acreage restricted by conservation easements .....	2b 68,264.00
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, and not on a historic structure listed in the National Register .....	2d 0

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 2

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, handling of violations, and enforcement of the conservation easements it holds? ☒ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ 1637

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ 71,769.

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

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

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

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

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

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

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

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

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

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

a ☐ Public exhibition

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other \_\_\_\_\_

c ☐ Preservation for future generations

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

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

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

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

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

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

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

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

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	4,997,181.	4,493,954.	1,984,910.	871,824.	705,024.
b Contributions	175,835.	482,647.	2,503,450.	1,101,530.	164,370.
c Net investment earnings, gains, and losses	73,564.	20,580.	5,594.	11,556.	2,430.
d Grants or scholarships					
e Other expenditures for facilities and programs	78,323.				
f Administrative expenses					
g End of year balance	5,168,257.	4,997,181.	4,493,954.	1,984,910.	871,824.

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

a Board designated or quasi-endowment ☒ 100.00 %

b Permanent endowment ☐ %

c Temporarily restricted endowment ☐ %

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

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

(i) unrelated organizations

(ii) related organizations

	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 XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		9,628,370.		9,628,370.
b Buildings				
c Leasehold improvements				
d Equipment		151,561.	106,303.	45,258.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				9,673,628.

Schedule D (Form 990) 2013

**Part VII Investments - Other Securities.**

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely-held equity interests .....		
(3) Other .....		
(A) INVESTMENTS WITH DONOR		
(B) RESTRICTIONS	960,969.	COST
(C) INVESTMENTS WITH BOARD		
(D) DESIGNATIONS	2,048,413.	COST
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	3,009,382.	

**Part VIII Investments - Program Related.**

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

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

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) FUNDS HELD ON BEHALF OF OTHERS	4,420.	
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	4,420.	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☒

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	3,889,461.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains on investments	<b>2a</b>	124,772.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	79,756.
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	121,408.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	325,936.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	3,563,525.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	68,730.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	68,730.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	3,632,255.

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

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

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	2,185,238.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	79,756.
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	121,408.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	201,164.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	1,984,074.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	68,730.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	68,730.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	2,052,804.

**Part XIII Supplemental Information.**

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

**PART II, LINE 5:****EASEMENT MONITORING:**

THE LAND TRUST FOR TENNESSEE IS AN ACCREDITED LAND TRUST. ACCREDITATION

RECOGNIZES AN ORGANIZATION'S COMMITMENT TO EXCELLENCE AND CONTINUAL

LEARNING AND IMPROVEMENT. 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 COMMITTEE MEMBERS, TRAINED VOLUNTEERS AND

**Part XIII** Supplemental Information (continued)

RELEVANT PROFESSIONALS.

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, VIA CONSERVATION TRACK DATABASE.

3. BRING CONSERVATION EASEMENT SUMMARY ON THE SITE VISIT TO USE AS A REFERENCE.

4. IF MONITOR IS A VOLUNTEER, COMPLETE THE STEWARDSHIP MONITOR RELEASE FORM IF NOT COMPLETED AT VOLUNTEER TRAINING.

5. INSPECT THE CONSERVED PROPERTY, EITHER FROM THE AIR OR ON THE GROUND. WHILE INSPECTING, TAKE NOTES AND PHOTOGRAPHS.

6. FILL OUT A STEWARDSHIP SITE VISIT MONITORING FORM PROVIDING A WRITTEN DOCUMENTATION OF WHAT WAS SEEN AND SUBMIT IN CONSERVATION TRACK'S LIBRARY.

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 EMBODIED IN ITS CONSERVATION EASEMENTS. AS A GENERAL RULE, THE BOARD OF DIRECTORS OF 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, AND MAINTAIN LTTN'S TAX-EXEMPT STATUS AS A CHARITABLE ORGANIZATION. IN CONNECTION WITH A STEWARD'S MONITORING OF A CONSERVATION EASEMENT, ANY

**Part XIII** Supplemental Information (continued)

SUSPECTED VIOLATION OF THE TERMS OF A CONSERVATION EASEMENT ARE TO BE RECORDED ON THE FORM AND IMMEDIATELY REPORTED TO THE STEWARDSHIP MANAGER. VIOLATIONS MAY ALSO BE REPORTED BY A STAFF OBSERVATION OUTSIDE THE ANNUAL MONITORING VISITS 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, ARE RECORDED BY THE MONITORING STEWARD OR LTTN STAFF MEMBER RECEIVING NOTICE THEREOF. THE STEWARD OR STAFF MEMBER ARE, TO THE EXTENT POSSIBLE, TO DISCERN AND DOCUMENT WHETHER THE SUSPECTED VIOLATION HAS BEEN CAUSED BY THE LANDOWNER OR SOME OTHER PERSON. THE MONITORING STEWARD WILL REFRAIN FROM DISCUSSING THE SUSPECTED VIOLATION WITH THE LANDOWNER.

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

3. THE STEWARDSHIP MANAGER 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 NON-STEWARD OBSERVER, THE STEWARDSHIP MANAGER WILL SCHEDULE A MONITORING VISIT WITH THE LANDOWNER TO INSPECT THE SITE OF THE SUSPECTED VIOLATION AND TAKE PHOTOGRAPHS. THIS PHYSICAL INSPECTION SHOULD BE PERFORMED BY THE STEWARDSHIP MANAGER, LAND PROTECTION DIRECTOR, EXECUTIVE DIRECTOR, A BOARD MEMBER, OR ANY COMBINATION THEREOF.

4. ALL DOCUMENTATION OF THE SUSPECTED VIOLATION (INCLUDING PHOTOGRAPHS, IF ANY) WILL 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 MANAGER WILL THEN DISCUSS POTENTIAL RESOLUTIONS



**Part XIII** Supplemental Information (continued)

WITH OTHER STAFF MEMBERS. IN ADDITION, THE LAND PROTECTION STAFF MAY DISCUSS POTENTIAL RESOLUTIONS WITH THE STEWARDSHIP OR LAND PROTECTION COMMITTEE AND THE BOARD OF DIRECTORS WHEN APPROPRIATE.

6. THE STEWARDSHIP MANAGER 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 MANAGER OR EXECUTIVE DIRECTOR DELEGEE. IF THE VIOLATION HAS BEEN CORRECTED, THEN LTTN SENDS AN OFFICIAL LETTER TO THE LANDOWNER STATING THAT THE COMPLIANCE IS 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 MANAGER OR EXECUTIVE DIRECTOR DELEGEE 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, BOARD OF DIRECTORS, AND THE STEWARDSHIP OR LAND PROTECTION COMMITTEE ARE CONTACTED TO DISCUSS POTENTIAL LEGAL ACTION.

**Part XIII** Supplemental Information (continued)

10. WITH THE ADVICE OF LTTN'S LEGAL COUNSEL, BOARD OF DIRECTORS AND APPROVAL BY THE STEWARDSHIP OR LAND PROTECTION COMMITTEE, LTTN MAY CONSIDER ENFORCEMENT OF THE EASEMENT THROUGH MEDIATION, ARBITRATION, LITIGATION, OR OTHER MEANS CONSISTENT WITH THE TERMS OF THE CONSERVATION EASEMENT.

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 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:

THE INTENDED USES OF THE ORGANIZATION'S ENDOWMENT FUNDS ARE FOR SEVERAL PURPOSES. THE STEWARDSHIP FUND ENSURES THE COMPLIANCE OF THE TERMS AND CONDITIONS OF THE CONSERVATION EASEMENTS THE ORGANIZATION HOLDS.

**Part XIII** Supplemental Information (continued)

THE REMAINING FUNDS ARE DESIGNATED BY THE BOARD TO BE USED AS AN OPERATING RESERVE, A WORKING CAPITAL FUND, REVOLVING FUND TO ASSIST WITH THE ACQUISITION OF LAND OVER SHORT PERIODS AND BOARD RESERVE FUND TO GENERATE REVENUE AND CAPITAL GROWTH.

PART II, LINE 3: TRANSFER OF EASEMENT:

THE LAND TRUST TRANSFERRED A CONSERVATION EASEMENT ON THE 3,282 ACRE FIERY GIZZARD EASEMENT PROTECTED PROPERTY. THIS TRANSFER WAS PART OF THE NATIONAL FOREST LEGACY PROGRAM TO PERMANENTLY PROTECT FORESTS THAT ARE THREATENED BY CONVERSION TO NON-FOREST USES. THE STATE OF TENNESSEE OWNS THE ADJACENT GRUNDY COUNTY FOREST SMA AND MANAGES THE FIERY GIZZARD HIKING TRAIL WHICH OVERLOOKS THIS EASEMENT PROPERTY.

THE AMENDMENT ON HARLINSDALE FARM, WHICH WAS EXECUTED ON 03/06/2014, WAS A JOINT DECISION BETWEEN THE GRANTOR (THE CITY OF FRANKLIN) AND THE GRANTEE (THE LAND TRUST FOR TENNESSEE) IN ORDER TO CLARIFY WHAT TYPES OF ACTIVITIES, SPECIFICALLY COMMUNITY EVENTS AND OTHER SIMILAR TYPES OF ACTIVITIES, WERE PERMITTED ON THE PROPERTY (A PUBLIC PARK). THE AMENDMENT STRENGTHENS THE CONSERVATION EASEMENT BY RESTRICTING CERTAIN HIGH-IMPACT ACTIVITIES THAT COULD HAVE A NEGATIVE IMPACT ON THE CONSERVATION VALUES OF THE PROPERTY AND THE USES OF THE PROPERTY AS A PASSIVE PUBLIC PARK. CONSERVATION VALUES OF THIS PROPERTY INCLUDE AGRICULTURAL, SCENIC, HISTORIC, ECOLOGICAL AND EDUCATIONAL, AND BY AMENDING THE EASEMENT AND CLARIFYING THE USES, THESE CONSERVATION VALUES WILL BE BETTER PROTECTED.

PART X, LINE 2:

MANAGEMENT PERFORMS AN EVALUATION OF ALL INCOME TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN THE COURSE OF PREPARING THE LAND TRUST'S

**Part XIII** Supplemental Information (continued)

INCOME TAX RETURNS TO DETERMINE WHETHER THE INCOME TAX POSITIONS MEET A "MORE LIKELY THAN NOT" STANDARD OF BEING SUSTAINED UNDER EXAMINATION BY THE APPLICABLE TAXING AUTHORITIES. MANAGEMENT HAS PERFORMED ITS EVALUATION OF ALL INCOME TAX POSITIONS TAKEN ON ALL OPEN INCOME TAX RETURNS AND HAS DETERMINED THAT THERE WERE NO POSITIONS TAKEN THAT DO NOT MEET THE "MORE LIKELY THAN NOT" STANDARD. ACCORDINGLY, THERE ARE NO PROVISIONS FOR INCOME TAXES, PENALTIES OR INTEREST RECEIVABLE OR PAYABLE RELATING TO UNCERTAIN INCOME TAX POSITIONS.

## PART XI, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES 121,408.

## PART XI, LINE 4B - OTHER ADJUSTMENTS:

DIRECT DONOR BENEFITS 68,730.

## PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES 121,408.

## PART XII, LINE 4B - OTHER ADJUSTMENTS:

DIRECT DONOR BENEFITS 68,730.

Department of the Treasury  
Internal Revenue Service

**Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.**

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

**▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)**

OMB No. 1545-0047

# 2013

## Open To Public Inspection

Name of the organization

THE LAND TRUST FOR TENNESSEE, INC.

Employer identification number

62-1770549

## Part I

### Fundraising Activities.

**Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

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

- a ☐ Mail solicitations
- b ☐ Internet and 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.

[illegible]

- 3** List all states in which the organization is registered or licensed to solicit contributions 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 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. 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)	SOUTHEAST SUMMERTIME S (event type)	NONE (total number)	
Revenue	<b>1</b> Gross receipts .....	228,945.	31,005.		259,950.
	<b>2</b> Less: Contributions .....	61,916.	10,000.		71,916.
	<b>3</b> Gross income (line 1 minus line 2) .....	167,029.	21,005.		188,034.
Direct Expenses	<b>4</b> Cash prizes .....				
	<b>5</b> Noncash prizes .....				
	<b>6</b> Rent/facility costs .....				
	<b>7</b> Food and beverages .....	51,228.	7,220.		58,448.
	<b>8</b> Entertainment .....	2,750.	200.		2,950.
	<b>9</b> Other direct expenses .....	49,115.	10,895.		60,010.
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) .....				121,408.
	<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) .....				66,626.

**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	<b>1</b> Gross revenue .....				
Direct Expenses	<b>2</b> Cash prizes .....				
	<b>3</b> Noncash prizes .....				
	<b>4</b> Rent/facility costs .....				
	<b>5</b> Other direct expenses .....				
	<b>6</b> 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	
	<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) .....				
	<b>8</b> Net gaming income summary. Subtract line 7 from line 1, 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? ☐ Yes ☐ No

b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: \_\_\_\_\_

- 11** Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 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
- 13** Indicate the percentage of gaming activity operated in:
- |                                      |            |   |
|--------------------------------------|------------|---|
| <b>a</b> The organization's facility | <b>13a</b> | % |
| <b>b</b> An outside facility         | <b>13b</b> | % |
- 14** Enter 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? ☐ Yes ☐ No
- 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 of the third party:

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

**16** Gaming manager information:

Name ► \_\_\_\_\_

Gaming manager compensation ► \$ \_\_\_\_\_

Description of services provided ► \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

☐ Director/officer ☐ Employee ☐ 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? ☐ Yes ☐ No
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ \_\_\_\_\_

**Part IV** **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

OMB No. 1545-0047

**2013**

Open to Public  
Inspection

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**  
▶ **Attach to Form 990.**  
▶ **Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)**

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 or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
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 .....				
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 .....				
15 Real estate - Residential .....				
16 Real estate - Commercial .....				
17 Real estate - Other .....	X	1	154,900.	FMV
18 Collectibles .....				
19 Food inventory .....				
20 Drugs and medical supplies .....				
21 Taxidermy .....				
22 Historical artifacts .....				
23 Scientific specimens .....				
24 Archeological artifacts .....				
25 Other ▶ ( <u>ALCOHOLIC BEV</u> ) .....	X	3	10,916.	COST OF ITEM
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 Acknowledgement .....

**29**

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 an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) (2013)



**Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No. 1545-0047

**2013**

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:

PROJECTS COMPLETED BY THE LAND TRUST TO 279, PROTECTING OVER 88,000

ACRES OF LAND THROUGHOUT TENNESSEE, INCLUDING 252 CONSERVATION

EASEMENTS OF 68,264 ACRES.

- IN FY14, THE LAND TRUST FOR TENNESSEE PROTECTED 4,596 ACRES THROUGH  
27 INDIVIDUAL PROJECTS IN 20 COUNTIES THROUGHOUT TENNESSEE. HIGHLIGHTS  
INCLUDE:

- ONE FARM IN LEIPER® FORK WAS PROTECTED CLOSE TO WHERE OUR WORK BEGAN  
IN 1999.

- FIVE PROPERTIES WERE PROTECTED THAT BUFFER OR CREATE IMPORTANT PUBLIC  
LANDS:

\*16 ACRES IN FENTRESS COUNTY THAT CONNECT POGUE CREEK STATE  
NATURAL AREA TO PICKETT STATE PARK;

\*120 ACRES IN CUMBERLAND COUNTY THAT CONNECT THE CUMBERLAND TRAIL  
FROM BLACK MOUNTAIN TO OZONE FALLS STATE NATURAL AREA;

\*25 ACRES IN GRUNDY COUNTY THAT ADD OVER 4 MILES TO THE MOUNTAIN  
GOAT TRAIL;

\*23 CRITICAL ACRES IN A SECOND PHASE OF LINKING RADNOR LAKE STATE  
NATURAL AREA IN DAVIDSON COUNTY;

\*93 ACRES IN RHEA COUNTY THAT HAVE BEEN INCORPORATED INTO THE  
CUMBERLAND TRAIL SYSTEM.

-OVER 900 ACRES OF WORKING FARMLAND WERE PROTECTED IN ROBERTSON COUNTY,

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

Schedule O (Form 990 or 990-EZ) (2013)

332211  
09-04-13

Name of the organization	THE LAND TRUST FOR TENNESSEE, INC.	Employer identification number	62-1770549
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HOME TO SOME OF THE HIGHEST PERCENTAGES OF PRIME AGRICULTURAL SOILS IN THE STATE.

-MORE THAN 737 ACRES OF FORESTLAND WERE PROTECTED RANGING FROM THE DUCK RIVER TO EAST TENNESSEE.

-THREE PROPERTIES IN THE SCENIC SEQUATCHIE VALLEY THAT CONTAIN OVER 2.5 MILES OF THE SEQUATCHIE RIVER AND OVER 800 ACRES OF SOME OF THE MOST PRODUCTIVE SOILS IN THE STATE.

-587 ACRES OF FOREST AND WETLANDS WEST IN TENNESSEE IN THE HATCHIE RIVER WATERSHED.

-PROTECTED WORKING FARMS IN SUMNER, ROBERTSON, BLEDSOE, SEQUATCHIE, WILLIAMSON, MONTGOMERY AND JEFFERSON COUNTIES.

-OUR FIRST PROJECT IN COFFEE COUNTY PROTECTING 275 ACRES OF FARMLAND THAT CREATE THE HEADWATERS TO NORMANDY LAKE.

-90 ACRES IN MEIGS COUNTY ADJOINING TWRA'S HIWASSEE REFUGE WHERE TENS OF THOUSANDS OF SANDHILL CRANES CONVERGE FOR THEIR WINTER MIGRATION PERIOD.

-AT OUR GLEN LEVEN FARM, YEARS OF HARD WORK AND DEDICATION WERE REALIZED WHEN WE COMPLETED THE STABILIZATION OF THE HISTORIC HOME, ENSURING ITS LASTING CONSERVATION FOR FUTURE GENERATIONS. HIGHLIGHTS INCLUDE:

\*WORKING WITH EDUCATION PROFESSIONALS, OUR STAFF CREATED LESSON PLANS (BASED ON TENNESSEE STATE CURRICULUM STANDARDS) FOR TEACHERS TO CONNECT THEIR STUDENTS TO ALL THERE IS TO LEARN AND EXPERIENCE AT GLEN LEVEN FARM. WITH THIS CAME THE IMPLEMENTATION OF A SUCCESSFUL KINDERGARTEN-4TH GRADE FIELD TRIP PROGRAM IN THE FALL.

\*VISITORS YOUNG AND OLD CAN NOW EXPERIENCE OUR EDUCATION GARDEN FILLED WITH NATIVE TENNESSEE PLANTS AND CROPS THAT SERVES AS AN OUTDOOR CLASSROOM AND LEARNING LABORATORY;

Name of the organization	THE LAND TRUST FOR TENNESSEE, INC.	Employer identification number	62-1770549
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-WE CONTINUED OUR LEADERSHIP ROLE IN THE FARMLAND LEGACY PARTNERSHIP, MADE UP OF 13 AGENCIES, THAT SERVES AS AN AUTHORITATIVE RESOURCE FOR BOTH FARM LEVEL AND COMMUNITY PLANNING THAT PROMOTES THE PRESERVATION AND VIABILITY OF WORKING FARMS IN TENNESSEE.

-WE CONTINUED WORKING WITH PARTNERS INCLUDING USDA-NATURAL RESOURCES CONSERVATION SERVICE, THE HERITAGE FOUNDATION OF FRANKLIN AND WILLIAMSON COUNTY, CUMBERLAND REGION TOMORROW, TENNESSEE FARM BUREAU FEDERATION, THE TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION, TENNESSEE PRESERVATION TRUST, THE NATIONAL PARK SERVICE, UT AGRICULTURAL EXTENSION, THE DEPARTMENT OF AGRICULTURE, MIDDLE TENNESSEE STATE'S CENTER FOR HISTORIC PRESERVATION, COMMUNITY FOOD ADVOCATES, THE BATTLE OF NASHVILLE PRESERVATION SOCIETY, THE MOUNTAIN GOAT TRAIL ALLIANCE, THE FRIENDS OF WARNER PARKS, THE NATURE CONSERVANCY, THE FRIENDS OF RADNOR LAKE, THE FRIENDS OF THE SOUTH CUMBERLAND STATE PARK, GILES COUNTY FARMLAND TRUST, THE UNIVERSITY OF THE SOUTH, THE DEPARTMENT OF DEFENSE AT FORT CAMPBELL, TENNESSEE WILDLIFE RESOURCES AGENCY, METRO-NASHVILLE DAVIDSON COUNTY, NUMEROUS LOCAL WATERSHED ORGANIZATIONS, AND MANY MORE.

-OUR STAFF PARTICIPATED IN THE FOLLOWING WORKING GROUPS: USDA-NRCS TECHNICAL COMMITTEE, TENNESSEE WATER GROUP, FARMLAND LEGACY PARTNERSHIP, FOREST LEGACY COMMITTEE, NASHVILLE NEXT AND NUMEROUS LOCAL FOOD AND AGRICULTURE COMMITTEES.

-SPEAKING ENGAGEMENTS AND OUTREACH

\*WE PARTICIPATED IN OVER 40 SPEAKING ENGAGEMENTS AND EVENTS AROUND THE STATE, REACHING OVER 5,000 PEOPLE. OUR SPEAKING EVENTS EDUCATED LANDOWNERS, COMMUNITY MEMBERS, PROFESSIONALS AND OFFICIALS ABOUT OUR PROGRAMS AND CONSERVATION METHODS AND OPPORTUNITIES.

\*WE PROVIDED INDIVIDUAL LAND CONSERVATION EDUCATION TO

Name of the organization	THE LAND TRUST FOR TENNESSEE, INC.	Employer identification number	62-1770549
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APPROXIMATELY 300 LANDOWNERS INTERESTED IN PROTECTING THEIR LANDS THROUGH EDUCATIONAL MATERIALS AND/OR INDIVIDUAL ON-SITE MEETINGS AND CONSULTATIONS.

-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 B, LINE 11:

UPON RECEIPT OF THE FINAL FORM 990 IN ITS ENTIRETY FROM OUR TAX PREPARER, THE FORM 990 IS UPLOADED TO OUR WEBSITE ON A PASSWORD ENCRYPTED WEBPAGE AND CORRESPONDENCE IS SENT TO THE ENTIRE BOARD ABOUT ITS AVAILABILITY FOR THEIR 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:

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. 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 IN 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.

Name of the organization	THE LAND TRUST FOR TENNESSEE, INC.	Employer identification number	62-1770549
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FORM 990, PART VI, SECTION B, LINE 15:

ON AN ANNUAL BASIS, OUR PROCESS IS FOR EMPLOYEES TO BE  
FORMALLY REVIEWED AFTER THE END OF EACH FISCAL YEAR BY THEIR SUPERVISOR.  
THE EXECUTIVE DIRECTOR'S (ED) COMPENSATION IS REVIEWED ANNUALLY BY THE  
EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS. THE REVIEW USES THE LATEST  
SALARY AND BENEFIT INFORMATION SURVEY CONDUCTED BY THE INDUSTRY, THE LAND  
TRUST ALLIANCE. ANY FURTHER INFORMATION IS PROVIDED TO THE EXECUTIVE  
COMMITTEE AS REQUESTED.

FORM 990, PART VI, SECTION C, LINE 19:

OUR GOVERNING DOCUMENT IS 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. IT INCLUDES DETAILED  
INFORMATION ABOUT OUR ORGANIZATION INCLUDING A LIST OF OUR BOARD MEMBERS  
AND OUR FINANCIAL INFORMATION.

FORM 990, PART XII, LINE 2

THE ORGANIZATION'S OVERSIGHT PROCESS AND SELECTION PROCESS  
HAS NOT CHANGED FROM THE PRIOR YEAR.