Form

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)

u Do not enter social security numbers on this form as it may be made public.

u Information about Form 990 and its instructions is at www.irs.gov/form990.

2016 Open to Public Inspection

OMB No. 1545-0047

<u>A</u>		e 2016 calendar year, or tax year beginningL 0				
		_	PARKS AND GREENWAYS	+	Employe	r identification number
	Address		chaction	\rightarrow		
	Name ch	ange Doing business as Number and street (or P.O. box if mail is not delivered)			62-1 E Telephon	557574
一	Initial retu	1 44= 00	d to street address)			3 29-4441
-	Final retu		reign postal code		<u></u>	
\vdash	terminated	nashville t	N 37212	١,	Gross red	ceipts\$ 2,139,865
	Amended	return F Name and address of principal officer:				
	Applicatio	n pending STEVE LAW		H(a) Is this a grou	p return for	subordinates Yes X No
		117 30TH AVENUE SOU	тн	H(b) Are all subo	rdinates inc	cluded? Yes No
		NASHVILLE	TN 37212	If "No," a	attach a list	. (see instructions)
$\overline{}$	Tax-exer	mpt status: X 501(c)(3) 501(c) () t (in		1		
	Website		, , , , , , , , , , , , , , , , , , , ,	H(c) Group exem	ption numb	per u
ĸ	Form of	organization: X Corporation Trust Association	Other u L Y	ear of formation: 19		M State of legal domicile: TN
	Part I	Summary	•			<u> </u>
	1 1	Briefly describe the organization's mission or most	significant activities:			
Se		THE ORGANIZATION'S PRIMARY MI		NESSEE'S N	IATUR <i>I</i>	AL
Jan	'	TREASURES BY CREATING GREEN (CORRIDORS LINKING EXISTIN	G PUBLIC	LANDS	USING
Governance		CONSERVATION EASEMENTS AND OU	JTRIGHT PURCHASE.			
6	2 (Check this box u if the organization discontinued	d its operations or disposed of more than	25% of its net a	assets.	
∞ ∞	1	Number of voting members of the governing body (ا م ا	21
es		Number of independent voting members of the government			4	20
Ϋ́Ε	5	Total number of individuals employed in calendar ye	ear 2016 (Part V, line 2a)		5	11
Activities		Total number of volunteers (estimate if necessary)				135
_	7a	Total unrelated business revenue from Part VIII, co	lumn (C), line 12		7a	0
		Net unrelated business taxable income from Form 9				0
				Prior Year		Current Year
ē					,017	1,861,724
Revenue	1				,635	0
Ş		nvestment income (Part VIII, column (A), lines 3, 4		-302	,313	1,376
_		Other revenue (Part VIII, column (A), lines 5, 6d, 8d		-34	,248	-17,241
		Total revenue – add lines 8 through 11 (must equal		537	,091	1,845,859
	1	Grants and similar amounts paid (Part IX, column (0
		Benefits paid to or for members (Part IX, column (A		454	-1-	165 005
es	15 3	Salaries, other compensation, employee benefits (P		471	,515	467,905
ens	16a	Professional fundraising fees (Part IX, column (A),	ine 11e)			0
Expenses	b	Total fundraising expenses (Part IX, column (D), lin		200	115	016 071
ш	'' '	Other expenses (Part IX, column (A), lines 11a-11c			,115	216,871
		Total expenses. Add lines 13–17 (must equal Part I			,630	684,776
<u> </u>	19	Revenue less expenses. Subtract line 18 from line	12	-142 Beginning of Curre		1,161,083 End of Year
ets c	20 -	Total assets (Part X, line 16)	<u> </u>	2,903		4,647,228
Net Assets or Fund Balances	21	T (,411	792,032
Net	22 1	Net assets or fund balances. Subtract line 21 from	ine 20	2,852		3,855,196
	art II	Signature Block	III 20	2,032	7007	3/033/130
		nalties of perjury, I declare that I have examined this retu	urn including accompanying schedules and sta	etements and to t	ha hast o	f my knowledge and helief it
		ect, and complete. Declaration of preparer (other than off				my knowledge and belief, k
-						
Sig	n	Signature of officer			Date	
He		STEVE LAW	EXECU:	TIVE DIE	ECTO)R
		Type or print name and title				
_		Print/Type preparer's name	Preparer's signature	Date	Check	if PTIN
Pai	d	ABIGAIL L. CAMPBELL, CPA				рроуер Р01296738
Pre	parer	Firm's name } BLANKENSHIP CPA	A GROUP, PLLC	Firr	n's EIN }	45-0491842
Use	e Only	215 WARD CIRCLE		1		
		Firm's address } BRENTWOOD, TN	37027-2304	Pho	one no.	615-373-3771
May	v the IF	RS discuss this return with the preparer shown abo		1110		X Yes No

orm 990 (2016) TENNES			62-1557	074	Page 2
	_	rice Accomplishments			
Check if Sc	hedule O contains	s a response or note to	any line in this Pa	rt III	<u></u>
1 Briefly describe the orga					
THE ORGANIZAT	ION'S PRIMA	RY MISSION IS	TO PROTECT	TENNESSEE'S	NATURAL
TREASURES BY	CREATING GF	REEN CORRIDORS	LINKING EXI	STING PUBLIC	LANDS USING
CONSERVATION	EASEMENTS A	ND OUTRIGHT PU	RCHASE.		
2 Did the organization und	dertake any significant	program services during the	ear which were not lis	sted on the	
		gg			Yes X No
If "Yes," describe these	new services on Sche	dule O			
		ke significant changes in how	it conducts, any progr	am	
	_		· · · -		Yes X No
If "Yes," describe these		·····			163 21 110
	_		a three largest program	n comisso oo maaayraa	l hu
=		ccomplishments for each of it			
		anizations are required to rep	ort the amount of grai	nts and allocations to other	ners,
the total expenses, and	revenue, if any, for ea	ach program service reported.			
		7,769 including grants of) (Revenue \$)
THE ORGANIZAT	ION WORKS T	O PRESERVE TEN	NESSEE SCEN	IC BEAUTY BY	CREATING AN
INTERCONNECTE	D SYSTEM OF	' PARKS, GREENW	AYS, AND WI	LDLIFE AREAS	5.
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• • • • • • • • • • • • • • • • • • • •					
4b (Code:) (Expe	enses \$	including grants o	of\$) (Revenue \$)
3T / 7					
• • • • • • • • • • • • • • • • • • • •					
• • • • • • • • • • • • • • • • • • • •					
• • • • • • • • • • • • • • • • • • • •					
4c (Code:) (Expe	enses \$	including grants o	of\$) (Revenue \$)
N/A				, ,	
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*					
4d Other program services	(Describe in Schedule	· O)			
(Expenses \$		ding grants of\$) (Revenu	Δ \$	1
) (ixevenu	υ ψ	
4e Total program service e	Apenises u	547 , 769			

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
_	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			v
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	4	x	
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4	Λ	
5	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Dead III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	<u> </u>		
U	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Non" anymote Cabadula D. David	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, 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? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a		40.	37	
	Schedule D, Parts XI and XII	12a	X	
Ø	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
12		13		X
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization maintain an office, employees, or agents outside of the Onlied States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	144		- 22
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
-	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	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? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
		_	000	(004-

Part IV Checklist of Required Schedules (continued)

20a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a	Yes	No X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
1	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20.0		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
;	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No." go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
Ĭ	to defease any tay-evemnt honds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		2
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	254		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
6	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	230		
U				
	current or former officers, directors, trustees, key employees, highest compensated employees, or	26		X
7	disqualified persons? If "Yes," complete Schedule L, Part II	26		
	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			٦,
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		2
8	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):			٦,
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			٠,
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			Ι,
_	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	37	X
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30	X	
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		X
2				
	complete Schedule N, Part II	32		X
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		X
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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)? If "Yes," complete Schedule R, Part V, line 2	35b		
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.	38	X	

Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in Box 3 of Form 1008. Enter 4- If not applicable be Enter the number of Pores W/2G included in line 1s, Enter 4- If not applicable 10 b			_
b Enter the number of Forms W/G included in ne 1s. Efficil -0 if the organization comply with backup withholding rules for reportable payments to vendos and reportable payming (gambling) winnings to prize winnings. 2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax. Statements, filled of the collected year ending with or within the year covered by this return. 2a I 11 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1 and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization in a post of 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 accounts) 3b If Yes, enter the name of the foreign country uses a bank account, securities account, or other financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 5a Dod any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction? 5b If Yes's in the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization receive a payment in excess of \$75 mad	<u></u>	<u>.,L</u>	
b Enter the number of Forms W/G included in ne 1s. Efficil -0 if the organization comply with backup withholding rules for reportable payments to vendos and reportable payming (gambling) winnings to prize winnings. 2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax. Statements, filled of the collected year ending with or within the year covered by this return. 2a I 11 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1 and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization in a post of 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 accounts) 3b If Yes, enter the name of the foreign country uses a bank account, securities account, or other financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 5a Dod any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction? 5b If Yes's in the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization receive a payment in excess of \$75 mad	Yes	s N	lo
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (pambling) winnings to proze winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required feedral employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a At any time during the calendar year, did the organization have were 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)? 3b If "Yes," enter the name of the foreign country; u. 3c enstructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b Did entry taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shelt any contributions that were not tax deductible as charitable contributions? 6a Different or tax deductible? 7b Organizations shalt many receive deductible contributions under section 170(c). 6b Different organization and the way of the property of the organization file form 8222? 7c Different organization make all the contributions under section 170(c). 7c Different organization received a contribution of c			
reportable gaming (gambling) winnings to prize winners? 2 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 2 I 1			
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendary year anding with or within the year covered by this return b if at least one is reported on line 2a, did the organization file all required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a If "Yes," has it filed a Form 990-T for this year? if "No" to line 3b, provide an explanation in Schedule O. 3b If "Yes," has it filed a Form 990-T for this year? if "No" to line 3b, provide an explanation in Schedule O. 3b 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)? If "Yes," enter the name of the foreign country. u See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Id any taxable party norifly the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible contributions? 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 179(c). 8 Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided or the payor? 7 Organizations but any receive deductible contributions or promise organization organization neceive any funds, directly or indirectly, to pay premiums on a personal bene			
Statements, flied for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If "Yes," has if filed a Form 990-T for this year? If "Mo" to fine 3b, provide an explanation in Schedule 0 3countly? 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country; cuch as a bank account, securities account, or other financial accounts? 5countly? 4a If "Yes," enter the name of the foreign country; cuch as a bank account, securities account, or other financial accounts; fleaking requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts 5countly? 5countly? 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization file Form 8886-T? 6c) If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 6d) Does the organization solicit any contributions that were not tax deductible as charitable contributions? 6d) If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c) Organizations that may receive deductible contributions under section 170(c). 8 bid the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7c) Organizations that may receive deductible contributions under section 170(c). 8 bid the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8292? 7c Did the organization in receive any funds, directly or indirectly, to pa	1	_	_
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b Enter the amount of reserves the organization is required to maintain by the states in which			
the organization is licensed to issue qualified health plans 13b			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?		7	X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	_	1	_

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Check if Schedule O contains a response or note to any line in this Part VI. In A. Governing Body and Management Iter the number of voting members of the governing body at the end of the tax year there are material differences in voting rights among members of the governing body, or he governing body delegated broad authority to an executive committee or similar mimittee, explain in Schedule O. Iter the number of voting members included in line 1a, above, who are independent of unique of the organization delegate control over management duties customarily performed by or under the direct pervision of officers, directors, or trustees, or key employees to a management company or other person? If the organization make any significant changes to its governing documents since the prior Form 990 was filed? If the organization have members or stockholders? If the organization have members or stockholders? If the organization have members, stockholders, or other persons who had the power to elect or appoint e or more members of the governing body? If the organization contemporaneously document the meetings held or written actions undertaken during the year by the follow the organization contemporaneously document the meetings held or written actions undertaken during the year by the follow the organization contemporaneously document the meetings held or written actions undertaken during the year by the follow the organization contemporaneously document the meetings held or written actions undertaken during the year by the follow the organization contemporaneously document the meetings held or written actions undertaken during the year by the follow the organization contemporaneously document the meetings held or written actions be reached at	2 3 4 5 6 7a 7b	instru	uctio X
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d any officer, director, trustee, or key employee have a family relationship or a business relationship with y other officer, director, trustee, or key employee? d the organization delegate control over management duties customarily performed by or under the direct pervision of officers, directors, or trustees, or key employees to a management company or other person? d the organization make any significant changes to its governing documents since the prior Form 990 was filed? d the organization become aware during the year of a significant diversion of the organization's assets? d the organization have members or stockholders? d the organization have members, stockholders, or other persons who had the power to elect or appoint e or more members of the governing body? e any governance decisions of the organization reserved to (or subject to approval by) members, ockholders, or persons other than the governing body? d the organization contemporaneously document the meetings held or written actions undertaken during the year by the following governing body? the committee with authority to act on behalf of the governing body? there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	3 4 5 6 7a 7b		X
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pervision of officers, directors, or trustees, or key employees to a management company or other person? d the organization make any significant changes to its governing documents since the prior Form 990 was filed? d the organization become aware during the year of a significant diversion of the organization's assets? d the organization have members or stockholders? d the organization have members, stockholders, or other persons who had the power to elect or appoint e or more members of the governing body? e any governance decisions of the organization reserved to (or subject to approval by) members, bockholders, or persons other than the governing body? d the organization contemporaneously document the meetings held or written actions undertaken during the year by the following governing body? and committee with authority to act on behalf of the governing body? there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	4 5 6 7a 7b ving:	X	X
d the organization make any significant changes to its governing documents since the prior Form 990 was filed? d the organization become aware during the year of a significant diversion of the organization's assets? d the organization have members or stockholders? d the organization have members, stockholders, or other persons who had the power to elect or appoint e or more members of the governing body? e any governance decisions of the organization reserved to (or subject to approval by) members, ockholders, or persons other than the governing body? d the organization contemporaneously document the meetings held or written actions undertaken during the year by the follow the governing body? The committee with authority to act on behalf of the governing body? There any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	4 5 6 7a 7b ving:	X	X
d the organization become aware during the year of a significant diversion of the organization's assets? d the organization have members or stockholders? d the organization have members, stockholders, or other persons who had the power to elect or appoint e or more members of the governing body? e any governance decisions of the organization reserved to (or subject to approval by) members, ockholders, or persons other than the governing body? d the organization contemporaneously document the meetings held or written actions undertaken during the year by the follow the governing body? The committee with authority to act on behalf of the governing body? There any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	5 6 7a 7b ving:	X	Х
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ockholders, or persons other than the governing body? d the organization contemporaneously document the meetings held or written actions undertaken during the year by the following governing body? ach committee with authority to act on behalf of the governing body? there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	ving:		
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e governing body? ich committee with authority to act on behalf of the governing body? there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	_		Х
ich committee with authority to act on behalf of the governing body? there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	8a		
there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		X	<u> </u>
	8b	X	<u> </u>
e organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	L	X
n B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		
		Yes	
d the organization have local chapters, branches, or affiliates?	10a		X
'Yes," did the organization have written policies and procedures governing the activities of such chapters,			ĺ
iliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		<u> </u>
as the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
escribe in Schedule O the process, if any, used by the organization to review this Form 990.			
d the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	<u> </u>
ere officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
d the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			ĺ
scribe in Schedule O how this was done	12c		<u> </u>
=			<u> </u>
	14	X	
	15a		<u> </u>
her officers or key employees of the organization	15b	X	
d the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	16a		X
th a taxable entity during the year?			
Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
			i
d d d h	the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," scribe in Schedule O how this was done the organization have a written whistleblower policy? the organization have a written document retention and destruction policy? the process for determining compensation of the following persons include a review and approval by ependent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? or organization's CEO, Executive Director, or top management official ter officers or key employees of the organization Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). The organization invest in, contribute assets to, or participate in a joint venture or similar arrangement at a taxable entity during the year? Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," scribe in Schedule O how this was done the organization have a written whistleblower policy? the organization have a written document retention and destruction policy? the process for determining compensation of the following persons include a review and approval by expendent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? organization's CEO, Executive Director, or top management official ter officers or key employees of the organization Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement a taxable entity during the year? Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," scribe in Schedule O how this was done the organization have a written whistleblower policy? the organization have a written document retention and destruction policy? the process for determining compensation of the following persons include a review and approval by expendent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? organization's CEO, Executive Director, or top management official organization's CEO, Executive Director, or top management official organization in 15b or 15b, describe the process in Schedule O (see instructions). the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement or a taxable entity during the year? organization follow a written policy or procedure requiring the organization to evaluate its ticipation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the

- Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. $\begin{tabular}{c} \begin{tabular}{c} \begin{tabul$
- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records: ${f u}$

STEVE LAW

117 30TH AVENUE SOUTH

NASHVILLE TN 37212 615-329-4441

Form **990** (2016)

Form 990 (20	16) TENNESSEE	PARKS AND	GREENWAYS	62-1557574		Page 7
Part VII	Compensation o	f Officers, Direc	ctors, Trustees,	Key Employees, Highe	st Compensated	Employees, ar
	Independent Co	ntractors		_	-	_
	Check if Schedule	O contains a re	esponse or note t	o any line in this Part VII		
Section A.	Officers, Directors,	Trustees, Key Emp	loyees, and Highest	Compensated Employees		
1a Complete	this table for all persons	required to be lister	Deport componenti	on for the colondar year anding	with or within the	21/

- **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.

Ave hour we (list hour relations) (1) DR. CHUCK WOMACK CHAIRMAN (2) JOHN NOEL III PRESIDENT (3) MARY LYNN DOBSON 0	rage rs per eek t any irrs for ated izations r dotted ne)	box	not con an institutional trustee	ss pe od a co	tion more rson is lirecto	s both r/truste	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) DR. CHUCK WOMACK CHAIRMAN 0 (2) JOHN NOEL III PRESIDENT 0 (3) MARY LYNN DOBSON 0	.50	trustee	. – 1		/ employee	hest compensated ployee	mer	, ,		and related
CHAIRMAN	.00 .50	x		3,5			- 1		1	
(2) JOHN NOEL III OPRESIDENT (3) MARY LYNN DOBSON 0	.50	X								
0 PRESIDENT 0 (3) MARY LYNN DOBSON 0			!	X				0	0	0
PRESIDENT 0 (3) MARY LYNN DOBSON 0										
(3) MARY LYNN DOBSON 0		x		х				0	0	0
	- 0								<u> </u>	
REGIONAL VP 0	.50 .00	x		x				0	0	0
(4) FRANK RICKS										
	.50									
	.00	X		Х			_	0	0	0
(5) BOB TUKE	.50									
REGIONAL VP 0	.00	x		X				0	0	0
(6) ESTIE SHEAHAN	.50									
	.00	$ \mathbf{x} $		х				0	0	0
(7) ANN TIDWELL	•00	122		21					•	
	.50									
	.00	$ \mathbf{x} $		х				0	0	0
(8) RYAN BAILEY										
	.50									
	.00	X						0	0	0
(9) JANIE FINCH										
	.50									
	.00	X					_	0	0	0
(10) SCOTT MAY	F0									
	.50	.							0	•
(11) DIRECTOR GARY MYERS	.00	X					\dashv	0	0	0
	.50									
	.00	$ \mathbf{x} $					- 1			i
DAA							I	0	0	0

Page 8

Part VII	Section A. Officer	s, Directors, Tr	rust	ees,	Key	Em	ploy	/ees	s, and Highest Compens	sated Employees (continu	ıed)		
	(A) Name and title Average hours per week (list any		bo	o not c x, unle icer ar	ss per	tion more son i	s both	n an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	ortable Estimated amount of ated other		
	Publ	hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	í	from the organization and relate organization	on ed
(12) I	MARK PEACOCK						-						
DIRECT		0.50	x						0	o			0
	ROBERT PHILP									0			
DIRECT	OR	0.50 0.00	x						0	0			0
(14)	ED ROEBER	0.50											
DIRECT	 OR	0.50	x						0	0			0
	MR. JOE ROYE												
· · · · · · · · · · · · · · · · · · ·	<u></u>	0.50											_
DIRECT(16)	OR LOIS RULEMAN	0.00	X						0	0			0
(10)	DOID KULLEMAN	0.50											
DIRECT		0.00	X						0	0			0
(17)	WILL SKELTON	0.50											
DIRECT	OR	0.00	x						0	0			0
(18)	STEVE STEDMA												
DIRECT	 OR	0.50	x						0	0			0
	CHARLIE TROS												
DIRECT	OR	0.50 0.00	x						0	o			0
1b Sub-	total	•						u					
	I from continuation she		•						84,874 84,874				
	I (add lines 1b and 1c) I number of individuals (i							u d at	pove) who received more				
repor	rtable compensation from	n the organizati	on ı	<u>0</u>									Yes No
3 Did t	he organization list any	former officer, c	direc	tor, c	or tru	ste	e, ke	y er	mployee, or highest comp	ensated			X
4 For a	any individual listed on li	ne 1a, is the su	m o	rep	or si ortab	ucn Ie c	omp:	ens:	alation and other compensa	tion from the		3	A
	nization and related orga <i>idual</i>	anizations greate	er th	nan \$	\$150,	,000)? If	"Yes	s," complete Schedule J fo	or such		4	x
5 Did a	any person listed on line								n any unrelated organization				
	ervices rendered to the . Independent Contrac		"Ye	s," cc	omple	ete	Sche	edule	e J for such person			5	X
1 Com	plete this table for your	five highest com	nper com	sate	d ind	depe	nder the	nt co	ontractors that received mendar year ending with or	ore than \$100,000 of within the organization's	tax year.		
		(A) d business address								(B) tion of services			(C) pensation
											-+		
	I number of independent ived more than \$100,000									0			

Pa	irt v	Check if Schedule O contains	a response	e or note to anv l	ine in this Part VI	I	
		De ele li e I		(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
Program Service Revenue Contributions, Gifts, Grants Program Service Revenue and Other Similar Amounts	1a b c d	Federated campaigns 1a Membership dues 1b Fundraising events 1c Related organizations 1d	108,624	pec	revenue	60	512-514
Contributions and Other Sin	e f g h	Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above 1f 1, Noncash contributions included in lines 1a-1f: Total. Add lines 1a-1f	753,100 378,087 u	1,861,724			
enue			Busn. Code				
Seve	2a						
ervice F	b c						
n S	d						
gran	e	All other management and described					
² roç	T	All other program service revenue					
_	<u>g</u> 3	Total. Add lines 2a–2f					
	4	and other similar amounts) Income from investment of tax-exempt bone	u	9,037			9,037
	5	Royalties	u				
		(i) Real (ii)	Personal				
	6a	Gross rents					
	b	Less: rental exps.					
	С	Rental inc. or (loss)					
	d 7a	Net rental income or (loss)	u				
	'a	sales of assets (i) Securities (ii)	i) Other				
		other than inventory	213,789				
	b	Less: cost or other					
		basis & sales exps	221,450				
		Gain or (loss)	-7,661	7 ((1	7 ((1		
		Net gain or (loss)	u	-7,661	-7,661		
Other Revenue	ва	Gross income from fundraising events (not including \$ 108,624 of contributions reported on line 1c).					
r R		See Part IV, line 18 a	55,315				
the	b	Less: direct expenses b	72,556				
0		Net income or (loss) from fundraising event	s u	-17,241			
	9a	Gross income from gaming activities.					
		See Part IV, line 19a					
	b	Less: direct expenses b					
	С	Net income or (loss) from gaming activities	u				
	10a	Gross sales of inventory, less					
		returns and allowances a					
		Less: cost of goods sold b					
	С	Net income or (loss) from sales of inventory					
		Miscellaneous Revenue	Busn. Code				
	11a						
	b						
	С.	All of					
	d	All other revenue					
		Total. Add lines 11a–11d		1,845,859	-7,661	0	9,037
	12	Total revenue. See instructions	u	±,0 1 0,005	-/,001	U	, <i>5,</i> 03/

Part IX Statement of Functional Expenses

	ion 501(c)(3) and 501(c)(4) organizations must		ll other organizations mus	st complete column (A)	
3001	Check if Schedule O contains a res				Π
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1112Dt	561101		Py
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
4	individuals. See Part IV, lines 15 and 16 Benefits paid to or for members				
5	Compensation of current officers, directors,				
·	trustees, and key employees	84,874	76,387	4,244	4,243
6	Compensation not included above, to disqualified	0 - 7 0 1 -	10,001	- ,	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	334,106	263,925	37,153	33,028
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	13,473	10,643	1,498	1,332
9	Other employee benefits	3,370	2,662	375	1,332 333 3,171
10	Payroll taxes	32,082	25,343	3,568	3,171
11	Fees for services (non-employees):				
	Management	3,829	3,829		
	Legal	15,563	15,563		
	Accounting Lobbying	13,303	13,303		
	Professional fundraising services. See Part IV, line 1	7			
	Investment management fees	,			
	Other. (If line 11g amount exceeds 10% of line 25, column				
J	(A) amount, list line 11g expenses on Schedule O.)	31,209	22,975	2,386	5,848
12	Advertising and promotion	4,562	3,057	•	1,505
13	Office expenses	52,124	38,245	1,503	12,376
14	Information technology	10,094	4,769	452	4,873
15	Royalties				
16	Occupancy	20,858	13,042	6,814	1,002
17	Travel	13,923	11,478	90	2,355
18	Payments of travel or entertainment expense	S			
10	for any federal, state, or local public officials Conferences, conventions, and meetings	4,012	2,251	121	1,640
19 20	Interest	44,704	40,234	4,470	1,040
21	Interest Payments to affiliates	± ± ± 1 1 1 1	10,231	7,710	
22	Depreciation, depletion, and amortization	4,384	4,384		
23	Insurance	10,609	7,982	1,680	947
24	Other expenses. Itemize expenses not covered		,	,	-
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	BAD DEBT EXPENSE	1,000	1,000		
b					
С.					
d	All other eveness				
e 25	All other expenses Total functional expenses. Add lines 1 through 24e	684,776	547,769	64,354	72,653
26	Joint costs. Complete this line only if the	004,770	541,109	04,334	12,033
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here u if				
	following SOP 98-2 (ASC 958-720)				
DAA	, , , , , , , , , , , , , , , , , , , ,				Form 990 (2016)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash—non-interest bearing 1,350,231 91,111 Savings and temporary cash investments 1,139,601 2 Pledges and grants receivable, net 78,750 17,500 3 Accounts receivable, net 104,905 4 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 instructions). Complete Part II of Schedule L 6 25,000 7 Notes and loans receivable, net ______ Inventories for sale or use 8 9 Prepaid expenses and deferred charges 8,457 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 3,355,412 b Less: accumulated depreciation 10b 39,797 1,348,830 3,315,615 10c Investments—publicly traded securities 11 Investments—other securities. See Part IV, line 11 12 12 Investments—program-related. See Part IV, line 11 13 13 14 Intangible assets 14 20,302 Other assets. See Part IV, line 11 49,944 15 15 2,903,018 4,647,228 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 Accounts payable and accrued expenses 37,142 17 31,444 17 Grants payable 18 18 Deferred revenue 19 19 Tax-exempt bond liabilities 20 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 13,269 760,588 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 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 25 50,411 792,032 Total liabilities. Add lines 17 through 25 26 26 Organizations that follow SFAS 117 (ASC 958), check here uX and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 2,438,586 27 3,470,221 27 Temporarily restricted net assets 337,918 302,872 28 28 Permanently restricted net assets 76,103 29 82,103 29 Organizations that do not follow SFAS 117 (ASC 958), check here u complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 Total net assets or fund balances 2,852,607 3,855,196 33 33 4,647,228 2,903,018 Total liabilities and net assets/fund balances ... 34

Form **990** (2016)

orm	990 (2016) TENNESSEE PARKS AND GREENWAYS 62-1557574			Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,84	5,8	359
2	Total expenses (must equal Part IX, column (A), line 25)	2	68	34,7	776
3	Revenue less expenses. Subtract line 2 from line 1	3	1,16	1,0	083
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,85	2,6	507
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	-15	8,4	194
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	3,85	55,1	L96
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	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:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		. 3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	. 3b		
			Form	990	(2016)

Pa	rt VII Section A. Of	ficers, Directo	ors, Tr	uste	es,	Key	Em	ploy	ees	, and Highest Compens	ated Employees (continu	ied)			
	(A) Name and title	(B) Averag hours p week (list an	per c	kod	k, unle	Posi check ess pe nd a d	more rson i	than o	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)		(F) Estimate amount other ompens from the	t of r ation	
	Pub	organizati below do line)	d ions otted	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)			organiza and rela rganizat	ition ated	
(20) MELINDA WE														
 DTB	ECTOR	0.		X						0	0				0
$\frac{D1R}{(21)}$		0.		Λ						0	0				
EXE	CUTIVE DIRECTOR	40.0 R 0.0		x		х				84,874	0				0
	Sub-total								u u	84,874					
	Total (add lines 1b and	1c)	· · · · · · · ·			<u></u>			u						
2	Total number of individual reportable compensation					to th	ose	listed	d ab	pove) who received more	than \$100,000 of				
3		any former off	icer, d	irect	tor, o	or tru	ustee uch	e, ke indiv	y er	mployee, or highest comp	ensated	 [3	Yes	No
4		organizations	greate	er th	an S	\$150	,000)? If '	'Yes	ation and other compensa s," complete Schedule J fo			4		
5	Did any person listed on		e or a	ccru	ie co	mpe	ensa	tion f	rom	any unrelated organization					
Sect	for services rendered to ion B. Independent Cor		on? If	"Yes	S," C(<u>ompi</u>	ete	Scne	auie	e J for such person			5	[
1	Complete this table for y	our five highes	st com	pen	sate	d ind	depe	ender	nt co	ontractors that received mendar year ending with or	ore than \$100,000 of	tay year			
		(A) ne and business add		COIII	рсп	Sauci	11 10	ı uıc	Can		(B) tion of services	tax year.		(C) mpensat	ion
2	Total number of independence received more than \$100	dent contracto	rs (inc ensatio	ludii on fi	ng b rom	ut no	ot lin	nited nizat	to t	those listed above) who					

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

OMB No. 1545-0047 **2016**

Open to Public Inspection

u Attach to Form 990 or Form 990-EZ.

u Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

TENNESSEE PARKS AND GREENWAYS

Employer identity

Employer identification number

	FOUNDATION 62-1557574								
Pa	art I	Reas	on for Public Charity	Status (All organization	ns mus	t comp	ete this part.) See instr	uctions.	
The	orga	nization is no	t a private foundation beca	use it is: (For lines 1 through 1	2, check	only one	box.)		
1		A church, co	onvention of churches, or as	ssociation of churches describe	ed in sec	tion 170	(b)(1)(A)(i).		
2	П	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)							
3	П			vice organization described in					
4	Н	-	· · · · · · · · · · · · · · · · · · ·	ed in conjunction with a hospit				the hospital's name	
•	Ш	city, and stat	= -	od in conjunction with a neoph	iai accorn	JCG III J (Solion Tro(B)(T)(A)(III). Enter	the hoopitals hame,	
5		•		t of a college or university own	od or on	orated by	, a governmental unit describ	 nd in	
J	Ш	=			ieu oi op	erated by	a governmental unit describe	5U III	
6			O(b)(1)(A)(iv). (Complete Pa		n acatio	n 470/h\	(4)(4)(4)		
6	₩			governmental unit described i				d- 10 -	
7	X		section 170(b)(1)(A)(vi).	a substantial part of its support	t irom a (governme	ental unit or from the general	public	
	\Box				Oort II \				
8	Н	-		170(b)(1)(A)(vi). (Complete F			and the state of t		
9	Ш	-	=	escribed in section 170(b)(1)(-	_	
		university:	or a non-land grant college	e of agriculture (see instructions	s). Enter	me name	e, city, and state of the colleg	e oi	
10	\Box		ion that narmally receives:	(1) more than 33 1/3% of its s	t fr	om contr	ibutions membership foos a	d groce	
10	Ш			empt functions—subject to certain					
				and unrelated business taxable					
			•	30, 1975. See section 509(a)		`	,		
11			=	d exclusively to test for public					
12	П	_	- · · · · · · · · · · · · · · · · · · ·	d exclusively for the benefit of,	-			purposes	
	ш	_		nizations described in section					
				that describes the type of sup					
	а	Type I. A	A supporting organization o	perated, supervised, or control	lled by its	support	ed organization(s), typically b	y giving	
		_		ower to regularly appoint or ele	-				
		supportin	ng organization. You must	complete Part IV, Sections A	and B.	-			
	b	Type II.	A supporting organization s	supervised or controlled in con	nection v	vith its su	ipported organization(s), by h	aving	
		control o	r management of the suppo	orting organization vested in th	ne same	persons t	hat control or manage the su	pported	
			•	e Part IV, Sections A and C.					
	С	Type III	functionally integrated. A	supporting organization opera	ated in co	nnection	with, and functionally integra	ted with,	
			• , , ,	nstructions). You must comple					
	d	_		ed. A supporting organization	-				
				he organization generally must				tiveness	
		_ '	,	must complete Part IV, Sect		,			
	е			eceived a written determination non-functionally integrated supp				I	
	f		mber of supported organization		porting of	garnzano			
	g			the supported organization(s).					
(:)			(ii) EIN		(iv) Is the	organization	(a) Amount of monotony	(vi) Amount of	
(1)		e of supported panization	(11) = 111	(iii) Type of organization (described on lines 1–10	listed in voi	ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see	
				above (see instructions))		ment?	instructions)	instructions)	
					Yes	No			
(A)									
(B)									
(C)									
(D)									
(E)									
• •									

62-1557574

Page 2

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.)

	tion A. Public Support			4 1			
Caler	ndar year (or fiscal year beginning in) u	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not	1112	bhe	GUU			y
	include any "unusual grants.")	760,745	581,708	1,155,002	871,017	575,724	3,944,196
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	760,745	581,708	1,155,002	871,017	575,724	3,944,196
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
•	shown on line 11, column (f)						238,586
6 Sec	Public support. Subtract line 5 from line 4. tion B. Total Support						3,705,610
	ndar year (or fiscal year beginning in) u	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	760,745	581,708	1,155,002	871,017	575,724	3,944,196
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8,004	11,272	5,610	8,368	9,037	42,291
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						3,986,487
12	Gross receipts from related activities, et					12_	130,471
13	First five years. If the Form 990 is for the	•	irst, second, third	, fourth, or fifth tax	x year as a sectio	n 501(c)(3)	. \square
	organization, check this box and stop he						<u></u>
	tion C. Computation of Public					1 1	
14	Public support percentage for 2016 (line	6, column (f) divid	led by line 11, co	lumn (f))		14	92.95 %
15	Public support percentage from 2015 Sc	hedule A, Part II,	line 14		4: 00 4/00/		99.05%
16a					4 is 33 1/3% or m	ore, check this	▶ [X]
L	box and stop here. The organization quality 33 1/3% support test—2015. If the organization	•					▶ 🕰
b	this box and stop here. The organization			organization			▶ □
17a	10%-facts-and-circumstances test—2						
	10% or more, and if the organization me	_					
	Part VI how the organization meets the				-	-	
	organization			-			▶ □
b	10%-facts-and-circumstances test—2	2015. If the organiz	ation did not che	ck a box on line 1	3, 16a, 16b, or 17	'a, and line	· ⊔
	15 is 10% or more, and if the organization	-					
	Explain in Part VI how the organization						
	supported organization			_			▶ □
18	Private foundation. If the organization of	did not check a bo	x on line 13, 16a	16b, 17a, or 17b	, check this box a	ind see	
	instructions						▶ □

Page 3

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

(Complete only if you checked the box on line 10 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.)

<u> </u>	tion A. Public Support			4 1			
Caler	ndar year (or fiscal year beginning in) u	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		PE	JUU			y .
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) u	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						_
	and 12.)						
14	First five years. If the Form 990 is for the		first, second, third	, fourth, or fifth ta	x year as a sectio	n 501(c)(3)	
	organization, check this box and stop he						<u></u> ▶ ∐
	tion C. Computation of Public					1 1	
15	Public support percentage for 2016 (line						%
16	Public support percentage from 2015 Sc						%
	tion D. Computation of Investm					1 1	
17	Investment income percentage for 2016						<u>%</u>
18	Investment income percentage from 201						%_
19a	33 1/3% support tests—2016. If the org						. □
I.	17 is not more than 33 1/3%, check this						
b	33 1/3% support tests—2015. If the org	=					
20	line 18 is not more than 33 1/3%, check		_	-		_	
20	Private foundation. If the organization of	JIU NOT CNECK A bo	ox on line 14, 19a	, or 19b, check th	is box and see in	structions	▶ ∐

Part IV Supporting Organizations

Schedule A (Form 990 or 990-EZ) 2016

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- **c** Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **8** Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- **c** Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "Yes," *provide detail in Part VI.*
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

/ [Yes	No
- 1			
	1		
	2		
	3a		
	3b		
	3с		
	30		
	4-		
	4a		
	4b		
	4c		
	_		
	5a		
	5b		
	5c		
	6		
	Ť		
	7		
	7		
	_		
	8		
	9a		
	9b		
	9с		
	10a		
	iva		
	104		
/For	10b	or 990-	E7\ 2016

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

Parent of Supported Organizations. Answer (a) and (b) below.

trustees of each of the supported organizations? Provide details in Part VI.

3a

Schedule A (Form 990 or 990-EZ) 2016 TENNESSEE PARKS AND GREENW	IAYS	62-1557	574 Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting (Organ	nizations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust or	n Nov.	20, 1970 (explain in Part	VI). See
instructions. All other Type III non-functionally integrated supporting organizations	must o	complete Sections A throu	gh E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year
Public Inchactu		(7.) The Total	(optional)
1 Net short-term capital gain	1_1		IL J V
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally integra	ated Ty	pe III supporting organiza	tion (see

Schedule A (Form 990 or 990-EZ) 2016

instructions).

	e A (Form 990 or 990-EZ) 2016 TENNESSEE PARKS A		62-1557	
Part	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,) Supporting Organ	izations (continued)	
	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt pu			
2	Amounts paid to perform activity that directly furthers exempt purpo			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of su	apported organizations		/
<u>4</u> 5	Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required)			
	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organizations to which the organizations are supported organizations.	nization is responsive		
Ū	(provide details in Part VI). See instructions.	nization is responsive		
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	and a dinibant arrassa by anno a arrown	(i)	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
	,		Pre-2016	Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
	Underdistributions, if any, for years prior to 2016			
2	(reasonable cause required-explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
	From 2013			
	From 2014			
	From 2015			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
<u>i</u> _	Carryover from 2011 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from			
	Section D, line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	- ·			
U	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j			
,	and 4c.			
8	Breakdown of line 7:			
<u> </u>	Diodingowii of lillo 1.			
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

	orm 990 or 990-EZ) 2016		PARKS AND		62-1557574	Page 8
Part VI	Supplemental I	nformation. Provide	e the explanation	s required by Part	II, line 10; Part II, line	17a or 17b; Part
	III, line 12; Part I	V, Section A, lines	1, 2, 3b, 3c, 4b, 4	4c, 5a, 6, 9a, 9b, 9	Oc, 11a, 11b, and 11c;	Part IV, Section
	B, lines 1 and ∠;	Part IV, Section C,	Tine 1; Part IV, S	Dection D, lines 2 8	and 3; Part IV, Section lines 5, 6, and 8; and I	E, lines TC, Za, Zb, Part V. Section E
	lines 2, 5, and 6.	. Also complete this	s part for any add	ditional information	. (See instructions.)	art v, Section L,
	11.00 2, 0, 41.0 0.	7.100 001111010 1110			- (Goo in our double)	11//
SUPPOR	RTING SCHEDU	LE - UNUSUAI	GRANTS			<u></u>
			-		_	
BEQUES	ST FROM ESTA	ATE			\$	1,000,000
ONE T	IME CONTRIBU	ITT∩N			\$	286,000
ONE I	IME CONTRIDO	71101			.	200,000
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Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

TENNESSEE PARKS AND GREENWAYS

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

Schedule of Contributors

u 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

OMB No. 1545-0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

2016

FOUNDATION Organization type (check	k one):
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
	is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See
For an organization	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributions.
Special Rules	
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line and that received from any one contributor, during the year, total contributions of the greater of (1) of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
contributor, during	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, onal purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
contributor, during contributions totale during the year for General Rule app	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such ed more than \$1,000. If this box is checked, enter here the total contributions that were received or an <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the colles to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions more during the year.
Caution: An organization 990-EZ, or 990-PF), but it	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, a 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 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
TENNESSEE PARKS AND GREENWAYS

Employer identification number 62-1557574

Part I	Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.							
(a) No.	Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
1		\$ 1,000,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
2		\$ 291,000	Person X Payroll Noncash X (Complete Part II for noncash contributions.)					
(a)	(b)	(c)	(d)					
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
	Name, address, and Zir + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
	Trumo, additios, dila Eli TT	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
	Name, audiess, allu ZIF + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					

PAGE 1 OF 1

Page 3

Name of organization
TENNESSEE PARKS AND GREENWAYS

Employer identification number 62-1557574

Part II	Noncash Property (See instructions). Use duplication	ate copies of Part II if addition	nal space is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	PROPERTY	\$ 286,000	01/01/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury

u Complete if the organization is described below. u Attach to Form 990 or Form 990-EZ. u Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," on 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," on 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.

кy

Tax)	e organization answered "Yes," on Form 990, Part IV, (see separate instructions), then		arate instruction	s) or Form 990-EZ, F	art V, line 35c (Prox
	Section 501(c)(4), (5), or (6) organizations: Complete Pare of organization TENNESSEE PARKS AND FOUNDATION			Employer ider	tification number
Pa	rt I-A Complete if the organization is exe	empt under section 501	(c) or is a se		
	Provide a description of the organization's direct and in				
	definition of "political campaign activities")				
2	Political campaign activity expenditures (see instruction	s)		u\$	
3	Volunteer hours for political campaign activities (see in				
Pa	rt I-B Complete if the organization is ex	empt under section 50	1(c)(3).		
1	Enter the amount of any excise tax incurred by the orga	anization under section 4955		u\$	
2	Enter the amount of any excise tax incurred by organiz	ation managers under section	4955	u \$	
3	If the organization incurred a section 4955 tax, did it file	Form 4720 for this year?			Yes No
4a					
b	If "Yes," describe in Part IV.				
Pa	rt I-C Complete if the organization is ex-	empt under section 50	1(c), except s	ection 501(c)(3).	
1	Enter the amount directly expended by the filing organization	zation for section 527 exempt	function		
	activities			u\$	
2	Enter the amount of the filing organization's funds conti	ributed to other organizations	for section		
	527 exempt function activities			u\$	
3	Total exempt function expenditures. Add lines 1 and 2.				
	line 17b			u\$	<u></u> <u></u>
4	Did the filing organization file Form 1120-POL for this y	/ear?			. Yes No
5	Enter the names, addresses and employer identification	number (EIN) of all section 5	27 political organ	izations to which the	filing
	organization made payments. For each organization list	ed, enter the amount paid from	m the filing organ	ization's funds. Also e	enter
	the amount of political contributions received that were			_	
	as a separate segregated fund or a political action com	mittee (PAC). If additional spa	ce is needed, pro	vide information in Pa	art 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
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Sche	edule C (Form 990 or 990-EZ) 2016 TENN	ESSEE PARK	S AND GREE	NWAYS	62-1557574	Page 2
	rt II-A Complete if the orga				l filed Form 5768 (election under
	section 501(h)).					
Α	Check $ {f u} igsqcup$ if the filing organiza					group member's
	name, address, Ell			, , ,	7	
В	Check ${f u}$ $igcap $ if the filing organiza			control" provisio		
	Limits on Lo (The term "expenditures"	bbying Expendi means amounts		UOH	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence				-	
	Total lobbying expenditures to influence					
С	Total lobbying expenditures (add lines	1a and 1b)				
d	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (ad	d lines 1c and 1d)				
f	Lobbying nontaxable amount. Enter the	amount from the foll	owing table in both			
,	columns.					
	If the amount on line 1e, column (a) or (b) is: The lobbying no	ntaxable amount is:			
	Not over \$500,000	20% of the amou	nt on line 1e.			
ŀ	Over \$500,000 but not over \$1,000,000	<u> </u>	% of the excess over \$			
-	Over \$1,000,000 but not over \$1,500,000		% of the excess over \$	· · ·		
- }	Over \$1,500,000 but not over \$17,000,000		6 of the excess over \$1	,500,000.		
	Over \$17,000,000	\$1,000,000.				
9	Grassroots nontaxable amount (enter 2	5% of line 1f)				
n	Subtract line 1g from line 1a. If zero or	less, enter -0-				
	Subtract line 1f from line 1c. If zero or I If there is an amount other than zero or	ess, enter -U-		ion file Form 4720		
J						☐Yes ☐ No
	reporting section 4911 tax for this year					Te5 140
	(O		ng Period Under		all at the Care as low	
	(Some organizations that mad					nns below.
	3	See the separate in	nstructions for iin	es za through zi	r.)	
	Lo	bbying Expenditu	res During 4-Yea	r Averaging Peri	iod	
	Calendar year (or fiscal year					
	beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
	g ,					
2 a	Lobbying nontaxable amount					
b	Lobbying ceiling amount					
	(150% of line 2a, column(e))					
С	Total lobbying expenditures					
	Grassroots nontaxable amount					
е	Grassroots ceiling amount					
	(150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990-EZ) 2016 TENNESSEE PARKS AND GREENWAYS 62- Part II-B Complete if the organization is exempt under section 501(c)(3) and has N	-1557574 NOT filed For	Page 3 m 5768
(election under section 501(h)).		
	(a)	(b)
For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	9	ЭУ
a Volunteers?	X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X	2.006
c Media advertisements?	X	2,086 170
d Mailings to members, legislators, or the public?	X	1,818
Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes?		1,010
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X	570
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	x	370
i Other activities?	X	
j Total. Add lines 1c through 1i		4,644
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	x	_, , ,
b If "Yes," enter the amount of any tax incurred under section 4912		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		
Part III-A Complete if the organization is exempt under section 501(c)(4), section 5	501(c)(5), or s	ection
501(c)(6).		
		Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?		. 1
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (c) ROTH Part III A lines 4 and 2, are encurred "No		
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes."		
1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	20	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		
excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		
and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (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, lines 1	and
2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.		
SCHEDULE C, PART II-B, LINE 1		
THE FOREVER GREEN TENNESSEE CAMPAIGN HELD MEETINGS WIT	H COALIT	ON MEMBERS
FROM OTHER ENVIRONMENTAL AND HISTORIC GROUPS ACROSS TH	E STATE V	/IA PHONE ANI
IN PERSON. MEMBERS OF THE COALITION WERE TASKED WITH R	RESEARCHIN	G THE
EXISTING TENNESSEE REAL ESTATE TRANSFER TAX, CREATING	A PROPOSE	D TAX RE-
DIRECTION FOR LEGISLATORS TO ADOPT INTO THE ANNUAL STA	TE BUDGE	C, CREATE

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

u Attach to Form 990. u Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047 6 Inspection

Employer identification number Name of the organization PARKS AND GREENWAYS TENNESSEE 62-1557574 FOUNDATION Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year _____ Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) Aggregate value at end of year 4 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? 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? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). **X** Preservation of land for public use (e.g., recreation or education) |X| Preservation of a historically important land area X Protection of natural habitat Preservation of a certified historic structure X Preservation of open space 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 32 a Total number of conservation easements 2a Total acreage restricted by conservation easements 8,169.00 2b c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 0 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located **u2** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year u\$ 4,145 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes X No and section 170(h)(4)(B)(ii)? 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" on 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) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X u \$ 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 Revenue included on Form 990, Part VIII, line 1 u \$ Assets included in Form 990, Part X

Sche	edule D (Form 990) 2016 TENNESSE				557574	Page 2
Pa	art III Organizations Maintaini	ng Collections o	f Art, Historical	Treasures, or C	ther Similar A	Assets (continued)
3	Using the organization's acquisition, acce collection items (check all that apply):	ssion, and other recor	ds, check any of the	following that are a s	significant use of it	S
а	Public exhibition	■ d □ L	oan or exchange pro	ograms		
b	Scholarly research	l n e 🗆	Other			
С	Preservation for future generations	1115				UV
4	Provide a description of the organization's	s collections and expla	ain how they further t	he organization's exe	empt purpose in Pa	art
	XIII.	_				
5	During the year, did the organization solid		•	•		
_	assets to be sold to raise funds rather that		s part of the organiza	tion's collection?		Yes No
Pa	art IV Escrow and Custodial	•	o" on Form 000	Dort IV line O e	" "ana"tad an a	may nt an Farm
	Complete if the organizat 990, Part X, line 21.				•	mount on Form
1a	Is the organization an agent, trustee, cus	todian or other interme	ediary for contribution	ns or other assets no	t	
	included on Form 990, Part X?					Yes No
b	If "Yes," explain the arrangement in Part	XIII and complete the	following table:			
						Amount
d	Additions during the year				1d	
e	Distributions during the year				1e	
7 7	Ending balance	n Form 000 Port V Ii		austadial assaunt lich		Yes No
	If "Yes," explain the arrangement in Part					
	art V Endowment Funds.	Alli. Check here ii the	explanation has bee	II piovided on Fait A	···	
	Complete if the organizat	ion answered "Ye	s" on Form 990.	Part IV. line 10.		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years bac	k (e) Four years back
1a	Beginning of year balance	31,278	241,191	193,232	193,2	32 173,191
	Contributions	158	-	<u>-</u>		20,041
С	: Net investment earnings, gains, and					
	losses					
d	Grants or scholarships					
	Other expenditures for facilities and					
	programs					
f	Administrative expenses					
g	End of year balance	31,436	241,191	193,232	193,2	193,232
2	Provide the estimated percentage of the	current year end balar	nce (line 1g, column	(a)) held as:		
	Board designated or quasi-endowment u					
b	Permanent endowment u 96.00 %					
С		4.00 %				
_	The percentages on lines 2a, 2b, and 2c	•			_	
3a	Are there endowment funds not in the po	ssession of the organi	zation that are held	and administered for	the	
	organization by:					Yes No
	(i) unrelated organizations					20(11)
L	(ii) related organizations					3a(ii) X
D	If "Yes" on line 3a(ii), are the related orga			· · · · · · · · · · · · · · · · · · ·		3b
- <u>4</u>	Describe in Part XIII the intended uses of art VI Land, Buildings, and Ed		dowment lunds.			
	Complete if the organizat	• •	s" on Form 990	Part IV line 11a	See Form 990) Part X line 10
	Description of property	(a) Cost or other b			Accumulated	(d) Book value
		(investment)	(othe	','	epreciation	• •
1a	Land		3,24	5,951		3,245,951
	Buildings			54,134	10,289	53,845
	: Leasehold improvements			6,943	1,619	5,324
	Equipment			34,974	26,411	8,563
е	Other			3,410	1,478	1,932
Tota	al. Add lines 1a through 1e. (Column (d) m	ust equal Form 990, P	art X, column (B), lin	e 10c.)	u	3,315,615

_		~
מפש	Δ	- 5
ı au		•

Part VII	Investments—Other Securities.	o" on Form 000 Port IV	line 11h Coe Form 000 Port V line 12
	Complete if the organization answered "Ye (a) Description of security or category	(b) Book value	(c) Method of valuation:
	(including name of security)	(2) 2001. Value	Cost or end-of-year market value
(1) Financial	derivatives	anatio	n Conv
(2) Closely-he	eld equity interests		
(3) Other			ii oop y
(D)			
		•••	
(F) (G)		•••	
(H)		•••	
	nn (b) must equal Form 990, Part X, col. (B) line 12.) u	•••	
Part VIII	Investments—Program Related.		
	Complete if the organization answered "Ye	s" on 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)			
<u>(4)</u> (5)			
(6)			
(7)			
(8)			
(9)			
	nn (b) must equal Form 990, Part X, col. (B) line 13.) u		
Part IX	Other Assets.	" F 000 D (I) (" 44 L O E 000 D () " 45
	Complete if the organization answered "Ye	s" on Form 990, Part IV,	
(1)	(a) Description		(b) Book value
<u>(1)</u> (2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	(1) (5) (5) (7) (7) (7)		
Part X	nn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.		u
raitA	Complete if the organization answered "Ye	s" on Form 990 Part IV	line 11e or 11f See Form 990 Part X
	line 25.	o on ronn 000, rait iv,	inc the or the deet of the doo, t are x,
1.	(a) Description of liability	(b) Book value	
(1) Federal	income taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
	nn (b) must equal Form 990, Part X, col. (B) line 25.) u		
	uncertain tax positions. In Part XIII provide the text of	the footpote to the organization	un's financial statements that reports the

Sche	edule D (Form 990) 2016 TENNESSEE PARKS AND GREENWAY:		62-155757		Page 4		
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.							
	Complete if the organization answered "Yes" on Form 990,	Part I	V, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	1,925,152		
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
а	Net unrealized gains (losses) on investments	2a	M '		n.		
b	Donated services and use of facilities	2b	6,737				
С	Recoveries of prior year grants	2c					
d	Other (Describe in Part XIII.)	2d	72,556				
е	Add lines 2a through 2d			2e	79,293		
3	Subtract line 2e from line 1			3	1,845,859		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:						
	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
	Other (Describe in Part XIII.)	4b		_			
	Add lines 4a and 4b			4c	1 045 050		
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,845,859		
Pa	rt XII Reconciliation of Expenses per Audited Financial State			er Re	eturn.		
	Complete if the organization answered "Yes" on Form 990,	Part I	v, line 12a.		FC4 0C0		
1	Total expenses and losses per audited financial statements			1	764,069		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	الما	6 727				
	Donated services and use of facilities	2a	6,737				
	Prior year adjustments	2b					
	Other losses	2c	72,556				
a	Other (Describe in Part XIII.)	2d		2-	70 202		
_	Add lines 2a through 2d			2e 3	<u>79,293</u> 684,776		
3 4	Subtract line 2e from line 1			3	004,770		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:						
	levestee at a second and included as Fame OOO Best VIII line 7h	4.					
	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	4b		40			
b c	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b	4b		4c	684 776		
b c 5	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	4b		4c 5	684,776		
b c 5	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information.	4b		5			
b c 5 Pa	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	4b	s 1b and 2b; Part V, line	5			
b c 5 Pa	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide	IV, lines	s 1b and 2b; Part V, line	5			
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b c 5 Provi	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid ART II, LINE 5 – MONITORING AND ENFORCEMENTAL.	IV, lines	s 1b and 2b; Part V, line additional information.	5 4; Pa	rt X, line		
b c 5 Provi	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide	IV, lines	s 1b and 2b; Part V, line additional information.	5 4; Pa	rt X, line		
b c 5 Provi	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid ART II, LINE 5 – MONITORING AND ENFORCEMENTAL TENNESSEE PARKS AND GREENWAYS FOUNDATION.	IV, lines de any a	s 1b and 2b; Part V, line additional information. OLICY	5 4; Pa	rt X, line		
b c 5 Provi	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid ART II, LINE 5 – MONITORING AND ENFORCEMENTAL.	IV, lines de any a	s 1b and 2b; Part V, line additional information. OLICY	5 4; Pa	rt X, line		
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b c 5 Par Provi ; Pa Pr Ti Pi Ri Ri	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid ART II, LINE 5 - MONITORING AND ENFORCEMENTATI II, LINE 5 - MONITORING AND ENFORCEMENTATI II, LINE 5 - MONITORING AND ENFORCEMENTATI II AGREEMENT. THE LANDOWNER OR DESIGNATION ADVANCE OF THE SITE VISIT, AND THE FOUNI EPRESENTATIVE BE PRESENT IF POSSIBLE DURING EPRESENT EPRESENT IF POSSIBLE DURING EPRESENT EP	IV, lines de any a NT PON MONSUR TED DATI	S 1b and 2b; Part V, line additional information. OLICY CONITORS CONSTRUCTORS CONSTRUCTORS COMPLIANCE REPRESENTATION PREFERS THE SITE VIST	5 4; Pa SERV	TATION EASEMENT THE TERMS IS CONTACTED THE OWNER OR		
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Part XIII Supplemental Information (continued)

FINDINGS.

DURING THE TIME BETWEEN SITE VISITS TO MONITOR THE LAND, OWNERS ARE ENCOURAGED TO CONTACT THE FOUNDATION WITH ANY QUESTIONS THAT MAY ARISE CONCERNING THE RIGHTS AND RESTRICTIONS OF THE EASEMENT; TO MAKE THE FOUNDATION AWARE OF CONCERNS LANDOWNERS HAVE ABOUT ACTIVITIES PLANNED ON THE PROPERTY, AND TO NOTIFY THE FOUNDATION OF ANY ACTIVITY REGULATED BY THE TERMS OF THE EASEMENT. SHOULD THE EASEMENT PROPERTY OR ANY PORTION OF IT CHANGE OWNERSHIP, THE FOUNDATION SHOULD BE NOTIFIED PROMPTLY.

PART II, LINE 9 - ACCOUNTING FOR CONSERVATION EASEMENTS
THE FOUNDATION RECEIVES DONATIONS OF CONSERVATION EASEMENTS. A QUALIFIED
CONSERVATION EASEMENT IS A RESTRICTION (THAT IS GRANTED IN PERPETUITY) ON
THE USE OF LAND GRANTED TO A CHARITY EXCLUSIVELY FOR CONSERVATION PURPOSES.
THE FOUNDATION HAS NOT CAPITALIZED THESE CONSERVATION EASEMENTS AS THEY
HAVE DETERMINED THEY MEET THE DEFINITION OF A COLLECTION IN ACCORDANCE WITH
GENERALLY ACCEPTED ACCOUNTING PRINCIPLES. APPROXIMATELY 8,169.09 ACRES ARE
CURRENTLY PROTECTED WITH AN APPRAISED VALUE AT THE DATE OF DONATION OF
\$35,234,508. THE FOUNDATION HAS ELECTED TO NOT RECOGNIZE
CONSERVATION EASEMENTS ACQUIRED THROUGH CONTRIBUTIONS.

PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS

THE FOUNDATION'S BOARD OF DIRECTORS ADOPTED AN ENDOWMENT GOAL OF \$10,000

PER EASEMENT PROPERTY AT INCEPTION OF THE PROGRAM IN 1999. THIS GOAL IS

EVALUATED WITH THE ACCEPTANCE OF EACH EASEMENT ON A CASE-BY-CASE BASIS BUT

NOT BELOW A MINIMUM OF \$5,000 PER EASEMENT PROJECT. IF ENDOWMENT FUNDS ARE

NOT SECURED AT OR BY THE COMPLETION OF THE TRANSACTION, THE FOUNDATION HAS

Part XIII Supplemental Information (continued)

A PLAN TO SECURE THESE FUNDS AND HAS A POLICY COMMITTING THE FUNDS TO THIS PURPOSE. THE FOUNDATION'S CONSERVATION EASEMENTS PROVIDE GUIDANCE FOR ARBITRATION AND VIOLATION ENFORCEMENT. HOWEVER, SHOULD LEGAL ENFORCEMENT BE REQUIRED, THE FULL BOARD OF DIRECTORS WILL APPROVE THE PROCESS AND BUDGET. RESTRICTED ACCOUNTS ARE ESTABLISHED FOR EACH EASEMENT AND REFLECTED ON THE MONTHLY BALANCE SHEET AND REPORTED TO THE BOARD. NOTE: CONTRIBUTION TO AN ENDOWMENT FUND IS NOT REQUIRED. THE LAND GIFT IS THE REAL GIFT TO CONSERVATION AND STEWARDSHIP FUNDING IS SOUGHT FROM GENERAL MEMBERSHIP OR BEQUESTS.

PART X - FIN 48 FOOTNOTE

THE FOUNDATION IS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501C(3) OF THE INTERNAL REVENUE CODE AND IS CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION AS DEFINED IN SECTION 509(A) OF THE INTERNAL REVENUE CODE. THEREFORE, NO PROVISION FOR FEDERAL INCOME TAXES IS INCLUDED IN THE ACCOMPANYING FINANCIAL STATEMENTS. THE FOUNDATION DOES NOT BELIEVE THERE ARE ANY UNCERTAIN TAX POSITIONS. FURTHER, THE FOUNDATION DOES NOT BELIEVE THEY HAVE ANY UNRELATED BUSINESS INCOME, WHICH WOULD BE SUBJECT TO FEDERAL TAXES. THE FOUNDATION IS NOT SUBJECT TO EXAMINATION BY U.S. FEDERAL OR STATE TAXING AUTHORITIES FOR YEARS BEFORE 2013.

PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER SPECIAL EVENT EXPENSES \$....**\$**... 72,556

PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER SPECIAL EVENT EXPENSES

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

U Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service u Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

TENNESSEE PARKS AND GREENWAYS Employer identification number Name of the organization 62-1557574 FOUNDATION Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants b Phone solicitations Special fundraising events d In-person solicitations 2a 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 b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. iii) Did fund (v) Amount paid to (vi) Amount paid to raiser have (i) Name and address of individual (iv) Gross receipts (or retained by) (or retained by) custody or (ii) Activity or entity (fundraiser) from activity fundraiser listed in organization control of ontributions' col. (i) Yes No 3 8 9 10 **Total** 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.

Schedule G (Form 990 or 990-EZ) 2016 TENNESSEE PARKS AND GREENWAYS 62-1557574 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" on 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.

		gross receipts	greater than \$5,000.										
en		Pub	(a) Event #1 SPRING FLING (event type)	(b) Event #2 COCKTAILS AND C (event type)	(c) Other events 2 (total number)	(d) Total events (add col. (a) through col. (c))							
Revenue	1	Gross receipts	130,359	16,344	17,236	163,939							
		Less: Contributions Gross income (line 1 minus	94,929	7,645	6,050	108,624							
		line 2)	35,430	8,699	11,186	55,315							
	4	Cash prizes											
	5	Noncash prizes											
Expenses	6	Rent/facility costs	6,537	1,195	8,428	16,160							
a Exp	7	Food and beverages .	36,432	5,843	5,705	47,980							
Direct	8	Entertainment	1,850	500	815	3,165							
	9	Other direct expenses	2,240	326	2,685	5,251							
		-	. Add lines 4 through 9 in columnubtract line 10 from line 3, column	n (d)		72,556 -17,241							
P		III Gaming. Com	plete if the organization ar	nswered "Yes" on Form 990	0, Part IV, line 19, or r	reported more							
		than \$15,000	on Form 990-EZ, line 6a.										
nne			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))							
Revenue				3.4 .3		(4)							
<u>~</u>	1	Gross revenue											
nses	2	Cash prizes											
Expenses	3	Noncash prizes											
Direct	4	Rent/facility costs											
	5	Other direct expenses											
	6	Volunteer labor	Yes % No	Yes %	Yes % No								
	7	Direct expense summary	. Add lines 2 through 5 in column	n (d)									
	۰	NI-A manation in come	many Subtract line 7 from line 1	column (d)	•								
	0	net gaming income sum	mary. Subtract line / nom line i,	Column (a)									
а	En:	ter the state(s) in which the organization licensed to	ne organization conducts gaming	activities:		Yes No							
a b 10a	En Is t If "	ter the state(s) in which the organization licensed to the control of the	ne organization conducts gaming to conduct gaming activities in ea	activities:		Yes No							

Sche	dule G (Form 990 or 990-EZ) 2016	TENNESSEE	PARKS	AND	GREENWAYS	62-155757	4 F	Page 3
11	Does the organization conduct gamin	g activities with nonn	nembers?				Yes	No
12	Is the organization a grantor, beneficia							
	formed to administer charitable gamir	ng?					Yes	No
13	Indicate the percentage of gaming ac				4.1			
а	The organization's facility				tion.	13a		%
b	An outside facility	7			7.1	13b		%
14	Enter the name and address of the p	erson who prepares t	he organizat	ion's gan	ning/special events bool	ks and		
	records:							
	Name u							
	A deligano a s							
	Address u							
15a	Does the organization have a contract	t with a third party fro	m whom the	organiz	ation receives gaming			
iou				_			Yes	No
b	If "Yes," enter the amount of gaming	revenue received by	the organizat	tion tu \$		and the		
	amount of gaming revenue retained b							
С	If "Yes," enter name and address of the							
	Name u							
	Address u							
16	Gaming manager information:							
	Name u							
	Coming manager companyation **							
	Gaming manager compensation \mathbf{u} \$							
	Description of services provided ${f u}$							
	Description of services provided a							
	Director/officer Emp	oloyee	Independent	contract	tor			
		,						
17	Mandatory distributions:							
а	Is the organization required under sta	te law to make charit	able distribut	tions from	n the gaming proceeds	to		
	retain the state gaming license?						Yes	No
b	Enter the amount of distributions requ	ired under state law	to be distribu	ited to ot	her exempt organizatior	ns or		
	spent in the organization's own exem	pt activities during the	tax year u £	<u> </u>				
Par								nd
	Part III, lines 9, 9b, 10b	o, 150, 15C, 16, a	nd 17b, a	s applic	cable. Also provide	any additional inform	nation.	
	See instructions							
• • • • • •								
• • • • • •								

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Noncash Contributions

u Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

11 Attach to Form 990

u Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

TENNESSEE PARKS AND GREENWAYS

Employer

OMB No. 1545-0047

2016

Open To Public Inspection

Employer identification number

62-1557574 FOUNDATION Part I Types of Property (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art — Works of art 1 Art — Historical treasures 2 Art — Fractional interests 3 Books and publications 4 5 Clothing and household goods Cars and other vehicles 6 7 Boats and planes Intellectual property 8 Securities — Publicly traded X 1 65,322 9 Securities — Closely held stock 10 Securities — Partnership, LLC, 11 or trust interests Securities — Miscellaneous 12 13 Qualified conservation contribution — Historic structures 14 Qualified conservation contribution — Other 1 286,000 X Real estate — Residential 15 Real estate — Commercial 16 Real estate — Other 17 Collectibles 18 Food inventory 19 Drugs and medical supplies 20 Taxidermy 21 Historical artifacts 22 23 Scientific specimens 24 Archeological artifacts 26,765 Other u(SPECIAL EVENTS) X 1 25 26 Other **u**(..... 27 Other **u**(_______ Other **u**(28 Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? Х 30a **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard X 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Х contributions?

If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

If "Yes," describe in Part II.

describe in Part II.

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Schedule M (Form	990) (2016)	TENNESS:	EE PARKS	AND	GREENW.	AYS	62-1557574		Page 2
Part II	Supplen the orga	nental Infor	mation. Provi	de the	information	required by	Part I, lines 30b,	32b, and 33, and who number of items rece	ether eived,
-	or a com	nbination of b	oth. Also cor	nplete t	his part for	any additio	nal information.		
	Du	blic) Ir	15	pe	ctic	on C	Copy	

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No. 1545-0047 2016

Department of the Treasury Internal Revenue Service

u Attach to Form 990 or 990-EZ.

Open to Public

u Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection Employer identification number Name of the organization TENNESSEE PARKS AND GREENWAYS

FOUNDATION	62-1557574
FORM 990, PART VI, LINE 2 -	RELATED PARTY INFORMATION AMONG OFFICERS
MARY LYNN DOBSON	ANN TIDWELL
OFFICER	OFFICER
SISTERS	
JOHN NOEL	MELINDA WELTON
OFFICER	DIRECTOR
HUSBAND/WIFE	
FORM 990, PART VI, LINE 4 -	SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS
IN DECEMBER 2016, THE BOARD	OF DIRECTORS APPROVED A COMPREHENSIVE RE-
WRITE OF THE BYLAWS. SIGNIFIC	CANT CHANGES AND/OR ADDITIONS INCLUDED:
DEFINING BOARD COMPOSITION AN	ND ESTABLISHING A MAXIMUM NUMBER OF BOARD
POSITIONS, ESTABLISHING BOARD	MEMBER TERM LIMITS, REDEFINING AND EXPANDING
THE POWERS AND DUTIES OF OFF	ICERS AND THE EXECUTIVE DIRECTOR, ESTABLISHING
SIX (6) STANDING COMMITTEES A	AND DEFINING THE COMPOSITION AND
RESPONSIBILITIES OF EACH COM	MITTEE, AND ADDING A SECTION REGARDING FISCAL
POLICIES.	
FORM 990, PART VI, LINE 11B	- ORGANIZATION'S PROCESS TO REVIEW FORM 990
	FINANCE AND INVESTMENT COMMITTEE REVIEW THE
	IDED TO THE FULL BOARD PRIOR TO FILING WITH THE
IRS.	
IND.	
EODM 000 DADT VIT TIME 100	- ENFORCEMENT OF CONFLICTS POLICY
FURM 330, PARI VI, LINE 12C	- FNEOVCEMENT OF CONFITCIO ROTICI

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE TENNESSEE PARKS AND GREENWAYS FOUNDATION IS COMMITTED TO OPERATING IN
AN ETHICAL, LEGAL, AND TECHNICALLY SOUND MANNER TO ENSURE LONG-TERM
PROTECTION OF THE LAND IN PUBLIC INTEREST. THE FOUNDATION'S ENTIRE
STANDARDS AND PRACTICES MANUAL IS AVAILABLE FOR DOWNLOAD ON OUR WEBSITE. IN
ADDITION, THE FOUNDATION'S PROFILE ON GIVINGMATTERS.COM AND GUIDESTAR.ORG
WEBSITES INCLUDES FINANCIAL STATEMENTS AND FORM 990S. GOVERNING DOCUMENTS,
POLICIES, AND FINANCIAL STATEMENTS ARE ALSO AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

PAGE 1 OF 2

Schedule O (Form 990 or 990-EZ) (2016) Name of the organization		Page 2
	Employer identifica	
TENNESSEE PARKS AND GREENWAYS	62-155757	4
SPECIAL EVENT EXPENSES SPECIAL EVENT EXPENSES	\$	72,556 -72,556
SPECIAL EVENT EXPENSES		7/2,550
•		
	PAGE 2 O	F 2

Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

u Attach to your tax return.

u Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No. 1545-0172

2016

Attachment

hment ence No. 17

TENNESSEE PARKS AND GREENWAYS Identifying number Name(s) shown on return 62-1557574 FOUNDATION Business or activity to which this form relates INDIRECT DEPRECIATION Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I. 500,000 Maximum amount (see instructions) 1 Total cost of section 179 property placed in service (see instructions) 2 2 2,010,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (a) Description of property (b) Cost (business use only) 6 Listed property. Enter the amount from line 29 7 7 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the **smaller** of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2015 Form 4562 10 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction, Add lines 9 and 10, but don't enter more than line 11 12 Carryover of disallowed deduction to 2017. Add lines 9 and 10, less line 12 ▶ | 13 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 5,116 during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 15 4,625 Other depreciation (including ACRS) 16 MACRS Depreciation (Don't include listed property.) (See instructions.) Section A 0 17 17 MACRS deductions for assets placed in service in tax years beginning before 2016 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2016 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (a) Classification of property placed in (e) Convention (a) Depreciation deduction only-see instructions) 3-year property 19a 754 5.0 200DB 263 MO 5-year property 7-year property d 10-year property 15-year property 20-year property S/L g 25-year property 25 yrs. h Residential rental S/L 27.5 yrs. MM property MM 27.5 yrs. S/L MM Nonresidential real 39 yrs. S/L property MM Section C-Assets Placed in Service During 2016 Tax Year Using the Alternative Depreciation System 20a Class life S/I **b** 12-year 12 yrs. S/L 40-year MM S/L 40 yrs. Part IV **Summary** (See instructions.) Listed property. Enter amount from line 28 21 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 10,004 22 here and on the appropriate lines of your return. Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the

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