# Form **990**

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No. 1545-0047

Open to Public Inspection

| A        | For the              | 2007 calend  | lar year, or tax year beginnin  | g April 1                      | , 2007. an    | d ending          | March 31                     | , 20 08  |
|----------|----------------------|--|---|--------------------------------|---------------|-------------------|------------------------------|--|
| 8 6      | heck if ap           | policable: Plea                                    | se C Name of organization   |                                |               |                   | D Employe                    | r identification number                                |
|          | Address (            | use  |   | et, Inc.                       |               |                   | 62                           | 1709756  |
| =        | Name ch              | print  | or Number and street (or P.O. b                                       | ox if mail is not delivered to | street addres | ss) Room/sute     | E Telepho                    | ne number  |
| =        | nitial retu          | 1 35   |   |                                |               |                   | (615)                        | 837-1151   |
| _        | Terminati            | Spec   |   | y, and ZIP + 4                 |               |                   | F Accounting                 | method: Cash Accrual                                   |
| _        | Amended              | tion   |   |                                |               |                   | Othe                         | er (specify) >   |
| =        |                      | on pending •                                       | Section 501(c)(3) organizations trusts must attach a completed        |                                |               |                   |                              | to section 527 organizations. for affiliates? Yes V No |
| G '      | Wehsite:             | : ► WANN CHI                                       | mberlandrivercompact.org  |                                |               | H(b) If "Yes,"    | enter numbe                  | r of affiliates ▶                                      |
|          |                      |  | ck only one) > \( \begin{align*} \sum 501(c) ( 3 ) \cdot \end{align*} | (insert no.) ☐ 4947(a)(1)      | or 527        | H(c) Are all aff  |                              | led? Yes No See instructions.)                         |
| ĸ        | Check h              | nere ▶ ☐ if th                                     | ne organization is not a 509(a)(3)                                    | supporting organization an     | d its aross   | H(d) Is this a se |                              |  |
|          | receipts             | are normally no                                    | t more than \$25,000. A return is not o file a complete return.       |                                |               |                   | on covered by<br>kemption Nu | r a group ruling? ☐ Yes ✓ No                           |
|          | O                    |  | lines Ch. Oh. Oh. and 10h to lin                                      | 0.12 5 679.0                   |               |                   |                              | ne organization is not required                        |
| _        |                      |  | lines 6b, 8b, 9b, and 10b to lin                                      |                                |               |                   |                              | orm 990, 990-EZ, or 990-PF).                           |
| 12       | art I                |  | Expenses, and Changes   |                                | -una Bai      | ances (See tr     | ne instruc                   | tions.)  |
|          | 1                    | Contribution                                       | ns, gifts, grants, and similar  |                                | 1.1           |                   | -1                           |  |
|          | а                    | Contribution                                       | ns to donor advised funds   |                                | 1a            |                   | _                            |  |
|          | b                    | Direct publi                                       | c support (not included on l  | line 1a) , , , ,               | 1b            | 89,0              | 176                          |  |
|          | С                    | Indirect pub                                       | olic support (not included or   | n line 1a)                     | 1c            |                   |                              |  |
|          |                      |  | t contributions (grants) (not   |                                | _1d           | 451,6             | <del></del>                  |  |
|          | е                    | Total (add li                                      | nes 1a through 1d) (cash \$   | 540,748 nonca                  | sh <b>S</b>   | 4,668             |                              | 540,748  |
|          | 2                    | Program ser  | vice revenue including gover  | nment fees and contrac         | cts (from P   | art VII, line 93) | 2                            | 25,197   |
|          | 3                    | Membership   | dues and assessments.   |                                |               |                   | . 3                          | 4*   |
|          | 4                    | Interest on savings and temporary cash investments |   |                                |               |                   | . 4                          | 7,049  |
|          | 5                    |  |   |                                |               |                   | . 5                          |  |
|          | 6a                   | 6a Gross rents                                     |   |                                |               | _                 |                              |  |
|          | ł                    |  | lexpenses   |                                | 6b            |                   |                              |  |
|          | C                    | Net rental in                                      | ncome or (loss). Subtract lin   | ne 6b from line 6a .           |               |                   | 6c                           |  |
| a        | 7                    |  | tment income (describe  |                                |               |                   | 7                            |  |
| Revenue  | 8a                   | Gross amo  | unt from sales of assets oth  | ner (A) Securities             |               | (B) Other         |                              |  |
| Š        |                      | than invent  |   |                                | 8a            |                   |                              |  |
|          |                      |  | r other basis and sales expens  | 1                              | 8b            | -                 |                              |  |
|          | 4                    |  | ss) (attach schedule)   |                                | 8c            |                   |                              |  |
|          | 1                    |  | (loss). Combine line 8c, colur  |                                |               |                   | 8d                           |  |
|          | 9                    | •  | ts and activities (attach schedul                                     |                                |               | _                 | i $\square$                  |  |
|          | 1                    | •  | •   | of                             | 3             |                   | -   <u> </u>                 |  |
|          | "                    |  | ns reported on line 1b)   |                                | 9a            | 105,8             | 857                          |  |
|          | Ь                    | Less: direc  | t expenses other than fund  | raising expenses               | 9b            | 44,               | 881                          |  |
|          |                      | Net income   | e or (loss) from special even   | its. Subtract line 9h fr       | om line 9     | <del></del>       | 9c                           | 60,976   |
|          | - I                  |  | s of inventory, less returns a  |                                | 10a           |                   |                              |  |
|          |                      |  | of goods sold   |                                | 10b           |                   |                              |  |
|          | C                    |  | or (loss) from sales of inventory                                     |                                | ract line 10h | o from line 10a   | 10c                          |  |
|          | 11                   |  | nue (from Part VII, line 103)   |                                |               |                   | •                            | · · · · · · · · · · · · · · · · · · ·                  |
|          | 12                   |  | nue. Add lines 1e, 2, 3, 4, 5,  |                                |               |                   |                              | 633,970  |
| _        | 13                   |  | ervices (from line 44, colum  | "                              |               |                   | 13                           | 450,724  |
| 9        |                      | -  | ent and general (from line 44)  |                                |               |                   | 14                           | 128,674  |
| Fynancac | 15                   |  | g (from line 44, column (D))  |                                |               |                   | 15                           | 28,153   |
| ,        | 16                   |  | g (from line 44, column (D))<br>to affiliates (attach schedule        |                                |               |                   | 16                           | 25,100   |
| ш        | 1 17                 |  | enses. Add lines 16 and 44  |                                |               |                   | . 17                         | 607,551  |
|          | +                    |  |   |                                |               |                   | 40                           | 26,419   |
| 6        | 18                   |  | (deficit) for the year. Subtra  |                                |               |                   | ·                            | 330,937  |
| Š        | 19                   |  | or fund balances at beginn  |                                |               | ın (A))           | 20                           | 330,331  |
| 2        | 18<br>19<br>20<br>21 |  | nges in net assets or fund b<br>or fund balances at end of v          |                                |               | <br>N             | . 20                         | 357.356  |

| Par    | Funct            | ional Expenses organizations and s                            | ection 49 | 947(a)(1) nonexempt (  | charitable trusts but   | are required for section optional for others. (S | ee the instructions.) |
|--------|------------------|---|-----------|------------------------|-------------------------|--|-----------------------|
|        |                  | ude amounts reported on line<br>9b, 10b, or 16 of Part I.     |           | (A) Total              | (B) Program<br>services | (C) Management<br>and general                    | (D) Fundraising       |
| 22a    |                  | m donor advised funds (attach schedule) noncash \$)           |           |                        |                         |  |                       |
|        |                  | ncludes foreign grants, check here 🕨 🗌                        | 22a       |                        |                         |  |                       |
| 22b    |                  | and allocations (attach schedule)                             |           |                        |                         |  |                       |
|        |                  | noncash \$)   |           | Ì                      | İ                       |  |                       |
|        | If this amount i | ncludes foreign grants, check here 🕨 🔲                        | 22b       |                        |                         |  |                       |
| 23     |                  | sistance to individuals (attach                               | 23        |                        |                         |  |                       |
| 24     | Benefits pa      | id to or for members (attach                                  | 24        |                        | -                       | :<br>:::   |                       |
| 25a    |                  | on of current officers, directors,                            |           |                        |                         |  |                       |
| LUU    |                  | ees, etc. listed in Part V-A                                  | 25a       | 73,741                 | 5,987                   | 51,136   | 16,618                |
| h      | -                | on of former officers, directors,                             |           |                        |                         |  |                       |
| -      | •                | ees, etc. listed in Part V-B                                  | 25b       | 36,739                 | 36,739                  |  |                       |
| _      |                  | on and other distributions, not                               |           |                        |                         |  | <del>_</del> -        |
| ·      |                  | pove, to disqualified persons (as                             |           |                        |                         |  |                       |
|        |                  | er section 4958(f)(1)) and persons                            | 1         |                        |                         |  |                       |
|        |                  | section 4958(c)(3)(B)   | 25c       |                        |                         |  |                       |
| 26     |                  | wages of employees not included                               |           |                        |                         |  |                       |
|        |                  | , b, and c  | 26        | 149,511                | 149,511                 |  |                       |
| 27     |                  | an contributions not included on                              | 1         |                        |                         |  |                       |
|        |                  | , and c   | 27        |                        |                         |  |                       |
| 28     | Employee         | benefits not included on lines                                | 1         | İ                      |                         |  |                       |
|        | 25a - 27         |   | 28        |                        |                         |  |                       |
| 29     | Payroll taxe     | s   | 29        | 8,824                  | 6,863                   | 1,574  | 387                   |
| 30     | Professiona      | I fundraising fees  | 30        |                        |                         |  | _                     |
| 31     | Accounting       | fees  | 31        | 7,696                  |                         | 7,696  |                       |
| 32     | Legal fees       |   | 32        |                        |                         |  |                       |
| 33     |                  |   | 33        | 33,829                 | 11,692                  | 22,137   |                       |
| 34     |                  |   | 34        |                        |                         |  |                       |
| 35     |                  | d shipping  | 35        | 2,152                  |                         |  | 2,152                 |
| 36     |                  |   | 36        |                        |                         |  |                       |
| 37     |                  | rental and maintenance  | 37        |                        |                         |  |                       |
| 38     | _                | d publications  | 38        | 8,996                  |                         |  | 8,99                  |
| 39     |                  |   | 39        | 8,572                  |                         | 8,572  |                       |
| 40     |                  | s, conventions, and meetings                                  | 40        | 3,001                  |                         | 3,001  |                       |
| 41     |                  |   | 41        | 4,888                  |                         | 4,888  |                       |
| 42     |                  | n, depletion, etc. (attach schedule)                          | 42        | 4,000                  |                         | 4,000  |                       |
| 43     | Contract lai     | nses not covered above (itemize):                             | 43a       | 246,160                | 239,932                 | 6,228  |                       |
| a      | Maketing         |   | 43b       | 11,739                 | 233,332                 | 11,739   |                       |
| b      | Insurance        |   | 43c       | 7,589                  |                         | 7,589  |                       |
| C      | Other            |   | 43d       | 4,114                  |                         | 4,114  |                       |
| d      |                  |   | 43e       |                        |                         |  |                       |
| e<br>f |                  |   | 43f       |                        |                         |  |                       |
|        |                  |   | 43g       |                        |                         |  |                       |
| g      |                  |   |           |                        |                         |  |                       |
| 44     |                  | tional expenses. Add lines 22a 43g. (Organizations completing |           |                        |                         |  |                       |
|        |                  | 3)—(D), carry these totals to lines                           |           |                        |                         |  |                       |
|        |                  | · · · · · · · · · · · · · · · · · · ·                         | 44        | 607,551                | 450,724                 | 128,674  | 28,15                 |
| Joir   |                  | eck ▶ ☐ if you are following SO                               |           |                        |                         | <u> </u>   |                       |
|        |                  | from a combined educational campaig                           |           | ndraising solicitation | reported in (B) Pro     | ogram services?                                  | ► ☐ Yes 🕅 N           |
|        |                  | he aggregate amount of these joint cos                        |           |                        |                         |  |                       |
|        |                  | ocated to Management and general \$                           |           |                        | amount allocated        |  |                       |
| (111)  | me annount all   | ocated to Management and Astretal 2                           |           | , and (iv) the         | - amount anocated       | ra i minimanili a                                |                       |

### Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

| ۷h | at is the organization's primary exempt purpose?  See Statement 2 - attached   | Program Service                                      |
|----|--|--|
|    | organizations must describe their exempt purpose achievements in a clear and concise manner. State the number          | Expenses<br>(Required for 501(c)(3) and              |
|    | clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4)     | (4) orgs. and 4947(a)(1)<br>trusts; but optional for |
| rg | anizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.) | others.)   |
| а  | Building Outside The Box - Demonstrating practical and profitable sustainable building practices and educating         |  |
|    | the building community, local officials and home owners to the benefits and value of building green.                   |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    | (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □                                    | 254,891  |
| b  | Watershed - Development and education of autonomous watershed organizations working at the local level to              |  |
|    | enhance tributary watersheds.  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    | (Grants and allocations \$ ) if this amount includes foreign grants, check here ▶ □                                    | 85,923   |
| С  | Local Officials - Provides local leaders educational classes to help them make informed water resource,                |  |
|    | stormwater and wastewater decisions for their local communities.   |  |
|    | ······   |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    | (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □                                    | 28,344   |
| d  | Project Blue Streams - Improves small stream habitat and encourages local landowners to become stewards of             |  |
|    | their local streams.   |  |
|    |  |  |
|    |  |  |
|    |  |  |
|    | 70   |  |
|    | (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □                                    | 29,946   |
| е  | Other program services (attach schedule)   |  |
|    | (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □                                    | 51,620   |
|    | Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶                               | 450,724  |
|    |  |  |

| Pa              | rt IV | Balance Sheets (See the instructions.)   |                          |   |                 |                    |
|-----------------|-------|--|--------------------------|---|-----------------|--------------------|
| N               | ote:  | Where required, attached schedules and amounts wo column should be for end-of-year amounts only. | rithin the description   | (A)<br>Beginning of year                |                 | (B)<br>End of year |
|                 | 45    | Cash—non-interest-bearing  |                          | 171,425                                 | 45              | 42,945             |
|                 | 46    | Savings and temporary cash investments .   |                          |   | 46              | 187,327            |
|                 | ł     | Accounts receivable  | 47a<br>47b               |   | 47c             | 9,000              |
|                 | l .   | Pledges receivable   | 48a<br>48b               |   | 48c             |                    |
|                 | 49    | Grants receivable  |                          | 167,432                                 |                 | 123,438            |
|                 |       | Receivables from current and former officers, key employees (attach schedule)                    | directors, trustees, and |   | 50a             |                    |
|                 | b     | Receivables from other disqualified persons (a 4958(f)(1)) and persons described in section 4958 | s defined under section  |   | 50b             |                    |
| ş               | 51a   | Other notes and loans receivable (attach schedule)   | 51a                      |   |                 |                    |
| ssets           | b     | Less: allowance for doubtful accounts .  | 51b                      |   | 51c             |                    |
| Ä               | 52    | Inventories for sale or use  |                          |   | 52              |                    |
|                 | 53    | Prepaid expenses and deferred charges .  |                          |   | 53              | 4,934              |
|                 | 54a   | Investments—publicly-traded securities   | . ► ☐ Cost ☐ FMV         |   | 54a             |                    |
|                 | b     | Investments—other securities (attach schedu  | le) ▶ ☐ Cost ☐ FMV       |   | 54b             | - Al-Alpha         |
|                 | 1     | Investments—land, buildings, and equipment: basis  | 55a                      |   |                 |                    |
|                 | b     | Less: accumulated depreciation (attach schedule)   | 55b                      |   | 55c             |                    |
|                 | 56    | Investments—other (attach schedule)  |                          |   | 56              |                    |
|                 | 57a   | Land, buildings, and equipment: basis .  | 57a 41,847               |   | 1 .             |                    |
|                 | b     | Less: accumulated depreciation (attach schedule)   | 57b 19,682               | 11,633                                  | 57c             | 22,165             |
|                 | 58    | Other assets, including program-related investigation  | stments                  |   |                 |                    |
|                 |       | (describe ►  |                          |   | 58              |                    |
|                 | 59    | Total assets (must equal line 74). Add lines   | 45 through 58            | 350,490                                 | +               | 389,809            |
|                 | 60    | Accounts payable and accrued expenses .  |                          | 19,553                                  | <del> </del>  - | 32,453             |
|                 | 61    | Grants payable   |                          |   | 61              |                    |
|                 | 62    | Deferred revenue   |                          |   | 62              |                    |
| bilities        | 63    | Loans from officers, directors, trustees, and schedule)  |                          |   | 63              | ···········        |
| iat             | 64a   | Tax-exempt bond liabilities (attach schedule)  |                          |   | 64a             |                    |
| _               |       | Mortgages and other notes payable (attach  |                          | -                                       | 64b             | <del></del>        |
|                 | 65    | Other liabilities (describe ►  | )                        |   | 65              |                    |
| _               | 66    |  |                          | 19,553                                  | 66              | 32,453             |
| 5               | ľ     | ganizations that follow SFAS 117, check here ▶ 67 through 69 and lines 73 and 74.                |                          | 220.02                                  |                 | 251 004            |
| ŭ               | 67    | Unrestricted   |                          | 330,937                                 | <del> </del>    | 351,904            |
| -               | 68    | Temporarily restricted   |                          |   | 68              | 5,452              |
| ä               | 69    |  | <u>.</u>                 |   | 69              |                    |
| · Fund Balances |       | ganizations that do not follow SFAS 117, check<br>complete lines 70 through 74.                  |                          |   | 70              |                    |
| č               | 70    | Capital stock, trust principal, or current fund  |                          |   | 70              |                    |
| oto             | 71    | Paid-in or capital surplus, or land, building,   |                          |   | 71 72           |                    |
| 00              | 72    | Retained earnings, endowment, accumulate   |                          |   | 12              |                    |
| Not Accete or   | 73    | Total net assets or fund balances. Add line 70 through 72. (Column (A) must equal line 21)       | 19 and column (B) must   | 330,93                                  | 7 73            | 357,356            |
|                 | 74    | equal line 21)   |                          | 350,49                                  |                 | 389,809            |
|                 | 1     |  |                          | ; , , , , , , , , , , , , , , , , , , , |                 | 350,300            |

| Par    | t IV-A Reconciliation of Revenue per Audit instructions.)  | ed Financial Stateme                            | ents With Reve                          | nue per               | Return (S                 | See the                                  |
|--------|--|---|---|-----------------------|---------------------------|--|
| a      | Total revenue, gains, and other support per audite   | d financial statements                          |   |                       | а                         | 638,638                                  |
| b      | Amounts included on line a but not on Part I, line   |   |   |                       |                           |  |
| 1      | Net unrealized gains on investments  |   | b1                                      |                       |                           |  |
| 2      | Donated services and use of facilities   |   | b2                                      | 4,668                 |                           |  |
| 3      | Recoveries of prior year grants  | I   | b3                                      | ·····                 |                           |  |
| 4      | Other (specify):   | ,   |   |                       |                           |  |
| •      | Cuto (opening).  |   | b4                                      | ļ                     |                           |  |
|        | Add lines b1 through b4  |   |   |                       | b                         | 4,668                                    |
| С      | Subtract line b from line a  |   |   |                       | С                         | 633,970                                  |
| d      | Amounts included on Part I, line 12, but not on lin  |   |   |                       |                           |  |
| 1      | Investment expenses not included on Part I, line 6   | 1   | d1                                      |                       |                           |  |
| 2      | Other (specify):   |   |   |                       |                           |  |
|        | ***************************************  |   | d2                                      |                       |                           |  |
|        | Add lines d1 and d2  |   |   |                       | d                         |  |
| е      | Total revenue (Part I, line 12). Add lines c and d   |   |   |                       | е                         | 633,970                                  |
| Pa     | t IV-B Reconciliation of Expenses per Aud  |   |   |                       | i i                       |  |
| а      | Total expenses and losses per audited financial st   |   |   |                       | а                         | 612,219                                  |
| b      | Amounts included on line a but not on Part I, line   |   | La 1                                    | 4 cco                 |                           |  |
| 1      | Donated services and use of facilities   |   | b1                                      | 4,668                 |                           |  |
| 2      | Prior year adjustments reported on Part I, line 20   |   | b2                                      |                       |                           |  |
| 3      | Losses reported on Part I, line 20   |   | b3                                      |                       | 1                         |  |
| 4      | Other (specify):   |   | b4                                      |                       |                           |  |
|        | Add to be determined to 4  |   |   |                       | ь                         | 4,668                                    |
| _      | Add lines b1 through b4  |   |   |                       | c                         | 607,551                                  |
| C C    |  |   |   |                       |                           |  |
| d<br>1 | Amounts included on Part I, line 17, but not on lir Investment expenses not included on Part I, line 6 |   | d1                                      |                       |                           |  |
| 2      |  |   | 1                                       |                       |                           |  |
| ~      | Other (specify).   |   | d2                                      |                       | l i                       |  |
|        |  |   |   |                       | d                         |  |
| е      | Total expenses (Part I, line 17). Add lines c and c  | di  |   | . ▶                   | е                         | 607,551                                  |
| Pa     | rt V-A Current Officers, Directors, Trustees or key employee at any time during the year               | , and Key Employees<br>ar even if they were not | (List each persor compensated.) (Se     | n who wa<br>ee the in | s an officer structions.) | , director, trustee,                     |
|        | (A) Name and address   | (B)<br>Title and average hours per              | (C) Compensation<br>(If not paid, enter | (D) Contribut         | tions to employee         | (E) Expense account and other allowances |
|        |  | week devoted to position                        | -0)                                     |                       | sation plans              |  |
|        | ug Hausken   | Executive Director, 40 hrs.                     |   |                       |                           |  |
|        | 57 Lynn Drive, Nashville, TN 37204   |   | \$3,500                                 |                       | 0                         | 0  |
|        | rgo Farnsworth   | Senior Fellow, 40 hrs.                          | #E4 502                                 |                       | 0                         | . ا                                      |
|        | O1 Minnis Rd., Springfield, TN 37172   |   | \$54,583                                | _                     |                           | 0  |
|        | net Regen<br>7 Rochelle Drive, Nashville, TN 37220   | Admin. Manager, 30 hrs.                         | \$15,658                                |                       | 0                         | 0  |
| -03    | Rochene Drive, nessiane, in 57220  |   | 510,000                                 |                       |                           | -  |
|        |  | 1   |   |                       |                           |  |
| Se     | e list of Board of Directors - all uncompensated   |   |   |                       |                           |  |
|        | e Statement 4 - attached)  |   |   |                       |                           |  |
|        |  |   |   |                       |                           |  |
|        |  |   |   |                       |                           |  |
|        |  | <u>.</u>  |   |                       |                           |  |
|        |  |   |   |                       |                           |  |
|        |  | -   |   |                       |                           |  |
|        |  |   |   | ļ                     |                           |  |
|        |  |   |   |                       |                           |  |
|        |  |   |   | <u> </u>              |                           |  |
|        |  | -   |   | 1                     |                           |  |

| Par     | t V-A Current Officers, Directors, Trustees   | , and Key Employe   | es (continued)                                  |   |            | Yes                       | No   |
|---------|---|---|---|---|------------|---------------------------|--|
|         | Enter the total number of officers, directors, and trumeetings  | ustees permitted to vo  | te on organization                              | n business at board<br>20   |            |                           |  |
| b       | Are any officers, directors, trustees, or key employ employees listed in Schedule A, Part I, or hig contractors listed in Schedule A, Part II-A or relationships? If "Yes," attach a statement that ide | hest compensated p<br>II-B, related to each                                 | rofessional and other through                   | other independent family or business  | 75b        |                           | <b>✓</b> _                                       |
| С       |   | Part I, or highest co<br>Part II-A or II-B, rec<br>at are related to the or | ompensated profeive compensating sation? See    | essional and other on from any other the instructions for                       | 75c        |                           | <b>✓</b>   |
| d       | If "Yes," attach a statement that includes the info<br>Does the organization have a written conflict of in  |   |   | <u> </u>  | 75d        |                           | ✓  |
| Par     | <b>t V-B</b> Former Officers, Directors, Trustees, and officer, director, trustee, or key employee re person below and enter the amount of comp   | Key Employees That I ceived compensation o                                  | Received Comper                                 | nsation or Other Bene<br>escribed below) during                                 | efits (I   | rear, lis                 |  |
|         | (A) Name and address  | (B) Loans and Advances  | (C) Compensation<br>(if not paid,<br>enter -0-) | (D) Contributions to employee<br>benefit plans & deferred<br>compensation plans | acco       | Expenunt and lower toward | other  |
|         | llyn Hoey<br>, 730 Peachtree, NE, Atlanta, GA 30308   | - 0   | 36,739  | 0   |            |                           | 0  |
|         |   | •   |   |   |            |                           |  |
|         |   | -   |   |   |            |                           |  |
|         |   | -   |   |   |            |                           |  |
|         |   | -   |   |   |            |                           |  |
|         |   | -   |   |   |            |                           |  |
|         |   |   |   |   |            |                           |  |
|         |   | -   |   |   |            |                           |  |
|         |   |   |   |   |            |                           |  |
|         |   |   |   |   |            |                           |  |
| Pa      | rt VI Other Information (See the instruction  | ns.)  |   | 1   |            | Yes                       | No   |
| 76      | Did the organization make a change in its activit detailed statement of each change   | ies or methods of cor   | ~   |   | 76         |                           | 1  |
| 77      | Were any changes made in the organizing or go If "Yes," attach a conformed copy of the change   | verning documents bu  |   |   | 77         | -                         | 1  |
|         | Did the organization have unrelated business gr<br>this return?   | oss income of \$1,000   |   |   | 78a        |                           | 1  |
| b<br>79 | If "Yes," has it filed a tax return on Form 990-T Was there a liquidation, dissolution, termination,  |   |   |   | 78t        |                           | +  |
| 80a     | a statement   |   |   |   | 79         | +                         | <del>                                     </del> |
|         | common membership, governing bodies, trust organization?  | tees, officers, etc., t   | o any other exe                                 | empt or nonexempt   |            | 3                         | 1  |
| b       | o If "Yes," enter the name of the organization ►  |   |   |   |            |                           | -  |
|         | Enter direct and indirect political expenditures. ( Did the organization file Form 1120-POL for this  | See line 81 instruction   | ns.) <u>[81a</u>                                | 1   | 0<br>. 811 |                           | /  |

|      | 90 (2007)  |                 |              | <del></del>   |
|------|--|-----------------|--------------|---------------|
| Part | VI Other Information (continued)   |                 | Yes          | No            |
|      | Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?  | 82a             | ✓            |               |
| ь    | If "Yes," you may indicate the value of these items here. Do not include this  |                 |              |               |
|      | amount as revenue in Part I or as an expense in Part II.   |                 |              |               |
|      | (See instructions in Part III.)  |                 |              |               |
|      | Did the organization comply with the public inspection requirements for returns and exemption applications?  | 83a             |              |               |
|      | Did the organization comply with the disclosure requirements relating to quid pro quo contributions?   | 83b             |              | <del></del> / |
|      | Did the organization solicit any contributions or gifts that were not tax deductible?  | 84a             |              | <del></del> - |
| þ    | If "Yes," did the organization include with every solicitation an express statement that such contributions or   | 045             |              | ı             |
|      | gifts were not tax deductible?   | 84b<br>85a      |              |               |
|      | 501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?  | 85b             |              |               |
| b    | Did the organization make only in-house lobbying expenditures of \$2,000 or less?  | 000             |              |               |
|      | received a waiver for proxy tax owed for the prior year.   |                 |              |               |
| _    | Dues, assessments, and similar amounts from members  |                 |              | ĺ             |
| d    | Section 162(e) lobbying and political expenditures   |                 |              |               |
|      | Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e   | -               |              |               |
| f    | Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f  |                 |              |               |
| g    | Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?  | 85g             | <u> </u>     |               |
| _    | If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f   |                 |              | l             |
| •••  | to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the  |                 | ļ            | ŀ             |
|      | following tax year?  | 85h             | 1            |               |
| 86   | 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 86a   | -               |              |               |
| b    | Gross receipts, included on line 12, for public use of club facilities 86b   | 4               |              |               |
| 87   | 501(c)(12) orgs. Enter: a Gross income from members or shareholders 87a  | -               | ļ            | 1             |
| b    | Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)  | <del>-</del> -[ |              |               |
| 88a  | At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX | 88a             |              | <b>V</b>      |
| b    | At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI  | 88b             |              | /             |
| 89a  | 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶  |                 |              |               |
| b    | 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction         |                 |              | 1             |
| С    | Enter: Amount of tax imposed on the organization managers or disqualified  |                 |              |               |
|      | persons during the year under sections 4912, 4955, and 4958  | i i             |              | 1             |
| d    | Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶  |                 |              |               |
|      | All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?  | 89e             |              | 1             |
| f    | All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?  | 89f             | -            | +             |
| g    | For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings of any time during the year?                            |                 |              | 1             |
| 902  | at any time during the year?   |                 | <u></u>      |               |
|      | Number of employees employed in the pay period that includes March 12, 2007 (See   |                 |              |               |
| 91a  | The books are in care of ▶ Janet Regen  Telephone no. ▶ (615)  | 7220            | 331-37       | 87            |
| b    | At any time during the calendar year, did the organization have an interest in or a signature or other authority   | ,               | [34          | _1            |
|      | over a financial account in a foreign country (such as a bank account, securities account, or other financial  | ا               | ∣Ye          |               |
|      | account)?  | . 911           | <del>-</del> | +             |
|      | If "Yes," enter the name of the foreign country ▶  | .               |              |               |
|      | See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  | `               |              |               |

| Form 99          | 0 (2007)  |                                 |                                     |                               |                     | Page 8                       |
|------------------|---|---------------------------------|-------------------------------------|-------------------------------|---------------------|------------------------------|
|                  | VI Other Information (continued)  |                                 |                                     | <del></del>                   |                     | Yes No                       |
| c .<br>92        | At any time during the calendar year, did the org If "Yes," enter the name of the foreign country Section 4947(a)(1) nonexempt charitable trusts fill and enter the amount of tax-exempt interest received. | ing Form 990 i                  | in lieu of Form<br>ed during the ta | <b>1041—</b> Check<br>ax year | here , , ,          | 91c ✓                        |
|                  | Analysis of Income-Producing Activi   |                                 | instructions.) siness income        |                               | on 512, 513. or 514 | (E)                          |
| note:<br>indicat | Enter gross amounts unless otherwise  | (A)                             | (B)                                 | (C)                           | (D)                 | Related or exempt function   |
| 93               | Program service revenue:  | Business code                   | Amount                              | Exclusion code                | Amount              | income                       |
| а                | Training and workshop fees  |                                 |                                     |                               |                     | 25,197                       |
| b                |   |                                 |                                     | -                             |                     |                              |
| C                |   |                                 |                                     | 1                             |                     |                              |
| d                |   |                                 |                                     |                               |                     | <u> </u>                     |
| e<br>f           | Medicare/Medicaid payments  |                                 |                                     | 1                             |                     |                              |
| g                | Fees and contracts from government agencies   |                                 |                                     |                               |                     |                              |
| 94               | Membership dues and assessments   |                                 |                                     |                               |                     |                              |
| 95               | Interest on savings and temporary cash investments  |                                 |                                     | 14                            | 7,049               |                              |
| 96               | Dividends and interest from securities  | :                               |                                     |                               |                     |                              |
| 97               | Net rental income or (loss) from real estate:   |                                 |                                     |                               |                     |                              |
| a<br>b           | debt-financed property  |                                 |                                     |                               |                     |                              |
| 98               | Net rental income or (loss) from personal property  |                                 | <u> </u>                            |                               |                     |                              |
| 99               | Other investment income   |                                 |                                     |                               |                     |                              |
| 100              | Gain or (loss) from sales of assets other than inventory  |                                 |                                     |                               |                     |                              |
| 101              | Net income or (loss) from special events .  |                                 |                                     |                               |                     | 60,976                       |
| 102              | Gross profit or (loss) from sales of inventory  |                                 |                                     |                               |                     |                              |
| 103<br>b         | Other revenue: a  |                                 |                                     |                               |                     |                              |
| c                |   |                                 |                                     |                               |                     |                              |
| d                |   |                                 |                                     |                               |                     |                              |
| е                |   |                                 |                                     |                               |                     |                              |
| 104              | Subtotal (add columns (B), (D), and (E))  |                                 |                                     |                               | 7,049               | <del></del>                  |
| 105<br>Note:     | Total (add line 104, columns (B), (D), and (E)). Line 105 plus line 1e, Part I, should equal the air  |                                 |                                     |                               | · •                 | 93,222                       |
|                  | VIII Relationship of Activities to the Acco   |                                 |                                     | noses (See th                 | ne instructions.)   |                              |
|                  | No. Explain how each activity for which income i  | is reported in co               | lumn (E) of Part                    | VII contributed               |                     |                              |
| 93               |   | unity for training              | g general public                    | on protecting a               | and enhancing wa    | iter environment.            |
|                  |   |                                 |                                     |                               |                     |                              |
| 10               | Bring awareness to the community for enhancing  | ng water quality                | by running wate                     | r boat races on               | the cumberland      | river and having             |
| Do               | catfish dinner event.   | diarian and Di                  | crospreded Ent                      | tition (Can the               | instructions 1      |                              |
| Par              | (A)   | (B)                             |                                     |                               | T                   | (E)                          |
|                  | Name, address, and EIN of corporation, Pe   | ercentage of<br>ership interest | (C<br>Nature of                     | <i>i</i><br>activities        | (D)<br>Total income | (E)<br>End-of-year<br>assets |

| Part IX | Information Regarding Taxable   | Subsidiaries and Dis                 | regarded Entities (See the  | instructions.)      |                              |
|---------|---|--------------------------------------|-----------------------------|---------------------|------------------------------|
|         | (A)<br>e, address, and EIN of corporation,<br>entnership, or disregarded entity | (B) Percentage of ownership interest | (C)<br>Nature of activities | (D)<br>Total income | (E)<br>End-of-year<br>assets |
| N/A     |   | %                                    |                             |                     |                              |
|         |   | %                                    |                             |                     |                              |
|         |   | %                                    |                             |                     |                              |
|         |   | %                                    |                             |                     |                              |
|         |   | A                                    | 1 D C. A                    | 41 - 1 - 1 - 1 - 1  |                              |

| Part | X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instruction                                   | ıs.)     |      |
|------|---|----------|------|
| (a)  | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . | ☐ Yes    | ☑ No |
| (b)  | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract                         | t? 🗌 Yes | ☑ No |
| Not  | e: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).  |          |      |

| Part                  | is a controlling organizatio   |  |                        | lities. Compl     | ete only if the o     | rganiza         | ation      |
|-----------------------|--|--|------------------------|-------------------|-----------------------|-----------------|------------|
| 06                    | Did the reporting organization mal<br>the Code? If "Yes," complete the   | ke any transfers to a control            | led entity as de       | efined in section | on 512(b)(13) of      | Yes             | No         |
|                       | (A) Name, address, of each controlled entity   | (B) Employer Identification Number       | (C<br>Descrip<br>trans | tion of           | (E<br>Amount o        |                 | er         |
| а                     |  |  |                        |                   |                       |                 |            |
| b                     |  |  |                        |                   |                       |                 |            |
| С                     |  |  |                        |                   |                       |                 |            |
| •                     | Totals   |  |                        |                   |                       |                 |            |
| 107                   | Did the reporting organization rec<br>512(b)(13) of the Code? If "Yes,"  |  |                        |                   | section               | Yes             | No         |
|                       | (A)<br>Name, address, of each<br>controlled entity   | (B)<br>Employer Identification<br>Number | (C<br>Descrip<br>trans | tion of           | (I<br>Amount c        | O)<br>of transf | fer        |
| а                     |  |  |                        |                   |                       |                 |            |
| b                     |  |  |                        |                   |                       | .,,             |            |
| С                     |  |  |                        |                   |                       |                 |            |
|                       | Totals   |  |                        |                   |                       |                 |            |
| 108                   | Did the organization have a bindirents, royalties, and annuities de  |  |                        | 2006, covering    | g the interest,       | Yes             | No         |
| Pleas<br>Sign<br>Here | Under penalties of perjury, I declare that and belief, it is true, correct, and complete September 1. Signature of officer | I have examined this return, including   | accompanying sch       |                   | of which preparer has |                 |            |
| Paid                  | Type or print name and title  Preparer's   |  | Date                   | Check if self-    | Preparer's SSN or PTI | N (See Ge       | n, Inst. X |
| Prepai<br>Use 0       | Inly if self-employed) Thomason  | Financial Resources, Inc.                |                        | employed ► ☐      |                       | 040094          |            |
|                       | address, and ZIP - 4 1009 Hard   | Phone i                                  | no. ► ( 615 )          | 673-73            | 37                    |                 |            |

#### SCHEDULE A

(Form 990 or 990-EZ)

## Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Cumplementary Information (See congrete instructions)

| 200/

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Supplementary Information—(See separate instructions.)

MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

1709756 **Cumberland River Compact, Inc.** Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions. List each one. If there are none, enter "None.") (d) Contributions to (e) Expense (a) Name and address of each employee paid more (b) Title and average hours (c) Compensation mployee benefit plans & account and other than \$50,000 per week devoted to position deferred compensation allowances None \_\_\_\_\_ Total number of other employees paid over \$50,000 . Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.") (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation None Total number of others receiving over \$50,000 for professional services . . . . . . . . Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.) (a) Name and address of each independent contractor paid more than \$50,000 (c) Compensation (b) Type of service None Total number of other contractors receiving over \$50,000 for other services . . . . . .

| Par | Statements About Activities (See page 2 of the instructions.)  | Yes                                   | No       |
|-----|--|---------------------------------------|----------|
| 1   | During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities   S (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)  |                                       | <b>√</b> |
|     | Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.  |                                       |          |
| 2   | During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.) |                                       |          |
| а   | Sale, exchange, or leasing of property?  | а                                     | 1        |
| b   | Lending of money or other extension of credit?   | <u> </u>                              | 1        |
| С   | Furnishing of goods, services, or facilities?  | <u>c</u>                              | 1        |
| d   | Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?  | d                                     | 1        |
| e   | Transfer of any part of its income or assets?  | e                                     | 1        |
| За  | Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)   | а                                     | 1        |
| b   | Did the organization have a section 403(b) annuity plan for its employees?   | ь                                     | <b>/</b> |
| С   | · ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '  | с                                     | /        |
| d   | Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? .  | d                                     | 1        |
| 4a  |  | a                                     | 1        |
| D   | The trie organization make any taxable distributions under section 4500:   | lc                                    | 1        |
|     | Did the organization make a distribution to a donor, donor advisor, or related person:   | ic i                                  | 1 -      |
| d   | Enter the total number of donor advised funds owned at the end of the tax year   |                                       | 0        |
| е   | Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year •   |                                       | 0        |
| f   | Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts   | · · · · · · · · · · · · · · · · · · · | 0        |
| ç   | Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year   |                                       | 0        |

| Ľa                                       | rt IV  | Reason for Non-Private   | Foundation S                               | Status (See pages 4   | through 8 of  | the instruction   | ons.)                       |  |  |
|--|--|--|--|---|---|-------------------|-----------------------------|--|--|
| cer                                      |  | the organization is not a privat   |  |   |   | licable box.)     |                             |  |  |
| 5  | ☐ A (  | church, convention of churches   | , or association o                         | f churches. Section 170   | (b)(1)(A)(i).   |                   |                             |  |  |
| 6  | A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)  |  |  |   |   |                   |                             |  |  |
| 7  | □ A I  | hospital or a cooperative hospit   | al service organiz                         | zation. Section 170(b)(1)(  | A)(iii).  |                   |                             |  |  |
| 8  | A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).   |  |  |   |   |                   |                             |  |  |
| 9  | A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶   |  |  |   |   |                   |                             |  |  |
| 0  | ☐ An<br>(Al  | n organization operated for the be<br>lso complete the Support Sched   | enefit of a college<br>Jule in Part IV-A.) | or university owned or op   | erated by a gov   | vernmental unit.  | Section 170(b)(1)(A)(iv     |  |  |
| 1 <b>1</b> a                             | ☑ An   | n organization that normally recei<br>0(b)(1)(A)(vi). (Also complete the   | ves a substantial<br>Support Schedu        | part of its support from a<br>ule in Part IV-A.)                                | governmental  | unit or from the  | general public. Section     |  |  |
| l1b                                      | □ A  | community trust. Section 170(b)  | (1)(A)(vi). (Also co                       | omplete the Support Sch   | nedule in Part  | IV-A.)            |                             |  |  |
| 12                                       | 2 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.) |  |  |   |   |                   |                             |  |  |
| 13                                       |  | n organization that is not contro<br>quirements of section 509(a)(3).  |  |   |   |                   | d otherwise meets th        |  |  |
|  |  | Type I ☐ Type II   |  | III-Functionally Integrate  |   | Type III-Other    |                             |  |  |
|  |  | Provide the following info   | rmation about th                           | ne supported organizati   | ions. (See page   | e 8 of the instru | uctions.)                   |  |  |
| (a) Name(s) of supported organization(s) |  | (a) (b) of supported organization(s) Employer T identification organization organization (descriing to the control of the cont |  | (c) Type of organization (described in lines 5 through 12 above or IRC section) | (d)  Is the supported organization listed in the supporting organization's governing documents? |                   | (e)<br>Amount of<br>support |  |  |
|  |  |  |  |   | Yes   | No                |                             |  |  |
|  |  | 200  |  |   |   |                   |                             |  |  |
|  |  |  |  |   |   |                   |                             |  |  |
|  |  |  |  |   |   |                   |                             |  |  |
| _  |  |  |  |   |   |                   |                             |  |  |
| Tot                                      | al   | <u> </u>   | <u> </u>                                   |   |   | ▶                 |                             |  |  |

|        | t IV-A Support Schedule (Complete only You may use the worksheet in the instructions  |   |   |   |   |   | eccounting.   |
|--------|---|---|---|---|---|---|---|
| Cale   | ndar year (or fiscal year beginning in)   | (a) 2006  | (b) 2005  | (c) 2004  | (d) 2003  | 3   | (e) Total   |
| 15     | Gifts, grants, and contributions received. (Do  |   |   |   |   |   |   |
|        | not include unusual grants. See line 28.).  | 433,474   | 519,825   | 232,878   | 447   | ,218                                      | 1,633,395   |
| 16     | Membership fees received  |   |   |   |   |   |   |
| 17     | Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose   | 16,728  | 23,164  | 20,975  | 35  | ,708                                      | <del>96</del> ,575  |
| 18     | Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 | 2,492   | 2,774   | 1,117   |   | 513                                       | 6,89 <del>6</del>   |
| 19     | Net income from unrelated business activities not included in line 18   |   |   |   |   |   |   |
| 20     | Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.   |   |   |   |   |   |   |
| 21     | The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.   |   |   |   |   |   |   |
| 22     | Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets  |   |   |   |   |   |   |
| 23     | Total of lines 15 through 22  | 452,694   | 545,763   | 254,970   | 48  | 3,439                                     | 1,736,866   |
| 24     | Line 23 minus line 17   | 435,966   | 522,599   | 233,995   | 44  | 7,731                                     | 1,640,291   |
| 25_    | Enter 1% of line 23   | 4,527   | 5,458   | 2,550   |   | 4,834                                     |   |
| 26     | Organizations described on lines 10 or 11:  | a Enter 2% of   | amount in colun   | nn (e), line 24 .   | ▶   | 26a                                       | 32,806  |
| b      | Prepare a list for your records to show the na governmental unit or publicly supported organ amount shown in line 26a. Do not file this list was a supported organ.   | ization) whose tot  | al gifts for 2003 t   | through 2006 exc  | eeded the   | 26b                                       | 7,194   |
| С      | Total support for section 509(a)(1) test: Enter   | -   |   |   |   | 26c                                       | 1,640,291   |
| d      | Add: Amounts from column (e) for lines: 18  | 6,896   | 19  | ,194  |   | 26d                                       | 14,090  |
| е      | Public support (line 26c minus line 26d total)  |   |   |   |   | 26e                                       | 1,626,201   |
| f      | Public support percentage (line 26e (nume   | rator) divided by   | line 26c (denom   | ninator))   | ▶   | 26f                                       | 99.14 %   |
| 27     | Organizations described on line 12: a F person," prepare a list for your records to show Do not file this list with your return. Enter t  | v the name of, and  | i total amounts re  | ceived in each ye   | were receiv<br>ar from, eac                                 | ed fro                                    | m a "disqualified<br>qualified person."   |
| b      | (2006) (2005)  For any amount included in line 17 that was recishow the name of, and amount received for each (Include in the list organizations described in lines the difference between the amount received an amounts) for each year:  (2006) (2005)                                      | eived from each pe<br>h year, that was me<br>s 5 through 11b, as<br>d the larger amou | erson (other than "<br>ore than the large<br>well as individuals<br>nt described in (1) | disqualified person<br>r of (1) the amount<br>s.) Do not file this<br>or (2), enter the | ns"), prepare<br>on line 25 folist with you<br>sum of these | a list<br>or the y<br>r retur<br>e differ | for your records to<br>year or (2) \$5,000.<br>n. After computing<br>rences (the excess |
| c      | Add: Amounts from column (e) for lines: 15  |   | 16  | <u>_</u>  |   | t   | t   |
|        | 17 20   |   |   |   |   | 27c                                       | <del> </del>  |
| d      |   |   |   | <del></del> · · ·   |   | 27d                                       |   |
| e      | , ,   |   |   |   |   | 27e                                       |   |
| f      |   |   | • •   |   |   | 27g                                       | 0/  |
| g<br>h |   |   |   |   |   | 27g                                       | <del></del>   |
| 28     | Unusual Grants: For an organization description of the nature of the grant. Do no   | bed in line 10, 11<br>each year, the na   | , or 12 that rece   | ived any unusual<br>outor, the date ar  | grants dur  | ing 20<br>of the                          | 03 through 2006, grant, and a brief   |

Part V Private School Questionnaire (See page 9 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

| 29      | Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?   | 29  | Yes  | No             |
|---------|---|-----|--|----------------|
| 30      | Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?  | 30  |  |                |
| 31      | Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? | 31  |  |                |
|         | If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)  |     |  |                |
|         |   |     |  |                |
| 32<br>a | Does the organization maintain the following:  Records indicating the racial composition of the student body, faculty, and administrative staff?  | 32a |  |                |
| b       | Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory  | 32b |  |                |
| •       | basis?  | 320 | <del>                                     </del> |                |
| C       | with student admissions, programs, and scholarships?  | 32c |  | <u> </u>       |
| d       | Copies of all material used by the organization or on its behalf to solicit contributions?  | 32d | <u> </u>   | <u> </u>       |
|         | If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)  |     |  |                |
|         |   |     |  |                |
| 33      | Does the organization discriminate by race in any way with respect to:  |     | }  |                |
| а       | Students' rights or privileges?   | 33a |  | -              |
| b       | Admissions policies?  | 33b |  | <u> </u>       |
| c       | Employment of faculty or administrative staff?  | 330 | -  | -              |
| d       | Scholarships or other financial assistance?   | 330 | 1  | <u> </u>       |
| е       | Educational policies?   | 33€ | <u> </u>   | Ì              |
| f       | Use of facilities?  | 331 | -  | -              |
| g       | Athletic programs?  | 339 | <u>,                                    </u>     | -              |
| h       | Other extracurricular activities?   | 331 | 1  | <del> </del> - |
|         | If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)   |     |  | į              |
|         |   |     |  |                |
|         |   |     |  |                |
| 34a     | Does the organization receive any financial aid or assistance from a governmental agency?   | 34  | a  | -              |
| b       | Has the organization's right to such aid ever been revoked or suspended?  | 34  | b  | $\perp$        |
|         | If you answered "Yes" to either 34a or b, please explain using an attached statement.   |     |  |                |
| 35      | Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation   | 35  |  |                |
| _       | or not. 1100, 10 00, 1010 2 0.D. 001, covering radia mondiscrimination: in 100, attach an explanation   |     | <u>, i </u>                                      |                |

| Par    | t VI-A Lobbying Expenditures by Ele<br>(To be completed ONLY by an         |                               |                          |              |        | instruction                                       | ıs.)          |   |
|--------|--|-------------------------------|--------------------------|--------------|--------|---|---------------|---|
| Chec   | k ▶ a ☐ if the organization belongs to an affiliat                         |                               |                          |              |        | "limited contr                                    | ol" prov      | sions apply.  |
|        | Limits on Lobbyin (The term "expenditures" mean                            | -                             |                          |              |        | (a)<br>Affiliated group<br>totals                 | fo            | (b)<br>be completed<br>r all electing<br>rganizations |
| 36     | Total lobbying expenditures to influence public                            |                               | <del></del>              |              | 36     |   | <b>—</b> —    | garizaroris   |
| 37     | Total lobbying expenditures to influence a legisl                          |                               |                          | I            | 37     |   |               |   |
| 38     | Total lobbying expenditures (add lines 36 and 3                            |                               |                          |              | 38     |   |               |   |
| 39     | Other exempt purpose expenditures  |                               |                          |              | 39     |   |               |   |
| 40     | Total exempt purpose expenditures (add lines 3                             | 18 and 39)                    |                          | }            | 40     |   | _   _         | *   |
| 41     | Lobbying nontaxable amount. Enter the amount                               |                               | -                        |              |        |   |               |   |
|        |  |                               | ble amount is—           |              | 0      |   |               |   |
|        | Not over \$500,000   |                               |                          |              |        |   |               |   |
|        | Over \$1,000,000 but not over \$1,500,000 . \$175,0                        | •                             |                          |              | 41     |   | ľ             |   |
|        | Over \$1,500,000 but not over \$17,000,000 . \$225,0                       | •                             |                          | 1            |        |   |               |   |
|        |  | •                             |                          |              |        |   |               |   |
| 42     | Grassroots nontaxable amount (enter 25% of lit                             |                               |                          |              | 42     |   |               |   |
| 43     | Subtract line 42 from line 36. Enter -0- if line 42                        | is more than lin              | ne 36                    |              | 43     |   |               |   |
| 44     | Subtract line 41 from line 38. Enter -0- if line 4                         | I is more than lin            | ie 38                    |              | 44     |   |               | -   |
|        | Caution: If there is an amount on either line 43                           | or line 44. vou n             | nust file Form 47        | 20.          |        |   |               |   |
|        |  |                               | d Under Secti            |              |        |   |               | <del>-</del>  |
|        | (Some organizations that made a section See the instructions for           | n 501(h) election             | do not have to d         | complete all |        |   | below         |   |
|        |  | Lob                           | bying Expenditu          | ıres During  | 4-Yea  | r Averaging                                       | Period        | l   |
|        | Calendar year (or fiscal year beginning in) ▶                              | (a)<br>2007                   | (b)<br>2006              | (c)<br>2005  |        | (d)<br>2004                                       |               | (e)<br>Total  |
| 45     | Lobbying nontaxable amount , ,   |                               |                          |              |        |   |               |   |
| 46     | Lobbying ceiling amount (150% of line 45(e))                               |                               |                          | <u> </u>     |        |   |               |   |
| 47     | Total lobbying expenditures  |                               |                          |              |        | •   |               |   |
| 48     | Grassroots nontaxable amount   |                               |                          |              |        |   | -             |   |
| 49     | Grassroots ceiling amount (150% of line 48(e))                             |                               |                          |              |        |   |               |   |
| 50     | Grassroots lobbying expenditures   |                               | <b>\</b>                 | 1            |        |   |               |   |
| Pa     | rt VI-B Lobbying Activity by Nonelect (For reporting only by organization) | cting Public Cations that did | harities<br>not complete | Part VI-A)   | (See   | page 14 of  | f the ir      | nstructions.)   |
|        | ing the year, did the organization attempt to influ                        |                               |                          |              | ding a | ny Yes  | No            | Amount  |
| atte   | empt to influence public opinion on a legislative r                        | natter or reference           | dum, through the         | use of:      |        | <del>                                     </del>  | -             | -   |
| а      | Volunteers   |                               |                          |              |        |   |               |   |
| b      | ,  | ·                             | •                        | _            | 1.)    | · <del>                                    </del> | $\dashv$      |   |
| C      |  |                               |                          |              | • •    | •   |               |   |
| 0      |  |                               |                          |              |        | 1 1   |               |   |
| f      |  |                               |                          |              |        | i I   | $\neg \vdash$ |   |
| ç      |  |                               |                          |              |        |   |               |   |
| r<br>F |  |                               |                          |              |        | . 🗀   |               |   |
| i      | Total lobbying expenditures (Add lines c throu                             | gh h.)                        |                          |              |        |   |               |   |
|        | If "Yes" to any of the above, also attach a sta                            | tement giving a c             | detailed descripti       | on of the lo | bbying | activities.                                       |               |   |

| Pa                | rt VII |                      | Regarding Tr<br>ganizations (See      | ansfers To and Transa<br>page 14 of the instructio   | ctions and      | Relationships              | With Noncharitable                    |
|-------------------|--------|----------------------|---------------------------------------|--|-----------------|----------------------------|---------------------------------------|
| 51                | Did (  | the reporting organ  | nization directly or i                | ndirectly engage in any of the (c)(3) organizations) or in secti   | following with  | any other organiza         | ation described in section zations?   |
| а                 |        |                      |                                       | to a noncharitable exempt orga   |                 |                            | Yes No                                |
|                   |        |                      |                                       |  |                 |                            | 51a(i) 🗸                              |
| (ii) Other assets |        |                      |                                       |  |                 |                            |                                       |
| b                 |        | er transactions:     |                                       |  |                 |                            |                                       |
|                   | (i)    | Sales or exchange    | es of assets with a                   | noncharitable exempt organiza  | tion            |                            | b(i)   ✓                              |
|                   |        |                      |                                       | table exempt organization  |                 | • • • • • •                | b(ii) 🗸                               |
|                   |        |                      |                                       | er assets  |                 |                            | b(iii) ✓                              |
|                   |        |                      |                                       |  |                 | • • • • •                  | b(iv)                                 |
|                   |        |                      |                                       |  |                 |                            | b(v) ✓                                |
|                   |        |                      |                                       | hip or fundraising solicitations   |                 |                            | b(vi) ✓                               |
| С                 |        |                      |                                       | its, other assets, or paid emplo   |                 |                            |                                       |
|                   |        |                      |                                       | complete the following schedule  |                 | · · · · · · · ·            | •                                     |
|                   | good   | ds, other assets, or | r services given by                   | the reporting organization. If toolumn (d) the value of the good   | he organization | n received less than       | fair market value in anv              |
| -                 | a)     | (b)                  |                                       | (c)  |                 | (d)                        |                                       |
| Lin               | e no.  | Amount involved      | Name of nonch                         | naritable exempt organization  | Description of  | f transfers, transactions, | and sharing arrangements              |
|                   |        |                      |                                       |  |                 |                            |                                       |
|                   |        |                      |                                       |  |                 | · <del>-</del>             |                                       |
|                   |        |                      |                                       |  |                 |                            |                                       |
|                   |        |                      | · · · · · · · · · · · · · · · · · · · |  |                 |                            |                                       |
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|                   |        |                      | l                                     |  |                 |                            |                                       |
|                   | des    | cribed in section 5  |                                       | affiliated with, or related to, on the other than section 501(c)(3)) or the control of the contr |                 | , .                        |                                       |
|                   | -      | (a)                  |                                       | (b)  |                 | (c)                        | · · · · · · · · · · · · · · · · · · · |
|                   |        | Name of organia      | zation                                | Type of organization   |                 | Description of rel         | ationship                             |
|                   |        |                      |                                       |  |                 |                            |                                       |
| -                 |        |                      |                                       |  | 1               |                            |                                       |
| _                 |        |                      |                                       |  |                 |                            |                                       |
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|                   |        |                      |                                       |  | İ               |                            |                                       |
| _                 |        |                      | - IIII RUMAHAN III A                  |  |                 |                            |                                       |
| _                 |        |                      |                                       |  |                 |                            |                                       |
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| _                 |        |                      |                                       |  | 1               |                            |                                       |
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### FEDERAL STATEMENTS FOR 3/31/08- #990 EIN: #62-1709756

## STATEMENT 1 - Form 990, Part 1, Line 9 - Special Events & Activities

| Special Events   | Gross<br><u>Receipts</u> | Less<br><u>Contrib.</u> | Gross<br><u>Revenue</u> | Less<br>Direct<br><u>Expenses</u> | Net<br>Income<br>(Loss) |
|------------------|--------------------------|-------------------------|-------------------------|-----------------------------------|-------------------------|
| Dragon Boat Race | 92,143                   | 0                       | 92,143                  | 43,831                            | 48,312                  |
| Catfish Dinner   | <u>13.714</u>            | 0                       | <u>13,714</u>           | <u>1,050</u>                      | <u> 12,664</u>          |
| Total            | 105,857                  | 0                       | 105,857                 | 44,881                            | 60,976                  |

## STATEMENT 2 - Form 990, Part III -Organization's Primary Exempt Purpose

To enhance the water quality of the Cumberland River and its watersheds through education and by promoting cooperation among citizens, businesses and agencies in Kentucky and Tennessee.

# STATEMENT 3 – Form 990, Part IV, Line 57 – Equipment

|                       |          | Less:               |              |
|-----------------------|----------|---------------------|--------------|
|                       |          | Accumulated         | Book         |
|                       | Cost     | <b>Depreciation</b> | <u>Value</u> |
| Office furniture      | \$10,000 | \$ 6,905            | \$ 3,095     |
| Computers & equipment | 31,847   | <u>12,777</u>       | 19,070       |
|                       | \$41,847 | \$19,682            | \$22,165     |

## STATEMENT 4 - Form 990, Part VA - List of Board of Directors

| <u>Name</u>   | <u>Title</u> | Avg. Hrs. | Comp. | <b>Benefits</b> | Expenses |
|---|--------------|-----------|-------|-----------------|----------|
| Phil Armor<br>501 Union Street, 6 <sup>th</sup><br>Nashville, TN 3721 |              | .5        | 0     | 0               | 0        |
| Albert Benneyworth<br>4525 Harding Rd., S<br>Nashville, TN 3720       | te 314       | .5        | 0     | 0               | 0        |
| Shirley Caldwell-Par<br>4505 Harding , #167<br>Nashville, TN 3720     | ,            | .5        | 0     | 0               | 0        |
| Alean Biles<br>1825 Morena St.<br>Nashville, TN 3720                  | Director     | .5        | 0     | 0               | 0        |

## FEDERAL STATEMENTS FOR 3/31/08- #990 EIN: #62-1709756

STATEMENT 4 - Form 990, Part VA - List of Board of Directors (continued)

| SIATEMENT 4 - Form 990, Part VA - List of Board of Directors (continued)     |                          |           |       |          |          |  |  |  |
|--|--------------------------|-----------|-------|----------|----------|--|--|--|
| <u>Name</u>  | <u>Title</u>             | Avg. Hrs. | Comp. | Benefits | Expenses |  |  |  |
| Berdelle Campbell<br>1217 5 <sup>th</sup> Ave., North<br>Nashville, TN 37208 | Secretary                | .5        | 0     | 0        | 0        |  |  |  |
| George Cate<br>120 Chatsworth Dr.<br>Nashville, TN 37215                     | Director                 | .5        | 0     | 0        | 0        |  |  |  |
| Won Choi<br>226 3 <sup>rd</sup> Ave., North<br>Nashville, TN 37203           | Director                 | .5        | 0     | 0        | 0        |  |  |  |
| Bill Coble<br>5033 Old Hickory Bly<br>Nashville, TN 37218                    |                          | .5        | 0     | 0        | 0        |  |  |  |
| Laurel Creech<br>1310 Clinton St., Suit<br>Nashville, TN 37203               |                          | .5        | 0     | 0        | 0        |  |  |  |
| David Duhl<br>401 Church Street<br>Nashville, TN 3723-                       | Director                 | .5        | 0     | 0        | 0        |  |  |  |
| Bill Forrester<br>P.O. Box 160710.<br>Nashville, TN 37216                    | Director                 | ,5        | 0     | 0        | 0        |  |  |  |
| Bill Gary, IV<br>263 Green Turtle Bay<br>Grand Rivers, KY 42                 | Director<br>y Dr.<br>045 | .5        | 0     | 0        | 0        |  |  |  |
| Don Green<br>212 Skyline Dr.<br>Brentwood, TN 3702                           | Director<br>27           | .5        | 0     | 0        | 0        |  |  |  |
| Jonathan Harwell, JR<br>118 Sloan Rd.<br>Nashville, TN 37209                 |                          | .5        | 0     | 0        | 0        |  |  |  |
| Shelley Harwell<br>3902 Woodlawn Dr.<br>Nashville, TN 37205                  | Director                 | .5        | 0     | 0        | 0        |  |  |  |
| Skip Lawrence<br>707 Monroe St.<br>Nashville, TN 37208                       | Director                 | .5        | 0     | 0        | 0        |  |  |  |
| Courtney Masters<br>105 Hidden Lake Ct<br>Hendersonville, TN                 | Board Co-Chair<br>37075  | .5        | 0     | 0        | 0        |  |  |  |
| Art Newby<br>220 Athens Way, Ste<br>Nashville, TN 37208                      |                          | .5        | ð     | 0        | 0        |  |  |  |
| Bob Philp, Jr.<br>1616 Westgate Circle<br>Brentwood, TN 3702                 |                          | .5        | 0     | 0        | 0        |  |  |  |
| Vera Vollbrecht<br>7311 Highway 100<br>Nashville, TN 37221                   | Director                 | .5        | 0     | 0        | 0        |  |  |  |