06115 07/13/2009 9:47 AM

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

	mai Revenu		► The organiz	ation may have	to use a copy of this	return to satisfy sta	ate reporting require	ments.	Inspection
A	For the 20	08 calendar ye	ear, or tax year beginnii	ng	, and end	ing			
В	Check if applic		C. Name of organization					D Emp	loyer identification number
	Apdress chang	use IRS		FRIENDS	OF WARNER	PARKS			
	Name change	label or print or	Doing Business As			\		62	-1333658
	_	type.	Number and street (or P.	O, box if mail is not de	fivered to street address)	1	Room/suite	E Tele	shane number
اا	Initial return	See	50 VAUGHI				j	61	5-370-8051
ı	Termination	Specific	City or town, state or	country, and ZIP	+ 4	i		G Gross re	ceipts \$ 2,832,659
三	Amended retu	instruc- m tions.	NASHVILLE	-		37221		0.000	
' H		E North	e and address of principal					H(a) is to	is a group return for
الا	Application pe	nding ' 'Yali''	e and address of principal	· Onicer.				1 '	sies ¹ Yes X No
		į						H(b) Are	all afficiales
}		ſ						1	
_		l v	501(c) (3) •	(insert no.)	42/2/-2/41	1 -07		- " "	o," altach a fist. (see instructions)
ı <u>-</u>	Tax-exemp		RIENDSOFWA		4947(a)(1) or	527		- Lucionia	
<u>J</u>						; 		In(c) Gibt	p evemption number
		ization: X Cor		Association C	Other ►	1	L. Year of formation:		M State of legal domicie: TN
;;;E	art I	Summai							
			ne organization's miss			<u> </u>	·		
			OF WARNER PAR	. 	· · · · · · · · · · · · · · · · · · ·				RD OF
auc	• • • •		RECREATION	· • • • • • • • • • • • • • • • • • • •	· • • • • • • • • • • • • • • • • • • •	PROTECT, 2	AND IMPROVE,	THE	
֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡֡		• • • • • • • • • • • • • • • • • • •	AND NATURAL	. . 	· · · · · · · · · · · · · · · · · · ·				
Activities & Governance	2 Che	eck this box	if the organiza	ition discontinue	d its operations or dis	sposed of more tha	in 25% of its assets.		•
। ଏ ଏ			members of the gave					3	38
S	4 Nur	nber of indepe	endent voting member	s of the governing	ng body (Part VI, iine	1b)	* · · · * * * · · · * * · · * * * * * *	4	0
iviti			employees (Part V, line				• • • • • • • • • • • • • • • • • • • •	5	4
Acti	6 Tota	al number of v	olunteers (estimate if	necessary)				6	1778
•			ated business revenue			1	· · · · · · · · · · · · · · · · · · ·	I ~	
ì	b Ne:	unrelated bus	siness taxable income	from Form 990-	T, line 34				0
							Prior Ye	ear	Current Year
i C	8 Con	itributions and	grants (Part VIII, line	1h)	• • • • • • • • • • • • • • • • • • • •	•	• • • • • • • • • • • • • • • • • • • •	5,610	
Кеуеппе	9 Prog	gram service i	revenue (Part VIII, line	: 2g)	******		• • • • • • • • • • • • • • • • • • • •	8,860	
) A	10 Inve	stment incom	ie (Part VIII, column (A	A), lines 3, 4, and	d 7c)		2	4,357	12,428
2	11 Cin	er revenue (P	art VIII, column (A), Er	ies 5, 6d, 8c, 9c	, 10c, and 11e)		41	8,718	
			dd fines 8 through 11					7,545	2,832,659
	13 Gra	nts and simila	r amounts paid (Part I	X, column (A), li	nes 1-3)				
	14 3en	efits paid to o	r for members (Part I)	(, column (A), lin		1	i		
i an	15 Sala	aries, ether co	mpensation, employed	e benefits (Part I	IX, column (A), lines (3,942	254,345
Expenses			raising fees (Part IX, o			* *************************************	· .		
per	i .		expenses (Part IX, ccl			154,794	1410年末島城	(C)	
ű	1	•	Part IX, column (A), lir	• •			32	6,623	
			Add lines 13-17 (must				46	0,565	
l			enses, Subtract line 1		• •	1		6,980	2,264,009
50							Beginning	of Year	End of Year
Assets or Balances	20 Tota	al assets (Part	X, line 16)				5,84	0,333	8,103,439
A 8	21 Tota	al liabilities (Pa				i	3	0,311	29,408
25			d balances. Subtract li				5,81	0,022	8,074,031
) ¬	art II	Signatur		,					<u> </u>
			ies of perjury. I declare th	a: have examine	d this return including ad	companying schedul	es and statements, and	to the best	of my knowledge
i			is true, correct, and comp						
Sig	מו	Et.	OCIAINS	Wallin	1			12	12/10
He		Signatur	re of officer	.F12.35312.5624		· · ·		Dox.	713/ D
	. •	· - 1	anor L. Wi	lic E	xecutive	Director		003	•
	,		print name and title	- 11 (-) - -	ALVELLE F	-1			
۱			<u> </u>			Date	Check	į,	Preparer's dentitying number
Pai	id	Preparer's signature	7337 5	· ()	Moshall) 4	eaif.	. [(see instructions)
	parer's	agrature	JAN D. KO		200000		/13/09 emplo		P00542646
	e Only	Firm's name ((or yours FOX,					EIN	▶ 26-0372062
	···	if self-employ	"		IA WAY STE			Phone	
		address, and		TWOOD,		4452		па. 🕨	615-690-6550
			um with the preparer s	<u>`</u>		<u>. </u>	. <u></u>	<u> ,</u>	Yes No
DAA	For Priv	acy Act and I	Paperwork Reduction	n Act Notice, se	ee the separate inst	ructions.			Form: 990 (2006)

Pa	art III Statement of Program Service Accor	nplishments (see instructions)	
1	Briefly describe the organization's mission:		
F	RIENDS OF WARNER PARK PROVIDE	S VOLUNTEER SERVICE TO T	HE NASHVILLE BOARD OF
Ρ	PARKS AND RECREATION IN ORDER	TO PRESERVE, PROTECT, AN	D IMPROVE, THE
	IISTORIC AND NATURAL QUALITY O	THE TABLE	
••			
_		ione during the year which were not listed on	
2	Did the organization undertake any significant program servi		Yes X No
			j tes 🔼 No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant of	hanges in how it conducts, any program	
	services?		Yes X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for each of the	organization's three largest program services by ex	openses.
-	Section 501(c)(3) and 501(c)(4) organizations and section 4		
	allocations to others, the total expenses, and revenue, if any		Ť
	allocations to others, the total expenses, and revende, if any	i tor cucir program control reported.	
	200 200) · · · · · · · · · · · · · · · · · · ·) (Payonya \$
4a	(Code:) (Expenses \$ 209,299	including grants of \$) (Revenue \$)
	PROJECTS HELPED TO PRESERVE AN	D PROTECT THE NATURAL BE	AUTI
	OF THE PARKS. ALSO, THE PROGR	AMS SUPPORTED EDUCATION	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
P	PROGRAMS FOR THE PUBLIC AT THE	NATURE CENTER, AS WELL	
	AS PROVIDING FOR PARK RANGERS		
	CONSERVATION EDUCATION WAS TAU		r <u>c</u>
	OPPORTUNITIES FOR MANY PEOPLE		
	• • • • • • • • • • • • • • • • • • •	FOR HANDS ON EDUCATION A	1410
O	OUTDOOR RECREATION.		,,
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,	
4h	(Code:) (Expenses \$	including grants of \$) (Revenue \$
40			

4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
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4c	(Code:)(Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:)(Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:)(Expenses \$	including grants of \$) (Revenue \$)
		including grants of \$) (Revenue \$)
	Other program services. (Describe in Schedule O.)) (Revenue \$)
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants	s of \$) (Revenue \$	
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	١.	77	
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	A	_
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	}		
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
J		8		X
	complete Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			-
9				
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	_		×
	complete Schedule D, Part IV	9	-	X
)	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		-
l	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,		37	l
	Parts VI, VII, VIII, IX, or X as applicable	11	X	
2	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	<u> </u>
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		7
lа	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
3	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
7	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
		18	х	 -
3	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	19		X
}	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	20	— ——	3
)	Did the organization operate one or more hospitals? If "Yes," complete Schedule H			X
1	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		-
2	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	ļ	X
3	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			l _
	Schedule J	23		X
4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			1
	24b–24d and complete Schedule K. If "No," go to question 25.	24a		7
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
·		24c		
		24d		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240	1	\vdash
a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	05-		3
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	 	<u> </u>
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			-
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		7
;	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
7	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	1	X

art IV Checklist of Required Schedules (continued)		Van	Na
	78,612,74	res	No
	10000000 10000000000000000000000000000		14.74.53 2011 11.4
(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,		\$173	900
Part IV	28a		X
Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			l
complete Schedule L, Part IV	28b		X
Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	30		X
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
- 11	31		X
	32		X
	33		X
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
111 D.F A.M. Barr A	34		X
, , , , , , , , , , , , , , , , , , , ,			
	35		X
141414444444444444444444444444444444444			
	36		X
VI	37		х
	During the tax year, did any person who is a current or former officer, director, trustee, or key employee: Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization a	During the tax year, did any person who is a current or former officer, director, trustee, or key employee: Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV 28a Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV 28b Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 29 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 20 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 20 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I 31 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 12 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 32 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 33 Did the organization conduct more than 5% of its activities through an entity that is not a r	During the tax year, did any person who is a current or former officer, director, trustee, or key employee: Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV 28a Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV 28b Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I Is any related organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Is any related organizations. Did the organization make any transfers to an exempt non-charitable related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization on onduct more than 5% of its activities through an e

Form **990** (2008)

Pa	int V Statements Regarding Other IRS Filings and Tax Compliance				V-0	No
4-	Factor the assessmented in Pay 2 of Form 1006. Applied Summary and Transmittal of	1 1	I		Yes	No_
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a	2			
L	U.S. Information Returns. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		3	
b	Did the organization comply with backup withholding rules for reportable payments to vendors and report					
С		u		10	1 105 M 2 3 4 JA	X
2a	gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	l				
La	Statements, filed for the calendar year ending with or within the year covered by this return	2a	4	4,74,74		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
Ü	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			10000		
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	/				
-	this return?			3a		X
b				3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auth	ority				
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial					
	account)?			. 4a	Name and the State of	X
b	If "Yes," enter the name of the foreign country:			600		0.0752
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Ban	k				Maria
	and Financial Accounts.					D. FERR
5a						X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ı?		5b		X
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity					
	Regarding Prohibited Tax Shelter Transaction?				<u> </u>	Х
6a	Did the organization solicit any contributions that were not tax deductible?			<u>6a</u>		A
b	If "Yes," did the organization include with every solicitation an express statement that such contributions of			6.		
	gifts were not tax deductible?			6b	1.000	171.0
7	Organizations that may receive deductible contributions under section 170(c).	_		- A .		
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more tha			7a	, .	x
	\$75? If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
D	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					<u> </u>
С	required to file Form 8282?			7c		X
ч	If "Yes," indicate the number of Forms 8282 filed during the year	7d	[100
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal statement of the property of t					
·	benefit contract?			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		X
a	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as					
	required?			. 7h	35321508	X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section	n				
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsor	ring				
	organization, have excess business holdings at any time during the year?			8	1 3.4 5	X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			[4.5]		
а	Did the organization make any taxable distributions under section 4966?				ļ	X
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	1	X
10	Section 501(c)(7) organizations. Enter:	1	I			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				1 33
11	Section 501(c)(12) organizations. Enter:	مدا	ı			
a	Gross income from members or shareholders	11a		\dashv		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	111				
	amounts due or received from them.)	11b	<u></u>	12a	1.707436	Tation 19
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	12b	[
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120	I	17.75 min	1-14077	A CASA C

Form 990 (2008) FRIENDS OF WARNER PARKS 62-1333658 Page 6 Governance, Management, and Disclosure (Sections A, B, and C request information about policies not Part VI required by the Internal Revenue Code.) Section A. Governing Body and Management No For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions. 38 Enter the number of voting members of the governing body 1a 0 Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? Did the organization become aware during the year of a material diversion of the organization's assets? X Does the organization have members or stockholders? Does the organization have members, stockholders, or other persons who may elect one or more members X X 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X The governing body? Яh Each committee with authority to act on behalf of the governing body? Does the organization have local chapters, branches, or affiliates? 9a If "Yes," does the organization have written policies and procedures governing the activities of such chapters, X affiliates, and branches to ensure their operations are consistent with those of the organization? Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations

	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	1	- 22
Sec	etion B. Policies	****		
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		X
13	Does the organization have a written whistleblower policy?	13	<u> </u>	X
14	Does the organization have a written document retention and destruction policy?		X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:	5 3 1 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		
а	The organization's CEO, Executive Director, or top management official?	15a	X	
b	Other officers or key employees of the organization?	15b	X	
	Describe the process in Schedule O. (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	14 15		
	the organization's exempt status with respect to such arrangements?	16b	<u> </u>	<u> </u>

Section C. Disclosure

- List the states with which a copy of this Form 990 is required to be filed
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) 18 available for public inspection. Indicate how you make these available. Check all that apply.

must describe in Schedule O the process, if any, the organization uses to review the Form 990

Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at

X Another's website X Upon request Own website

- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 policy, and financial statements available to the public.
- State the name, physical address, and telephone number of the person who possesses the books and records of the 20 4205 HILLSBORO ROAD organization: ▶ BECKY FYKE

615-370-8051

TN 37215

X

NASHVILLE

10

11

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the or	ganization did not compen	sate	any c	office	r, dir	recto	r, tru	istee, or key employee.		
(A) Name and Title	(B) Average hours per	Posi	ition ((C check	C) all ti	nat ap	ply)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
ELEANOR L. W	ILLIS									
EXEC. DIR.	45	X		X	X	X		67,500	0	0
	<u> </u>	<u> </u>				Ц	Ь		l	5 QQQ (2000)

(A) Name and title	A. Officers, Directors, Trus (B) Average	Posi	tion (() chec!	C) k all t	hat ap	ply)	(D) Reportable	(E) Reportable	1	(F) stimated	
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	other compensatio		
						i						
				:								
• • • • • • • • • • • • • • • • • • • •												
. , ,												
	•											
*	-											
				-								
							<u> </u>	67,500				
2 Total number of indivorganization ▶ 0	viduals (including those in 1a	a) wh	no re	ceiv	ed m	ore t	han	\$100,000 in reportable com	pensation from the			
employee on line 1a' 4 For any individual list the organization and individual	list any former officer, direct ? If "Yes," complete Schedu ted on line 1a, is the sum of related organizations greate d on line 1a receive or accru the organization? If "Yes," of	le J f repo er th: e co	for si ortab an \$ mpe	uch i le co 150, nsati	ndivi mpe 0003	idual ensati P If "Y 	ion a 'es,"	and other compensation from complete Schedule J for su unrelated organization for	n ch		3 4	X X X
Section B. Independent												
Complete this table f compensation from t		sate	d inc	lepe	nder	t cor	ntrac				(C)	
	(A) Name and business address						<u> </u>	Descrip	(B) tion of services		(C) Compensation	3
<u> </u>							ļ. <u></u>					
	pendent contractors (includ	ing tl	hose	in 1) wh	o rec	eive	d more than \$100,000 in				
compensation from t	ne organization 📂										े0 Form 990 (2	2008)

Pa	ırt V	Statement of Rev	enue	<u> </u>			(0)	(5)
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
t s	1a	Federated campaigns	1a	1,188,188				
and	b	Membership dues	1b					
<u> </u>	ءَ ا	Fundraising events	1c	460,292				
at a	ď	Related organizations	1d					
S,E	٦	Government grants (contributions)	1e			(1)		
<u>Sis</u>		All other contributions, gifts, grants,						
he	l '	and similar amounts not included above	1f	1,105,483				
	_	Noncet and the store included in lines of						
젊	9	Noncash contributions included in lines 1		* * * * * * * * * * * * * * * * * * * *	2,753,963			and the second
Program Service Revenue Contributions, gifts, grants and other similar amounts	n	Total. Add lines 1a-1f		·	2,100,000	1967		
				Busn. Code	48,711	48,711		
eve	2a	PARKS SUPPORT	• • • • •		40,711	40,711		
ë.	b		• • • • •					
ž	C		· · · · ·					
အွ	d							
ran	е							
õ	f	All other program service rev			40 844			
<u> </u>	g	Total. Add lines 2a-2f			48,711			
	3	Investment income (including	divide	ends, interest, and				17 101
					12,428	-4,693		17,121
	4	Income from investment of ta						
	5	Royalties			Compression and the State	The state of the s		
		(i) Rea	<u> </u>	(ii) Personal				
	6a	Gross Rents						
	b	Less: rental exps.						
	С	Rental inc. or (loss)					٠.	2.0
	_d	Net rental income or (loss)		,				
	7a	Gross amount from sales of assets (i) Securi	ties	(ii) Other			La de la Calaba	
		other than inventory						
	b	Less: cost or other						
		basis & sales exps.						
	С	Gain or (loss)						
	d	Net gain or (loss))				
	8a	Gross income from fundraising ev		[
ē		(not including \$						
enr		of contributions reported on line 1		İ				
ě		See Part IV, line 18		a				
er	h	Less: direct expenses		b				
Other Revenu		Net income or (loss) from fun		na events	Auto Anti-Anglia in Premior in Laure (1997)			
~		Gross income from gaming activi						
	Ju	See Part IV, line 19		a				
	h	Less: direct expenses		h				
		Net income or (loss) from gar		otivitios			····	· · · · · · · · · · · · · · · · · · ·
		Gross sales of inventory, less	-	icuvides				
	Tua	•						
	_	returns and allowances		a				
		Less: cost of goods sold		D	1,345,000,000,000,000		, # W	
	C	Net income or (loss) from sal		nventory Busn. Code			1 11 11 11 11 11	Attaches District
		Miscellaneous Rever	ide	busn. Code	4	44 724		
		RESTRICTED REVENUES			44,724			
	b	ENDOWMENT FUND			4,800			
	C	COMMUNITY FUND ENDO	MENT	LOSS	-31,967	-31,967		
	đ			-				
	е	Total. Add lines 11a-11d			17,557		no rate. I in platfield	
	12	Total Revenue. Add lines 1h						
	1	9c, 10c, and 11e		<u>,,,,,,,</u>	2,832,659	61,575	0	17,121

Part IX Statement of Functional Expenses

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

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

	All other organizations must	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and		expenses	general expenses	Схропосо
'	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
2					
•	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				1000
4	Benefits paid to or for members		***		
5	Compensation of current officers, directors,	67 500	C 750	12 500	47 250
	trustees, and key employees	67,500	6,750	13,500	47,250
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	4 7 4 4 4		4 04 5	00 001
7	Other salaries and wages	156,116	124,120	1,915	30 <u>,081</u>
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	19,838	15,916		3,042
10	Payroll taxes	10,891	5,441	1,223	4,227
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	15,486		15,486	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	106,517	41,099		65,418
13	Office expenses	268		268	
14	Information technology				
15	Royalties				
16	Occupancy	2,715		2,715	
17	Travel	1,027		1,027	
18	Payments of travel or entertainment expenses			•	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20					
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				***
23	Insurance	9,790	5,098		4,692
24	Other expenses, Itemize expenses not				
	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
_	RESTRICTED EXPENSES	67,113	Transfer and the second of the second	67,113	<u> </u>
a	HILL TRACT CAMPAIGN	27,091		27,091	
b	*	23,997		23,997	
C	GENERAL EXPENSES PARKWATCH	15,074		15,074	
d		7,749	7,749	13,074	
e	EDUCATION	37,478	3,126	34,268	84
f	All other expenses	568,650			154,794
25	Total functional expenses. Add lines 1 through 24f Joint Costs, Check here	308,030	209,299	204,007	203,703
26	Joint Costs. Check here ☐ if following SOP 98-2. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation	<u> </u>			Form 990 (2008)

്റ്	art /	National Sheet								
					(A)		(End o	-		
					Beginning of year			156,	762	
	1	Cashnon-interest bearing			132,085	1				
	2	Savings and temporary cash investments			341,186			.36,		
	3	Pledges and grants receivable, net			391,521	3	3	961,	422	
	4	Accounts receivable, net				4				
	5	Receivables from current and former officers, directors, trus	stees, ke	y						
		employees, or other related parties. Complete Part II of Sch	hedule L	,		5		41 5.3 %	3.349/89/00	
	6	Receivables from other disqualified persons (as defined un	der section	on						
		4958(f)(1)) and persons described in section 4958(c)(3)(B).	. Comple	te		S KEN				
		Part II of Schedule L				6				
ध	7	Notes and loans receivable, net		.,,		7				
Assets	8	Inventories for sale or use				8				
As	9	Prepaid expenses and deferred charges				9	The West Have the grant on a control as a transfer to		ADDERVISION IN	
	10a	Land, buildings, and equipment: cost basis	10a	4,821,801						
	þ	Less: accumulated depreciation. Complete					140 (545)	evalue.		
		Part VI of Schedule D	10b		4,816,801	10c	4,8	<u>321,</u>	<u>801</u>	
	11	and the state of t			59,743	11	(559,	<u>808</u>	
	12					12				
	13	Investments—program-related. See Part IV, line 11				13				
	14	Intangible assets				14				
	15	Other assets. See Part IV, line 11			98,997	15		67,	030	
	16	Total assets. Add lines 1 through 15 (must equal line 34)			5,840,333	16	8,1	L03,	439	
	17	Accounts payable and accrued expenses			30,311	17		29,	408	
	18	Grants payable				18				
	19	Deferred revenue								
	20									
တ္ထ										
Liabilities	22	Payables to current and former officers, directors, trustees,		. ,				18 18 19 18 18111		
ᅙ	~~	employees, highest compensated employees, and disqualif								
<u>:</u>		0 11 0 18 10 1 1				22				
_	23	Secured mortgages and notes payable to unrelated third pa				23		<u> </u>	•	
	24					24				
	25	Other liabilities. Complete Part X of Schedule D				25				
	26	Total liabilities. Add lines 17 through 25			30,311	26		29,	408	
<u>,,,</u>	20	Organizations that follow SFAS 117, check here				- 1			1861	
nces		complete lines 27 through 29, and lines 33 and 34.	alla.							
ğ	27	•			4,937,238	27	4.9	984,	926	
Balar	27	Unrestricted net assets			872,784			89,		
뿧	28	Temporarily restricted net assets			3,2,.02	29				
or Fund	29	Permanently restricted net assets				133			ndayez k Yankida N	
ᅹᅵ		Organizations that do not follow SFAS 117, check here				1.4.2.7 1.4.0.0				
ō		and complete lines 30 through 34.				30		ade a di Nasa,	10.483	
Net Assets	30			.,		31				
ŠŠ	31	Paid-in or capital surplus, or land, building, or equipment fu				32				
ĕ	32	Retained earnings, endowment, accumulated income, or of			5,810,022		8 (074,	N31	
et	33							103,		
	34	Total liabilities and net assets/fund balances	<u> </u>	· · · · · · · · · · · · · · · · · · ·	5,840,333	34	0,-	LUJ,	433	
P	art)	XI Financial Statements and Reporting						Т.,	1	
				a			[32.5	Yes	No	
1			ash 🛭 🗵		ther			1	-	
2a	We	ere the organization's financial statements compiled or reviev	wed by ar	n independent accountan	nt?		I		X	
b		ere the organization's financial statements audited by an inde						X	├	
c		"Yes" to lines 2a or 2b, does the organization have a committ								
		e audit, review, or compilation of its financial statements and					2c	X	_	
За	ı As	a result of a federal award, was the organization required to	undergo	an audit or audits as set	t forth in					
	the	e Single Audit Act and OMB Circular A-133?					3a		X	
b	lf"	"Yes," did the organization undergo the required audit or audi							<u></u>	

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No. 1545-0047 **2008**

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

FRIENDS OF WARNER PARKS

Employer identification number 62–1333658

			EKTENDS OF A							<u> </u>	<u> </u>		
P	art I	Reas	on for Public Charity	Status (All organization	ns must c	omplete	this p	art.) (:	see in	structio	ons)		<u></u>
The	orgai	nization is not a	a private foundation because	e it is: (Please check only one c	organization	.)							
1	П			ociation of churches described i			۸)(i).						
2	П	A school desc	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E.)									
3	П			ce organization described in sec	ction 170(b)	(1)(A)(iii)	. (Attach	Schedu	le H.)				
4	П	•	•	d in conjunction with a hospital c						e hospita	al's name,		
		city, and state											
5		•		of a college or university owned	or operated	by a gove	rnmenta	l unit de	scribed	in			
•	ــــا	•	b)(1)(A)(iv). (Complete Part			., ., .,							
6		,	** ** ** * * * * * * * * * * * * * * * *	overnmental unit described in s	ection 170/	5 1/11/Δ1/ν	1						
7	x	•		substantial part of its support fro			•	the ner	eral nul	hlic			
,			•	,	in a govern	memar an		i alo goi	iciai pa	biio			
			section 170(b)(1)(A)(vi). (Co		+ II A								
8	\vdash	-		i 70(b)(1)(A)(vi). (Complete Part I) more than 33 1/3 % of its sup	-	ntributions	momb	archia fo	oe and	arose			
9	لــا	-											
		•		pt functions—subject to certain		, .				แอ			
			•	nd unrelated business taxable in	·-		r tax) ii c	m busii	169969				
	m		•	0, 1975. See section 509(a)(2)		-	-)/A) /os	a laatrii	otiona\				
10	-			exclusively to test for public safe									
11	لـــا			exclusively for the benefit of, to						tion			
				ed organizations described in se						uon			
				he type of supporting organizati			. [\neg					
	\Box	a Type		c Type III–Functio			d į	· ·	e III–Otl	lei			
е	Ш	, ,		anization is not controlled direct	•					tian.			
				and other than one or more pub	oliciy suppor	ted organi	zations (sescribe	a in sec	uon			
			section 509(a)(2).										
f		· ·		rmination from the IRS that it is	a Type I, Ty	/pe II, or I	ype III si	upportin	g				
		_	check this box										Ш
g		Since August	17, 2006, has the organizat	tion accepted any gift or contribu	ution from a	ny of the							
		following per											
		(i) A persor	who directly or indirectly co	ontrols, either alone or together	with person:	s describe	d in (ii)					Yes	No
				f the supported organization?							11g(i)	\vdash	
		(ii) A family	member of a person describ	ed in (i) above?							11g(ii)		
		(iii) A 35% o	ontrolled entity of a person d	described in (i) or (ii) above?							11g(iii)		
h		Provide the f	ollowing information about the	he organizations the organizatio	n supports.								
(i)	Name	e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Did y	ou notify	(vi) I	s the	(vii) Am	ount of	
` '		anization	, ,	(described on lines 1-9	in col. (i) I	isted in your	· · · · · ·	ization in	organizat		supp	ort	
				above or IRC section (see instructions))	governing	document?	col. (i)	of your cort?	(i) organi U.:	zed in the			
				(See instructions))	Yes	No	Yes	No	Yes	No			
					1.00	- 110							
					<u> </u>								
												-	
										\vdash			
					The second second		Toggine CC =	14.04		1897.5K S			
Tota	ıl		[4] A. Carrier and A. Santana and A. Carrier and		1.00	12	L 2000 13	1 1 1 1 1	1				

Page 2

Schedule A (Form 990 or 990-EZ) 2008 FRIENDS OF WARNER PARKS Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Sec	tion A. Public Support					····	
Cal	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 2	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's	653,403	1,203,642	729,896	404,470	2,802,675	5,794,086
_	benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1-3	653,403	1,203,642	729,896	404,470	2,802,675	5,794,086
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						5,464,627
6	Public support. Subtract line 5 from line 4						329,459
	tion B. Total Support					· · · · · · · · · · · · · · · · · · ·	
Cal	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	653,403	1,203,642	729,896	404,470	2,802,675	5,794,086
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	57,638	40,093	55,651	24,357	17,121	194,860
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10 11	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	4,326	96,591	12,129	418,718	17,557	549,321 6,538,267
12	Gross receipts from related activities, etc. (ege instructions)	- 15 Vis <u> 11 Vis</u>			12	554,986
13	First five years. If the Form 990 is for the			or fifth tax year a			
13	organization, check this box and stop here						▶ □
800	tion C. Computation of Public Su			· · · · · · · · · · · · · · · · · · ·			
	Public support percentage for 2008 (line 6,			n)		14	5.0389 %
14	Public support percentage from 2007 Sche					45	85.2335 %
15 40-	33 1/3 % support test—2008. If the organ						7
16a	and stop here. The organization qualifies a						▶ □
	33 1/3 % support test—2007. If the organ					check this	
b							► X
4-9-	box and stop here. The organization qualit	nes as a publicly sup	poneu organizacio	v on line 12 16a		ie 10% or	
17a	10%-facts-and-circumstances test—200						
	more, and if the organization meets the "fa	7 HOW the	▶ □				
_	organization meets the "facts-and-circumst					,	
b	10%-facts-and-circumstances test—200						
	more, and if the organization meets the "fa					v now the	▶ □
	organization meets the "facts-and-circumst					6 .6'	[H
18	Private foundation. If the organization did	not check a box on	line 13, 16a, 16b, 1	17a, or 17b, check	this box and see in	structions	P L

Schedule A (Form 990 or 990-EZ) 2008 FRIENDS OF WARNER PARKS

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Sec	tion A. Public Support								
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")								
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose								
3	Gross receipts from activities that are not an unrelated trade or business under section 513								
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf								
5	The value of services or facilities furnished by a governmental unit to the organization without charge								
6	Total. Add lines 1-5								
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons								
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000								
С	Add lines 7a and 7b								
8	Public support (Subtract line 7c from line 6.)								
Section B. Total Support									
Çal	endar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total		
9	Amounts from line 6								
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources								
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975								
C	Add lines 10a and 10b								
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on								
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)								
13	Total support. (Add lines 9, 10c, 11,								
	and 12.)								
14	First five years. If the Form 990 is for the o organization, check this box and stop here	7				(3) ,	▶ □		
Sec	tion C. Computation of Public Su								
15	Public support percentage for 2008 (line 8,	column (f) divided l	by line 13, column (f))		15	%		
16	Public support percentage from 2007 Sched	dule A, Part IV-A, li	ne 27g				%		
Sec	tion D. Computation of Investmer	nt Income Perc	centage						
17	Investment income percentage for 2008 (lin						%		
18	Investment income percentage from 2007 S						%		
19a	33 1/3 % support tests—2008. If the organ						. ,		
	17 is not more than 33 1/3 %, check this box						▶ ∟		
b	33 1/3 % support tests—2007. If the organ						. –		
	line 18 is not more than 33 1/3 %, check this						🟲 📙		
20	Private foundation. If the organization did	not check a box or	line 14, 19a or 19b	o, check this box a	nd see instructions		▶ ∟		

Schedule A (Fe	orm 990 or 990-EZ) 2008	FRIENDS O	F WARNER	PARKS	62-1333658	Page 4
Part IV	Supplemental Info	rmation, Comple	ete this part to	o provide the exp	planation required by Part II, line 10; tional information. (see instructions)	
PART I	I, LINE 10 -					
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No. 1545-0047
2008
Open to Public

Open to Public Inspection

Employer identification number Name of the organization 62-1333658 FRIENDS OF WARNER PARKS Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 2 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year a Total number of conservation easements 2a 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year
_ _ _ _ _ _ Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? No In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

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

Schedule D (Form 990) 2008

4,821,801

c Leasehold improvements
d Equipment

Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)

Schedule D (Form 990) 2008 FRIENDS OF WARNER PAR	KS	62-1333658	Page 3
Part VII Investments—Other Securities. See Form 99			
(a) Description of security or category	(b) Book value	(c) Method of valuation:	
(including name of security)	(5) 50011 741100	Cost or end-of-year market value	
	<u>-</u>		
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
_ _ _			
_ _			 ,
_ _			
 			
			A
_			
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments—Program Related. See Form 99	0 Part X line 13	2.500.0 (24.0) (16.0) (16.0) (16.0) (16.0) (16.0) (16.0) (16.0) (16.0) (16.0) (16.0) (16.0) (16.0) (16.0) (16.0)	ACT CONTRACTOR OF THE PARTY OF
	(b) Book value	(c) Method of valuation:	
(a) Description of investment type	(b) Book value	Cost or end-of-year market value	
		Cost of end-of-year market value	
1000			
	<u> </u>		
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13.)			
Total: (Oblight (b) should addar to the east, takes, earl (b) the east,			· · · · ·
		(b) Book	value
(a) Description		(0) 5001	Value

	•		
	. Date .		
			
	·		
			•
Total. (Column (b) should equal Form 990, Part X, col. (B) line 15.)		▶	
Part X Other Liabilities. See Form 990, Part X, line 2	5		
(a) Description of liability	(b) Amount		H.541.343.
	(b) Amount		
Federal income taxes			
		얼굴 등은 그렇는 살으셨다고 하시네요?	
		· [발생님은 기록의 보고를 12 시험하다.	
			
		보고 말을 다 됐다. 그렇게 말	
		[의 스타일 시호를 다 깨끗되는 말 보다	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25.)		The state of the s	<u> </u>
In Part XIV, provide the text of the footnote to the organization's financial state	ements that reports the org	ganization's liability for	
uncertain tax positions under FIN 48.			

Sche	dule D (Form 990) 2008 FRIENDS OF WARREN FARRES	<u> </u>		i age 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to F	inancial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	2,832,659
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	568,650
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	2,264,009
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net). Add lines 4-8		9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10	2,264,009
Pa	rt XII Reconciliation of Revenue per Audited Financial Statement		urn	
1	Total revenue, gains, and other support per audited financial statements		1	2,832,659
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	13.00.57	
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV)	2d		
	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	2,832,659
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:]	14-175 Year 64-175 G	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIV)	4b		
	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12.)		5	2,832,659
	rt XIII Reconciliation of Expenses per Audited Financial Statemen	nts With Expenses per R	eturn	
1	Total expenses and losses per audited financial statements		1	568,650
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		100	
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b	7	
	Losses reported on Form 990, Part IX, line 25	2c	7	
ď	Other (Describe in Part XIV)	2d	1 1	
	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	568,650
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:] [······
7	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
a h	Other (Describe in Dont VIV)	4b	1	
			4c	
5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)		5	568,650
7.5	rt XIV Supplemental Information		1	
	elete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines	ta and 4: Part IV lines 1h		
	b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and			
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Schedule D (Fo	orm 990) 200	8 F I	RIEN	DS (OF I	WAR	NER	PF	IRK	S						62	<u>2-1</u>	333	365	8					Р	age 5
Schedule D (Fo	Supplen	nental l	nform	natior	n (con	tinued)																			
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SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No. 1545-0047

2008

Open To Public Inspection

Name of the organization FRIENDS OF WARNER	PARKS				Employer identif	
Part I Fundraising Activities. Complete if	the organization	on ai	ารพย	ered"Yes" to Form	990, Part IV, line	e 17.
Part I Fundraising Activities. Complete if Indicate whether the organization raised funds through ar Mail solicitations Email solicitations In-person solicitations In-person solicitations In-person solicitations In-person solicitations If "Yes," list the ten highest paid individuals or entities (fur to be compensated at least \$5,000 by the organization. For entity (fundraiser)	y of the following a e Solicitation f Solicitation g Special fund n any individual (inconnection with production)	ctivitie of non of gov draisin luding	s. Che-gove ernme g eve office nal fu eemee requir fund-have of of the dy or ol of utions?	eck all that apply. rnment grants ent grants nts rs, directors, trustees ndraising services?	Iraiser is	Yes No (vi) Amount paid to (or retained by) organization
Total 3 List all states in which the organization is registered or lice registration or licensing.		is or h	as be	en notified it is exempt fi	om	

P	art I	Fundraising E	vents. Complete if the or ,000 on Form 990-EZ, lii	rganiza ne 6a.	ation answered"Yes" to List events with gross	Form 990, Part IV, I receipts greater than	ine 18, d \$5,000	or rep	orte	t
Revenue	1 2	Gross receipts Less: Charitable contributions Gross revenue (line 1 minus line 2)	(a) Event #1 (event type)		(b) Event #2 (event type)	(c) Other Events NONE (total number)	(d) Total E d col. (a col. () throu	gh
Direct Expenses	4 5 6 7 8 9	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Direct expense summary. Net income summary. Co	Add lines 4 through 7 in column	i)						
P	art I	II Gaming. Com	plete if the organization a on Form 990-EZ, line 6a.	answe	red"Yes" to Form 990,	Part IV, line 19, or re	ported r	nore		
Revenue		ιιαι τ ψ 10,000	(a) Bingo		(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	1 '	otal gam a) throug		
 	1	Gross revenue	to the second se	\perp						
Direct Expenses	2 3 4	Cash prizes Non-cash prizes Rent/facility costs								
	5	Other direct expenses	Yes %	+	Yes %	Yes	%	i Kilyan		484.0
	6	Volunteer labor	Yes %		Yes %	No No	,			
	7		Add lines 2 through 5 in column		i)		• <u>(</u>		Т	
9 a b	Is i	the organization licensed to No," Explain: ere any of the organization' Yes," Explain:	e organization operates gaming a o operate gaming activities in eac s gaming licenses revoked, susp	ch of thes	se states? or terminated during the tax ye	ar?		9a 10a	Yes	No
11 12	ls	es the organization operate the organization a grantor,	e gaming activities with nonmem beneficiary or trustee of a trust o le gaming?	bers? or a mem	ber of a partnership or other o	entity		11 12 0 or 99	00-EZ)	2008

Sche	edule G (Form 990 or 990-EZ) 2008 FRIENDS OF WARNER PARKS	62- <u>1333</u>	658	F	age 3
				Yes	No
13	Indicate the percentage of gaming activity operated in:				
а	The organization's facility	13a	%	14000	
b	An outside facility		%		
14	Provide the name and address of the person who prepares the organization's gaming/special events books				
	and records:				
	Name ►		1. 170.00	100 to 10	1 55 32 3
	Address ▶				
				3000	
15a	Does the organization have a contract with a third party from whom the organization receives gaming			2000	egissa s
	revenue?		15a		L
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$	and the			
	amount of gaming revenue retained by the third party ▶ \$	•			
C				-20	
	Name ►		26.6	2.75	
	Address ▶				
			1807		
16	Gaming manager information:				275
	Name ▶				
	Gaming manager compensation ▶ \$				
	Description of services provided ▶				
	_				
	Director/officer Employee Independent contractor		1.1		
17	Mandatory distributions:				
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		184		
	retain the state gaming license?		17a	ļ	
b					
	in the organization's own exempt activities during the tax year ▶ \$		1. 1/4 1		

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

OMB No. 1545-0047
2008

Open to Public Inspection

Name of the organization FRIENDS OF WARNER PARKS	Employer identification number 62–1333658
FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCK	KHOLDERS
ORGANIZATION HAS MEMBERS.	
FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THE	HEIR RIGHTS
BOARD VOTES ON ADDITIONS TO THE BOARD.	
FORM 990, PART VI, LINE 8B - DOCUMENTATION BY COMMITTEE	F FYDLANATION
NO.	
FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR	TOP OFFICIAL
EVALUATED ANNUALLY.	
FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR	OFFICERS
EVALUATED ANNUALLY.	
FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLO	DSURE EXPLANATION
ON REQUEST.	,