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Form **990**

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 2010

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

_				,			<u> </u>			'
<u>A</u>	For the	2010 calend	dar year, or tax year beginn			and ending			, 201	
В	Check if a	applicable	C Name of organization Sout	hern Appalachian	n Highlands Co	nservancy	, Inc.	D Employer	Identification I	Number
	Addr	ess change	Doing Business As						98890	
	Nam	e change	Number and street (or P O box	if mail is not delivered to	street addr)	Room/su	ite	E Telephone	number	
	Initia	ıl return	34 Wall St.			502		(828)	253-0	095
	Term	nınated	City, town or country		State	ZIP code + 4				
	Ame	nded return	Asheville		NC	28801		G Gross rece	eipts \$ 7 , 1	71,782.
	Appl	ication pending	F Name and address of principal	officer		ŀ	(a) Is this a	group return f	or affiliates?	Yes X No
			Carl Silverstein 34 Wall S	t., Ste. 502 Ashe	eville NC	28801		affiliates include attach a list (se		Yes No
ī	Tax-ex	empt status	X 501(c)(3) 501(c) () ◀ (insert no)	4947(a)(1) or	527	11 190, 8	attach a list (se	ee instructions)	
J	Webs	ite: ► ww	w.appalachian.org	1			l(c) Group e	exemption numb	ber ►	
K	Form o	f organization	X Corporation Trust	Association Other	LY	ear of Formatio	n 1974	M Stat	te of legal dom	icile NC
Pa	art I	Summar			· ·					
•	1 B		be the organization's missio	n or most significan	t activities The	Southern	Appala	chian Hig	hlands Co	nservancy is
ø			country's oldest and mo							
ance	_ <u>f</u>	or the ber	nefit of present and fu	ture generation	. SAHC works to	o conserv	e_the_ur	ique plar	nt and ani	mal habitat,
~		lean water	, local farmland and scen	ic beauty of the mo	ountains of Nort	h Carolina	and eas	t Tennesse	e (Conting	<u>led See Note.)</u>
Sever Sever			x 🕨 🔲 if the organization			sed of more	than 25%	6 of its net	assets	
23%			iting members of the govern dependent voting members			L)		-	4	21
∋ë ⊝e	1		of individuals employed in		• •	u)		-	5	21 12
Activities			of volunteers (estimate if n	•	(i ait v, iiie za)				6	40
-8	1		ed business revenue from Pa	_	line 12				7a	0.
<u> </u>			business taxable income fr						7b	
Revenue							P	rior Year	Cı	urrent Year
3	8 C	Contributions	and grants (Part VIII, line 1	h)			3	,997,77	9.	7,033,922.
֓֞֞֞֝֟֞֟֝֟֟֝֟֝֟֟֝֟֟	1	-	rice revenue (Part VIII, line 2					9,73		
Š	1		come (Part VIII, column (A)					19,09		102,582.
) C	1		e (Part VIII, column (A), line		•			5,03		21,276.
			e – add lines 8 through 11 (12)	4	,031,63		7,157,780.
	1		milar amounts paid (Part IX	• •	1-3)			165,51	3.	153,661.
	1		to or for members (Part IX,							
တ္			er compensation, employee		olumn (A), lines 5	-10)		583,47		588,912.
n3e	16a P	rofessional '	fundraising fees (Part IX, co	lumn (A), line 11e)					0.	
Expenses	b ⊺	otal fundrais	sing expenses (Part IX, colu	mn (D), line 25) 🟲	4	3,595.				
ш	17 C	Other expens	ses (Part IX, column (A), line	es 11a-11d, 11f <u>-24f)</u>			2	,331,26	2.	4,949,187.
	18 T	otal expense	es Add lines 13-17 (must e	qual Part IX, column	(AD) ITT 257 11	En	3	,080,25	4.	5,691,760.
	19 R	Revenue less	expenses Subtract line 18	from line 12	ILLOUIN		<u>!</u>	951,38	2.	1,466,020.
8 8				99		SC	Beginnin	g of Current \	rear E	nd of Year
Soft	4		(Part X, line 16)	1 1	JAN 302	012 9		<u>,327,67</u>		0,000,888.
Net Assets	21 T	otal liabilitie	s (Part X, line 26)	ᅵ앂┃		HS.	<u> </u>	<u>,367,39</u>		1,171,282.
			fund balances Subtract lin	e 21 from line 20	OCDEN		16	<u>,960,27</u>	6. 18	<u>8,829,606.</u>
Pa	art II	Signatur	<u>re Block</u>	<u></u>	MAD !!	UI	l			
Und	er penaltie plete Dec	s of perjury, I de laration of prepa	eclare that I have examined this retui arer (other than officer) is based on a	n, including accompanying	g schedules and staten	nents, and to th	e best of m	y knowledge an	nd belief, it is tr	ue, correct, and
			3:00 May 1-11	7		<u> </u>		1-10 -	,	
c:	~	Signatu	ire of officer				Da	/ - / 8 - / / Re	<u> </u>	
Sig He	gn ro									
110			1 Maxwell print name and title				Treas	urer		
			oreparer's name	Preparer's signature		Date	I	Charle T	, PTIN	
D-	:	1 "	•	57/101	70 -		,,	Check	if Fills	
Pa	ııa eparer		en C Corliss	OMON DITC	oran	<u> 01/10/</u>	12	self-employed		
	eparer se Only	.						. ,		
	ZIZ OMNODITA DI DIL I							Firm's EIN	0001 00	26 0006
N4c	u the ID	C discuss 45	ASHEVILLE	hours obous? /ss = ::		1-1434		Phone no (36-0206
			is return with the preparer s							Yes No
ВA	A FORF	raperwork K	eduction Act Notice, see th	e separate instructi	ONS.	TEE	40101 03/	25/11		Form 990 (2010)

TEEA0102

10/06/10

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	Х	
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, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		_
6	Did the organization maintain any donor advised funds or any similar funds or 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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7	Х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If $'Yes,'$ complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable	**		
а	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	х	
b	Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
c	Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d	х	
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	Х	
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	х	_
	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Х	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
	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, Parts II and IV	15		Х
	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, Parts III and IV	16		х
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		x
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19_		х
	a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		_ X
_ t	o If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20 b		

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Form 990 (2010) Southern Appalachian Highlands Conservancy, Inc.

Part 10 Checklist of Required Schedules (continued) 62-1098890

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III	22_	_	Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		Х
b	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 to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		X
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		<u>X</u>
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	28c 29	х	Х
		29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30	х	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32	_	Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Х
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 Yes X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197 Note. All Form 990 filers are required to complete Schedule O	38	х	
BAA		Form	1 990 ((2010)

3 - 4 - 5 - 6

Га	Chack if Schoolule O contains a response to any question in this Bort V			
	Check if Schedule O contains a response to any question in this Part V		Yes	
1.	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 13		res	No
	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
•	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
2.				
28	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return 2a 12	ŀ		
ı	o If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3:	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3b		
	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		_	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
ı	if 'Yes,' enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			ş
5 a	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
ı	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5c		
	· · · · · · · · · · · · · · · · · · ·			
O a	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		х
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were			
•	not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).		*	¥ 7
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and		,m)	* *
٠	services provided to the payor?	7a		Х
ŀ	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
•	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			
	Form 8282?	7c		X
	d If 'Yes,' indicate the number of Forms 8282 filed during the year	<u>* </u>		
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
Ģ	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899	_		
	as required?	. 7g		
•	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
_				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business			
	holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			
ě	a Did the organization make any taxable distributions under section 4966?	9a		Х
1	b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Х
	Section 501(c)(7) organizations. Enter			
á	a Initiation fees and capital contributions included on Part VIII, line 12			
ı	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
i	a Gross income from members or shareholders			
ı	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		-
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year [12b]			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
•	a Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
(b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b			
	c Enter the amount of reserves on hand			
	a Did the organization receive any payments for indoor tanning services during the tax year?	140		x
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14a 14b		├^
	5 in 165, 165 it filed a form 720 to report these payments. In 140, provide an explanation in scriedule O.	140		<u> </u>

Forr	n 990 (2010) Southern Appalachian Highlands Conservancy, Inc. 62-1098890		F	Page 6					
Pa	rt VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b be	low, a	and t						
	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or char	iges i	n						
	Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI			.					
Sec	ction A. Governing Body and Management			Х					
<u> </u>	Citori A. Governing Body and management		Yes	No					
1	a Enter the number of voting members of the governing body at the end of the tax year 21		163	NO					
	b Enter the number of voting members included in line 1a, above, who are independent 1b 21	1							
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other								
3	officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision	2		Х					
Δ	of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents	3		X					
•	since the prior Form 990 was filed?	-		Α					
5		5		х					
6	Does the organization have members or stockholders?	6		Х					
7	7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?								
	b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7a 7b	<u>X</u>	х					
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by	À	^						
	the following:								
	a The governing body?	8a 8b	<u>X</u>						
	b Each committee with authority to act on behalf of the governing body?								
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		x					
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
			Yes	No					
10	a Does the organization have local chapters, branches, or affiliates?	10a		Х					
	b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10ь							
11	a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х						
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990			* ~					
12	a 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	х						
	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	х						
13	Does the organization have a written whistleblower policy?	13	Х						
14	Does the organization have a written document retention and destruction policy?	14	Х						
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		_						
	a The organization's CEO, Executive Director, or top management official	15a	X						
	b Other officers of key employees of the organization	15b	Х						
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.)								
16	a 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							
	b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the								
	organization's exempt status with respect to such arrangements?	16b							
	ction C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ► See Form 990, Page 6, Line 17 (continued)	-	. _						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) av inspection. Indicate how you make these available. Check all that apply.	aılable	for pu	iplic					
	Own website X Upon request								
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest polic statements available to the public	y, and	financ	cial					
20	, , , ,								
	S. Appalachian Highlands Conservan 34 Wall St. Suite 502, Asheville NC 28801 (8	<u> 28)_</u> 2	<u> </u>	0095					

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Form 990 (2010)	Southern Appalachian Highlands Conservancy.	Tnc

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

Checkif Schedule O contains a response to any question in this Part VII

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

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

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

Check this box if neither the organization	nor any r	elated	lorg	anız	atio	n com	pen	sated any current office	cer, director, or trustee	;
(A)	(B)			(((D)	(E)	(F)
Name and title	Average					that app		Reportable	Reportable	Estimated
	hours per week (describe hours for related organiza- tions in Schedule O)	adividial trustee or director	anstitutional feuslee	Offir el	Key employee	Higt est conntaisated employee	Funnei	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
_(1) Witt Langstaff, Jr									_	
President	2.00	X		Х				0.	0.	0.
(2) Jeanette Blazier Vice President	2.00	х		х				0.	0.	0.
(3) Bill Maxwell										
Treasurer	2.00	x		х				0.	0.	0.
(4) Jay Leutze										
Secretary	2.00	Х		х				0.	0.	0.
(5) Bruce Cummingham										
At Large	1.00	X						0.	0.	0.
(6) Courtney Blossman										
Board Member	1.00	X						0.	0.	0.
(7) Leslie Casse	1 00									_
Board Member	1.00	Х			-			0.	0.	0.
(8) Richard Coker	1									_
Board Member (9) Joe DeLoach	1.00	_X						0.	0.	0.
Board Member	1.00	v						0.	0	0
(10) Nancy Edgerton	1.00							0.	0.	0.
Board Member	1.00	y						0.	0.	0.
(11) Jack Hamilton	1.00							0.		<u> </u>
Board Member	1.00	x						0.	0.	0.
(12) Doris Gove									<u>~</u>	
Board Member	1.00	х						0.	0.	0.
(13) Lindsay Hearn										
Board Member	1.00	Х						0.	0.	0.
(14) Florence Krupnick	. –									
Board Member	1.00	Х						0.	0.	0.
(15) Bill Jones										
Board Member	1.00	Х						0.	0.	0.
(16) Bill Lowndes										
Board Member	1.00	Х		\square				0.	0.	0.
(17) Tom Laughlin										
Board Member	1.00							0.	0.	0.
BAA		1	IEEA	0107	12	/21/10				Form 990 (2010)

500 300

Partition A. Officers, Directors, Trus	iees, r	LEY	LII			c 5,	alli		ipensateu Enij	noyees (cont)
. (A)	(B)	Post	tion (chack		lhat a	nnlul	(D)	(E)	(F)
Name and title	Average hours	o =	_	_	_		-	Reportable compensation from	Reportable compensation from	Estimated amount of other
	hours per week (describe hours for related organi zations in Sch O)	ndivi	Institutional trustee	Officer	Keye	Highest compens	Former	the organization (W-2/1099-MISC)	related organizations (W 2/1099-MISC)	compensation from the
	related	dual ector	non	31	employee	st co	er			organization and related
	zations	tag	al trı		oyee	durc				organizations
	Sch O)	e e	stee			1 83				
			"		}	ted				
(18) Ken Maness										
Board Member	1.00	x						0.	0.	0.
(19) David Ramsey					<u> </u>					
Board Member	1.00	х						o.	0.	0.
(20) Kathy Singleton										
Board Member	1.00	Х						0.	0.	0.
(21) Milton "Buddy" Tignor, Jr.									··	
Board Member	1.00	Х						0.	0.	0.
(22) Carl Silverstein										
Executive Director	40.00			Х				82,285.	0.	15,346.
(23)	1									
	 				L.					
(24)										
(25)								-		
(26)	 				<u> </u>	-				
(20)	-									
(27)										
(28)									_	
522	-									
(29)										
1 b Sub-total	<u> </u>	<u> </u>	,		<u> </u>] !	•	82,285.	0.	15,346.
c Total from continuation sheets to Part VII, Section A							•	02,203.		15,346.
d Total (add lines 1b and 1c)	•						▶	82,285.	0.	15,346.
Total number of individuals (including but not limited	to those	e list	led a	ahov	(e) v	who	rece			
from the organization	10 11105			2001	٠, ١		, , ,	ivea more than \$	roo,ooo iir reportat	ne compensation
	-									Yes No
3 Did the organization list any former officer, director	or truste	e. k	ev e	mole	ove	e. or	hial	hest compensated	employee	THE REAL PROPERTY.
on line 1a ³ If 'Yes,' complete Schedule J for such in	dividual	•,	-, -		-,-	-,	9		o.mp.oy oo	3 X
4 For any individual listed on line 1a, is the sum of rep	ortable	com	pen	satio	on a	ind c	ther	compensation fro	om	医有多数基次
the organization and related organizations greater th	an \$150	0,000)? <i>If</i>	'Ye	s' c	omp	lete	Schedule J for		4 X
5 Did any person listed on line 1a receive or accrue co	mpones	tion	fror	m ar		nroli	atad	organization or un	duadual	4 X
for services rendered to the organization? If 'Yes,' co	omplete	Sch	edul	le J	tor :	such	per	son_		5 X
Section B. Independent Contractors										
Complete this table for your five highest compensate compensation from the organization	d indep	ende	ent c	ontr	act	ors t	hat i	received more tha	n \$100,000 of	
(A)								(B)		(C)
Name and business addres	S							Description of	of services	Compensation
	-									
										
									- -	
2 Total number of independent contractors (including t	out not li	mite	d to	tho	se I	ısted	d ab	ove) who received	more than	
\$100,000 in compensation from the organization >										Walle Hall

,		·	venue			(A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax
i .							function revenue	revenue	under sections 512, 513, or 514
S	1	a Federated campaigns		1 a					, , , , , , ,
NA.		b Membership dues		1 b	60,290.				
S,G		c Fundraising events		1 c					
E &		d Related organizations		1 d					٠
NS, C		e Government grants (contributi	ons)	1 e	1,896,225.				
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS		f All other contributions, gifts, g similar amounts not included	rants, and above	1f	5,077,407.				
E S		g Noncash contributions include	d in Ins 1a-1	If \$_	1,770,441.				
		h Total. Add lines 1a-1f				7,033,922.			
PROGRAM SERVICE REVENUE	_			-	Business Code				
2	2			· -					
H H		b		· – – -	-				
Ž.		<u> </u>	-	· - - -		, , <u>, , , , , , , , , , , , , , , , , ,</u>			
A SE		d			.	_ 			
RA		e	-						
မှု မှ		f All other program service	e revenue	e [>				
-		g Total. Add lines 2a-2f						<u> </u>	
	3	Investment income (incleated other similar amounts)	uding divi	idends,	interest and	102,582.	0.	0.	102,582.
	4	Income from investment	t of tax-ex	empt b	ond proceeds	· ·			
	5	Royalties		·			_		
			(i) R	eal	(н) Personal	* * `	*	* * *	-
	6	a Gross Rents	15,	,300.		**		*	¥
		b Less [,] rental expenses	5,	089.		,,		*	** »
		c Rental income or (loss)	10,	,211.	.	<u>A</u>			* 1
		d Net rental income or (lo	ss)			10,211.	0.	. 0.	10,211.
	7	a Gross amount from sales of	(ı) Seci	urities	(ii) Other	. ^	÷	· »	~ ~ ~
		assets other than inventory				4	, s *		4
		b Less cost or other basis				,			
		and sales expenses							
l		c Gain or (loss)			<u> </u>				
		d Net gain or (loss)							
ENUE	8	a Gross income from func (not including \$	2,8	<u>885.</u>					
OTHER REVE		of contributions reported	on line	IC)	14 276				
띺		See Part IV, line 18 b Less direct expenses		a	14,376. 5,439.				
		c Net income or (loss) fro	m fundra	CIDG OV		8,937.		0.	8,937.
		a Gross income from gam See Part IV, line 19				0,931.		0.	0,937.
		b Less: direct expenses		b					
		c Net income or (loss) fro	m gaming	activit	ies ►				
		a Gross sales of inventory and allowances							
		b Less cost of goods sold	i	ь	3,474.				
		C Net income or (loss) fro		of inven		-2,410.	0.	0.	-2,410.
		Miscellaneous Rever			Business Code				
	11	a Miscellaneous			900099	4,538.	0.	0.	4,538.
		b		L					
		c		↓					
		d All other revenue		L					
		e Total. Add lines 11a-11			•	4,538.			
	12	Total revenue. See inst	ructions		<u> </u>	7,157,780.	0.	0.	123,858.

Sec. 12.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Do 1	All other organizations must comp not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	and organizations in the U.S. See Part IV, line 21	153,661.	153,661.		·
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	96,161.	68,782.	18,338.	9,041.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	33,101.	30,702.	10,330.	3,011.
7	Other salaries and wages	396,261.	323,069.	51,456.	21,736.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	9,920.	7,894.	1,406.	620.
9	Other employee benefits	43,559.	34,663.	6,174.	2,722.
10	Payroll taxes	43,011.	34,227.	6,096.	2,688.
	Fees for services (non-employees)	10,011.	0.,22,.		2,000.
	Management				
	Legal	13,319.	13,319.	0.	0.
	Accounting	12,120.	0.	12,120.	0.
	Lobbying	•			
	Professional fundraising services See Part IV, line 17		Ę.	, *· · · · · · · · · · · · · · · · · · ·	·
f	Investment management fees	31,129.	0.	31,129.	0.
ç	g Other	27,155.	16,902.	10,253.	0.
12	Advertising and promotion	567.	0.	567.	0.
13	Office expenses	33,093.	23,169.	7,720.	2,204.
14	Information technology	7,062.	4,629.	2,433.	0.
15	Royalties				
16	Occupancy	39,375.	31,799.	5,078.	2,498.
17	Travel	18,818.	15,054.	1,882.	1,882.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	10,586.	7,067.	3,337.	182.
20	Interest	40,995.	40,995.	0.	0.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	14,842.	8,905.	5,937.	0.
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)	9,175.	4,019.	5,156.	0.
a	Dues & Subscriptions	4,210.	3,158.	1,052.	0.
	Land Transaction Fees	1,043,989.	1,043,989.	0.	0.
	Land Transfers to State	3,488,802.	3,488,802.	0.	0.
	Surveys & Appraisals	85,256.	85,256.	0.	0.
	Property Taxes	64,372.	64,372.	0.	0.
	All other expenses	4,322.	3,465.	835.	22.
25	Total functional expenses. Add lines 1 through 24f	5,691,760.	5,477,196.	170,969.	43,595.
26	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form 990 (2010)

Pa	rt X	Balance Sheet								
		,			(A) Beginning of year		(B) End of year			
	1	Cash - non-interest-bearing			34,595.	1	50,209.			
	2	Savings and temporary cash investments		ĺ	964,083.	2	981,395.			
	3	Pledges and grants receivable, net		ĺ	35,399.	3	77,643.			
	4	Accounts receivable, net			4					
	5		bles from current and former officers, directors, trustees, key employees, hest compensated employees. Complete Part II of Schedule L							
	6	Receivables from other disqualified persons (as define persons described in section 4958(c)(3)(B), and contraponsoring organizations of section 501(c)(9) voluntal organizations (see instructions)	employers and	,	6					
A S	7	Notes and loans receivable, net		60,000.	7	30,000.				
ASSETS	8	Inventories for sale or use				8				
T S	9	Prepaid expenses and deferred charges			21,906.	9	15,904.			
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	14,562,680.	« · · · »					
	b	Less accumulated depreciation	10b	67,314.	14,264,229.	10 c	14,495,366.			
	11	Investments – publicly traded securities	0.70220	2,201,778.	11	2,474,417.				
	12	Investments – other securities See Part IV, line 11			2/202///00	12				
	13	Investments – program-related See Part IV, line 11				13				
	14	Intangible assets				14				
	15	Other assets See Part IV, line 11		1,745,684.	15	1,875,954.				
	16	Total assets Add lines 1 through 15 (must equal line	34)		19,327,674.	16	20,000,888.			
	17	Accounts payable and accrued expenses	· ··	19,390.	17	25,916.				
	18	Grants payable				18	23,310.			
	19	Deferred revenue		•	19					
Ļ	20	Tax-exempt bond liabilities		20						
Å	21	Escrow or custodial account liability Complete Part I	hedule D	 ·	21					
Ļ	22	Payables to current and former officers, directors, trushighest compensated employees, and disqualified per	stees, k	key employees,	<u>/ ♣·♦ 後 ≪ ,</u>	ž				
Ī		of Schedule L		22						
E S	23	Secured mortgages and notes payable to unrelated th	ırd part	ties	2,273,008.	23	1,080,366.			
	24	Unsecured notes and loans payable to unrelated third	parties	5	75,000.	24	65,000.			
	25	Other liabilities Complete Part X of Schedule D				25				
	26	Total liabilities. Add lines 17 through 25			2,367,398.	26	1,171,282.			
N E T		Organizations that follow SFAS 117, check here ►	X ar	nd complete lines		٠	«			
Ŧ		27 through 29 and lines 33 and 34.			· · · · · · · · · · · · · · · · · · ·		<u> </u>			
Ş	27	Unrestricted net assets			3,275,435.	27	3,782,614.			
SSETS	28	Temporarily restricted net assets			1,309,259.	28	1,287,322.			
	29	Permanently restricted net assets			12,375,582.	29	13,759,670.			
R		Organizations that do not follow SFAS 117, check he	re 🟲	and complete						
E		lines 30 through 34.			* ′					
FUZD	30	Capital stock or trust principal, or current funds				30				
B A L	31	Paid-in or capital surplus, or land, building, or equipment	ent fun	nd		31				
Ê	32	Retained earnings, endowment, accumulated income,	or othe	er funds		32				
AZCES	33	Total net assets or fund balances			16,960,276.	33	18,829,606.			
<u>\$</u>	34	Total liabilities and net assets/fund balances			19,327,674.	34	20,000,888.			

BAA

Form 990 (2010)

<u>rorn</u>	62-	TOARR	90	Pa	age 12	
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI				X	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,1	57 <u>,</u> 7	780.	
2 Total expenses (must equal Part IX, column (A), line 25)						
3	Revenue less expenses Subtract line 2 from line 1	3			<u> </u>	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	16,9			
5	Other changes in net assets or fund balances (explain in Schedule O)	5	4	03,3	310.	
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	18,8	29,6	306.	
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII				X	
				Yes	No	
1	Accounting method used to prepare the Form 990		_ *	. 3		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O					
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х	
-	b Were the organization's financial statements audited by an independent accountant?		2b	Χ		
(c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th review, or compilation of its financial statements and selection of an independent accountant?	e audıt,	2c	Х		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		* *	*** \;	*	
•	d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue separate basis, consolidated basis, or both	d on a	\$	* 1	→	
	X Separate basis Consolidated basis Both consolidated and separate basis]	
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S Audit Act and OMB Circular A-133?	ingle	3a		x	
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the requi or audits, explain why in Schedule O and describe any steps taken to undergo such audits	red audit	3ь			
BAA			Form	990	(2010)	

TEEA0112 12/21/10

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

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

OMB No _1545-0047

Open to Public Inspection

Employer identification number

				Conservancy, In						98890	
Part I				(All organizations					See II	nstruct	ions.
The org	_	•		ett is (For lines 1 through	•		•	•			
1	=	•		lation of churches descr		section	1 70(b)(1))(A)(i).			
2	=			(ii). (Attach Schedule E	•						
3	_			e organization described		. ,	<i>/ / / / / / / / / /</i>				
4 _	_		=	in conjunction with a ho	spital de	scribed	ın secti	on 1 70 (l)(1)(A)(iii) Ente	er the hospital's
5	name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(bX1XAXiv). (Complete Part II)										
6 7	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v)). (Complete Part II)										
8 [_			t ii) 0(b)(1)(A)(vi). (Complete	e Part II)					
9 🛚	_	=		more than 33-1/3% of		-	contribu	tions m	emhers	hın fees	and gross receints
	from inve: June	i activities related stment income a s 30, 1975 See s	d to its exempt function Ind unrelated business Induction 509(a)(2). (Cor	ns – subject to certain taxable income (less s nplete Part III)	exceptio ection 5	ns, and l1 tax) f	(2) no n rom bus	nore tha inesses	n 33-1/3 acquire	3% of its	support from gross
10	An o	organization orga	nized and operated ex	clusively to test for pub	lic safet	y See s	ection 5	i09(a)(4)).		
11 _	more desc	e publicly suppor cribes the type of	ted organizations des supporting organizati	sclusively for the benefit cribed in section 509(a) on and complete lines 1	(1) or se	ction 50 igh 11h	9(a)(2)	See se	or carry ction 50	out the 9(a)(3).	purposes of one or Check the box that
_		Type I	b Type II	с 💹 Туре III		•	•			d 📙	Type III - Other
e _	othe	hecking this box r than foundatior ion 509(a)(2)	, I certify that the organt managers and other	nization is not controlle than one or more public	d directly	y or ındı orted orç	rectly by ganization	one or	more di ribed in	squalifie section	ed persons 509(a)(1) or
f		e organization re ck this box	ceived a written deter	mination from the IRS th	hat is a	Гуре І, Т	ype II o	r Type I	II suppo	rtıng org	anization,
9	Sinc	e August 17, 200	06, has the organization	on accepted any gift or	contribu	tion fron	n any of	the follo	owing pe	ersons?	
	(i)	A person who	directly or indirectly co	ontrols, either alone or to	ogether v	with pers	sons des	scribed i	n (II) an	d (III)	Yes No
			erning body of the sup								11 g (i)
	(ii)	-	er of a person describ	**							11 g (ii)
	(iii)	A 35% controlle	ed entity of a person o	described in (i) or (ii) ab	ove?						11 g (iii)
h	Prov	ride the following	information about the	supported organization)(s)						
	(ı) Na	ime of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	is 1-9 organization in the organization in organiz ction column (i) listed in column (i) of colum is)) your governing your support? organize		ation in Inn (i)				
					Yes	No	Yes	No	Yes	No	
(A)											
<u>(A)</u>											
<u>(B)</u>											
(C)											
<u>(D)</u>			-				-				
(E)					ļ						
Total											
	or Pap	erwork Reduction	on Act Notice, see the	Instructions for Form 9	90 or 99	0-EZ.	<u> </u>	!	Schedul	e A (For	m 990 or 990-EZ) 2010

Sec. 12.

Schedule A (Form 990 or 990-EZ) 2010 Southern Appalachian Highlands Conservancy, Inc. 62-1098890 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	tion A. Public Support				-		
	ndar year (or fiscal year nning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include 'unusual grants')						
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
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 shows a line 11 column (6)	. 18	*	ž *	<i>₽</i>	*	
	shown on line 11, column (f)		· · · · · · · · · · · · · · · · · · ·				
6	Public support. Subtract line 5 from line 4			· /	\$ 	* *	
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10	≪ &	~ %		**************************************	*	
12	Gross receipts from related active	ities, etc (see inst	ructions)			12	
13	First five years. If the Form 990 organization, check this box and	s for the organiza	ition's first, secon	d, third, fourth, or	fifth tax year as a	a section 501(c)(3)	▶ □
Sec	tion C. Computation of Pu	blic Support P	ercentage				
	Public support percentage for 20		•	e 11, column (f)		14	%
15	Public support percentage from 2	2009 Schedule A,	Part II, line 14			15	%
16 <i>a</i>	16a 33-1/3% support test — 2010. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
	33-1/3% support test – 2009. If t and stop here. The organization	qualifies as a pub	licly supported or	ganization			▶ []
17 a	110%-facts-and-circumstances te or more, and if the organization r the organization meets the 'facts	neets the 'facts-ai	nd-circumstances	' test. check this b	ox and stop here	. Explain in Part I\	10% / how ► □
	o 10%-facts-and-circumstances te or more, and if the organization r organization meets the 'facts-and	neets the 'facts-ai I-circumstances'	nd-circumstances test: The organiza	' test, check this b ition qualifies as a	ox and stop here publicly support	e. Explain in Part I\ ed organization	/ how the ►
18 BAA	Private foundation. If the organiz	zation did not ched	ck a box on line 1	3, 16a, 16b, 17a, (or 17b, check this	box and see instr	uctions >

Sec. 12.

Page 3

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

Sect	tion A. Public Support						
Calend	dar year (or fiscal yr beginning in)►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions						
	and membership fees received (Do not include	0 010 004	0 667 460		2 222 772	7 000 000	00 070 500
2	any 'unusual grants.') Gross receipts from admis-	2,010,994.	2,067,463.	12,662,362.	3,991,119.	7,033,922.	28,372,520.
	sions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	353,556.	47,564.	25,331.	18,197.	30,740.	475,388.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the						
_	organization without charge	0 264 550	0 715 007	10 605 600	4 015 076	7 064 660	00.047.000
	Total. Add lines 1 through 5 Amounts included on lines 1,	2,364,550.	2,715,027.	12,687,693.	4,015,976.	7,064,662.	28,847,908.
	2, and 3 received from disqualified persons	557,500.	5,577,592.	4.075.500.	742.578.	2.562.500.	13,515,670.
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			.,	,.,.,.		10,010,0.0.
С	Add lines 7a and 7b	557,500.	5,577,592.	4,075,500.		2,562,500.	13,515,670.
8	Public support (Subtract line 7c from line 6)	10-10-44 3 4 10 10 10 10 10 10 10 10 10 10 10 10 10	4				15,332,238.
Sec	tion B. Total Support					-	
Calend	dar year (or fiscal yr beginning in)►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6	2,364,550.	2,715,027.	12,687,693.	4,015,976.	7,064,662.	28,847,908.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses	70,281.	69,662.	76,833.	19,090.	102,582.	338,448.
_	acquired after June 30, 1975	70 201	60 662	76 022	10 000	100 500	220 440
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	70,281.	69,662.	76,833.	19,090.	102,582.	338,448.
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	7,048.	3,834.	1,360.	0.	4,538.	16,780.
13	Total support. (Add Ins 9, 10c, 11, and 12)						29,203,136.
14	First five years. If the Form 990 organization, check this box and	stop here		d, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ □
Sec	tion C. Computation of Pu						
15		-	•	e 13, column (f))		15	52.50 %
16	Public support percentage from 2					16	51.36 %
$\overline{}$	tion D. Computation of Inv						
17	Investment income percentage for			=	nn (f))	17	1.16 %
18	Investment income percentage fr					18	1.06 %
19a	33-1/3% support tests – 2010. If is not more than 33-1/3%, check	the organization of this box and stop	did not check the longanian before. The organian of the companian of the c	box on line 14, an zation qualifies as	id line 15 is more a publicly suppor	than 33-1/3%, and ted organization	d line 17 ► X
b	33-1/3% support tests - 2009. If line 18 is not more than 33-1/3%	, check this box a	nd stop here. The	organization qua	lifies as a publicly	supported organi	1/3% and
20	Private foundation. If the organiz	zation did not ched	ck a box on line 14	4, 19a, or 19b, ch	eck this box and s	ee instructions	

Schedule A (Form 990 or 990-EZ) 2010 Southern Appalachian Highlands Conservancy, Inc. 62-1098890 Page 4
Part IV. Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
Other Income Part III, Line 12
Description: Miscellaneous
2006: 7048.
2007: 3834.
2008: 1360.
2009: 0.
2010: 4538.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 2010 Open to Public / Inspection

Employer identification number

Sou	thern Appalachian Highlands (Conservancy, Inc.	62-1098890
Par	t 🔝 Organizations Maintaining Donoi	Advised Funds or Other Similar Fund	is or Accounts. Complete if
	the organization answered 'Yes' to	o Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor funds are the organization's property, subject to	or advisors in writing that the assets held in dono of the organization's exclusive legal control?	r advised Yes No
6	Did the organization inform all grantees, donorsused only for charitable purposes and not for the purpose conferring impermissible private benefits the conferring impermissible private bending impermissible private benefits the conferring impermissible	s, and donor advisors in writing that grant funds one benefit of the donor or donor advisor, or for an fit?	can be by other Yes No
Par	till Conservation Easements. Compl	ete if the organization answered 'Yes'	to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by X Preservation of land for public use (e g , re X Protection of natural habitat X Preservation of open space	Preservation of X Preservation of	an historically important land area a certified historic structure
2	Complete lines 2a through 2d if the organization last day of the tax year	n held a qualified conservation contribution in the	e form of a conservation easement on the
	idet day of the tax year		Held at the End of the Tax Year
9	Total number of conservation easements		2a 96
-	Total acreage restricted by conservation easen	nents	2b 20,684.0
	Number of conservation easements on a certific		2c 1
		· · · · · · · · · · · · · · · · · · ·	201
C	Number of conservation easements included in structure listed in the National Register	(c) acquired after 8/17/06, and not on a historic	2d 0
3	Number of conservation easements modified, t tax year ▶1	ransferred, released, extinguished, or terminated	by the organization during the
4	Number of states where property subject to cor	nservation easement is located 2	
5	Does the organization have a written policy regard enforcement of the conservation easement	arding the periodic monitoring, inspection, handles it holds?	ing of violations, X Yes No
6	Staff and volunteer hours devoted to monitoring 2,500	g, inspecting, and enforcing conservation easeme	ents during the year
7	Amount of expenses incurred in monitoring, ins ▶ \$ 40,700.	specting, and enforcing conservation easements	during the year
8	Does each conservation easement reported on $170(h)(4)(B)(i)$ and section $170(h)(4)(B)(ii)$?	line 2(d) above satisfy the requirements of section	X Yes No
9	In Part XIV, describe how the organization reprinclude, if applicable, the text of the footnote to conservation easements.	orts conservation easements in its revenue and e the organization's financial statements that desi	xpense statement, and balance sheet, and cribes the organization's accounting for
Pai	Complete if the organization ans	ctions of Art, Historical Treasures, or wered 'Yes' to Form 990, Part IV, line 8	Other Similar Assets.
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finance.	SFAS 116 (ASC 958), not to report in its revenue held for public exhibition, education, or research cial statements that describes these items	e statement and balance sheet works of in furtherance of public service, provide,
t	If the organization elected, as permitted under historical treasures, or other similar assets hel- following amounts relating to these items:	SFAS 116 (ASC 958), to report in its revenue sta d for public exhibition, education, or research in	atement and balance sheet works of art, furtherance of public service, provide the
	(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 ar amounts required to be reported under SFAS 1	t, historical treasures, or other similar assets for 16 (ASC 958) relating to these items:	financial gain, provide the following
a	Revenues included in Form 990, Part VIII, line	1	► \$
t	Assets included in Form 990, Part X		- \$

Schedule D (Form 990) 2010 South Part III Organizations Mainta	ern Appalachiar	n Highlands Co s of Art, Histo	onse rica l	rvancy, Inc. Treasures, or	62-109 Other Similar Ass		ontını	Page 2 Ied)
3 Using the organization's acquisition items (check all that apply)	on, accession, and o		-	_	at are a significant use	e of its o	:ollectio	n
a Pùblic exhibition d Loan or exchange programs								
b Scholarly research								
c Preservation for future general Provide a description of the organ		and explain how	thev f	urther the organizat	ion's exempt purpose	ın		
Part XIV 5 During the year, did the organizat assets to be sold to raise funds ra			_	_	,		-	_
assets to be sold to raise funds ra	ther than to be mair	tained as part of	the or	rganization's collect	tion?	Yes		No
Part IV Escrow and Custodia 9, or reported an amo	unt on Form 990	Part X, line	orgar 21.	nization answer	ed 'Yes' to Form S	990, P	art IV,	line ——
1 a Is the organization an agent, trust included on Form 990, Part X?	tee, custodian, or oth	er intermediary f	or cor	ntributions or other a	assets not	Yes		No
b If 'Yes,' explain the arrangement	in Part XIV and comp	olete the following	g table	·.				
						Amoun	<u>t</u>	
c Beginning balance					1c			
d Additions during the year					1d			
e Distributions during the year					1 e			
f Ending balance					1f	7		_
2a Did the organization include an ar	•	Part X, line 217				Yes	L	No
Part V Endowment Funds. Co					000 D-+ IV/ (. 10		
Part V Endowment Funds. Co	· -							
1 a Basimuna of year halance	(a) Current year	(b) Prior year		(c) Two years back	(d) Three years back	(e)	Four year	
1 a Beginning of year balance b Contributions	2,403,218.	639,4		499,869	<u> </u>	- A		<u>* </u>
b Contributions		1,723,1	00.	300,850	• */ * * .			
c Net investment earnings, gains, and losses	388,297.	97,0	52.	-142,362	* * * * * *			ķ~ j
d Grants or scholarships					· · · · · · · · · · · · · · · · · · ·	1	-	;
e Other expenditures for facilities and programs	49,464.	39,2	49.	14,140	. 8 . 2			
f Administrative expenses	22,856.	17,1		4,786		% <i>M</i>		
g End of year balance	2,719,195.	2,403,2	18.	639,431	• [:	*	
2 Provide the estimated percentage	of the year end bala	nce held as						
a Board designated or quasi-endow	ment •1	5.05 %						
b Permanent endowment ►	84.95 %							
c Term endowment ► 0	<u>.00</u> %							
3a Are there endowment funds not in	the possession of the	ne organization th	nat are	e held and administ	ered for the	í		
organization by:						2 0	Yes	No
(i) unrelated organizations (ii) related organizations						3a(i)	Х	
b If 'Yes' to 3a(ii), are the related or	raanizations listed or	roguered on Cab	مانيام	D2		3a(ii)		X
4 Describe in Part XIV the intended	•					3b		<u> </u>
Part VI Land, Buildings, and I								
Description of investment	(a) Co:	st or other basis	(b)	Cost or other	(c) Accumulated	(d)	Book va	alue
1a Land	''	nvestment)		pasis (other)	depreciation			
b Buildings				249,557.	30,069.		210	188
c Leasehold improvements				249,337.				,488.
d Equipment	 			44,549.	37,245.			,304.
e Other			1	4,268,574.	0.	1 4		,574.
Total. Add lines 1a through 1e (Column	(d) must equal Form	n 990, Part X. coi			<u> </u>			,366.
ВАА					Schei			90) 2010

TEEA3302 12/20/10

Schedule D (Form 990) 2010 Southern Appalachian Part VII Investments—Other Securities. See F	Highlands Conser	evancy, Inc. 62-109	8890 Page 3
(a) Description of security or category	(b) Book value		
(including name of security)	(b) Book value	(c) Method of valuat Cost or end-of-year mark	ket value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
<u>(A)</u>			
(B)			
(C)			
(D)			
(E)			
<u></u>			
(G)	<u> </u>		
<u>(H)</u>			
_(I)			
Total. (Column (b) must equal Form 990 Part X, column (B) line 12)	l	<u> </u>	· · · · · · · · · · · · · · · · · · ·
Part VIII Investments-Program Related. (See	Form 990, Part X,	line 13)	
(a) Description of investment type	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
(1)			
(2)			
(3)			
(4)			
(5)			•
(6)			
(7)			
(8)			
(9)			
(10)			-
Total. (Column (b) must equal Form 990, Part X, column (B) line 13)		, N N N N N N N N N N N N N N N N N N N	*
Part IX Other Assets. (See Form 990, Part X,	line 15)		
(a) De	scription		(b) Book value
(1) Funds with the Community Foundati	ion of WNC		0.
(2) -Roan Endowment			57,388.
(3) -Land and Conservation Easement S	Stewardship End	dowment	245,010.
(4) -Land and Conservation Easement A	Acquistion Endo	owment	170,455.
(5) -Highlands Fund Operating Endowme	ent		351,790.
(6) Land Assets Subject to Life Estat			1,051,311.
(7)			
(8)			
(9)	-		
(10)			
Total. (Column (b) must equal Form 990, Part X, column(B)), line 15)	>	1,875,954.
Part X Other Liabilities. (See Form 990, Part			1,013,331.
(a) Description of liability	(b) Amount		
(1) Federal income taxes	(b) / intodiff		
(2)			
(3)			
• • • • • • • • • • • • • • • • • • • •			
(4)	 		
(5)		1	
(5)	_		
(6)			
(6) (7) (8) (9) (10)			
(6) (7) (8) (9) (10) (11)			
(6) (7) (8) (9) (10)	>		

	edule D (Form 990) 2010 Southern Appalachian Highlands Conservancy, Inc.	62-10	98890	Page 4
Pa	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements			
1	Total revenue (Form 990, Part VIII,column (A), line 12)		7,157	<u>,</u> 780.
2	Total expenses (Form 990, Part IX, column (A), line 25)		5,691	760.
3	Excess or (deficit) for the year Subtract line 2 from line 1			020.
4	Net unrealized gains (losses) on investments		403	3,310.
5	Donated services and use of facilities			
6	Investment expenses			
7	Prior period adjustments			
8	Other (Describe in Part XIV)			
9	Total adjustments (net) Add lines 4 through 8		403	3,310.
_10				,330.
Pa	Reconciliation of Revenue per Audited Financial Statements With Reve	nue per Return	l	
1	Total revenue, gains, and other support per audited financial statements	1	7,607	,431.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
	a Net unrealized gains on investments 2a	403,310.		
1	b Donated services and use of facilities 2b	32,339.		
•	c Recoveries of prior year grants			
(d Other (Describe in Part XIV)	14,002.		
•	e Add lines 2a through 2d	2e	449	651.
3	Subtract line 2e from line 1	3	7,157	780.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
	a Investments expenses not included on Form 990, Part VIII, line 7b			
- 1	b Other (Describe in Part XIV)			
(c Add lines 4a and 4b	4c		
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		780.
Pa	rt.XIIIA Reconciliation of Expenses per Audited Financial Statements With Exp	enses per Retu	<u>irn</u>	
1	Total expenses and losses per audited financial statements	1	5,738	,101.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	لئنا		
	a Donated services and use of facilities 2a	32,339.		
I	b Prior year adjustments 2b			
•	c Other losses 2c			
•	d Other (Describe in Part XIV)	14,002.		
(e Add lines 2a through 2d	2e	46	5,341.
3	Subtract line 2e from line 1	3	5,691	,760.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investments expenses not included on Form 990, Part VIII, line 7b			
	b Other (Describe in Part XIV)			
	c Add lines 4a and 4b Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	4c		760
	TOTAL EXPENSES Add lines 3 and 4c. (This must equal Form 990, Fart I, line 18)	<u> 3</u>	3,691	760.
Com	V, line 4; Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Als additional information.	4, Part IV, lines 19 so complete this pa	b and 2b, irt to provide	
<u>Pt</u>	II Line 3 SAHC amended a 46-acre conservation easement	to establis	h_quideli	nes_
<u>Pt</u>	II Line 3 for permitted locations of allowed developmen	<u>nt infrastru</u>	<u>cture, wi</u>	<u>th</u>
<u>Pt</u>	II Line 3 no change in total amount of development allo	owed_by_the	- -	-
<u>Pt</u>	II Line 3 conservation easement.			-
<u>Pt</u>	II Line 5SAHC has a conservation easement monitoring & enf	orcement pol	icy that 's	<u>been</u>
<u>Pt</u>	II Line 5adopted based on quidelines set forth by the I	and Trust A	lliance th	īronāp
<u>Pt</u>	II_Line_5its_accredidation_process. Monitoring_is_perfo	ormed by a La	and Stewar	rdship
Pt	II Line 5 Coordinator. SAHC has enforcement capability & max	<u>intains a </u> leg	al defense	fund.
BAA			edule D (Form 9	

Schedule D (Form 990) 2010 Part XIV Supplemen	Southern Appalachian Highlands Conservancy, Inc. tal Information (continued)	62-1098890 Page 5
Pt_II_Line_9	Please see attached note from the audit repor	:t
Pt_V_Line_4	_To_generate_income_for_conservation_easement	stewardship,
Pt_V_Line_4	land_acquisition_and_other_conservation_purpo	oses_consistent
Pt_V_Line_4	with the purpose and terms of each endowment	fund.
Pt_X	SAHC is exempt from federal income taxes under	501(c)(3) of the Internal
Pt_X	Revenue Code. Under the Code, income from certain	activities not related to the
Pt_X	organization's tax-exempt purpose may be subject to taxat	ion as unrelated business income.
Pt_X	The organization had less than \$1,000 of income from un	related business activities in
Pt_X	the 2010-11 fiscal year and was, therefore, not requi	red to file Federal Form 990-T
Pt_X	(Exempt Organization Business Income Tax Return)	. The organization believes
Pt_X	that it has appropriate support for all tax po-	sitions taken, and as such,
Pt_X	does not have any uncertain tax positions that a	re material to the financial
<u>Pt_X</u>	statements. The organization's Forms 990 for 200	9, 2010 and 2011 are subject
<u>Pt_X</u>	to examination by the IRS, generally for three	years after being filed.
Pt_XII_Line_2d	Event Expense \$5,439, Rental Expense \$5,089, I	Merchandise Expense \$3,474
Pt_XIII_Line_2d_	Event Expense \$5,439, Rental Expense \$5,089, 1	Merchandise Expense \$3,474
	- 	·
		·

SCHEDULE I

Department of the Treasury Internal Revenue Service

Name of the organization

Governments and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.

Inc.

Southern Appalachian Highlands Conservancy, [Parill General Information on Grants and Assistance

OMB No 1545-0047

: . •

Silving Chicago	Inspection	Employer Identification number
		Employer

62-1098890

Land Conservat Land Conservat **ջ** □ (h) Purpose of grant or assistance ▲ X Yes Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000 Rantle Grants and Other Assistance to Governments and Organizations in the United States. Complete of the organization answered 'Yes' to (g) Description of non cash assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance? and the selection criteria used to award the grants or assistance? (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 27,994. 100,000. (d) Amount of cash grant (c) IRC section if applicable 501(c)(3) 501(c)(3) Part II can be duplicated if additional space is needed Enter total number of section 501(c)(3) and government organizations 56-1712373 58-1552188 (p) EIN 3 Enter total number of other organizations Conservation Trust for NC (2) The North Carolina Arbore __100_Frederick_Law_Olmsted 1028 Washington St____ 11111 1 (a) Name and address of organization or government Asheville NC 28806 Raleigh NC 27605 1 1 i ١ ١ ı ı ١ 1 € E **©** 9 9 හු

Schedule I (Form 990) 2010

10/29/10

TEEA3901

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

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. 62-1098890 Southern Appalachian Highlands Conservancy, Schedule 1 (Form 990) 2010 Part III

•

Page 2

(f) Description of non-cash assistance Parily Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance ო 4 Ŋ 7 9

_process_by_the_steering_committee_and_each_group_must_complete_a_grant_ Each organization must go through an application process, a selection _agreement_that_contains_the_following:_ Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2

RESPONSIBILITIES: The Subgrantee is to use the funds in accordance Pt_I_Line_2

SUBGRANT PERIOD: grant period is scheduled to end xxxdate. All subgrant Pt_L Line_2

with their approved subgrant application (guidelines attached).

Pt_I_Line_2

funds should be expended between xxxdate and xxx date. Pt_I_Line_2 REPORTS: The Subgrantee agrees to prepare and deliver to Blue Ridge Forever a report on the use of these funds on the attached form by xxx, 2010 Pt_I_Line_2 Pt_I_Line_2

to be collectively submitted to the Grantors for all activity under the grant Pt_I_Line_2_

See Schedule I (Form 990) - Part IV - Supplemental Information (Continuation Sheet)

BAA

Schedule I (Form 990) 2010

Schedule I (Form 990) - Part IV - Supplemental Information (continued) Schedule I (Form 990) - Part IV - Supplemental Information (Continuation Sheet)

Pt I Line 2	as required by Grantor.
Pt I Line 2	Accounting Practices: The Subgrantee must adhere to generally accepted accounting
Pt I Line 2	principles in maintaining accurate, current and complete records. Upon request,
Pt I Line 2	the Subgrantee shall permit authorized representatives from SAHC or the Grantor
Pt I Line 2	to inspect and/or have audited all work, materials, payrolls, records,
Pt I Line 2	and other data with respect to the Subgrantee's operations and expenditure of grant
Pt I Line 2	funds provided under this contract. The Subgrantee shall have adequate internal
Pt I Line 2	controls to insure protection of all assets. As a condition of this Contract
Pt I Line 2	for Services, Subgrantee acknowledges and agrees that the following
Pt I Line 2	specific accounting practices shall be observed: (1) The Subgrantee's books and
Pt I Line 2	and bank statements are reconciled monthly. Expenditures of Subgrantee funds
Pt I Line 2	are subject to a formal review and approval process. (2) The Subgrantee's Board
Pt I Line 2	of Directors approves a formal annual budget. (3) The Subgrantee's accounting
Pt I Line 2	policies provide for documentation of expenditures. Such documentation includes
Pt I Line 2	invoices and receipts from vendors verifying that goods and services were
Pt I Line 2	delivered and paid for. The Subgrantee agrees to retain all records supporting the
Pt I Line 2	disbursement of grant funds for a period of five (5) years, and bank account
Pt I Line 2	records for a period of five (5) years.

SCHEDULE M

Noncash Contributions

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

OMB No 1545-0047

2010

Open To Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990.

Southern Appalachian Highlands Conservancy, Inc. 62-1098890 Part I Types of Property (a) (b) (c) (d) Method of determining noncash contribution amounts Check If Noncash contribution Number of applicable contributions or amounts reported on Form 990. items contributed Part VIII, line 1g 1 Art-Works of art Art-Historical treasures 3 Art-Fractional interests Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes Intellectual property 9 Securities-Publicly traded Securities-Closely held stock 10 Securities-Partnership, LLC, or trust interests 11 Securities-Miscellaneous 12 Qualified conservation contribution-Historic structures 1,766,525. Please see note 14 Qualified conservation contribution-Other 15 Real estate-Residential 16 Real estate-Commercial Real estate-Other 17 Collectibles 18 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts Other ► (Supplies for Event) 25 3,916. Fair Market Value 26 Other ► (_____) 27 Other ► (28 Other ► (Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No **30a** During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt 30 a purposes for the entire holding period? **b** If 'Yes,' describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 Х 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32 a Х b If 'Yes.' describe in Part II 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

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

describe in Part II

Schedule M (Form 990) 2010

Schedule M (Form 990) 2010 Southern Appalachian Highlands Conservancy, Inc. 62-1098890 Page 2 Rartill Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.
' and 33. Also complete this part for any additional information.
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TEEA4602 10/26/10

Schedule M (Form 990) 2010

BAA

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2010

Department of the Treasury Internal Revenue Service Name of the organization

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

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

Southern	Appalachian Highlands Conservancy, Inc.	62-1098890
Pt_VI-A,	Line 7a At the annual membership meeting, a group of pr	rescreened trustees are
Pt_VI-A,	Line 7a voted on by members either in person or by prox	y. Members
Pt_VI-A,	Line 7a may abstain from voting or vote for or against.	This vote
Pt_VI-A,	Line 7a is the extent of the membership rights. Members	s do not
Pt_VI-A,	Line 7a have control over day-to-day governance decision	ons. However,
Pt_VI-A,	Line 7a if there would be significant changes to the or	ganization, such as a
Pt_VI-A,	Line 7a merger, dissolution, or amendment to the Articl	<u>es_of</u>
Pt_VI-A,	Line 7a Incorporation, members may vote on such issues.	
Pt_VI-B,	Line 11a The 990 is prepared by independent accountants,	reviewed by management,
Pt_VI-B,	Line 11a presented to the Finance Committee for review, and once	e it is approved, presented
Pt_VI-B,	Line 11a to the entire Board for final approval or propo	osed revision.
Pt_VI-B,	Line 12c All Trustee members and staff must sign an annu	al conflict of interest
Pt_VI-B,	Line 12c statement acknowledging that they understand the	ne_policy_and
Pt_VI-B,	Line 12c procedures. As part of this policy there is a c	disclosure procedure if
Pt_VI-B,	Line 12c there is knowledge of a possible conflict of in	terest.
Pt_VI-B,	Line 15 In the annual budgeting process, the Board approves a	a budget line for aggregate
Pt_VI-B,	Line 15 salary expense. Thereafter, individual salaries	and salary increases for
Pt_VI-B,	Line 15 employees are determined by the Executive Directo	r. The Board of Directors
Pt_VI-B,	Line 15 sets the Executive Director salary after a perf	formance review and
Pt_VI-B,	Line 15 a check of comparable salary information for no	onprofit organizations
Pt_VI-B,	Line 15 with similar budgets.	
Pt_VI-C,	Line 18 Forms 1023 & 990 are available upon request.	
Pt_VI-C,	Line 19 Governing documents, conflict of interest policy	<u>/ & financial statements</u>
Pt_VI-C,	Line 19 are available upon request.	
Pt_XII,_I	ine 2c Executive Committee	

Southern Appalachian Highlands Conservancy, Inc.	62-1098890	1
Schedule O (Form 990), Supplemental Information to Form 990, Page 2, Part III, Line 1 (continued)	orm 990	
Briefly describe the organization's mission:		
for the benefit of present and future generation. SAHC works	to conserve the unique plant and animal habitat,	
clean water, local farmland and scenic beauty of the mountains of No	orth Carolina and east Tennessee (Continued See Note)	
Schedule O (Form 990), Supplemental Information to Form 990, Page 6, Line 17 (continued)	orm 990	

North Carolina
South Carolina

Additional Information For Tax Return

Southern Appalachian Highlands Conservancy, Inc.

62-1098890

Form 990 p 1: Pt I, Ln 1, Mission, Cont-3

Mission continued: for the benefit of present and future generations. We achieve this by forging and maintaining conservation relationships with landowners and public agencies, owning and managing land, and working with communities to accomplish their conservation objectives.

Form 990 p 6: Line 17-1

The organization maintains a Charitable Solicitation License with the NC and SC Secretaries of State. As part of the annual license renewal process, the organization is required to provide a copy of the Form 990 filed with the IRS.

Schedule M: Line 14 column (d)

3 Bargain Purchase

Bargain purchase land value determined by estimated fair market value based on appraisal.

Per accounting policies, contributed conservation easements are not recorded in income.

Southern Appalachian Highlands Conservancy, Inc. EIN # 62-1098890

Form 990 p 11: Part X Balance Sheet, Lines 23 & 24

Notes Payable Notes payable

Notes payable consisted of the following at June 30, 2011: A non-interest bearing, unsecured personal loan from a member of the organization, payable in one sum on May 10, 2012. Under the terms of the loan, upon the lender's death, the loan is forgiven and becomes a charitable gift of the lender's estate.	\$ 65,000	
Note payable Dated August 1, 2007 to the Conservation Fund used to purchase the Wesser Bald property. The loan	\$ 03,000	
is due December 31, 2011 with interest at 1.9% per annum. Note payable dated October 21, 2008 to the Conservation Fund used to purchase the Book property. The learn	219,222	
Fund used to purchase the Beck property. The loan is is due October 21, 2012 with interest at 3.8% per annum.	122,555	
Note payable dated June 3, 2011 to the Conservation Fund used to purchase the Hawk Mountain property. The loan is is due June 3, 2014 with interest at 3.9% per annum.	363,909	
Note payable dated October 20, 2008 to the Conservation Trust of NC (CTNC) used to purchase the Beck/Elk Hollow property. Funds were made available through the Will Henry Stevens Revolving Loan Fund held by the CTNC. The term is four years with interest at 3.0% per annum.	162,127	
Note payable dated February 26, 2010 to the Conservation Trust of NC (CTNC) used to purchase the Burleson property. Funds were made available through the Will Henry Stevens Revolving Loan Fund held by the CTNC. The term is three years with interest at 3.0% per annum.	171,473	
Note payable dated February 26, 2010 to the Conservation Trust of NC (CTNC) used to purchase the Burleson property. Funds were made available through the Will Henry Stevens Revolving Loan Fund held by the CTNC. The term is three years with interest at 3.0% per annum.	41,080	
Total Notes Payable	\$ 1,145,366	_
The following is a summary of maturities for the years ending June 30:		=
2012	284,222	
2013	497,235	
2014	363,909	
2015 Total	\$ 1 145 266	_
i Otal	\$ 1,145,366	=

Southern Appalachian Highlands Conservancy, Inc. EIN # 62-1098890

Form 990 Schedule D: Part II Conservation Easements, Line 9

Land and Land Stewardship Responsibilities

SAHC has land and land stewardship responsibilities that fall into three main categories:

- Conservation Lands SAHC maintains fee simple ownership of real property with conservation value. These properties are either managed in an effort to protect the conservation value, or transferred to other organizations or governmental entities that will manage the lands in a similar fashion. SAHC records conservation lands acquired on a fee simple basis at cost, if purchased, or at fair value if received as a gift. Fair value is based on independent appraisal.
- Conservation Easements SAHC has perpetual conservation stewardship responsibilities for these properties. A conservation easement is a legal agreement between a landowner and a land trust that permanently limits uses of a tract of land in order to protect its conservation value. SAHC has responsibility for over 90 conservation easements. Easements received by donation are not recognized in assets or in income, and easements purchased are expensed.
- Property Held Subject to Life Estate Conservation property received by donation with the donor retaining the right to live on the property for the remainder of his or her lifetime. The property is recorded at actuarial, present value of the appraisal and amortized annually to planned giving contributions.