Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

2015 Open to Public Inspection

OMB No. 1545-0047

JUL 1, 2015 and ending DEC 31, 2015 A For the 2015 calendar year, or tax year beginning Check if applicable: C Name of organization D Employer identification number ROSE FITZGERALD KENNEDY GREENWAY Address change CONSERVANCY, INC. Name change 20-1678932 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 292-0020 185 KNEELAND STREET (617)termin-ated 2,735,567. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ BOSTON, MA Amended return 02111 H(a) Is this a group return Applica-F Name and address of principal officer: JESSE BRACKENBURY Yes X No for subordinates? pending 185 KNEELAND STREET, BOSTON, MA 02111 H(b) Are all subordinates included? Yes No Tax-exempt status: X = 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► WWW.ROSEKENNEDYGREENWAY.ORG **H(c)** Group exemption number ▶ **K** Form of organization: X Corporation Association Other > L Year of formation: 2004 M State of legal domicile: MA Part I Summary Briefly describe the organization's mission or most significant activities: SEE ATTACHED SCHEDULE O Activities & Governance Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. 21 Number of voting members of the governing body (Part VI, line 1a) 21 Number of independent voting members of the governing body (Part VI, line 1b) 45 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5 422 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 4,752,224. 1,525,462. Revenue 478,117. 663,978. Program service revenue (Part VIII, line 2g) 861,915. 607,912. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 <98,250. 1,567. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 6,179,867. 2,613,058. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Ō. 0. Benefits paid to or for members (Part IX, column (A), line 4) 2,312,059. 1,166,332. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 3,335,296. 1,387,547. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 5,647,355. 2,553,879. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 532,512. 59,179. Revenue less expenses. Subtract line 18 from line 12 Assets or Balances **Beginning of Current Year End of Year** 20,094,385. 21,606,598. 20 Total assets (Part X, line 16) 732,370. 319,056. 21 Total liabilities (Part X, line 26) 775,329. 20,874,228. 22 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign JESSE BRACKENBURY, EXECUTIVE DIRECTOR Here Type or print name and title PTIN Print/Type preparer's name Preparer's signature if self-employed DAVID KELLEHER, CPA DAVID KELLEHER, CPA 05/02/16 P01059560 Paid Firm's name ALEXANDER, ARONSON, FINNING & CO., P.C. 04-2571780 Preparer Firm's EIN ▶ Firm's address 21 EAST MAIN STREET Use Only Phone no. 508 - 366 - 9100 WESTBORO, MA 01581 X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	SEE PART I, LINE 1
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	0, 0, 0, 1, 1, 0,
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$1, 247, 480 . including grants of \$) (Revenue \$)
	SEE SCH O-MAINTENANCE, HORTICULTURE, AND RANGERS
	270 666
4b	(Code:) (Expenses \$ 279,666 · including grants of \$) (Revenue \$ 440,909 ·)
	SEE ATTACHED SCHEDULE O - PROGRAMS AND PLANNING
4c	(Code:) (Expenses \$552,311. including grants of \$) (Revenue \$)
40	SEE ATTACHED SCHEDULE O - PUBLIC ART
	— ITTICIDE DENIEDULO TODETO INT
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 99,797 • including grants of \$) (Revenue \$)
4e	

Form 990 (2015) CONSERVANCY, Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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		Х
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		X
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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			3,7
_	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,	_		х
	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i> . Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	7		
8	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
40	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	-10		
•	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			,,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			₩
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
'	the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	· · · ·		
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			7,7
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	45		х
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X

Form 990 (2015) CONSERVANCY, INC. Part IV Checklist of Required Schedules (continued)

			Yes	NO
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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</i> "Yes," <i>complete Schedule J</i>	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year 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		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			l
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	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):			v
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
C	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	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
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		x
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, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	1

Form 990 (2015) CONSERVANCY, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V					
		ı	0.11		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	21			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		J			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r					
_	(gambling) winnings to prize winners?	 I		1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		45			
	filed for the calendar year ending with or within the year covered by this return				v	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions					v
	-			3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		•	4.		х
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		
D	If "Yes," enter the name of the foreign country:		.t. (FDAD)			
E-0	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A			Ea		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.			5a 5b		X
b	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to			30		
va	any contributions that were not tax deductible as charitable contributions?			6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contribu					
-	were not tax deductible?		•	6b		
7	Organizations that may receive deductible contributions under section 170(c).	,				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices p	rovided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w					
	to file Form 8282?			7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contrac	t?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 88	399 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	-				
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а				9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:	ءمد ا				
	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a 10b				
11	Section 501(c)(12) organizations. Enter:	IOD				
	Gross income from members or shareholders	11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against	<u>-</u>				
~	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
	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				
С	Enter the amount of reserves on hand	13c				
				14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	le O		14b		

ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 21			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	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?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	37	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		37	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		37	
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Λ	
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?		v	
	The organization's CEO, Executive Director, or top management official	15a	X	Х
b	Other officers or key employees of the organization	15b		
46	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
Ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40-		х
	taxable entity during the year?	16a		
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	4Ch		
500	exempt status with respect to such arrangements? tion C. Disclosure	16b		
	List the states with which a copy of this Form 990 is required to be filed ►MA			
17 10		avoilob	Jo.	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) for public inspection. Indicate how you made these available. Check all that apply.	avallal	ii C	
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial	
13	statements available to the public during the tax year.	a miail	oiai	
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	JESSE BRACKENBURY - 617-292-0020			
	185 KNEELAND STREET BOSTON MA 02111			

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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. 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.

(A)	(B)	(C)					(D)	(E)	(F)	
Name and Title	Average	Position (do not check more than one box, unless person is both an		Reportable	Reportable	Estimated				
	hours per week			ss pe nd a d				compensation from	compensation from related	amount of other
	(list any	ctor						the	organizations	compensation
	hours for	Individual trustee or director				ted		organization	(W-2/1099-MISC)	from the
	related	stee (truste		ao	beusa		(W-2/1099-MISC)		organization
	organizations below	ual tru	ional		ploye	t com				and related organizations
	line)	ndivid	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) JESSE BRACKENBURY	65.00	_	_				_			
EXECUTIVE DIRECTOR		Х	4	X				194,015.	0.	23,632.
(2) GEORGIA MURRAY	4.00									
CHAIR AND DIRECTOR		Х		Х				0.	0.	0.
(3) ROBERT GORE	2.00									
TREASURER AND DIRECTOR		Х		X				0.	0.	0.
(4) CHRISTINE MANFREDI	2.00									_
CLERK AND DIRECTOR		Х		Х				0.	0.	0.
(5) CHRISTOPHER BETKE	2.00									
DIRECTOR	1 00	X						0.	0.	0.
(6) MARK BOYLE	1.00	,,							0	•
DIRECTOR	1 00	Х						0.	0.	0.
(7) KATHRYN BURTON	1.00	x						0.	0.	0
DIRECTOR (8) JAMES CHAN	2.00	^						0.	0.	0.
DIRECTOR	4.00	X						0.	0.	0.
(9) JANELLE CHAN	1.00							0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(10) HELEN CHIN SCHLICHTE	1.00									•
DIRECTOR		x						0.	0.	0.
(11) JAMES KALUSTIAN	1.00							_		
DIRECTOR		Х						0.	0.	0.
(12) BEEDEE LADD	1.00									
DIRECTOR		Х						0.	0.	0.
(13) MARTIN LYNN	2.00									
DIRECTOR		Х						0.	0.	0.
(14) TIM MORNINGSTAR	1.00									
DIRECTOR		Х						0.	0.	0.
(15) JANE PAPPALARDO	1.00								_	_
DIRECTOR		Х				_		0.	0.	0.
(16) YOUNG PARK	2.00	ļ.,		,,					_	•
VICE CHAIR AND DIRECTOR	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Х		Х				0.	0.	0.
(17) COLLEEN RICHARDS POWELL	1.00	₹,							0.	^
DIRECTOR		Х						0.	0.	0.

Form 990 (2015)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)																
(A)	(B)			(C	C)			(D)	(E)	(F)						
Name and title	Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)		(do not check more than one box, unless person is both an			(do not check more that box, unless person is bo			(do not check more than one box, unless person is both an				Reportable compensation from	Reportable compensation from related	Estimated amount of other
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations						
(18) ROBYN REED	1.00															
DIRECTOR		Х						0.	0.	0.						
(19) DANIEL SIEGER	1.00															
DIRECTOR		Х						0.	0.	0.						
(20) JEROME SMITH	1.00															
DIRECTOR		X						0.	0.	0.						
(21) DANIEL TOSCANO	1.00							_		_						
DIRECTOR		Х						0.	0.	0.						
(22) JOHN PREGMON	1.00															
DIRECTOR		Х						0.	0.	0.						
(23) JODI WOLIN	50.00															
DIRECTOR OF DEVELOPMENT						Х		142,314.	0.	7,589.						
(24) STEVEN ANDERSON	50.00							116 100	0	00 073						
DIRECTOR OF PARK OPERATIONS						Х		116,490.	0.	20,273.						
			4					, in the second								
1b Sub-total								452,819.	0.	51,494.						
c Total from continuation sheets to Part V								0.	0.	0.						
d Total (add lines 1b and 1c)								452,819.	0.	51,494.						
2 Total number of individuals (including but n						e) wh	no re	eceived more than \$100	0,000 of reportable							
compensation from the organization																

Yes No

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
SHAWMUT DESIGN AND CONSTRUCTION	PUBLIC ART	
560 HARRISON AVE, BOSTON, MA 02118	INSTALL/DEINSTALL	1,470,923.
WORK, INC.	BASIC PARK	_
25 BEACH STREET, DORCHESTER, MA 02122	MAINTENANCE	628,411.
A. BONADIO & SONS	LANDSCAPE	
35 R. ALBERT ST, WALTHAM, MA 02453	CONSTRUCTION	217,535.
GREENWAY CAROUSEL ENTERTAINMENT		
201 SOMERVILLE AVE, SOMERVILLE, MA 02143	CAROUSEL OPERATOR	161,922.
ARUP USA, INC.	PUBLIC ART	
955 MASSACHUSETTS AVE, CAMBRIDGE, MS 02139	ENGINEERING	146,551.
2 Total number of independent contractors (including but not limited to those lister		
\$100,000 of compensation from the organization > 5		
ARUP USA, INC. 955 MASSACHUSETTS AVE, CAMBRIDGE, MS 02139 2 Total number of independent contractors (including but not limited to those lister	ENGINEERING	

Statement of Revenue

Part VIII Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (**D)** Revenue excluded Related or Unrelated Total revenue from tax under exempt function husiness revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns **b** Membership dues 1b c Fundraising events d Related organizations 1d 1e 1,022,298. e Government grants (contributions) f All other contributions, gifts, grants, and 503,164. similar amounts not included above g Noncash contributions included in lines 1a-1f: \$ 1,525,462. h Total. Add lines 1a-1f Business Code 228,905. 713110 228,905. 2 a FOOD VENDING INCOME Program Service Revenue b CAROUSEL REVENUE 722100 112,962. 112,962. 83,985. c PROGRAM FEES 900099 83,985. 38,775. d MAINTENANCE REVENUE 900099 38,775. e OPEN MARKET 900099 13,490. 13,490. f All other program service revenue 478,117. g Total. Add lines 2a-2f . Investment income (including dividends, interest, and 646,425. 646,425. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses c Rental income or (loss) d Net rental income or (loss) ... 7 a Gross amount from sales of (i) Securities (ii) Other 83,996. assets other than inventory b Less: cost or other basis 122,509 and sales expenses <38,513. c Gain or (loss) <38,513.b <38,513.> d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c). See Part IV, line 18 a Other b Less: direct expenses _____ b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a **b** Less: direct expenses c Net income or (loss) from gaming activities ... 10 a Gross sales of inventory, less returns and allowances a **b** Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a OTHER INCOME 900099 1,567. 1,567. b d All other revenue 1,567. e Total. Add lines 11a-11d 2,613,058. 479,684. 607,912 Total revenue. See instructions.

Part IX Statement of Functional Expenses

Sect	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).									
	Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to domestic organizations									
	and domestic governments. See Part IV, line 21									
2	Grants and other assistance to domestic									
	individuals. See Part IV, line 22									
3	Grants and other assistance to foreign									
	organizations, foreign governments, and foreign									
	individuals. See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
	trustees, and key employees	118,742.	35,622.	41,560.	41,560.					
6	Compensation not included above, to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)	054 242	655 200	02 400	445 445					
7	Other salaries and wages	854,343.	655,399.	83,499.	115,445.					
8	Pension plan accruals and contributions (include	6 200	4 220	000	1 040					
	section 401(k) and 403(b) employer contributions)	6,387.	4,339.	808.	1,240. 7,565.					
9	Other employee benefits	112,292.	95,020.	9,707.	7,565.					
10	Payroll taxes	74,568.	56,578.	8,300.	9,690.					
11	Fees for services (non-employees):									
a	Management	21,340.	20 557	•	783.					
b	Legal	13,674.	20,557. 11,067.	1,510.	1,097.					
С.	Accounting	13,074.	11,007.	1,310.	1,097.					
d	Lobbying									
e	Professional fundraising services. See Part IV, line 17									
Τ ~	Investment management fees									
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.)									
40			/							
12	Advertising and promotion	34,279.	29,234.	2,293.	2,752.					
13 14	Office expenses	35,300.	27,287.	5,309.	2,704.					
15	Information technology Royalties	33/3001	2772074	373031	277011					
16	Occupancy									
17	Travel									
18	Payments of travel or entertainment expenses									
.0	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings									
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	148,825.	144,542.	94.	4,189.					
23	Insurance	55,227.	53,279.	1,889.	59.					
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)									
а	CONTRACTED SERVICES	755,183.	737,231.		17,952.					
b	DIRECT PROGRAM EXPENSE	320,005.	305,697.	2,933.	11,375.					
c	PROFESSIONAL DEVELOPMEN	3,714.	3,402.	8.	304.					
d		-	-							
	All other expenses									
25	Total functional expenses. Add lines 1 through 24e	2,553,879.	2,179,254.	157,910.	216,715.					
26	Joint costs. Complete this line only if the organization									
	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation.									
	Check here if following SOP 98-2 (ASC 958-720)				5 900 (0015)					

Form 990 (2015)
Part X Balance Sheet

ı u	ILA	Dalatice Stieet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	602,193.	1	461,600.
	2	Savings and temporary cash investments	1,392,221.	2	1,251,534.
	3	Pledges and grants receivable, net	418,458.	3	94,377.
	4	Accounts receivable, net	10,605.	4	15,890.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ω		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	118,525.	9	131,891.
		Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 4,919,326.			
	b	Less: accumulated depreciation 10b 762,324.	4,096,824.	10c	4,157,002.
	11	Investments - publicly traded securities	4,007,066.	11	3,918,297.
	12	Investments - other securities. See Part IV, line 11	10,960,706.	12	10,063,794.
	13	Investments - program-related. See Part IV, line 11		13	.,,
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	21,606,598.	16	20,094,385.
	17	Accounts payable and accrued expenses	732,370.	17	319,056.
	18	Grants payable	<u>, </u>	18	•
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		key employees, highest compensated employees, and disqualified persons.			
api		Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	732,370.	26	319,056.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			,
Ś		complete lines 27 through 29, and lines 33 and 34.			
nce	27	Unrestricted net assets	5,914,485.	27	5,549,326.
ala	28	Temporarily restricted net assets	1,454,973.	28	721,233.
ф	29	Permanently restricted net assets	13,504,770.	29	13,504,770.
Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶			
고		and complete lines 30 through 34.			
ţ	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or	32	Retained earnings, endowment, accumulated income, or other funds		32	
Se	33	Total net assets or fund balances	20,874,228.	33	19,775,329.
	34	Total liabilities and net assets/fund balances	21,606,598.	34	20,094,385.
	U-1	Total habilities and fiet assets/fully balances	,,,	υ τ	_0,001,000.

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,61		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,55	3,8	79.
3	Revenue less expenses. Subtract line 2 from line 1	3			79.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		20,87		
5	Net unrealized gains (losses) on investments	5	<1,15	8,0	78.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	19,77	5,3	29.
Pa	rt XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat				
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?	_	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		1

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.

Employer identification number 20-1678932

Pai	t I	Reason for Public (Charity Status (All organizations must co	omplete th	is part.) Se	ee instructions.	
he o	organi	zation is not a private found	ation because it is:	(For lines 1 through 11. o	check only	one box.)		
1		A church, convention of ch			•	•)(A)(i).	
2		A school described in secti	•				76-76-7	
3		A hospital or a cooperative		•			i)	
4		A medical research organiz	· ·				-	the hospital's name
•		city, and state:	ation operated in co	injunction with a noopita	1 40001100	3 111 000010	ii ii o(b)(i)(A)(iii). Liitoi	the hoopital o hame,
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in						
J		section 170(b)(1)(A)(iv). (C		mege of difficerally owner	u or opera	ted by a gi	overnmental unit descrit	Jed III
6				mantal unit dagarihad in	aaatian 1	70/6//4// 4/	()	
6	37	A federal, state, or local gov	_				•	
′	21	An organization that norma	•	antial part of its support	irom a gov	ernmentai	unit or from the general	public described in
_		section 170(b)(1)(A)(vi). (Co	•	(4)(4)(4)() (Olata D		4		
8		A community trust describe			-			
9		An organization that norma	•	•	-			-
		activities related to its exem						
		income and unrelated busin		(less section 511 tax) fr	om busine	sses acqu	ired by the organization	after June 30, 1975.
		See section 509(a)(2). (Cor	•					
10		An organization organized a	•					
11		An organization organized a	•				•	
		more publicly supported or	-					Check the box in
		lines 11a through 11d that	• •			-		
а		Type I. A supporting orga	· · · · · · · · · · · · · · · · · · ·					
		the supported organization			a majority	of the dire	ctors or trustees of the s	supporting
		organization. You must c						
b		Type II. A supporting org						-
		control or management o			ame perso	ons that co	entrol or manage the sup	pported
		organization(s). You mus						
С		Type III functionally inte	- 11				• •	ed with,
		its supported organization						
d		Type III non-functionally					• • • •	
		that is not functionally int			•			iveness
		requirement (see instructi		7				
е		Check this box if the orga					Type I, Type II, Type III	
		functionally integrated, or	• •					
f	Ente	r the number of supported o	organizations					
g		ide the following information		 	Viv.A la Alaa a	iti	() ()	
	(I	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9	listed i	n vour	(v) Amount of monetary support (see	(vi) Amount of other support (see
		organization		above (see instructions))	governing		instructions)	instructions)
					Yes	No		
ota	ı							

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 3,916,848 5,603,759 3,033,686 4,752,224 1,525,462 18,831,979. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to 213,943 235,047 244,361 268,920 173,580 the organization without charge 1,135,851. 4,130,791, 5,838,806 3,278,047 5,021,144 1,699,042 19,967,830. 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 shown on line 11. column (f) 1,108,642. 18,859,188. 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2011 **(b)** 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total 4,130,791. 5,838,806. 3,278,047 5,021,144. 1,699,042, 19,967,830. 7 Amounts from line 4 8 Gross income from interest. dividends, payments received on securities loans, rents, royalties 312,083. 310,133. 752,596. 568,891. 641,614. 2,585,317. 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 32,198. 9,519. 1,567 assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 720,219. 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 83.46 14 % 14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2014 Schedule A, Part II, line 14 86.76 15 16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and ightharpoons Xstop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

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

Se	qualify under the tests listed be ction A. Public Support	elow, please comp	plete Part II.)				
	endar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(a) 2012	(d) 2014	(a) 2015	(f) Total
	Gifts, grants, contributions, and	(a) 2011	(b) 2012	(c) 2013	(a) 2014	(e) 2015	(f) Total
'	membership fees received. (Do not						
	include any "unusual grants.")						
•	* * * * * * * * * * * * * * * * * * * *						
2	Gross receipts from admissions, merchandise sold or services per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf				4		
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
,	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Amounts from line 6	(a) 2011	(6) 2012	(6) 2013	(4) 2014	(6) 2013	(i) Total
	Gross income from interest,						
100	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources				+		
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth	tax year as a sectio	on 501(c)(3) organi	zation,
	check this box and stop here						>
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2015 (line 8, column (f) d	livided by line 13, o	column (f))		15	%
16	Public support percentage from 2014	Schedule A, Part	: III, line 15			16	%
Se	ction D. Computation of Inve	stment Incom	e Percentage				
17	Investment income percentage for 20	15 (line 10c, colur	mn (f) divided by lir	ne 13, column (f))		17	%
	Investment income percentage from					18	%
	33 1/3% support tests - 2015. If the						
-	more than 33 1/3%, check this box a						
ŀ	33 1/3% support tests - 2014. If the						
•	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
	die realitation in the organization	ala libe billook a	~~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~	-, J. 100, OHOOK I	2200 4114 000 111		······ F —

Part IV | Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

1		Yes	No
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	ıu		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	•		
	8		
	J		
	9a		
	9b		
	0-		
	9c		
	10a		
	10b		
m 9	90 or 99	90-EZ)	2015

Do	rt IV Supporting Organizations (continued)			ige c
Га	rt IV Supporting Organizations _(continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
_	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions):			
· a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3</i> below.			
C	The organization is the parent of each of its supported organizations. Compete line or below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	.)	
2	Activities Test. <i>Answer (a) and (b) below.</i>	ructions	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	NO
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
h		Zd		
b				
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	O.L.		
_	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
а				
	trustees of each of the supported organizations? Provide details in <i>Part VI</i> .	3a		
b		0.		
	of its supported organizations? If "Yes," describe in <i>Part VI</i> the role played by the organization in this regard.	3b		

Schedule A (Form 990 or 990-EZ) 2015 CONSERVANCY, INC.

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Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	anizations			
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All					
	other Type III non-functionally integrated supporting organizations must cor	nplete :	Sections A through E.			
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8				
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see		1			
	instructions for short tax year or assets held for part of year):					
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
С	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discount claimed for blockage or other					
	factors (explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,					
	see instructions).	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by .035	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions)	6				
7	Check here if the current year is the organization's first as a non-functionally	/-integra	ated Type III supporting org	anization (see		
	instructions).	-				

Schedule A (Form 990 or 990-EZ) 2015

Par	^ব V │ Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations _(continued)	
Secti	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	าร	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive	e	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1_	Distributable amount for 2015 from Section C, line 6		4	
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
<u>a</u>				
<u>b</u>				
C	Fuer 2010			
	From 2013			
	From 2014			
	Total of lines 3a through e Applied to underdistributions of prior years			
	Applied to underdistributions of prior years Applied to 2015 distributable amount			
	• • • • • • • • • • • • • • • • • • • •			
<u> </u>	Carryover from 2010 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section D,			
7	line 7:			
	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
	Remaining underdistributions for years prior to 2015, if			
-	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2016. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а				
b				
С	Excess from 2013			
d	Excess from 2014			
е	Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 CONSERVANCY, INC.

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Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;
Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
PART II, SHORT YEAR EXPLANATION:
IN JULY 2015, THE BOARD OF DIRECTORS VOTED TO APPROVE A CHANGE IN THE
CONSERVANCY'S FISCAL YEAR END FROM JUNE 30 TO DECEMBER 31 FOR YEARS
BEGINNING ON AND AFTER JULY 1, 2014. THIS WAS INITIATED TO BETTER
REFLECT A NATURAL BUSINESS YEAR.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.

Employer identification number 20-1678932

Pa	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	e conferring
	impermissible private benefit?		Yes No
Pa			
1	Purpose(s) of conservation easements held by the organizat	tion (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struc-	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by th	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	asement is located	
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements i	it holds?	Yes
6	Staff and volunteer hours devoted to monitoring, inspecting,	, handling of violations, and enforcing cor	nservation easements during the year
			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	tion easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	ation's financial statements that describes	s the organization's accounting for
_	conservation easements.		
Pa	t III Organizations Maintaining Collections o	-	Other Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (AS	• •	·
	historical treasures, or other similar assets held for public ex	chibition, education, or research in further	ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr		
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statemer	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of pu	ublic service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financi	al gain, provide
	the following amounts required to be reported under SFAS 1		
а	Revenue included on Form 990, Part VIII, line 1		> \$
1-	Assets in all relating Forms COO. Don't V		▶ ♠

Schedule D (Form 990) 2015

CONSERVANCY, INC.

Pa	rt III Organizations Maintaining (Collections of Art,	, Historical Tre	easures, or O	ther Simi	ilar Asse	ts (continued)	
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items							
	(check all that apply):							
а	Public exhibition	d	Loan or exch	nange programs				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's c	ollections and explain h	now they further th	ne organization's e	exempt pur	oose in Par	t XIII.	
5	During the year, did the organization solicit	or receive donations of	art, historical treas	sures, or other sim	nilar assets			
	to be sold to raise funds rather than to be m	aintained as part of the	e organization's co	llection?			Yes	No
Pa	rt IV Escrow and Custodial Arran	gements. Complete	e if the organization	n answered "Yes"	on Form 99	90, Part IV,	line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.						
1a	Is the organization an agent, trustee, custoo	ian or other intermedia	ry for contribution	s or other assets i	not included	d		
	on Form 990, Part X?					L	」Yes □	No
b	If "Yes," explain the arrangement in Part XIII	and complete the follo	wing table:					
							Amount	
С	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on F	orm 990, Part X, line 2	1, for escrow or cu	stodial account li	ability?	L	」Yes	No
	If "Yes," explain the arrangement in Part XIII						<u></u>	
Pa	rt V Endowment Funds. Complete	T T						
		(a) Current year	(b) Prior year	(c) Two years back		years back		
1a	0 0 ,	14,227,602.	15,163,053.	13,504,770	0. 13,	504,770.	13,504,7	<u> 170.</u>
b								
С	Net investment earnings, gains, and losses	<498,484.>	<203,102.	> 2,265,431	1.	686,381.	524,9	941.
d	1							
е	Other expenditures for facilities							
	and programs	229,159.	732,349.	607,148	8.	686,381.	524,9	941.
f	Administrative expenses							
g		13,499,959.	14,227,602.	15,163,05	3. 13,	504,770.	13,504,7	770.
2	Provide the estimated percentage of the cur	rent year end balance	(line 1g, column (a)) held as:				
а	3 1		%					
b		%						
С		<u>.0</u> 0 %						
_	The percentages on lines 2a, 2b, and 2c sho	·						
За	Are there endowment funds not in the posse	ession of the organizati	on that are held ar	nd administered to	or the organ	nization	, I	
	by:							No X
	(i) unrelated organizations						. (-)	X
							(/	
	If "Yes" on line 3a(ii), are the related organization						3b	
4 Dai	Describe in Part XIII the intended uses of the ort VI Land, Buildings, and Equipn		ment tunas.					—
ıaı	Complete if the organization answere		Dart IV line 11a S	oo Form 990 Pari	t V lino 10			
						tod	(d) Dook value	
	Description of property	(a) Cost or other	1 ' '		Accumula depreciatio		(d) Book value	
10	Land	<u> </u>	Dasis (54101)	aopi colatio			
	Land							
b			4 78	6,180.	668,1	93.	4,117,98	37.
c d				3,143.		230.	13,91	
u e				0,003.	84,9		25,10	$\frac{3}{2}$
	al. Add lines 1a through 1e. (Column (d) must e				/-	<u> </u>	4,157,00	

CONSERVANCY, INC.

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cos	t or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other	10 062 704	THE OF WEAR MAI	777777777777777777777777777777777777777
(A) TIFF MULTI ASSET FUND	10,063,794	END-OF-YEAR MAF	KKET VALUE
(B)			
(C)			
(D)			
(E) (F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	10,063,794		
Part VIII Investments - Program Related.	20,000,132		
Complete if the organization answered "Yes"	on Form 990 Part IV li	ne 11c. See Form 990. Part X. line 1:	3
(a) Description of investment	(b) Book value	(c) Method of valuation: Cos	
(1)			•
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		ne 11d. See Form 990, Part X, line 1	
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7) (8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15)		
Part X Other Liabilities.	<i>c 10.</i> /		
Complete if the organization answered "Yes"	on Form 990. Part IV. lii	ne 11e or 11f. See Form 990, Part X.	line 25.
1. (a) Description of liability	, ,	(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 25.) ▶		
2 Lightlity for uncertain tay positions. In Part VIII. provide		to the erganization's financial state	and a state of the

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

Sche	idule D (Form 990) 2015 CONSERVANCY, INC.	20-	1678932 Page 4
	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	1,812,865.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а		78.	
b	Donated services and use of facilities 2b 357,8	85.	
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	<800,193.
3	Subtract line 2e from line 1	3	2,613,058.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	0.
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		2,613,058.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	2,911,764.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a 357,8	85.	
b	Prior year adjustments 2b		
С	Other losses 2c		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	357,885.
3	Subtract line 2e from line 1	3	2,553,879.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	0.
_5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,553,879.
Pa	rt XIII Supplemental Information.		
Prov	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V	/, line 4; Part	X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.		
PAI	RT V, LINE 4:		
THI	E CONSERVANCY ADHERES TO THE UNIFORM PRUDENT MANAGEMENT	OF IN	STITUTIONAL
FUI	NDS ACT (UPMIFA). THE ASSETS IN ITS PERMANENTLY RESTRIC	TED EN	DOWMENT
FUI	ND ARE DONOR-RESTRICTED ASSETS UNTIL APPROPRIATED ACCOR	DING TO	O THE DONOR
~		D113 310	113 G
ST.	PULATION FOR EXPENDITURE BY THE CONSERVANCY. THE CONSE	KVANCY	HAS

FOR ANY BOARD DESIGNATED NET-ASSETS THAT IS DESIGNED TO PRESERVE CAPITAL
THROUGH RISK MANAGEMENT WHILE PROVIDING A LEVEL OF SUPPORT FOR THE

ADOPTED AN INVESTMENT AND SPENDING POLICY FOR ITS ENDOWMENT ASSETS AND

CONSERVANCY AND ITS PROGRAMS.

PART X, LINE 2:

Supplemental information (continued)
WITH ASC TOPIC, INCOME TAXES. THIS STANDARD CLARIFIES THE ACCOUNTING FOR
UNCERTAINTY IN TAX POSITIONS AND PRESCRIBES A RECOGNITION THRESHOLD AND
MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENTS REGARDING A TAX
POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE CONSERVANCY
HAS DETERMINED THAT THERE ARE NO UNCERTAIN TAX POSITIONS WHICH QUALIFY FOR
EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS AT DECEMBER
31, 2015. THE CONSERVANCY'S INFORMATION RETURNS ARE SUBJECT TO
EXAMINATION BY THE FEDERAL AND STATE JURISDICTIONS AND GENERALLY REMAIN
OPEN FOR THE MOST RECENT THREE YEARS.

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.

Employer identification number 20-1678932

Part I Fundraising Activities required to complete this par	 Complete if the organization answer t. 	ered "Y	'es" o	n Form 990, Part IV,	line 17. Form 990-EZ	I filers are not
 1 Indicate whether the organization rais a X Mail solicitations b X Internet and email solicitations c Phone solicitations d X In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the 	e X Solicitar f X Solicitar g X Special or oral agreement with any individual Part VII) or entity in connection with prividuals or entities (fundraisers) purs	tion of tion of fundra (includerofess	non-g gover aising ding o ional t	overnment grants rnment grants events fficers, directors, true fundraising services?	stees or X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundr have c or cor contrib	Did raiser ustody itrol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
LEX ROGERS PITTMAN - 16		Yes	No		1	
MILES STREET, ROXBURY, MA	GRANT WRITING		Х	225,000.	17,952.	207,048.
		K				
Total 3 List all states in which the organization	on is registered or licensed to solicit	contrib	. Dution:	225,000. s or has been notified	17,952.	
or licensing.					· 	
MA .						

Schedule G (Form 990 or 990-EZ) 2015 CONSERVANCY , INC . 20-1678932 Page Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 and \$15,000 are reported from \$15,000 are reported from \$15,000 and \$15,000 are reported from \$15,000 are repor

20-1678932 Page 2

		of fundraising event contributions and gro	oss income on Form 99	0-EZ, lines 1 and 6b. List	events with gross recei	ots greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
a)			(event type)	(event type)	(total number)	col. (c))
Revenue						
Rev	1	Gross receipts				
	2	Less: Contributions				
	_	Less. Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
S	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Exp		,				
rect	7	Food and beverages				
՝		Entartainment				
	8	Entertainment Other direct expenses				
	10	_	9 in column (d)		>	
_		Net income summary. Subtract line 10 from lin				
Pa	ırt I		answered "Yes" on Forr	n 990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.		(b) Pull tabs/instant		(d) Total gaming (add
nue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue						
—	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	Ť	Curior direct experiese	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No	No No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		>	
		ter the state(s) in which the organization condu	_	-4-40		Yes No
		the organization licensed to conduct gaming ac No," explain:		states?		. L Yes L NO
-						
		ere any of the organization's gaming licenses re	voked, suspended or to	erminated during the tax	year?	Yes No
b	If "	Yes," explain:				
	_					

Sch	hedule G (Form 990 or 990-EZ) 2015 CONSERVANCY, INC. 20-	16789	32	Page 3
11	Does the organization conduct gaming activities with nonmembers?		es	No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
	to administer charitable gaming?	Y	es l	No
	Indicate the percentage of gaming activity conducted in:	11		
	a The organization's facility			<u>%</u> %
	b An outside facility Enter the name and address of the person who prepares the organization's gaming/special events books and records:	l an		70
	Name			
	Address >		, [
	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	L Y •	es l	No
ı	b If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party > \$			
•	c If "Yes," enter name and address of the third party:			
	Name ▶			
	Address >			
40				
10	Gaming manager information:			
	Name ►			
	Gaming manager compensation ▶ \$			
	Description of services provided			
	Boson palari di dali Node previdedi p			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions:			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	L Y	es l	No
١	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
D	organization's own exempt activities during the tax year \$\bigsim \text{\$\sqrt{\$\exitt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$\sqrt{\$}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}	lines O. O	h 10h	155
ГС	art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).	iiries 9, 9	b, Tuc), 130,
	100, 10, and 112, as applicable. The provide any additional information (coe incitability).			
SC	CHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISE	RS:		
(]	I) NAME OF FUNDRAISER: ALEX ROGERS PITTMAN			
/ -	CARRED OF THERE AS A COLOR			
(]	I) ADDRESS OF FUNDRAISER: 16 MILES STREET, ROXBURY, MA 02119			

Schedule (G (Form 990 or 990-EZ)	CONSERVANCY,	INC.	20-1678932	Page 4
Part IV	G (Form 990 or 990-EZ) Supplemental Info	rmation (continued)			
		· · · · · · · · · · · · · · · · · · ·			
-					
			<u> </u>		
-					

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service Name of the organization

Questions Regarding Compensation

Department of the Treasury

Part I

ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.

Employer identification number 20-1678932

			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
	Receive a severance payment or change-of-control payment?	4a		X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			7.7
а	The organization?	6a		X
b	Any related organization?	6b		Х
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			v
_	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			v
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		I

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

Schedule J (Form 990) 2015

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base (ii) Bonus & incentive compensation		(iii) Other compensation compensation		Denenis	(B)(I)-(U)	reported as deferred on prior Form 990	
(1) JESSE BRACKENBURY	(i)	194,015.	0.	0.	6,001.	17,631.	217,647.	0.	
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.		0.			
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
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	(i)								
	(ii)								
	(i)								
	(ii)								

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 4:
SEE ATTACHED SCHEDULE O FOR DESCRIPTION OF COMPENSATION REVIEW PROCEDURES

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

➤ Attach to Form 990 or 990-EZ.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.

Employer identification number 20-1678932

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: (MISSION STATEMENT, 2005) THE ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY IS A PRIVATE, NON-PROFIT CORPORATION DEDICATED TO RAISING BROAD-BASED SUPPORT TO ENSURE STANDARDS OF EXCELLENCE IN THE DESIGN, SUSTAINABILITY AND USE OF THE ROSE FITZGERALD KENNEDY GREENWAY. SECURE THE GREENWAY'S FUTURE AS ONE OF AMERICA'S FOREMOST URBAN PARKS, THE CONSERVANCY ADVOCATES FOR STANDARDS OF CONSISTENCY AND EXCELLENCE IN DESIGN; MANAGES ITS OPERATIONS WORKING COLLABORATIVELY TO CREATE, FINANCE, PROMOTE, AND COORDINATE PUBLIC PROGRAMS AND EVENTS FOR THE GENERAL PUBLIC TO ENJOY; AND RAISES ADEQUATE AND STABLE FUNDING IN SUPPORT OF LONG-RANGE PUBLIC USES.

THE CONSERVANCY WORKS TO ACHIEVE ITS PUBLIC MISSION IN A PUBLIC/PRIVATE PARTNERSHIP WITH THE COMMONWEALTH OF MA.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

SUMMARY AND ACCOMPLISHMENTS:

THE CONSERVANCY IS THE DESIGNATED STEWARD OF THE ROSE KENNEDY GREENWAY, A MILE-AND-A-HALF OF CONTEMPORARY PARKS IN THE HEART OF BOSTON THAT CONNECT PEOPLE AND THE CITY WITH BEAUTY AND FUN. THE NON-PROFIT CONSERVANCY MAINTAINS, PROGRAMS, AND IMPROVES THE GREENWAY ON BEHALF OF THE PUBLIC AND IN PARTNERSHIP WITH THE COMMONWEALTH OF MASSACHUSETTS. -

(IN JULY 2015, THE BOARD OF DIRECTORS VOTED TO APPROVE A CHANGE IN THE CONSERVANCY'S FISCAL YEAR END FROM JUNE 30 TO DECEMBER 31 FOR YEARS BEGINNING ON AND AFTER JULY 1, 2014. THIS WAS INITIATED TO BETTER

Schedule O (Form 990 or 990-EZ) (2015) Page 2 Name of the organization ROSE FITZGERALD KENNEDY GREENWAY **Employer identification number** CONSERVANCY, INC. 20-1678932 REFLECT A NATURAL BUSINESS YEAR. AT THE RECOMMENDATION OF OUR AUDITORS, FY15 WAS EXTENDED TO 18 MONTHS (JULY 1, 2014-DECEMBER 31, 2015) TO ACCOMMODATE THE CHANGE. FY16 WILL REFLECT THE NEW JANUARY 1 - DECEMBER 31 CALENDAR FISCAL YEAR.) THE CONSERVANCY CONTINUED TO MAKE THE GREENWAY A JOY-FILLED PLACE FOR RESIDENTS AND VISITORS: THE CONSERVANCY COMMISSIONED AND INSTALLED A MONUMENTAL JANET ECHELMAN SCULPTURE, AS IF IT WERE ALREADY HERE, SUSPENDED 350 FEET OVER THE PARK FROM THREE ADJACENT SKYSCRAPERS. THE PIECE BROUGHT THE GARDENS BENEATH ALIVE AND WAS CELEBRATED BY PULITZER PRIZE-WINNING ART CRITIC SEBASTIAN SMEE AS "THE MOST BEAUTIFUL AND AUDACIOUS PIECE OF PUBLIC ART IN BOSTON IN LIVING MEMORY." WE ALSO INSTALLED MULTIPLE OTHER TEMPORARY EXHIBITIONS OF CONTEMPORARY PUBLIC ART. IN 2015, 1,194,000 VISITORS ENJOYED THE 300 FREE EVENTS, CAROUSEL, FOOD TRUCKS, AND FREE (UPGRADED!) WI-FI, AND MILLIONS MORE CASUALLY ENJOYED THE FOUNTAINS, GARDENS, AND PLAZAS. WE TOOK ON RESPONSIBILITY FOR THE CARE OF AN ADDITIONAL =1.3 ACRES OF PUBLIC PROPERTY, AND WE EXPANDED OUR CONTRACTED LANDSCAPE CARE OFFERINGS TO INCLUDE SPECIALTY ORGANIC SERVICES FOR THE FEDERAL RESERVE BANK OF BOSTON. WE COMPLETELY RENOVATED A MAJOR GARDEN BED IN THE NORTH END PARK TO BRING MORE FOUR-SEASON HORTICULTURAL INTEREST.

WE PLANTED THE 100,000TH BULB IN THE PARK AND LOOK FORWARD TO A BEAUTIFUL 2016 SPRING.

OUR MAINTENANCE TEAM ACCOMPLISHED SIGNIFICANT MASONRY AND LIGHTING REPAIRS IN THE NORTH END PARK, WHILE CONTINUING THE DAILY

RESPONSIBILITIES OF MAINTAINING A CLEAN, FUNCTIONAL PARK.

Employer identification number 20-1678932

WE BEGAN A NEW GRANT-FUNDED PARK RANGERS PROGRAM TO ADD SECURITY AND AMBASSADORSHIP ON THE GREENWAY.

ALL THIS LED TO AWARDS FROM AMERICANS FOR THE ARTS, THE BOSTON CHAMBER

OF COMMERCE, GREATNONPROFITS.ORG, THE BOSTON BUSINESS JOURNAL, USA

TODAY, AND TRIP ADVISOR.

HORTICULTURE

WE CONTINUE TO IMPROVE THE GREENWAY'S BEAUTY THROUGH SKILLED, ATTENTIVE

MAINTENANCE AND IMPORTANT, THOUGHTFUL IMPROVEMENTS. THE CONSERVANCY

USES ORGANIC AND SUSTAINABLE LANDSCAPE PRACTICES THAT ARE INNOVATIVE,

AWARD-WINNING, AND FISCALLY SOUND.

THE GREENWAY IS BOSTON'S ONLY ORGANICALLY-MAINTAINED PUBLIC PARK AND ONE OF A HANDFUL OF ORGANICALLY-MAINTAINED URBAN PARKS IN THE UNITED STATES; OUR SUSTAINABILITY EFFORTS HAVE EARNED US A MAYOR'S GREENOVATE AWARD. GREENWAY PLANTS ARE HEALTHIER, MORE RESILIENT, AND BETTER ABLE TO WITHSTAND THE STRESS OF PUBLIC USE AND THE DEMANDS OF AN URBAN ENVIRONMENT BECAUSE OF OUR MANAGEMENT PRACTICES. THE CONSERVANCY'S POLICY OF NOT USING HERBICIDES AND TOXINS ALSO ENSURES THAT RUN-OFF FROM THE PARKS WILL NOT POLLUTE BOSTON HARBOR OR HARM THE DELICATE MARINE LIFE. CHILDREN AND PETS CAN FREELY AND SAFELY PLAY ON OUR PARK LAWNS WITHOUT THE WORRY OF PESTICIDES. A HARVARD KENNEDY SCHOOL TEAM PARTNERED WITH US AND DETERMINED THAT OUR DAILY ORGANIC CARE IS LESS EXPENSIVE THAN A NON-ORGANIC APPROACH. THE CORNERSTONE OF OUR ORGANIC APPROACH IS OUR COMPOST TEA OPERATION. WE HAVE INCREASED APPLICATIONS OF OUR ORGANIC COMPOST TEA FROM 1,800 GALLONS IN 2010 TO APPROXIMATELY 13,500 GALLONS ANNUALLY. THE DEPTH OF THE ROOTS ON THE GREENWAY HAS TRIPLED SINCE THE CONSERVANCY TOOK OVER PARK OPERATIONS AND INTRODUCED

Employer identification number 20-1678932

ORGANIC METHODS. THE PARK IS A NATIONAL WILDLIFE FEDERATION CERTIFIED

WILDLIFE HABITAT. IN 2015, WE CUT THE FERTILIZER APPLIED TO THE LAWN IN

HALF, AS WE'VE HAD SUCH SUCCESS IN BUILDING UP THE NATURAL SOIL

BIOLOGY.

A WALK DOWN THE GREENWAY REVEALS LUSH, GREEN GRASS AND THRIVING GARDEN
BEDS. OUR SUSTAINABLE HORTICULTURE PRACTICES INCLUDE WEED MANAGEMENT,
TOP SEEDING, AND AERATION, ORGANIC DEBRIS COMPOSTING FOR FERTILIZER
APPLICATIONS, AND EFFICIENT WATER USAGE. IN ADDITION, THE GREENWAY'S
DEWEY SQUARE PARK FEATURES POLLINATOR, EDIBLE, DEMONSTRATION, AND RAIN
GARDENS. 75 PLANTER CONTAINERS THROUGHOUT THE PARK ARE CHANGED OUT
SEASONALLY WITH ARRANGEMENTS CONSISTENT WITH THEIR PARK SURROUNDINGS.

IN 2015, WE TOOK ON ADDITIONAL PROPERTY RESPONSIBILITY. THROUGH A NEW

LEASE ARRANGEMENT WITH MASSDOT, WE ARE NOW RESPONSIBLE FOR AN

ADDITIONAL APPROXIMATE 1.3 ACRES OF TRAFFIC TRIANGLES AND PLAZAS;

IMMEDIATE HORTICULTURE WORK IN THESE PROPERTIES INCLUDED CLEANING,

WEEDING, MULCHING, AND TREE PRUNING. WE WON A SMALL CONTRACT FOR

SPECIALTY ORGANIC SERVICES FOR THE LANDSCAPING AT THE FEDERAL RESERVE

BANK OF BOSTON, ACROSS FROM THE GREENWAY. WE ALSO CONTINUED OUR

COMPETITIVELY-AWARDED CONTRACT TO MAINTAIN THE BEAUTIFUL GARDENS,

FOUNTAINS, AND LABYRINTH IN ARMENIAN HERITAGE PARK.

WE TRANSFORMED THE HORTICULTURE IN THE NORTH END PARK. WITH A NEW

DESIGN DONE IN CONSULTATION WITH PUBLIC GARDEN DESIGNER LYNDEN MILLER,

WE ENTIRELY REPLANTED THE LARGE GARDEN BED ACROSS FROM THE NEW BOSTON

PUBLIC MARKET FOR GREATER FOUR-SEASON INTEREST. THIS REPLACED FAILING

PLANTS AND AN INVASIVE WEED WITH A LUSH GARDEN. WE ALSO INSTALLED A

Employer identification number 20-1678932

COMPLIMENTARY SET OF PLANTINGS UNDERNEATH THE PERGOLA, INCLUDING

EVERGREENS AND ROSES, TO SCREEN AGAINST THE TRAFFIC ON THE ADJOINING

SURFACE STREETS; THIS MATCHES WORK DONE IN THE PERGOLA BED SOUTH OF

HANOVER STREET IN SPRING 2014. THESE EFFORTS WERE INFORMED BY COMMUNITY

MEETINGS HELD OVER THE LAST SEVERAL YEARS.

OUR VOLUNTEER PROGRAM OFFERS OPPORTUNITIES FOR INDIVIDUALS AND

COMPANIES FOR HANDS-ON LEARNING WHILE THEY ASSIST WITH PARK

STEWARDSHIP. SHOULDER-TO-SHOULDER WITH OUR HORTICULTURAL STAFF, THE

COMMUNITY LEARNS ABOUT OUR ORGANIC CARE IN THIS ROOF-TOP GARDEN. WE

CONTINUE TO SEE INCREASES IN VOLUNTEER ENGAGEMENT WITH THE GREENWAY,

WITH HOURS GROWING FROM 3,118 IN 2013, TO 3,205 IN 2014, AND 4,830 IN

2015. IN ONE EXAMPLE OF COMMUNITY VOLUNTERISM, STUDENTS FROM THE

CHINATOWN'S JOSIAH QUINCY ELEMENTARY SCHOOL PLANTED 700 PACHYSANDRA

PLUGS IN MARY SOO HOO PARK. ON THE STRENGTH OF REVIEWS FROM VOLUNTEERS,

THE CONSERVANCY HAS WON THE TOP RATED AWARD FROM GREATNONPROFITS.ORG

MULTIPLE YEARS RUNNING.

MAINTENANCE

THE MAINTENANCE DEPARTMENT RESPONDS TO THE DAILY AND SEASONAL DEMANDS

OF RUNNING A CLEAN, GREEN, AND SAFE PARK. OUR TEAM CARES FOR SEVEN

WATER FEATURES, ACRES OF GRANITE PAVING, COMPLEX LIGHTING SYSTEMS, AND

MORE. THE CONSERVANCY'S MAINTENANCE STAFF HANDLES REPAIRS, FOUNTAIN

MAINTENANCE, AND OTHER SKILLED TASKS; OUR EFFORTS ARE SUPPLEMENTED BY

OUR CONTRACTED NON-PROFIT PARTNER, WORK INC., WHICH EMPLOYS INDIVIDUALS

WITH DISABILITIES. WORK INC. HANDLES BASIC PARK CARE-INCLUDING LAWN

MOWING, LITTER AND TRASH REMOVAL, AND SNOW REMOVAL-AND HELPS PROVIDE AN

IN-PARK PRESENCE 16 HOURS PER DAY, 365 DAYS PER YEAR.

REGULAR MAINTENANCE WORK INCLUDES FOUNTAIN CARE, WELDING REPAIRS,

RE-LAMPING, VEHICLE MAINTENANCE, MASONRY, AND MORE. MASONRY WORK

THROUGHOUT THE GREENWAY INCLUDED RESETING LOOSE PAVERS, REPAIRING

HANDICAPPED RAMPS, RESTORING FAILED MORTAR JOINTS, AND RE-CAULKING

FAILED EXPANSION JOINTS. SEASONALLY, THE MAINTENANCE TEAM SETS OUT AND

REMOVES MOVEABLE FURNITURE; STARTS-UP AND THEN DECOMMISSIONS AND

WINTERIZES THE SEVEN WATER FEATURES; INSTALLS AND REMOVES WINTER

LIGHTING; AND SUPERVISES ACRES OF SNOW REMOVAL.

SIGNIFICANT WORK WAS DONE ON THE GREENWAY'S WATER FEATURES. WE

INSTALLED NEW CONTROLLERS IN THREE FOUNTAINS ENABLING REMOTE

ADDRESSABILITY OF MANY FOUNTAIN CONTROL FUNCTIONS WHILE IMPROVING

RELIABILITY AND SAFETY OF ALL THREE FOUNTAINS. WE STANDARDIZED THE

CHEMICAL TREATMENT SO ALL FOUNTAINS NOW USE ONE DISINFECTANT PRODUCT

THAT IS MORE ECONOMICAL, MORE STABLE, BETTER FOR THE ENVIRONMENT, AND

SAFER TO HANDLE. WE MADE REPAIRS TO DEFECTIVE SUMP PUMPS AT THE RINGS

AND NORTH END FOUNTAINS, THE JOCKEY PUMP AND PIPES AT RINGS, THE PUMP

MOTOR AT HARBOR FOG, AND THE CHINATOWN FOUNTAIN STREAM BED.

IN THE NORTH END PARKS, WE MADE SIGNIFICANT CAPITAL REPAIRS AND

IMPROVEMENTS. WE REPLACED THE BOLLARD LIGHTS WITH MORE EFFICIENT,

ATTRACTIVE AND STURDY LED LIGHTS. WE REPLACED 21 BENCHES, INCLUDING

ADDING 8 "PORCH SWING" BENCHES. THE FOUNTAIN TROUGH WAS

RE-WATERPROOFED, AND THE PERGOLAS WERE RESURFACED. WE REPLACED CHIPPED

AND SPALLED GRANITE PAVERS IN FREEDOM TRAIL, AND FIXED THE LIGHTS

EMBEDDED IN THE GRANITE. WE EXTENSIVELY RE-POINTED AND RE-SEALED THE

GRANITE PAVEMENT JOINTS ON THE NORTH END PARCELS.

IN CHINATOWN PARK, WE RETROFITTED ALL 59 UPLIGHTS IN THE BAMBOO BEDS

WITH LOW MAINTENANCE LED COMPONENTS AND UPGRADED 28 POLE LIGHTS TO LED,

LOWERING MAINTENANCE COSTS AND INCREASING SAFETY BY INCREASING THE

AMOUNT OF LIGHT IN CHINATOWN PARK.

IN THE WHARF PARKS, WE MADE MASONRY REPAIRS TO HANDICAP RAMPS, ADDED

SKATEBOARD DETERRENTS, AND MADE THE ELECTRICAL OUTLETS MORE SECURE WITH

DIRECT BURIAL LOCKABLE OUTLET BOLLARDS. REPAIRS AND IMPROVEMENTS WERE

MADE AROUND THE GREENWAY CAROUSEL, INCLUDING TO THE TENT, SIDES, AND

TICKET BOOTH DOOR.

THE MAINTENANCE TEAM PLAYS A CRITICAL ROLE IN SUPPORT OF THE PARK

ACTIVATION. PUBLIC ART INSTALLATIONS AND DIDACTIC SIGNAGE OFTEN INCLUDE

SIGNIFICANT LABOR FROM THE MAINTENANCE STAFF. IN THE FORT POINT CHANNEL

PARK, THE SOOFA SOLAR POWERED BENCH WAS INSTALLED IN NEW COBBLE PAVING.

THE JANET ECHELMAN INSTALLATION WAS COMPLIMENTED BY THE MAINTENANCE

TEAM'S ADDITION OF RECYCLING/TRASH RECEPTACLES AND NEW TEMPORARY

HAMMOCKS.

WE BEGAN A NEW GRANT-FUNDED PARK RANGERS PROGRAM TO ADD SECURITY AND

AMBASSADORSHIP ON THE GREENWAY. TWO FULL-TIME RANGERS INTERFACE WITH

THE PUBLIC, COMPASSIONATELY ENSURING A SAFE AND WELCOMING PARK

EXPERIENCE FOR ALL VISITORS. RANGERS CONNECT A WIDE RANGE OF PEOPLE

WITH THE INFORMATION AND SERVICES THEY NEED, FROM OUT-OF-TOWN VISITORS

TO FAMILIES TO THE HOMELESS. RANGERS INVEST A SIGNIFICANT PORTION OF

THEIR TIME LIAISING WITH COMMUNITY-BASED ORGANIZATIONS THAT ASSIST WITH

SOCIAL SERVICES.

Employer identification number 20-1678932

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

PROGRAMS AND PLANNING:

THE CONSERVANCY HAS BROUGHT THE GREENWAY TO LIFE. IN ADDITION TO THE

MILLIONS OF VISITORS WHO PASSIVELY ENJOY OUR FOUNTAINS AND GARDENS, THE

TRACKABLE VISITATION-EVENTS, WI-FI, CAROUSEL, AND MOBILE EATS-CONTINUED

TO INCREASE DRAMATICALLY, FROM 801,000 IN 2013 TO 1,023,000 IN 2014 AND

1,194,000 IN 2015. TOURISTS, WORKERS, AND RESIDENTS MEET AND PLAY ON

THE GREENWAY, MOVING THROUGH THE GARDENS FROM THE FOUNTAINS TO THE FOOD

TRUCKS TO THE NEARBY ATTRACTIONS.

OUR 300 FREE ANNUAL EVENTS INCLUDE FESTIVALS, MARKETS, FITNESS CLASSES,
AND CONCERTS. MAJOR EVENTS INCLUDED THE BOSTON LOCAL FOOD FEST, THE
FIGMENT PARTICIPATORY ART FESTIVAL, AND RACE AMITY DAY. RECURRING
EVENTS INCLUDE THE BOSTON CALLING BLOCK PARTIES, HELD WEEKLY AT DEWEY
SQUARE PARK WITH OUTDOOR MUSIC AND DRINKS; THE SEASONAL FARMERS MARKET
AT DEWEY SQUARE PARK, THE SATURDAY GREENWAY OPEN MARKET WITH ARTISAN
WARES, AND THE BERKLEE COLLEGE OF MUSIC CONCERT SERIES. WE HOSTED MORE
THAN 80 FREE FITNESS CLASSES FROM YOGA TO CROSSFIT THROUGH THE
GREENWAY. OUR NATIONALLY ACCLAIMED GREENWAY MOBILE EATS PROGRAM
CONTINUES TO EXPAND WITH 30 TRUCKS AND TRIKES OFFERING ROSEMARY FRIES,
TEA-SMOKED EGGS, GOURMET GRILLED CHEESE, AND MORE.

PREMIERE PARTNERS BROUGHT OUTSTANDING NEW EVENTS TO THE GREENWAY IN

2015. THE CELEBRITY SERIES OF BOSTON HOSTED LET'S DANCE BOSTON FOR

5,000 PEOPLE WHO DANCED TOGETHER TO LIVE BANDS REPRESENTING A DIVERSITY

OF GENRES AND TRADITIONS DURING THIS 5-DAY, FREE DANCE FESTIVAL. THE

BOSTON BALLET CELEBRATED THE OPENING OF THEIR SEASON UNDER AS IF IT

WERE ALREADY HERE, WITH TWELVE MALE DANCERS CREATING A MOVING PYRAMID

FROM THE FIRST MOVEMENT OF THIRD SYMPHONY OF GUSTAV MAHLER: A BALLET BY

JOHN NEUEMIER. A NEW PARTNERSHIP WITH SAM ADAMS LED TO THE CREATION OF

THE FOR THE LOVE OF BEER FEST, A TICKETED OPPORTUNITY TO TRY 50 CRAFT

BEERS.

THE FREE WI-FI NETWORK WAS UPGRADED WITH THE LATEST TECHNOLOGY TO BE

CARRIER-GRADE. ALREADY ONE OF THE LARGEST FREE NETWORKS IN THE

COMMONWEALTH, THE GREENWAY WIRELESS NETWORK IS NOW ONE OF THE MOST

RELIABLE, AS WELL. THE NETWORK OFFERS 802.11AC BROADBAND EXPERIENCE

WITH EQUIPMENT PURPOSE-BUILT TO WITHSTAND HARSH OUTDOOR ENVIRONMENTS.

THE PRIVATE-SECTOR PARTNERSHIP ALLOWED FOR THE UPGRADES TO OCCUR AT NO

COST TO THE CONSERVANCY.

THE GREENWAY CAROUSEL AT THE TIFFANY & CO. FOUNDATION GROVE IS A NEW BOSTON LANDMARK. THE ONE-OF-A-KIND, ARTIST-CRAFTED CAROUSEL FEATURES 14

DIFFERENT CHARACTERS NATIVE TO THE LAND, SEA AND SKY OF MASSACHUSETTS

INCLUDING A SEA TURTLE, RABBIT, LOBSTER, COD, PEREGRINE FALCON, AND SKUNK. THE CHARACTERS WERE INSPIRED BY THE DRAWINGS OF BOSTON SCHOOL CHILDREN AND BROUGHT TO LIFE BY A LOCAL ARTIST. THE GREENWAY CAROUSEL WAS DESIGNED TO CREATE ACCESS FOR PEOPLE OF ALL ABILITIES. RIDERSHIP HAS TOPPED 100,000 EACH FULL YEAR IT HAS BEEN OPEN. CAROUSEL REVENUES HELP SUPPORT THE 300 FREE ANNUAL PROGRAMS ON THE GREENWAY.

THE GREENWAY GALA IS THE CONSERVANCY'S ANNUAL FUNDRAISING EVENT. IN

2015, THE GALA WAS AGAIN HOSTED ON THE GREENWAY, WELCOMING GUESTS INTO

A SPECTACULAR TENT WITH DECORATIONS PUT TOGETHER BY THE CONSERVANCY'S

Schedule O (Form 990 or 990-EZ) (2015) Page 2 Name of the organization ROSE FITZGERALD KENNEDY GREENWAY **Employer identification number** CONSERVANCY, INC. 20-1678932 HORTICULTURE TEAM. THE NIGHT WAS A GLOWING SUCCESS - ATTENDED BY APPROXIMATELY 400 REPRESENTATIVES FROM THE BUSINESS COMMUNITY, NONPROFIT COMMUNITY GROUPS, CORPORATIONS, FOUNDATIONS AND INDIVIDUALS. THE GALA PROVIDES THE CONSERVANCY AN OPPORTUNITY TO SAY THANK YOU TO OUR SUPPORTERS AND PROVIDES A PLATFORM FOR SHARING OUR CURRENT AND FUTURE INITIATIVES. FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: PUBLIC ART: THE GREENWAY CONSERVANCY HAS BECOME A LEADER IN CONTEMPORARY PUBLIC ART IN BOSTON. PUBLIC ART ON THE GREENWAY GIVES RESIDENTS, WORKERS, AND TOURISTS A REASON TO VISIT, LINGER, AND DISCUSS. IN FALL 2014, THE CONSERVANCY COMMISSIONED THE THIRD GREENWAY WALL MURAL, SEVEN MOON JUNCTION BY SHINIQUE SMITH IN COLLABORATION WITH THE MUSEUM OF FINE ARTS BOSTON. THIS PIECE WAS WAS NAMED ONE OF THE TOP 50 PUBLIC ART WORKS IN THE COUNTRY BY THE AMERICANS FOR THE ARTS' PUBLIC ART NETWORK. WE ALSO HIRED OUR FIRST PUBLIC ART CURATOR, LUCAS COWAN, FORMERLY SENIOR CURATOR AT MILLENNIUM PARK IN CHICAGO.

2015 BROUGHT THE TEMPORARY INSTALLATION OF A MONUMENTAL JANET ECHELMAN SCULPTURE, AS IF IT WERE ALREADY HERE, SUSPENDED 350 FEET OVER THE PARK FROM THREE ADJACENT SKYSCRAPERS. THIS PROJECT-WHICH INVOLVED THREE PRIVATE PROPERTY OWNERS AND THE 10-HOUR INSTALLATION CLOSING OF 2 MAJOR STREETS AND A HIGHWAY RAMP-WAS AN ENORMOUS PUBLIC SUCCESS. THE PARK BENEATH WAS ACTIVATED IN A COMPLETELY NEW WAY. ALL SEASON LONG THE PUBLIC SNAPPED PICTURES, GAZED UP AT THE ARTWORK FROM HAMMOCKS, AND

MARVELED AT THE SCULPTURE. ECHELMAN'S SCULPTURE WAS CELEBRATED BY PULITZER PRIZE-WINNING ART CRITIC SEBASTIAN SMEE AS "THE MOST BEAUTIFUL AND AUDACIOUS PIECE OF PUBLIC ART IN BOSTON IN LIVING MEMORY." THE SCULPTURE TRANSFORMED THE CONVERSATION ABOUT PUBLIC ART IN BOSTON; AS BOSTON GLOBE COLUMNIST YVONNE ABRAHAM WROTE, THE PIECE " REFLECTS THE KIND OF COURAGEOUS, FREE-SPIRITED VISION FOR THE CITY THAT MANY HAVE BEEN LONGING FOR FOREVER. THE NEW INSTALLATION MOVED ME TO TEARS, SILENCING IN THE MOMENT ONE OF MY LONGER-RUNNING BELLY-ACHES: THE DEARTH OF PUBLIC ART IN BOSTON; THE UNIFORMITY OF THE ART WE HAVE -STODGY LEGIONS OF BRONZE FIGURES DEPICTING POLITICIANS AND SPORTING OR OTHER HEROES; THE LACK OF AMBITION IN OUR SHARED SPACES. WE'VE HAD SOME GREAT DEPARTURES FROM THAT TRADITION OVER THE YEARS, BUT NONE THIS DRAMATIC AND ACCESSIBLE. CREDIT THE GREENWAY CONSERVANCY FOR THIS." IN ADDITION TO OUR MEDIA SPONSORS-THE BOSTON GLOBE, CBS WBZ, THE IMPROPER BOSTONIAN, WBUR, AND ARTS NEW ENGLAND-COVERAGE EXTENDED TO THE ATLANTIC, ARCHITECTURAL DIGEST, TIME MAGAZINE, CORRIERE DELLA SERA SETTE, FAST COMPANY, INTERIOR DESIGN, AND THE NEW YORK TIMES.

2015 ALSO SAW NUMEROUS OTHER INSTALLATIONS WHICH ESTABLISHED THE

GREENWAY AS A DESTINATION FOR PUBLIC ART. THE CONSERVANCY LAUNCHED A

12-YEAR CURATION PROJECT BASED ON THE CHINESE ZODIAC THAT BEGAN WITH

KYU SEOK OH'S WANDERING SHEEP; THIS ARTWORK, ALONG WITH THE ADDITION OF

TABLES, CHAIRS, AND PLANTERS, BROUGHT TO LIFE A VACANT PLAZA IN

CHINATOWN. THE CONSERVANCY COMMISSIONED ANOTHER GREENWAY WALL MURAL,

LAWRENCE WEINER'S A TRANSLATION FROM ONE LANGUAGE TO ANOTHER, IN

PARTNERSHIP WITH THE MIT LIST VISUAL ARTS CENTER. FINALISTS IN THE

DESIGN BIENNIAL BOSTON, A PROJECT OF THE BOSTON SOCIETY OF ARCHITECTS

AND PINKCOMMA GALLERY, CREATED AND INSTALLED INTERACTIVE TEMPORARY

WORKS ON THE GREENWAY THAT RELATED TO AS IF IT WERE ALREADY HERE.

THE CONSERVANCY LAUNCHED NEW ARTS EDUCATION EFFORTS. A VOLUNTEER CORPS

OF 19 ART AMBASSADORS PROVIDED 970 HOURS OF ENGAGEMENT IN 2015 WITH THE

PUBLIC, OFFERING TOURS AND STAFFING A "PORTABLE READING LIBRARY"

UNDERNEATH THE ECHELMAN. THE CONSERVANCY ALSO HOSTED "COMMUNITY DAYS"

FOR THE BOYS & GIRLS CLUBS OF BOSTON, BRINGING HUNDREDS OF CHILDREN TO

THE GREENWAY FOR PUBLIC ART EXPLORATION, A CAROUSEL RIDE, FOUNTAIN

PLAY, AND A FOOD TRUCK LUNCH.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OUTREACH:

THE OUTREACH DEPARTMENT, NEWLY ORGANIZED IN FY15 TO CONSOLIDATE VARIOUS

MARKETING, COMMUNICATIONS, COMMUNITY RELATIONS, AND GOVERNMENT AFFAIRS

FUNCTIONS, LEADS THE CONSERVANCY'S EXTERNAL MESSAGING EFFORTS. THE TEAM

IS IN REGULAR CONTACT WITH THE PUBLIC, COMMUNITY GROUPS, GOVERNMENT

OFFICIALS, THE MEDIA, AND OTHER STAKEHOLDERS THROUGH DIRECT OUTREACH,

IN-PARK MESSAGING, AND ELECTRONIC COMMUNICATIONS. THE DEPARTMENT ALSO

ASSISTS WITH THE CONSERVANCY'S GOVERNMENT PERMITTING EFFORTS. THE

DEPARTMENT COORDINATES THE MARKETING OF ALL GREENWAY OFFERINGS AND

CONSERVANCY STORIES.

METRICS FOR THE CONSERVANCY'S OWNED MEDIA ACCOUNTS WERE ALL UP

SIGNIFICANTLY IN FY15. GROWTH WAS CATALYZED BY THE GREENWAY ECHELMAN

SCULPTURE COMBINED WITH A RENEWED FOCUS ON COMMUNICATING WITH THE

PUBLIC WHEN AND WHERE THEY WERE. TWITTER, INSTAGRAM AND FACEBOOK WERE

CUMULATIVELY UP BY MORE THAN 75% IN CY2015. WEB SEARCHES SEEKING

INFORMATION ON CONSERVANCY EVENTS AND ACTIVITIES WERE AT THE RECORD

MONTHS SINCE THE CONSERVANCY WAS FOUNDED. THE GREENWAY BLOG AND
ENEWSLETTER EACH REACHED NEW HIGHS IN INTERACTIONS AND CLICKS.

THE OUTREACH DEPARTMENT SOUGHT, OBTAINED, AND FULFILLED NEARLY A DOZEN
MEDIA PARTNERSHIP AGREEMENTS RELATED TO PUBLIC ART INSTALLATIONS IN
FY15. THOSE AGREEMENTS PROVIDED ROUGHLY \$250,000 IN IN-KIND ADVERTISING

LEVELS, WITH MAY THROUGH SEPTEMBER 2015 EACH AMONG THE TOP 7 RECORDED

THE DEPARTMENT ALSO ENGAGED A PROFESSIONAL BRANDING FIRM WHO PROVIDED

THEIR SERVICES PRO BONO ON MARKETING STRATEGY, DESIGN SERVICES, AND A

COMPLETE REBRANDING. THE REBRANDING EFFORT INCLUDED REDESIGNING THE

CONSERVANCY'S LOGO, COLORS, AND FONTS. THE DEPARTMENT CONTINUED TO WORK

TO TRANSITION THE CONSERVANCY TO THE NEW STANDARDS THROUGH WORK

CHANGING OVER STAFF UNIFORMS, IN-PARK BRANDING, DIGITAL MEDIA,

CONSERVANCY VEHICLES, OFFICE SUPPLIES, AND OTHER ELEMENTS TO REFLECT

THE NEW BRANDING.

EXPENSES \$ 99,797. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 4:

OPPORTUNITIES IN EARNED MEDIA OUTLETS.

THE BYLAWS WERE AMENDED TO CHANGE TO A CALENDAR FISCAL YEAR. THE CHANGES

MOVE THE DATE OF ANNUAL MEETING FROM OCTOBER TO DECEMBER AND LEAD TO A

SMALL SHIFT IN TERMS OF CERTAIN BOARD MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A:

PER COMMONWEALTH LAW, AND THE ACTS OF 2008, CERTAIN MEMBERS OF THE BOARD OF DIRECTORS ARE APPOINTED BY ELECTED OFFICIALS OR BY GOVERNMENT AGENCIES.

FORM 990, PART VI, SECTION B, LINE 11:

AFTER INTERNAL REVIEW BY THE CONSERVANCY'S FINANCE DEPARTMENT AS WELL AS BY

ITS EXECUTIVE DIRECTOR, A DRAFT OF THE FORM 990 IS DELIVERED TO THE FINANCE, AUDIT, AND RISK MANAGEMENT COMMITTEE (FARMC) OF THE BOARD OF DIRECTORS FOR ITS REVIEW AND COMMENT. THE FARMC MEETS WITH THE CONSERVANCY'S INDEPENDENT ACCOUNTING FIRM TO REVIEW ANY QUESTIONS IT MAY HAVE. ONCE THE FARMC APPROVES THE DRAFT FORM 990, THE INDEPENDENT AUDITING FIRM PROVIDES A FINAL VERSION FOR REVIEW BY THE FULL BOARD PRIOR TO THE RETURN BEING FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

THE CONSERVANCY'S BOARD OF DIRECTORS SIGN THE CONFLICT OF INTEREST POLICY
YEARLY. DISCLOSURES ARE FILED WITH THE CONSERVANCY'S FINANCE, AUDIT AND
RISK MANAGEMENT COMMITTEE WHICH REVIEWS THE FILINGS AND REPORTS TO THE
BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 15A:

IN 2014 AND IN 2015, AN AD HOC BOARD WORKING GROUP CONSIDERED FORM 990

EXECUTIVE DIRECTOR COMPENSATION FROM COMPARABLE ORGANIZATIONS TO DETERMINE

THE EXECUTIVE DIRECTOR'S COMPENSATION.

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

THE CONSERVANCY'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FORM
990, FORM PC AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST
AND POSTED ON THE CONSERVANCY'S WEBSITE - WWW.ROSEKENNEDYGREENWAY.ORG.

FORM 990, PART VI, SECTION B, LINE 15B:

THE CONSERVANCY DOES NOT HAVE ANY OTHER OFFICERS OR KEY EMPLOYEES.

FORM 990, PART XII, LINE 2C:

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