

**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](http://www.irs.gov/form990).

**A For the 2016 calendar year, or tax year beginning and ending**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>185 KNEELAND STREET</b> City or town, state or province, country, and ZIP or foreign postal code <b>BOSTON, MA 02111</b> <b>F</b> Name and address of principal officer: <b>JESSE BRACKENBURY</b> <b>185 KNEELAND STREET, BOSTON, MA 02111</b>	<b>D</b> Employer identification number <b>20-1678932</b> <b>E</b> Telephone number <b>(617) 292-0020</b> <b>G</b> Gross receipts \$ <b>6,231,964.</b> <b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ <b>WWW.ROSEKENNEDYGREENWAY.ORG</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		
<b>L</b> Year of formation: <b>2004</b>		<b>M</b> State of legal domicile: <b>MA</b>

**Part I Summary**

<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>SEE ATTACHED SCHEDULE O</b>	
<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
<b>3</b>	Number of voting members of the governing body (Part VI, line 1a) .....	<b>3</b> 18
<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b) .....	<b>4</b> 18
<b>5</b>	Total number of individuals employed in calendar year 2016 (Part V, line 2a) .....	<b>5</b> 52
<b>6</b>	Total number of volunteers (estimate if necessary) .....	<b>6</b> 890
<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12 .....	<b>7a</b> 0.
<b>7b</b>	Net unrelated business taxable income from Form 990-T, line 34 .....	<b>7b</b> 0.
<b>8</b>	Contributions and grants (Part VIII, line 1h) .....	<b>8</b> 1,525,462. 3,663,626.
<b>9</b>	Program service revenue (Part VIII, line 2g) .....	<b>9</b> 478,117. 956,687.
<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....	<b>10</b> 607,912. 438,908.
<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....	<b>11</b> 1,567. -107,372.
<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....	<b>12</b> 2,613,058. 4,951,849.
<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3) .....	<b>13</b> 0. 0.
<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4) .....	<b>14</b> 0. 0.
<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) .....	<b>15</b> 1,166,332. 2,568,985.
<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e) .....	<b>16a</b> 0. 0.
<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>470,383.</b>	
<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) .....	<b>17</b> 1,387,547. 2,232,302.
<b>18</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .....	<b>18</b> 2,553,879. 4,801,287.
<b>19</b>	Revenue less expenses. Subtract line 18 from line 12 .....	<b>19</b> 59,179. 150,562.
<b>20</b>	Total assets (Part X, line 16) .....	<b>20</b> 20,094,385. 20,700,534.
<b>21</b>	Total liabilities (Part X, line 26) .....	<b>21</b> 319,056. 362,620.
<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20 .....	<b>22</b> 19,775,329. 20,337,914.

**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.

<b>Sign Here</b>	Signature of officer <b>JESSE BRACKENBURY, EXECUTIVE DIRECTOR</b> Type or print name and title	Date  		
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>DAVID KELLEHER, CPA</b>	Preparer's signature <b>DAVID KELLEHER, CPA</b>	Date <b>05/09/17</b>	Check <input type="checkbox"/> if self-employed PTIN <b>P01059560</b>
	Firm's name ▶ <b>ALEXANDER, ARONSON, FINNING &amp; CO., P.C.</b>	Firm's EIN ▶ <b>04-2571780</b>	Phone no. <b>508-366-9100</b>	
	Firm's address ▶ <b>21 EAST MAIN STREET</b> <b>WESTBOROUGH, MA 01581</b>			

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III  X

**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?  Yes  No  
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  No  
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 \$ 2,574,434. including grants of \$ \_\_\_\_\_) (Revenue \$ 104,016.)  
**SEE SCH O-MAINTENANCE, HORTICULTURE, AND RANGERS**

**4b** (Code: \_\_\_\_\_) (Expenses \$ 695,625. including grants of \$ \_\_\_\_\_) (Revenue \$ 875,954.)  
**SEE ATTACHED SCHEDULE O - PROGRAMS**

**4c** (Code: \_\_\_\_\_) (Expenses \$ 528,172. including grants of \$ \_\_\_\_\_) (Revenue \$ 1,100.)  
**SEE ATTACHED SCHEDULE O - PUBLIC ART**

**4d** Other program services (Describe in Schedule O.)  
(Expenses \$ 203,725. including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

**4e** Total program service expenses **▶ 4,001,956.**

**ROSE FITZGERALD KENNEDY GREENWAY  
CONSERVANCY, INC.**

**Part IV Checklist of Required Schedules**

		Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	<b>1</b>	<b>X</b>	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors?</i> .....	<b>2</b>	<b>X</b>	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....	<b>3</b>		<b>X</b>
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....	<b>4</b>		<b>X</b>
<b>5</b> 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? <i>If "Yes," complete Schedule C, Part III</i> .....	<b>5</b>		<b>X</b>
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> .....	<b>6</b>		<b>X</b>
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....	<b>7</b>		<b>X</b>
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....	<b>8</b>		<b>X</b>
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV</i> .....	<b>9</b>		<b>X</b>
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .....	<b>10</b>	<b>X</b>	
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	<b>11a</b>	<b>X</b>	
<b>b</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? <i>If "Yes," complete Schedule D, Part VII</i> .....	<b>11b</b>	<b>X</b>	
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII</i> .....	<b>11c</b>		<b>X</b>
<b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX</i> .....	<b>11d</b>		<b>X</b>
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	<b>11e</b>		<b>X</b>
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> .....	<b>11f</b>	<b>X</b>	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....	<b>12a</b>	<b>X</b>	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....	<b>12b</b>		<b>X</b>
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....	<b>13</b>		<b>X</b>
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....	<b>14a</b>		<b>X</b>
<b>b</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 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....	<b>14b</b>		<b>X</b>
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....	<b>15</b>		<b>X</b>
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....	<b>16</b>		<b>X</b>
<b>17</b> 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? <i>If "Yes," complete Schedule G, Part I</i> .....	<b>17</b>	<b>X</b>	
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....	<b>18</b>	<b>X</b>	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....	<b>19</b>		<b>X</b>

**ROSE FITZGERALD KENNEDY GREENWAY  
CONSERVANCY, INC.**

**Part IV Checklist of Required Schedules** *(continued)*

		Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....	<b>20a</b>		<b>X</b>
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....	<b>20b</b>		
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	<b>21</b>		<b>X</b>
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	<b>22</b>		<b>X</b>
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	<b>23</b>	<b>X</b>	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....	<b>24a</b>		<b>X</b>
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....	<b>24b</b>		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....	<b>24c</b>		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....	<b>24d</b>		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25a</b>		<b>X</b>
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25b</b>		<b>X</b>
<b>26</b> 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? <i>If "Yes," complete Schedule L, Part II</i> .....	<b>26</b>		<b>X</b>
<b>27</b> 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 of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....	<b>27</b>		<b>X</b>
<b>28</b> 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):			
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28a</b>		<b>X</b>
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28b</b>		<b>X</b>
<b>c</b> 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? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28c</b>		<b>X</b>
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	<b>29</b>	<b>X</b>	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	<b>30</b>		<b>X</b>
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....	<b>31</b>		<b>X</b>
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....	<b>32</b>		<b>X</b>
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....	<b>33</b>		<b>X</b>
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	<b>34</b>		<b>X</b>
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	<b>35a</b>		<b>X</b>
<b>b</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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>35b</b>		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>36</b>		<b>X</b>
<b>37</b> 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? <i>If "Yes," complete Schedule R, Part VI</i> .....	<b>37</b>		<b>X</b>
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	<b>38</b>	<b>X</b>	

**Note.** All Form 990 filers are required to complete Schedule O .....

**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

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
<b>2b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
<b>3b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
<b>4b</b>	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>5c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
<b>6b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>7a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
<b>7b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
<b>7c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>7d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
<b>7e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>7f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>7g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>7h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>9a</b>	Did the sponsoring organization make any taxable distributions under section 4966?		
<b>9b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>10a</b>	Initiation fees and capital contributions included on Part VIII, line 12		
<b>10b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>11a</b>	Gross income from members or shareholders		
<b>11b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>12b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>13a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		
<b>13b</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		
<b>13c</b>	Enter the amount of reserves on hand		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		X
<b>14b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

**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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	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>1b</b>	Enter the number of voting members included in line 1a, above, who are independent		
<b>2</b>	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?		X
<b>3</b>	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?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	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?	X	
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	The governing body?	X	
<b>8b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	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		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>10b</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?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>11b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>12b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>12c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?	X	
<b>15</b>	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?		
<b>15a</b>	The organization's CEO, Executive Director, or top management official	X	
<b>15b</b>	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		X
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>16b</b>	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 exempt status with respect to such arrangements?		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **MA**
- 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) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     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 financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **JESSE BRACKENBURY - 617-292-0020**  
**185 KNEELAND STREET, BOSTON, MA 02111**

ROSE FITZGERALD KENNEDY GREENWAY  
CONSERVANCY, INC.

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

Check if Schedule O contains a response or note to any line in this Part VII

**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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JAMES KALUSTIAN CHAIR	2.00	X		X				0.	0.	0.
(2) CHRISTINE MANFREDI CLERK AND TREASURER	2.00	X		X				0.	0.	0.
(3) KATHRYN R BURTON VICE CHAIR	2.00	X		X				0.	0.	0.
(4) CHRISTOPHER BETKE DIRECTOR	1.00	X						0.	0.	0.
(5) MARK BOYLE DIRECTOR	2.00	X						0.	0.	0.
(6) JAMES CHAN DIRECTOR	1.00	X						0.	0.	0.
(7) JANELLE CHAN DIRECTOR	1.00	X						0.	0.	0.
(8) JANE PAPPALARDO DIRECTOR	1.00	X						0.	0.	0.
(9) JOHN PREGMON DIRECTOR	1.00	X						0.	0.	0.
(10) ROBYN REED DIRECTOR	1.00	X						0.	0.	0.
(11) HELEN CHIN SCHLICHTER DIRECTOR	1.00	X						0.	0.	0.
(12) BEEDEE LADD DIRECTOR	1.00	X						0.	0.	0.
(13) DANIEL SIEGER DIRECTOR	1.00	X						0.	0.	0.
(14) SUSANNE LAVOIE DIRECTOR	1.00	X						0.	0.	0.
(15) MARTIN LYNN DIRECTOR	2.00	X						0.	0.	0.
(16) BRYANT MCBRIDE DIRECTOR	1.00	X						0.	0.	0.
(17) TIM MORNINGSTAR DIRECTOR	1.00	X						0.	0.	0.

ROSE FITZGERALD KENNEDY GREENWAY  
CONSERVANCY, INC.

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) THOMAS O'BRIEN DIRECTOR	1.00	X						0.	0.	0.
(19) COLLEEN RICHARDS POWELL DIRECTOR	1.00	X						0.	0.	0.
(20) BUD RIS DIRECTOR	1.00	X						0.	0.	0.
(21) JEROME SMITH DIRECTOR	1.00	X						0.	0.	0.
(22) DANIEL TOSCANO DIRECTOR	1.00	X						0.	0.	0.
(23) JESSE BRACKENBURY EXECUTIVE DIRECTOR	60.00			X				203,173.	0.	24,381.
(24) JODI WOLIN DIRECTOR OF DEVELOPMENT	50.00				X			107,783.	0.	7,742.
(25) STEVEN ANDERSON DIRECTOR OF PARK OPERATIONS	45.00				X			115,727.	0.	21,764.
<b>1b Sub-total</b>								426,683.	0.	53,887.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								426,683.	0.	53,887.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **3**

	Yes	No
3 Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	X
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	4	X
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
WORK, INC. 25 BEACH ST, DORCHESTER, MA 02122	BASIC PARK MAINTENANCE	641,518.
GREENWAY CAROUSEL ENTERTAINMENT 201 SOMERVILLE AVE, SOMERVILLE, MA 02143	CAROUSEL OPERATOR	180,579.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **2**



ROSE FITZGERALD KENNEDY GREENWAY  
CONSERVANCY, INC.

Form 990 (2016)

20-1678932 Page 9

**Part VIII Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>	555,635.				
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>	2,000,680.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .....	<b>1f</b>	1,107,311.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ .....		25,302.				
	<b>h Total.</b> Add lines 1a-1f .....		3,663,626.				
	<b>Program Service Revenue</b>	<b>2 a</b> FOOD VENDING INCOME .....	<b>Business Code</b> 713110	468,071.	468,071.		
<b>b</b> CAROUSEL REVENUE, NET .....		722100	201,370.	201,370.			
<b>c</b> PROGRAM FEES .....		900099	161,023.	161,023.			
<b>d</b> MAINTENANCE REVENUE .....		900099	93,760.	93,760.			
<b>e</b> OPEN MARKET .....		900099	32,463.	32,463.			
<b>f</b> All other program service revenue .....							
<b>g Total.</b> Add lines 2a-2f .....			956,687.				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		425,543.			425,543.	
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....						
	<b>6 a</b> Gross rents .....	(i) Real					
		(ii) Personal					
		<b>b</b> Less: rental expenses .....					
		<b>c</b> Rental income or (loss) .....					
	<b>d</b> Net rental income or (loss) .....						
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	(i) Securities					
		(ii) Other					
		<b>b</b> Less: cost or other basis and sales expenses .....					
		<b>c</b> Gain or (loss) .....					
	<b>d</b> Net gain or (loss) .....			13,365.		13,365.	
	<b>8 a</b> Gross income from fundraising events (not including \$ 555,635. of contributions reported on line 1c). See Part IV, line 18 .....	<b>a</b>	30,321.				
		<b>b</b> Less: direct expenses .....	<b>b</b>	162,076.			
<b>c</b> Net income or (loss) from fundraising events .....			-131,755.			-131,755.	
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>a</b>						
	<b>b</b> Less: direct expenses .....	<b>b</b>					
	<b>c</b> Net income or (loss) from gaming activities .....						
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>a</b>						
	<b>b</b> Less: cost of goods sold .....	<b>b</b>					
	<b>c</b> Net income or (loss) from sales of inventory .....						
Miscellaneous Revenue		<b>Business Code</b>					
<b>11 a</b> OTHER INCOME .....		900099	24,383.	24,383.			
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> All other revenue .....						
	<b>e Total.</b> Add lines 11a-11d .....			24,383.			
<b>12 Total revenue.</b> See instructions. ....			4,951,849.	981,070.	0.	307,153.	

ROSE FITZGERALD KENNEDY GREENWAY  
CONSERVANCY, INC.

Form 990 (2016)

20-1678932 Page 10

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 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	227,554.	68,266.	79,644.	79,644.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,858,761.	1,465,056.	180,691.	213,014.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	21,160.	16,406.	3,380.	1,374.
9 Other employee benefits	268,498.	218,956.	27,918.	21,624.
10 Payroll taxes	193,012.	145,438.	22,105.	25,469.
11 Fees for services (non-employees):				
a Management				
b Legal	14,139.	11,535.	851.	1,753.
c Accounting	39,584.	32,292.	2,383.	4,909.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	17.		17.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion				
13 Office expenses	66,224.	53,329.	5,029.	7,866.
14 Information technology	55,738.	44,517.	4,515.	6,706.
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	315,596.	307,047.	515.	8,034.
23 Insurance	129,562.	127,546.	659.	1,357.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>CONTRACTED SERVICES</b>	800,031.	735,385.		64,646.
b <b>DIRECT EXPENSE</b>	795,365.	760,940.	1,116.	33,309.
c <b>PROFESSIONAL DEVELOPMEN</b>	16,046.	15,243.	125.	678.
d				
e All other expenses				
25 <b>Total functional expenses.</b> Add lines 1 through 24e	4,801,287.	4,001,956.	328,948.	470,383.
26 <b>Joint costs.</b> 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)

ROSE FITZGERALD KENNEDY GREENWAY  
CONSERVANCY, INC.

Form 990 (2016)

20-1678932 Page 11

**Part X Balance Sheet**

Check if Schedule O contains a response or note to any line in this Part X

		(A)		(B)	
		Beginning of year		End of year	
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	461,600.	<b>1</b>	582,398.	
	<b>2</b> Savings and temporary cash investments .....	1,251,534.	<b>2</b>	1,088,144.	
	<b>3</b> Pledges and grants receivable, net .....	94,377.	<b>3</b>	235,672.	
	<b>4</b> Accounts receivable, net .....	15,890.	<b>4</b>	28,748.	
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>		
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L .....		<b>6</b>		
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>		
	<b>8</b> Inventories for sale or use .....		<b>8</b>		
	<b>9</b> Prepaid expenses and deferred charges .....	131,891.	<b>9</b>	104,229.	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 5,199,643.			
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 1,077,920.			
	<b>11</b> Investments - publicly traded securities .....	4,157,002.	<b>10c</b>	4,121,723.	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	3,918,297.	<b>11</b>	4,567,637.	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....	10,063,794.	<b>12</b>	9,971,983.	
	<b>14</b> Intangible assets .....		<b>13</b>		
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>14</b>		
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	20,094,385.	<b>15</b>			
		<b>16</b>	20,700,534.		
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	319,056.	<b>17</b>	362,620.	
	<b>18</b> Grants payable .....		<b>18</b>		
	<b>19</b> Deferred revenue .....		<b>19</b>		
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>		
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>		
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b>		
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>		
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>		
	<b>25</b> 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 .....		<b>25</b>		
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	319,056.	<b>26</b>	362,620.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>				
	<b>27</b> Unrestricted net assets .....	5,549,326.	<b>27</b>	5,812,388.	
	<b>28</b> Temporarily restricted net assets .....	721,233.	<b>28</b>	1,020,756.	
	<b>29</b> Permanently restricted net assets .....	13,504,770.	<b>29</b>	13,504,770.	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>				
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>		
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>		
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>		
	<b>33</b> Total net assets or fund balances .....	19,775,329.	<b>33</b>	20,337,914.	
	<b>34</b> Total liabilities and net assets/fund balances .....	20,094,385.	<b>34</b>	20,700,534.	

Form 990 (2016)

ROSE FITZGERALD KENNEDY GREENWAY  
CONSERVANCY, INC.

**Part 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	4,951,849.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,801,287.
3	Revenue less expenses. Subtract line 2 from line 1	3	150,562.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	19,775,329.
5	Net unrealized gains (losses) on investments	5	412,023.
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	20,337,914.

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____		

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.

OMB No. 1545-0047

2016

Open to Public Inspection

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

Name of the organization ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.
Employer identification number 20-1678932

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations
g Provide the following information about the supported organization(s).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization (described on lines 1-10 above (see instructions)), (iv) Is the organization listed in your governing document? (Yes/No), (v) Amount of monetary support (see instructions), (vi) Amount of other support (see instructions). Includes a Total row at the bottom.

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	5,603,759.	3,033,686.	4,752,224.	1,525,462.	3,663,626.	18,578,757.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge ...	235,047.	244,361.	268,920.	173,580.	283,049.	1,204,957.
<b>4 Total.</b> Add lines 1 through 3 .....	5,838,806.	3,278,047.	5,021,144.	1,699,042.	3,946,675.	19,783,714.
<b>5</b> 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) .....						1,110,494.
<b>6 Public support.</b> Subtract line 5 from line 4.						18,673,220.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>7</b> Amounts from line 4 .....	5,838,806.	3,278,047.	5,021,144.	1,699,042.	3,946,675.	19,783,714.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...	310,133.	752,596.	568,891.	641,614.	425,543.	2,698,777.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on ...						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....		32,198.	9,519.	1,567.	24,383.	67,667.
<b>11 Total support.</b> Add lines 7 through 10						22,550,158.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					<b>12</b>	2,676,906.
<b>13 First five years.</b> 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 <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	82.81 %
<b>15</b> Public support percentage from 2015 Schedule A, Part II, line 14 .....	<b>15</b>	83.46 %
<b>16a 33 1/3% support test - 2016.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2015.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2016.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2015.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 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**

<b>15</b> Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2015 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2015 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests - 2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
<b>c</b> 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)? <i>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.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
<b>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> 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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</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? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> 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)? <i>If "Yes," answer 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		



**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> 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?		
<b>b</b> A family member of a person described in (a) above?		
<b>c</b> 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.		
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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.		
<b>2</b> 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.		
<b>1</b>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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).		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>2</b> 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).		
<b>3</b> 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.		
<b>1</b>		
<b>2</b>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
<b>2</b> Activities Test. Answer (a) and (b) below.		Yes	No
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of 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.			
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more 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 activities but for the organization's involvement.			
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.			
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.			
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
<b>2a</b>			
<b>2b</b>			
<b>3a</b>			
<b>3b</b>			

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<b>Section A - Adjusted Net Income</b>		(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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):		
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	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

<b>Section C - Distributable Amount</b>			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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions	Current Year
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions	
<b>7 Total annual distributions.</b> Add lines 1 through 6	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions	
<b>9</b> Distributable amount for 2016 from Section C, line 6	
<b>10</b> Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
<b>1</b> Distributable amount for 2016 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
<b>3</b> Excess distributions carryover, if any, to 2016:			
<b>a</b>			
<b>b</b>			
<b>c</b> From 2013			
<b>d</b> From 2014			
<b>e</b> From 2015			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2016 distributable amount			
<b>i</b> Carryover from 2011 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2016 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2016 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4			
<b>5</b> Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
<b>6</b> Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
<b>7 Excess distributions carryover to 2017.</b> Add lines 3j and 4c			
<b>8</b> Breakdown of line 7:			
<b>a</b>			
<b>b</b> Excess from 2013			
<b>c</b> Excess from 2014			
<b>d</b> Excess from 2015			
<b>e</b> Excess from 2016			

**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:**

2016 (FY16) WAS THE CONSERVANCY'S FIRST JANUARY 1 - DECEMBER 31 FISCAL YEAR, FOLLOWING THE JULY 2015 APPROVAL BY THE BOARD OF DIRECTORS OF A CHANGE FROM JULY 1-JUNE 30. AS FY15 WAS AN EIGHTEEN-MONTH FISCAL YEAR ADJUSTMENT PERIOD, THE CONSERVANCY FILED TWO FORM 990'S. THE FIRST FILING WAS FOR TAX YEAR 2014 AND COVERED THE TWELVE-MONTH PERIOD JULY 1, 2014 - JUNE 30, 2015. THE SECOND FILING, REFERENCED IN THE 2016 FILING AS "PRIOR YEAR," WAS FOR TAX YEAR 2015 AND COVERED THE SIX-MONTH PERIOD JULY 1, 2015 - DECEMBER 31, 2015.

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.

OMB No. 1545-0047

2016

Open to Public Inspection

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

Name of the organization ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC. Employer identification number 20-1678932

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number and acreage, number of easements on historic structures, and monitoring details.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include reporting requirements for art and historical treasures.

ROSE FITZGERALD KENNEDY GREENWAY  
CONSERVANCY, INC.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (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):

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	13,504,770.	14,227,602.	15,163,053.	13,504,770.	13,504,770.
b Contributions					
c Net investment earnings, gains, and losses	803,176.	-493,673.	-203,102.	2,265,431.	686,381.
d Grants or scholarships					
e Other expenditures for facilities and programs	638,076.	229,159.	732,349.	607,148.	686,381.
f Administrative expenses					
g End of year balance	13,669,870.	13,504,770.	14,227,602.	15,163,053.	13,504,770.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment  \_\_\_\_\_ %
- b Permanent endowment  98.79 %
- c Temporarily restricted endowment  1.21 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		4,959,671.	955,368.	4,004,303.
d Equipment		79,407.	17,810.	61,597.
e Other		160,565.	104,742.	55,823.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				4,121,723.

**ROSE FITZGERALD KENNEDY GREENWAY  
CONSERVANCY, INC.**

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely-held equity interests .....		
(3) Other		
(A) <b>TIFF MULTI ASSET FUND</b>	<b>9,971,983.</b>	<b>END-OF-YEAR MARKET VALUE</b>
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	<b>9,971,983.</b>	

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 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)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶		

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

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

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	6,110,162.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	412,023.	
b	Donated services and use of facilities	2b	746,307.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		1,158,330.
3	Subtract line 2e from line 1		3	4,951,832.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	17.	
c	Add lines 4a and 4b	4c		17.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	4,951,849.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	5,547,577.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	746,307.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		746,307.
3	Subtract line 2e from line 1		3	4,801,270.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	17.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		17.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	4,801,287.

**Part XIII Supplemental Information.**

Provide 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.

**PART V, LINE 4:**

THE CONSERVANCY ADHERES TO THE UNIFORM PRUDENT MANAGEMENT OF INSTITUTIONAL FUNDS ACT (UPMIFA). THE ASSETS IN ITS PERMANENTLY RESTRICTED ENDOWMENT FUND ARE DONOR-RESTRICTED ASSETS UNTIL APPROPRIATED ACCORDING TO THE DONOR STIPULATION FOR EXPENDITURE BY THE CONSERVANCY. THE CONSERVANCY HAS ADOPTED AN INVESTMENT AND SPENDING POLICY FOR ITS ENDOWMENT ASSETS AND FOR ANY BOARD DESIGNATED NET-ASSETS THAT IS DESIGNED TO PRESERVE CAPITAL THROUGH RISK MANAGEMENT WHILE PROVIDING A LEVEL OF SUPPORT FOR THE CONSERVANCY AND ITS PROGRAMS.

**PART X, LINE 2:**

THE CONSERVANCY ACCOUNTS FOR UNCERTAINTY IN INCOME TAXES IN ACCORDANCE



**Part XIII** 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  
RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS AT DECEMBER 31,  
2016. THE CONSERVANCY'S INFORMATION RETURNS ARE SUBJECT TO EXAMINATION BY  
THE FEDERAL AND STATE JURISDICTIONS.

**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, line 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](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

Open to Public Inspection

Name of the organization **ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.**

Employer identification number  
**20-1678932**

**Part I**

**Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a  Mail solicitations
  - b  Internet and email solicitations
  - c  Phone solicitations
  - d  In-person solicitations
  - e  Solicitation of non-government grants
  - f  Solicitation of government grants
  - g  Special fundraising events
- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(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
		Yes	No			
ALEX ROGERS -- 185 KNEELAND STREET, BOSTON, MA 02111	GRANT WRITING		X	274,300.	35,846.	238,454.
<b>Total</b>				274,300.	35,846.	238,454.

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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ROSE FITZGERALD KENNEDY GREENWAY

**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		GALA	GLOW IN THE PARK	NONE		
Revenue		(event type)	(event type)	(total number)		
1	Gross receipts .....	546,193.	39,763.		585,956.	
2	Less: Contributions .....	522,217.	33,418.		555,635.	
3	Gross income (line 1 minus line 2) .....	23,976.	6,345.		30,321.	
Direct Expenses	4	Cash prizes .....				
	5	Noncash prizes .....				
	6	Rent/facility costs .....	77,012.	11,031.		88,043.
	7	Food and beverages .....	21,667.	6,720.		28,387.
	8	Entertainment .....	600.	2,500.		3,100.
	9	Other direct expenses .....	38,441.	4,105.		42,546.
10	Direct expense summary. Add lines 4 through 9 in column (d) .....				162,076.	
11	Net income summary. Subtract line 10 from line 3, column (d) .....				-131,755.	

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue .....			
Direct Expenses	2	Cash prizes .....			
	3	Noncash prizes .....			
	4	Rent/facility costs .....			
	5	Other direct expenses .....			
	6	Volunteer labor .....	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> 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) .....				

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
 a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No  
 b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No  
 b If "Yes," explain: \_\_\_\_\_

ROSE FITZGERALD KENNEDY GREENWAY

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 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?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
 

a The organization's facility	<b>13a</b>	%
b An outside facility	<b>13b</b>	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_  
 Address ▶ \_\_\_\_\_

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- 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 ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_  
 Gaming manager compensation ▶ \$ \_\_\_\_\_  
 Description of services provided ▶ \_\_\_\_\_  
 \_\_\_\_\_  
 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?  Yes  No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV** Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2016**

Open to Public Inspection

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](http://www.irs.gov/form990).

Department of the Treasury  
Internal Revenue Service

Name of the organization **ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.**

Employer identification number  
**20-1678932**

**Part I Questions Regarding Compensation**

**1a** 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.

- |  |   |
|--|---|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use    |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence    |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees      |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as, 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 .....

**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 on line 1a? .....

**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.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> 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:

- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....
- c** Participate in, or receive payment from, an equity-based compensation arrangement? .....
- 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:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on 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:

- a** The organization? .....
- b** Any related organization? .....
- 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 nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2016

ROSE FITZGERALD KENNEDY GREENWAY  
CONSERVANCY, INC.

20-1678932

**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 aren't 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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JESSE BRACKENBURY EXECUTIVE DIRECTOR	(i)	203,173.	0.	0.	6,301.	18,080.	227,554.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(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 M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

OMB No. 1545-0047

**2016**

Open To Public  
Inspection

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization **ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.** Employer identification number **20-1678932**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	2	25,302.	
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ( )				
26 Other ( )				
27 Other ( )				
28 Other ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

- 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? **30a**
- b If "Yes," describe the arrangement in Part II.
- 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? **31**
- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? **32a**
- b If "Yes," describe in Part II.
- 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31		X
32a		X

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

Schedule M (Form 990) (2016)



**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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

Open to Public  
Inspection

Name of the organization

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. TO  
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 NON-PROFIT CONSERVANCY IS THE DESIGNATED STEWARD OF THE ROSE  
KENNEDY GREENWAY, A CONTEMPORARY PARK IN THE HEART OF BOSTON. THE  
CONSERVANCY MAINTAINS, PROGRAMS, FINANCES, AND IMPROVES THE 1.5-MILE  
GREENWAY ON BEHALF OF THE PUBLIC.

2016 (FY16) WAS THE CONSERVANCY'S FIRST JANUARY 1 - DECEMBER 31 FISCAL  
YEAR, FOLLOWING THE JULY 2015 APPROVAL BY THE BOARD OF DIRECTORS OF A  
CHANGE FROM JULY 1-JUNE 30. AS FY15 WAS AN EIGHTEEN-MONTH FISCAL YEAR  
ADJUSTMENT PERIOD, THE CONSERVANCY FILED TWO FORM 990'S. THE FIRST

Name of the organization	ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.	Employer identification number	20-1678932
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FILING WAS FOR TAX YEAR 2014 AND COVERED THE TWELVE-MONTH PERIOD JULY 1, 2014 - JUNE 30, 2015. THE SECOND FILING, REFERENCED IN THE 2016 FILING AS "PRIOR YEAR," WAS FOR TAX YEAR 2015 AND COVERED THE SIX-MONTH PERIOD JULY 1, 2015 - DECEMBER 31, 2015.

THE CONSERVANCY CONTINUED TO MAKE THE GREENWAY A JOY-FILLED PLACE FOR RESIDENTS AND VISITORS:

THE CONSERVANCY CONTINUED ITS LEADING ROLE IN PRESENTING ROTATING EXHIBITIONS OF CONTEMPORARY PUBLIC ART. AI WEIWEI'S CIRCLE OF ANIMALS/ZODIAC HEADS: BRONZE AND MEHDI GHADYANLOO'S SPACES OF HOPE MURAL RECEIVED INTERNATIONAL ATTENTION. THE BOSTON GLOBE'S ART CRITIC DECLARED SPACES OF HOPE "BRILLIANT" AND "A TRIUMPH."

FREE PROGRAMS NOW TOP 400 ANNUALLY, INCLUDING 126 FITNESS CLASSES AND DIVERSE NEW FESTIVALS.

1,379,000 VISITORS ENJOYED THE 400 FREE EVENTS, CAROUSEL, FOOD TRUCKS, AND FREE WI-FI, AND MILLIONS MORE CASUALLY ENJOYED THE FOUNTAINS, GARDENS, AND PLAZAS.

WE ADDED THE PLAYCUBES TO CHINATOWN PARK, ADDED PLAY PROGRAMMING, AND EXPANDED A PARTNERSHIP WITH THE BOYS & GIRLS CLUBS OF BOSTON.

WE MADE HORTICULTURE IMPROVEMENTS TO THE APPROXIMATELY 1.3 ACRES OF PUBLIC PROPERTY THAT WE GAINED RESPONSIBILITY FOR IN 2015. WE CELEBRATED THE PLANTING OF THE PARK'S 150,000TH BULB.

OUR MAINTENANCE TEAM MADE NUMEROUS REPAIRS AND IMPROVEMENTS THROUGH THE PARK.

#### HORTICULTURE

WE CONTINUE TO IMPROVE THE GREENWAY'S BEAUTY THROUGH SKILLED, ATTENTIVE MAINTENANCE AND IMPORTANT, THOUGHTFUL IMPROVEMENTS. THE CONSERVANCY

Name of the organization ROSE FITZGERALD KENNEDY GREENWAY  
CONSERVANCY, INC.

Employer identification number  
20-1678932

USES ORGANIC AND SUSTAINABLE LANDSCAPE PRACTICES THAT ARE INNOVATIVE,  
AWARD-WINNING, AND FISCALLY SOUND.

THE GREENWAY IS ONE OF A HANDFUL OF ORGANICALLY-MAINTAINED PUBLIC PARKS  
IN THE UNITED STATES. 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 COMPOST TEA. SUCCESS WITH NATURAL SOIL BIOLOGY  
HAVE IMPROVED PLANT HEALTH AND ROOT DEPTH, ALLOWING FOR DECREASED  
APPLICATIONS OF COMPOST TEA AND ORGANIC FERTILIZER OVER TIME. OUR  
SUSTAINABILITY EFFORTS HAVE EARNED US A MAYOR'S GREENOVATE AWARD, AND  
THE PARK IS A NATIONAL WILDLIFE FEDERATION CERTIFIED WILDLIFE HABITAT.

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. 74 PLANTER CONTAINERS THROUGHOUT THE PARK ARE CHANGED OUT  
SEASONALLY WITH ARRANGEMENTS CONSISTENT WITH THEIR PARK SURROUNDINGS.  
WE CONTINUE OUR CONTRACTED SPECIALTY ORGANIC SERVICES FOR THE FEDERAL  
RESERVE BANK OF BOSTON.

Name of the organization	ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.	Employer identification number	20-1678932
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IN 2016, WE RENOVATED FOUR GARDEN AREAS. IN CHINATOWN PARK, WE COMPLETELY REPLANTED A TRIANGULAR BED TO BRING BETTER FOUR-SEASON INTEREST. WE CONTINUED THE RENOVATION OF THE WHARF DISTRICT'S HARBORSIDE GARDEN BEDS; THIS YEAR, THE GARDEN SOUTH OF MILK STREET WAS REDESIGNED FOR GREATER FOUR SEASON INTEREST AND BETTER BUFFERING FROM TRAFFIC. WE CREATED A POLLINATOR GARDEN STRIP IN THE FINANCIAL DISTRICT WITH AN IN-HOUSE DESIGN AND INSTALLATION; THIS CONTINUES OUR EFFORTS TO MAKE THE GREENWAY A 1.5-MILE "BUTTERFLY CORRIDOR." THE LINCOLN STREET TRIANGLE IN THE LEATHER DISTRICT NEIGHBORHOOD HAS AN INNOVATIVE NEW GARDEN DESIGN THAT INCLUDES STEEL CORE RINGS, STONE MULCH, A LOCAL ARTIST'S MURAL, AND BETTER SIGHTLINES; THE NEW ENVIRONMENT AND ADDED SEATING HAVE CREATED A GATHERING SPOT.

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. IN 2016 HORTICULTURE WELCOMED 692 VOLUNTEERS WHO CONTRIBUTED 2,767 HOURS FOR HORTICULTURE AND MORE. ON THE STRENGTH OF REVIEWS FROM VOLUNTEERS, THE CONSERVANCY HAS WON THE TOP RATED AWARD FROM GREATNONPROFITS.ORG MULTIPLE YEARS RUNNING.

#### MAINTENANCE

OUR MAINTENANCE TEAM CARES FOR SEVEN WATER FEATURES, ACRES OF GRANITE PAVING, COMPLEX LIGHTING SYSTEMS AND MORE. THE CONSERVANCY'S MAINTENANCE STAFF HANDLES REPAIRS, FOUNTAIN MAINTENANCE, VEHICLE MAINTENANCE, MASONRY, AND OTHER SKILLED TASKS. SEASONALLY, THE

Name of the organization ROSE FITZGERALD KENNEDY GREENWAY  
CONSERVANCY, INC.

Employer identification number  
20-1678932

MAINTENANCE TEAM SETS OUT AND REMOVES MOVEABLE FURNITURE, AND SUPPORTS  
INFRASTRUCTURE FOR WINTER LIGHTING AND PUBLIC ART.

THEY ALSO OVERSEE 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.

IN 2016, MAINTENANCE MADE FIXES AND IMPROVEMENTS THROUGHOUT THE  
GREENWAY. SUBSURFACE DRAINS WERE CLEANED OUT, DEFECTIVE LIGHTING WAS  
REPAIRED, AND ELECTRICAL OUTLETS WERE REPAIRED OR REPLACED. SEVERAL  
NEW TRASH RECEPTACLES WERE INSTALLED. STONE, BRICK AND CONCRETE PAVERS  
THAT HAD BECOME LOOSE WERE RESET. NEW DEHUMIDIFIERS WERE INSTALLED IN  
CHINATOWN PARK AND ARMENIAN HERITAGE PARK TO REPLACE DEFECTIVE ONES.  
THE MAINTENANCE DEPARTMENT, IN COLLABORATION WITH OTHER DEPARTMENTS,  
ASSISTED WITH WINTER LIGHTING, PUBLIC ART INSTALLATIONS, AND THE  
RENOVATION OF LINCOLN STREET TRIANGLE.

IN THE NORTH END, ALL THE FREEDOM TRAIL LIGHTS AND ASSOCIATED WIRING  
WERE REMOVED AND REINSTALLED, REPLACING DAMAGED FIXTURES, USING THE  
LIGHTING MANUFACTURERS' WATERPROOF JUNCTION BOXES. ROUGHLY FORTY  
PERCENT OF THE FREEDOM TRAIL PAVERS WERE REMOVED AND RESET DURING THIS  
PROJECT. STONE DUST PATHS WERE REGRADED. SEVERAL LARGE STONE PAVING  
SLABS WERE REMOVED AND RE-INSTALLED IN THE WALKWAYS AND FOUNTAINS.  
REPAIRS WERE MADE TO THE LEANING RAIL.

IN THE WHARF DISTRICT, NEW WOODEN SLATS WERE INSTALLED ON SEVERAL OF  
THE PROMENADE BENCHES. EXTENSIVE REPOINTING OF THE GRANITE PAVING WAS  
ACCOMPLISHED. ALL THE LED LIGHT SOURCES IN HARBOR FOG WERE REPLACED.

Name of the organization	ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.	Employer identification number	20-1678932
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FIVE PICO LIGHT FIXTURES IN THE RINGS FOUNTAIN WERE REPLACED.

THE GRAVEL ACCESS ROAD AT DEWEY SQUARE PARK WAS RE-GRADED AS WERE THE STONE DUST PATHS IN THE FORT POINT CHANNEL PARKS. ON DEWEY SQUARE PLAZA, A BENT LIGHT POLE AND FIXTURE WAS REPLACED, AND EIGHT NEW BIKE RACKS WERE INSTALLED.

IN CHINATOWN PARK, NEW ELECTRICAL OUTLET WAS INSTALLED IN PREPARATION OF THE MAKE AND TAKE PUBLIC ART PIECE. SOME OLD DETERIORATED TRASH RECEPTACLES WERE REMOVED. THE DOOR ON THE TUNNEL EGRESS BUILDING IN CHINATOWN PARK WAS PAINTED. THE MAINTENANCE MASON AND HELPERS RESET LOOSE BEACH STONES IN THE CHINATOWN FOUNTAIN STREAM BED. WE INSTALLED ADDITIONAL CIGARETTE BUTT RECEPTACLES IN MARY SOO HOO PARK.

OUR GRANT-FUNDED PARK RANGERS PROVIDE 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.

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

PROGRAMS:

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



Name of the organization	ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.	Employer identification number	20-1678932
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TO INCREASE DRAMATICALLY, TO 1,379,000 (FROM 96,000 IN 2009 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.

IN 2016, WE TOPPED 400 FREE ANNUAL EVENTS, INCLUDING FESTIVALS, MARKETS, FITNESS CLASSES, AND CONCERTS. MAJOR EVENTS INCLUDED THE BOSTON LOCAL FOOD FEST, THE FIGMENT PARTICIPATORY ART FESTIVAL, AND RACE AMITY DAY; NEW FESTIVALS INCLUDED THE BRAZILIAN FESTIVAL AND THE CARRIBEAN FESTIVAL. 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 126 FREE FITNESS CLASSES FROM YOGA TO CROSSFIT ALL ACROSS THE GREENWAY. SAM ADAMS' TICKETED BOSTOBERFEST RETURNED FOR A SECOND YEAR. OUR NEW PLAY PROGRAM OFFERED PROGRAMMING FOR YOUTH, INCLUDING YOUTH ADVENTURE DAY VISITS FROM THE BOYS AND GIRLS CLUB OF BOSTON.

WE CONTINUED FAVORITES LIKE THE CAROUSEL, MOBILE EATS AND FREE WI-FI, AND ADDED A NEW PLAY STRUCTURE FOR CHILDREN. THE GREENWAY CAROUSEL AT THE TIFFANY & CO. FOUNDATION GROVE, A NEW BOSTON LANDMARK, WELCOMED MORE RIDERS THAN EVER BEFORE TO TAKE A SPIN; THE SEA TURTLE, RABBIT, LOBSTER, COD, PEREGRINE FALCON, SKUNK, AND OTHER CHARACTERS WERE INSPIRED BY THE DRAWINGS OF BOSTON SCHOOL CHILDREN AND BROUGHT TO LIFE BY A LOCAL ARTIST. OUR NATIONALLY ACCLAIMED GREENWAY MOBILE EATS PROGRAM CONTINUES TO EXPAND WITH 35 TRUCKS AND TRIKES OFFERING ROSEMARY FRIES, TEA-SMOKED EGGS, GOURMET GRILLED CHEESE, AND MORE. THE FREE

Name of the organization	ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.	Employer identification number	20-1678932
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WI-FI NETWORK, WHICH WAS UPGRADED TO CARRIER-GRADE IN 2015 AT NO COST TO THE CONSERVANCY, CONTINUES TO BE VERY POPULAR. IN THE SPRING WE ARRANGE THE ADDITION OF THE DONATED PLAYCUBES IN CHINATOWN PARK, AND THE COMMUNITY LOVED THEM SO MUCH THAT WE'VE EXTENDED THEIR STAY FOR SEVERAL MORE YEARS.

THE GREENWAY GALA IS THE CONSERVANCY'S ANNUAL FUNDRAISING EVENT. IN 2016, THE GALA WAS AGAIN HOSTED ON THE GREENWAY, WELCOMING GUESTS INTO A SPECTACULAR TENT WITH DECORATIONS PUT TOGETHER BY THE CONSERVANCY'S 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 2016, THE CONSERVANCY BROUGHT CONTEMPORARY EXHIBITS TO THE GREENWAY FROM 8 ARTISTS: 2 INTERNATIONAL, 2 NATIONAL, AND 4 LOCAL. LOCAL ARTISTS PRODUCED A MURAL IN THE LEATHER DISTRICT, SCULPTURE INSTALLATIONS IN THE FINANCIAL DISTRICT AND NORTH END PARKS, AND OUR FIRST SOUND INSTALLATION NEAR THE WATERFRONT. MATTHEW HOFFMAN'S MAY THIS NEVER END

Name of the organization	ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.	Employer identification number	20-1678932
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TEXT-BASED WORK NEAR FANEUIL HALL BUILT OFF THE EXHIBITION OF LAWRENCE WEINER'S GREENWAY WALL MURAL, A TRANSLATION FROM ONE LANGUAGE TO ANOTHER. DON KENNEL'S MONKEY SEE CONTINUED THE ANNUAL CURATION BASED ON THE CHINESE ZODIAC; KYU SEOK OH'S WANDERING SHEEP WAS RECOGNIZED AS ONE OF THE COUNTRY'S BEST PIECES OF PUBLIC ART IN 2015 BY AMERICANS FOR THE ARTS' PUBLIC ART NETWORK, THE THIRD GREENWAY WIN IN FOUR YEARS.

AI WEIWEI'S CIRCLE OF ANIMALS/ZODIAC HEADS: BRONZE WAS COVERED IN ART NEWS, SCULPTURE MAGAZINE, THE EVENING STANDARD (LONDON), THE HINDU (INDIA) AND VICTORIA NEWS (BRITISH COLUMBIA); IT WAS ALSO COVERED BY WBUR, THE BOSTON GLOBE, BOSTON.COM, AND THE ASSOCIATED PRESS, AND PICKED UP IN OVER 100 NEWS OUTLETS INCLUDING YAHOO, THE DENVER POST AND THE CHICAGO TRIBUNE. LOCALLY, THE BAY STATE BANNER CELEBRATED THE ACCESSIBILITY OF THE WORK: "BOSTON LIVES AND BREATHES AROUND THE ARTWORK. CHILDREN PLAY IN THE FOUNTAIN AND DO CARTWHEELS ON THE GRASS. FOOD TRUCKS SERVE HUNGRY TEENS AND FAMILIES BROWSE THE LOCAL FOOD AND CRAFT STANDS AROUND THE SQUARE. ZODIAC TAKES ART FROM BEHIND THE EXPENSIVE TICKET PRICE AND THE VELVET ROPE, AND MAKES IT A PART OF LIFE."

MEHDI GHADYANLOO'S SPACES OF HOPE FURTHERED THE PARK'S REPUTATION AS A DESTINATION FOR CONTEMPORARY PUBLIC ART. IN FALL 2016, THE CONSERVANCY COMMISSIONED THE FIFTH GREENWAY WALL MURAL, THE FIRST ONE ENTIRELY SELF-CURATED WITHOUT A MUSEUM PARTNER. THIS WAS THE U.S. DEBUT OF IRANIAN STAR MURALIST GHADYANLOO AND ATTRACTED IN-DEPTH COVERAGE BY NEWSWEEK, U.S. NEWS & WORLD REPORT, BBC PERSIA, JUXTAPOZ MAGAZINE, AND THE ASSOCIATED PRESS; AP CALLED THE MURAL, "A STUNNING EXPRESSION OF OPTIMISM."

Name of the organization	ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.	Employer identification number	20-1678932
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THE CONSERVANCY CONTINUED ITS ARTS EDUCATION WITH A VOLUNTEER CORPS OF 25 ART AMBASSADORS WHO ENGAGE THE PUBLIC. THE AMBASSADORS WERE STATIONED AT THE AI WEIWEI SCULPTURES IN SHIRTS THAT READ "WHAT'S YOUR ZODIAC SIGN?" THE AMBASSADORS CONTRIBUTED 680 HOURS, ANSWERING QUESTIONS, STAFFING A NEW ART CART, AND OFFERING TOURS OF THE ART EXHIBITS.

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

OUTREACH:

THE OUTREACH DEPARTMENT, 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 2016. GROWTH WAS CATALYZED BY A RENEWED FOCUS ON COMMUNICATING WITH THE PUBLIC WHEN AND WHERE THEY WERE. TWITTER, INSTAGRAM AND FACEBOOK WERE CUMULATIVELY UP BY MORE THAN 47% IN 2016. WEB SEARCHES SEEKING INFORMATION ON CONSERVANCY EVENTS AND ACTIVITIES WERE AT CONTINUED HIGH LEVELS. THE GREENWAY BLOG AND ENEWSLETTER EACH REACHED NEW HIGHS IN INTERACTIONS AND CLICKS.

THE OUTREACH DEPARTMENT SOUGHT, OBTAINED, AND FULFILLED NEARLY A DOZEN

Name of the organization	ROSE FITZGERALD KENNEDY GREENWAY CONSERVANCY, INC.	Employer identification number	20-1678932
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MEDIA PARTNERSHIP AGREEMENTS RELATED TO PUBLIC ART INSTALLATIONS IN 2016. THOSE AGREEMENTS PROVIDED APPROXIMATELY \$267,000 IN IN-KIND ADVERTISING OPPORTUNITIES IN EARNED MEDIA OUTLETS.

THE DEPARTMENT ALSO ENGAGED A PROFESSIONAL BRANDING FIRM WHO PROVIDED THEIR SERVICES PRO BONO ON MARKETING STRATEGY AND DESIGN SERVICES FOR THE IN-KIND PUBLIC ART MEDIA CAMPAIGN. THE DEPARTMENT CONTINUED TO WORK TO TRANSITION THE CONSERVANCY TO THE NEW STANDARDS THROUGH WORK CHANGING OVER STAFF UNIFORMS, PRINTED COLLATERAL, IN-PARK BRANDING, DIGITAL MEDIA, CONSERVANCY VEHICLES, OFFICE SUPPLIES, AND OTHER ELEMENTS TO REFLECT THE NEW BRANDING.

EXPENSES \$ 203,725. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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 11B:

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

Name of the organization ROSE FITZGERALD KENNEDY GREENWAY  
CONSERVANCY, INC.

Employer identification number  
20-1678932

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:

EACH YEAR THE CONSERVANCY BOARD CHAIR REQUESTS ASSISTANCE FROM TWO TO THREE BOARD MEMBERS ON AN AD HOC BASIS TO SOLICIT FEEDBACK, EVALUATE THE EXECUTIVE DIRECTOR'S PERFORMANCE AND REVIEW COMPENSATION. SALARY DATA FOR COMPARATIVE POSITIONS AT OTHER NON-PROFIT ORGANIZATIONS IS USED IN DETERMINING EXECUTIVE COMPENSATION. ANY RECOMMENDED ADJUSTMENTS TO THE EXECUTIVE DIRECTOR'S SALARY ARE PRESENTED AT A FINANCE, AUDIT, AND RISK MANAGEMENT COMMITTEE (FARMC) OR BOARD MEETING FOR APPROVAL. THE MOST RECENT COMPARATIVE COMPENSATION ANALYSIS COINCIDED WITH THE LAST EXECUTIVE DIRECTOR SALARY ADJUSTMENT IN 2015.

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:

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.