

Form 990

Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung  
benefit trust or private foundation)

OMB No. 1545-0317

**2012**Open to Public  
Inspection**A For the 2012 calendar year, or tax year beginning****and ending****B Current  
applicable**

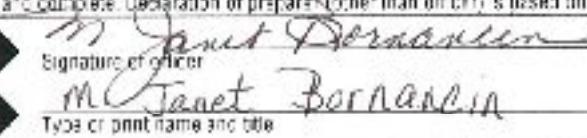
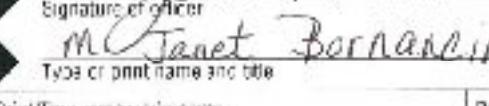
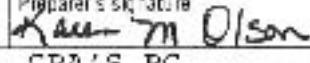
- Address  
change  
 Name  
change  
 Total  
debt  
 Amended  
return  
 Application  
pending

**C Name of organization**TREE RESEARCH AND EDUCATION ENDOWMENT  
FUND**D Doing Business As**Number and street for P.O. box if mail is not delivered to street address:  
552 S WASHINGTON STREETRoom/Suite  
109City, town, or post office, state, and ZIP code  
WAPPORVILLE, IL 60540**E Name and address of principal officer: MTCHEATL, NEAL  
NAME AS C ABOVE****I Tax-exempt status:**  501(c)(3)  501(c)(4)  (insert in)  4947(a)(1) or  527**J Website:** ► [WWW.TREEFUND.ORG](http://WWW.TREEFUND.ORG)**K Form of organization:** Corporation  Trust  Association  Other ►**L Year of formation:** 1975 **M State of legal domicile:** IL**Part I Summary**

<b>Activities &amp; Governance</b> 1 Briefly describe the organization's mission or most significant activities: SUPPORT SUSTAINABLE COMMUNITIES AND ENVIRONMENTAL STEWARDSHIP 2 Check this box ► <input type="checkbox"/> If the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7a Total unrelated business revenue from Part VII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34	<table border="1" style="width: 100%; border-collapse: collapse;"> <tbody> <tr><td>3</td><td>15</td></tr> <tr><td>4</td><td>15</td></tr> <tr><td>5</td><td>7</td></tr> <tr><td>6</td><td>200</td></tr> <tr><td>7a</td><td>0</td></tr> <tr><td>7b</td><td>0</td></tr> <tr><td colspan="2"><hr/></td></tr> <tr><td style="text-align: left;">8 Contributions and grants (Part VII, line 1b)</td><td>913,025</td></tr> <tr><td style="text-align: left;">9 Program service revenue (Part VII, line 2g)</td><td>0</td></tr> <tr><td style="text-align: left;">10 Investment income (Part VII, column (A), lines 3, 4, and 7c)</td><td>14,460</td></tr> <tr><td style="text-align: left;">11 Other revenue (Part VII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td><td>-126,979</td></tr> <tr><td style="text-align: left;">12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td><td>800,506</td></tr> <tr><td colspan="2"><hr/></td></tr> <tr><td style="text-align: left;">13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)</td><td>120,720</td></tr> <tr><td style="text-align: left;">14 Benefits paid to or for members (Part IX, column (A), line 4)</td><td>0</td></tr> <tr><td style="text-align: left;">15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)</td><td>263,126</td></tr> <tr><td style="text-align: left;">16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (B), line 2b)</td><td>260,809</td></tr> <tr><td style="text-align: left;">17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24ct)</td><td>208,164</td></tr> <tr><td style="text-align: left;">18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 2b)</td><td>592,010</td></tr> <tr><td style="text-align: left;">19 Revenue less expenses. Subtract line 18 from line 12</td><td>208,496</td></tr> <tr><td colspan="2"><hr/></td></tr> </tbody> </table>	3	15	4	15	5	7	6	200	7a	0	7b	0	<hr/>		8 Contributions and grants (Part VII, line 1b)	913,025	9 Program service revenue (Part VII, line 2g)	0	10 Investment income (Part VII, column (A), lines 3, 4, and 7c)	14,460	11 Other revenue (Part VII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-126,979	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	800,506	<hr/>		13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	120,720	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	263,126	16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (B), line 2b)	260,809	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24ct)	208,164	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 2b)	592,010	19 Revenue less expenses. Subtract line 18 from line 12	208,496	<hr/>		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr><th>Prior Year</th><th>Current Year</th></tr> </thead> <tbody> <tr><td>772,535</td><td>772,535</td></tr> <tr><td>0</td><td>0</td></tr> <tr><td>19,894</td><td>19,894</td></tr> <tr><td>59,291</td><td>59,291</td></tr> <tr><td>851,720</td><td>851,720</td></tr> <tr><td>165,290</td><td>165,290</td></tr> <tr><td>0</td><td>0</td></tr> <tr><td>283,881</td><td>283,881</td></tr> <tr><td>0</td><td>0</td></tr> <tr><td>201,301</td><td>201,301</td></tr> <tr><td>650,472</td><td>650,472</td></tr> <tr><td>201,248</td><td>201,248</td></tr> </tbody> </table>	Prior Year	Current Year	772,535	772,535	0	0	19,894	19,894	59,291	59,291	851,720	851,720	165,290	165,290	0	0	283,881	283,881	0	0	201,301	201,301	650,472	650,472	201,248	201,248	<b>Beginning of Current Year</b> 1,960,717	<b>End of Year</b> 2,416,423
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**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> <input type="checkbox"/> Signature of officer <input type="checkbox"/> Type or print name and title	 Janet Dornanen <small>Karen Olson</small>	 Karen Olson	<b>Date</b> 5/3/13	<b>PTIN</b> <small>Business</small> P00085441
<b>Paid</b> <b>Preparer Use Only</b>	Print/Type preparer's name <b>KAREN OLSON</b>	Preparer's signature 	<b>Date</b> 5-2-13	<b>PTIN</b> <small>Business</small> P00085441
	Firm's name ► DUGAN & LOPATKA, CPA'S PC		<b>Firm's EIN</b> 36-2886485	
	Firm's address ► 104 E. ROOSEVELT ROAD SUITE 102 WHEATON, IL 60187-5267		<b>Phone</b> ► 630-665-4440	

May the IRS decline this return with the preparer shown above? (see instructions)

Form 990 (2012) 17-10-12 LHA For Paperwork Reduction Act Notice, see the separate Instructions.

Form 990 (2012)

**TREE RESEARCH AND EDUCATION ENDOWMENT  
FUND**

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**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response to any question in this Part III

- 1 Briefly describe the organization's mission:

**SUPPORT SUSTAINABLE COMMUNITIES AND ENVIRONMENTAL STEWARDSHIP BY FUNDING RESEARCH, SCHOLARSHIPS AND EDUCATION PROGRAMS ESSENTIAL TO THE DISCOVERY AND DISSEMINATION OF NEW KNOWLEDGE IN THE FIELDS OF ARBORICULTURE AND URBAN FORESTRY**

- 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** **1 Expenses \$** **295,510.** **including grants \$** **165,290.** **3 Revenue \$** **6,692.1**

**RESEARCH SUPPORT AND EDUCATION - PROVIDE RESEARCH GRANTS TO INDIVIDUALS AND ORGANIZATIONS PERFORMING TREE-RELATED RESEARCH WHICH IS THE TRUST'S PURPOSE.**

**THE EDUCATIONAL PROGRAMS SUPPORT NUMEROUS PUBLIC EDUCATION ENDEAVORS. THE FOUR IDES TREES PROVIDES EDUCATIONAL OPPORTUNITIES THROUGH PRESENTATIONS AND MEDIA INTERVIEWS ON THE IMPORTANCE OF TREES AND THE ROLE OF TREE RESEARCH. PROGRAMS INCLUDE INFORMATION FOR PRE-SCHOOL TO HIGH SCHOOL. PROGRAMS ALSO DESCRIBE THE CAREER OPPORTUNITIES IN ARBORICULTURE. FINALLY, FUNDS MAY BE PROVIDED TO UNDERWRITE STUDENT ATTENDANCE AT THE TCI EXPO.**

4b **Code** **1 Expenses \$** \_\_\_\_\_ **including grants \$** \_\_\_\_\_ **3 Revenue \$** \_\_\_\_\_

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4c **Code** **1 Expenses \$** \_\_\_\_\_ **including grants \$** \_\_\_\_\_ **3 Revenue \$** \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- 4d Other program services (Describe in Schedule O.)

**Code** **1 Expenses \$** **including grants \$**

**3 Revenue \$**

**1**

4e Total program service expenses ► **295,510.**

TREE RESEARCH AND EDUCATION ENDOWMENT  
FUND

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## Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 601(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.	1 X	2 X
2 Is the organization required to complete Schedule B, Schedule of Contributors?	3 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.	4 X	
4 Section 601(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 601(h) election in effect during the tax year? If "Yes," complete Schedule D, Part II.	5 X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 88-19? If "Yes," complete Schedule C, Part III.	6 X	
6 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? If "Yes," complete Schedule D, Part I.	7 X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	8 X	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	9 X	
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account facility; serve as a custodian for amounts not listed in Part X; or provide check cashing, debit management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	10 X	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	11a X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts V, VI, VII, VIII, IX, or X as applicable.	11b X	
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11c X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11d X	
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11e X	
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11f X	
e Did the organization report an amount for other liabilities in Part X, line 26? If "Yes," complete Schedule D, Part X.	12a X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	12b X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII.	13 X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	14a X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	14b X	
14a Did the organization maintain an office, employees, or agents outside of the United States? 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? If "Yes," complete Schedule F, Parts I and IV.	15 X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	16 X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV.	17 X	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 5 and 11a? If "Yes," complete Schedule G, Part I.	18 X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	19 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part V, line 9a? If "Yes," complete Schedule G, Part III.	20a X	
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H. b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b X	

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**TREE RESEARCH AND EDUCATION ENDOWMENT  
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**Part IV. Checklist of Required Schedules (continued)**

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21	X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defuse any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.	25b	X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28a	X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28b	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33	X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV; and Part V, line 1.	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	X

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

**TREE RESEARCH AND EDUCATION ENDOWMENT  
FUND**

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**Part V Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response to any question in this Part V.

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	6
1b	Enter the number of forms W-9G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	
2a	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	2a	7
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction 1e).	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country: ►  See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	4b	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	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?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	<b>Organizations that may receive deductible contributions under section 170(e).</b>	7a	X
a	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?	7b	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c	X
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form B2B2?	7d	
d	If "Yes," indicate the number of Forms B2B2 filed during the year	7e	X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g	
g	If the organization received a contribution or qualified intellectual property, did the organization file Form 8399 as required?	7h	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	8	
B	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	9a	
9	<b>Sponsoring organizations maintaining donor advised funds.</b>	9b	
a	Did the organization make any taxable distributions under section 4965?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	<b>Section 501(c)(7) organizations.</b> Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	<b>Section 501(c)(12) organizations.</b> Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
a	Is the organization licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.Check if Schedule O contains a response to any question in this Part VI.  X**Section A. Governing Body and Management**

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1a	15
1b	Enter the number of voting members included in line 1a, above, who are independent.	1b	15
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X
6	Did the organization have members or stockholders?	6	X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a	X
b	Each committee with authority to act on behalf of the governing body?	8b	X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	9	X

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

	Yes	No	
10a	Did the organization have local chapters, branches, or affiliates?	10a	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	X
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	12b	X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12c	X
c	Do the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	13	X
13	Did the organization have a written whistleblower policy?	14	X
14	Did the organization have a written document retention and destruction policy?	15	X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15a	X
a	The organization's CEO, Executive Director, or top management official	15b	X
b	Other officers or key employees of the organization.	16a	X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		16b	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		
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 ► IL
- 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, physical address, and telephone number of the person who possesses the books and records of the organization: ►  
**M. JANET BORNANCIN — 630-369-8300**  
**552 S WASHINGTON STREET, NAPERVILLE, IL 60540**

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

Check if Schedule O contains a response to any question 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 or 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 100% of officer and 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
(1) MICHAEL MEAL CHAIRMAN	10.00				
(2) RANDY MILLER VICE CHAIRMAN	4.00	X X	0.	0.	0.
(3) JAMES ZWACK CHAIRMAN ELECT	4.00	X X	0.	0.	0.
(4) JOHN EBBENDRICKSEN TREASURER	4.00	X X	0.	0.	0.
(5) DOUG ANDERSON TRUSTEE	1.00	X	0.	0.	0.
(6) DERRICK CARNEY TRUSTEE	1.00	X	0.	0.	0.
(7) HALLIE ROSTER TRUSTEE	1.00	X	0.	0.	0.
(8) ANITA GANSILL TRUSTEE	1.00	X	0.	0.	0.
(9) DOUG SOBER TRUSTEE	1.00	X	0.	0.	0.
(10) MARK BOENIGKMAN TRUSTEE	1.00	X	0.	0.	0.
(11) EDWARD NACIE TRUSTEE	1.00	X	0.	0.	0.
(12) MICHAEL ROBINSON TRUSTEE	1.00	X	0.	0.	0.
(13) WENDY ROBINSON TRUSTEE	1.00	X	0.	0.	0.
(14) BRIAN SAYERS TRUSTEE	1.00	X	0.	0.	0.
(15) MICHAEL WEIDNER TRUSTEE	1.00	X	0.	0.	0.
(16) M. JANET BORKANCIN PRESIDENT/CEO	60.00	X	105,213.	0.	8,884.

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**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 citizen or 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
		President	Vice President	Secretary	Treasurer			
<b>1b</b> Sub-total ►						<b>105,213.</b>	0.	<b>8,884.</b>
c Total from continuation sheets to Part VII, Section A .....	►					0.	0.	0.
d Total (add lines 1b and 1c) .....	►					<b>105,213.</b>	0.	<b>8,884.</b>
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. ►								

		Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		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 \$100,000? 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
NONE		

- 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. ► 0

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**Part VIII | Statement of Revenue**

Check if Schedule C contains a response to any question 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, 513, or 514
<b>Contributions, Grants and Other Similar Amounts</b>					
1 a Federated campaigns	1a				
b Membership dues	1b				
c Fundraising events	1c	372,010.			
d Related organizations	1d				
e Government grants (contributions)	1e				
f All other contributions, gifts, grants, etc. similar amounts not included above	1f	400,525.			
g Contributions not included in line 1c-f	1g	116,078.			
h Total, Add lines 1a-1f	1h	772,535.			
<b>Program Service Revenue</b>		<b>Business Code</b>			
2 a					
b					
c					
d					
e					
f All other program service revenue	2f				
g Total, Add lines 2a-2f	2g				
3 Investment income (including dividends, interest, and other similar amounts)	3	19,894.			19,894.
4 Income from investment of tax-exempt bond proceeds	4				
5 Royalties	5				
6 a Gross rents	6a Real	6a Personal			
b Less: rental expenses					
c Rental income or (loss)					
d Net rental income or (loss)	6d				
7 a Gross amount from sales of assets other than inventory	7a Securities	7a Other			
b Less: cost or other basis and sales expenses					
c Gain or (loss)					
d Net gain or (loss)	7d				
8 a Gross income from fundraising events incl including \$ 372,010. of contributions reported on line 1c; See Part IV, line 18	8a	298,569.			
b Less: direct expenses	8b	246,170.			
c Net income or (loss) from fundraising events	8c	52,399.			52,399.
9 a Gross income from gaming activities. See Part IV, line 19	9a				
b Less: direct expenses	9b				
c Net income or (loss) from gaming activities	9c				
10 a Gross sales of inventory, less returns and allowances	10a				
b Less: cost of goods sold	10b				
c Net income or (loss) from sales of inventory	10c				
<b>Miscellaneous Revenue</b>		<b>Business Code</b>			
11 a MISCELLANEOUS	11a	900099	6,892.	6,892.	
b					
c					
d All other revenue	11d				
e Total, Add lines 11a-11d	11e	6,892.			
12 Total revenue. See instructions	12	851,720.	6,892.	0.	72,293.

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**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 to any question in this Part IX.

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22.	162,790.	162,790.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	2,500.	2,500.		
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	114,097.	22,819.	34,229.	57,049.
6 Compensation not included above to disqualified persons (as defined under section 4958(h)(1)) and persons described in section 403(b)(3)(B).				
7 Other salaries and wages.	132,811.	26,658.	23,381.	82,772.
8 Fension plan accruals and contributions (include section 401(k) and 403(b) employee contributions).	3,000.	825.	945.	1,230.
9 Other employee benefits.	9,053.	2,921.	3,108.	3,824.
10 Payroll taxes.	24,120.	5,762.	4,817.	13,541.
11 Fees for services (non-employees):				
a Management.	5,592.	911.	15.	4,666.
b Legal.	15,343.	2,856.	3,400.	9,087.
c Accounting.				
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion.	11,123.	2,276.		8,847.
13 Office expenses.	65,444.	16,850.	5,617.	42,977.
14 Information technology.				
15 Royalties.				
16 Occupancy.	17,537.	3,594.	3,622.	10,321.
17 Travel.	25,857.	8,509.	4,525.	12,823.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	831.	266.	20.	545.
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	2,174.	369.	500.	1,305.
23 Insurance.	7,141.	1,317.	1,574.	4,250.
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 LIAISONS	20,098.	17,729.		2,369.
b CONTRACT LABOR	14,024.	10,971.	901.	2,952.
c BOARD EXPENSES	7,920.	745.	7,175.	
d MISCELLANEOUS	7,417.	4,842.	324.	2,251.
e All other expenses.				
25 Total functional expenses. Add lines 1 through 24e.	650,472.	295,510.	94,153.	260,809.
26 Joint costs. Complete if line only if the organization incurred in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here ▶ <input type="checkbox"/> I am filing under <a href="#">BOC Form 2012-10-12</a>				

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**Part X Balance Sheet**Check if Schedule O contains a response to any question in this Part X 

		(A) Beginning of year	(B) End of year	
<b>Assets</b>	1 Cash - non-interest-bearing	70,348.	189,274.	
	2 Savings and temporary cash investments	1,705,891.	2,073,154.	
	3 Prebates and grants receivable, net	173,727.	138,013.	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employees and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see Instr.). Complete Part I or Sch L			6
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	8,577.	15,982.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule C	30,120.		
	b Less: accumulated depreciation	30,120.	2,174.	10c 0.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part V, line 11		15	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34)	<b>1,960,717.</b>	<b>2,416,423.</b>		
<b>Liabilities</b>	17 Accounts payable and accrued expenses	35,455.	17,739.	
	18 Grants payable	95,447.	157,533.	
	19 Deferred revenue	2,500.	25,900.	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	<b>26 Total liabilities.</b> Add lines 17 through 25	<b>133,402.</b>	<b>201,172.</b>	
Organizations that follow SFAS 117 (ASC 958), check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
27 Unrestricted net assets	434,330.	27	592,114.	
28 Temporarily restricted net assets	182,258.	28	623,454.	
29 Permanently restricted net assets	910,727.	29	999,683.	
Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.				
30 Capital stock or trust principal, or current funds		30		
31 Paid-in capital surplus, or land, building, or equipment fund		31		
32 Retained earnings, endowment, accumulated income, or other funds		32		
<b>33 Total net assets or fund balances</b>	<b>1,827,315.</b>	<b>33</b>	<b>2,215,251.</b>	
<b>34 Total liabilities and net assets/fund balances</b>	<b>1,960,717.</b>	<b>34</b>	<b>2,416,423.</b>	

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**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response to any question in this Part XI 

1 Total revenue (must equal Part VI, column (A), line 12)	1	851,720.
2 Total expenses (must equal Part IX, column (A), line 25)	2	650,472.
3 Revenue less expenses. Subtract line 2 from line 1	3	201,248.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,827,315.
5 Net unrealized gains (losses) on investments	5	186,688.
6 Donated services and use of facilities	6	
7 Investment expenses	7	
8 Prior period adjustments	8	
9 Other charges 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	2,215,251.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response to any question 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?	2a	X
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		
b Were the organization's financial statements audited by an independent accountant?	2b	X
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a 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		
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?	2c	X
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
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?	3a	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	3b	

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**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. ► See separate instructions.

OMB No. 1545-0047

**2012**Open to Public  
Inspection

Name of the organization	TREE RESEARCH AND EDUCATION ENDOWMENT FUND	Employer identification number
		37-1018692

**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 11, check only one box.)

- A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii).
- A school described in section 170(b)(1)(A)(iii). (Attach Schedule E.)
- A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 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:
- 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.)
- A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- A community trust described in section 170(b)(1)(A)(vii). (Complete Part II.)
- An organization that normally receives: (i) more than 33 1/3% of its support from contributors, membership fees, and gross receipts from activities related to its exempt functions subject to certain exceptions; and (ii) 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.)
- An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 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)(8). Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a  Type I      b  Type II      c  Type I & Functionally integrated      d  Type II & Non-functionally integrated

e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box.
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes  No 
  - i) A person who directly or indirectly controls, either alone or together with persons described in ii) and iii) below, the governing body of the supported organization?
  - ii) A family member of a person described in i) above?
  - iii) A 50% controlled entity of a person described in i) or ii) above?
- h Provide the following information about the supported organization(s).

11gi)	Yes <input type="checkbox"/> No <input type="checkbox"/>
11gii)	Yes <input type="checkbox"/> No <input type="checkbox"/>
11giii)	Yes <input type="checkbox"/> No <input type="checkbox"/>

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-8 above or TFC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?	(v) Did you initially contribute to the organization in col. (ii) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?	(vii) Amount of monetary support
				Yes	No		
Total							

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

Schedule A (Form 990 or 990-EZ) 2012

## TREE RESEARCH AND EDUCATION ENDOWMENT

Schedule A (Form 990 or 990-EZ) 2012 FUND

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**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 II. 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Grants, contributions, and membership fees received. (Do not include any "unusual grants.")	759,557.	503,532.	763,135.	913,025.	772,535.	3,711,784.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	759,557.	503,532.	763,135.	913,025.	772,535.	3,711,784.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 1, column (f)						386,008.
6 Public support. Subtract line 5 from line 4						3,325,776.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	759,557.	503,532.	763,135.	913,025.	772,535.	3,711,784.
B Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on	30,564.	7,962.	13,768.	14,460.	19,894.	86,668.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part V)						
11 Total support. Add lines 7 through 10	8,403.		5,926.	6,892.	21,221.	38,611.
12 Gross receipts from related activities, etc. (See instructions)				12		939,818.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						

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

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	87.05	%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	85.65	%
16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			
► X			
b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 16 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			
► —			
17a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 18a, or 16b, and line 14 is 10% or more and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			
► —			
b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 18a, 18b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			
► —			
18 Private foundation. If the organization did not check a box on line 13, 18a, 18b, 17a, or 17b, check this box and see instructions			
► —			

Schedule A (Form 990 or 990-EZ) 2012

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

(Complete only if you checked the box on line 2 of Part I or if the organization failed to qualify under Part I. 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total. Add lines 1 through 5</b>						
<b>7a 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 amounts on line 10 for the year</b>						
<b>c Add lines 7a and 7b</b>						
<b>B Public support (Subsections A and K)</b>						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (from section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. Add lines 9, 10a, 10b, 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**

15 Public support percentage for 2012 (line 8, column (f), divided by line 13, column (f))	<b>15</b>	%
--	-----------	---

16 Public support percentage from 2011 Schedule A, Part III, line 15	<b>16</b>	%
--	-----------	---

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

17 Investment income percentage for 2012 (line 10c, column (f), divided by line 13, column (f))	<b>17</b>	%
---	-----------	---

18 Investment income percentage from 2011 Schedule A, Part II, line 17	<b>18</b>	%
--	-----------	---

19a 33 1/3% support tests - 2012. 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 ►	<input type="checkbox"/>
---	--------------------------

19b 33 1/3% support tests - 2011. 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 ►	<input type="checkbox"/>
---	--------------------------

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►	<input type="checkbox"/>
---	--------------------------

**Schedule B**[Form 990, 990-EZ,  
or 990-PF]Document of the Treasury  
Internal Revenue Service**Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1542-0247

**2012**

Name of the organization

TREE RESEARCH AND EDUCATION ENDOWMENT  
FUND

Employer identification number

37-1018692

Organization type (check one):

Filers of:

Sections:

Form 990 or 990-EZ

 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See Instructions.

**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

- For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% payout test of the regulations under sections 508(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part V II, line 1b, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ► \$ \_\_\_\_\_

**Caution:** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part V, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

1H4 For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

TREE RESEARCH AND EDUCATION ENDOWMENT  
FUND

Employer identification number

37-1018692

**Part I** Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ASPLUNDH TREE EXPERT CO. 708 BLAIR MILL ROAD WILLOW GROVE, PA 19090	\$ 40,550.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	BANDIT INDUSTRIES, INC. 6750 W MILLBROOK ROAD REMUS, MI 49340	\$ 18,560.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	CANADIAN TREE FUND 144 FRONT ST W #700 TORONTO, ONTARIO, CANADA	\$ 23,970.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	INTERNATIONAL SOCIETY OF ARBORICULTURE P.O. BOX 3129 CHAMPAIGN, IL 61826	\$ 25,331.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	ISA OHIO CHAPTER P O BOX 155 HILLIARD, OH 43026	\$ 44,134.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	KASK AMERICA INC. 7281 W WINDS BLVD CONCORD, NC 28027	\$ 25,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/>
			(Complete Part II if there is a noncash contribution.)

Name of organization

TREE RESEARCH AND EDUCATION ENDOWMENT  
FUND

Employer identification number

37-1018692

**Part II Contributors** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	STIHL, INC.  P O BOX 2015  VIRGINIA BEACH, VA 23450	\$ 41,695.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8	WISCONSIN ARBORISTS ASSOCIATION  1700 S JOHNSON ROAD  NEW BERLIN, WI 53146	\$ 26,820.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9	ACRT, INC.  1333 HOME AVE  AKRON, OH 44310	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
10	BARTLETT TREE EXPERTS  1290 E MAIN STREET  STAMFORD, CT 06902	\$ 33,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
11	STUART AND SHIRLEY CROW  6310 MERCEDES AVE  DALLAS, TX 75214	\$ 31,955.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
12	DAVEY TREE EXPERT COMPANY  1500 N MANTUA STREET  KENT, OH 44240	\$ 24,590.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

TREE RESEARCH AND EDUCATION ENDOWMENT  
FUND

Employer identification number

37-1018692

**Part I: Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	ABORJET INC 99 BLUEBERRY HILL ROAD WOBURN, MA 01801	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution.)

Name of organization

TREE RESEARCH AND EDUCATION ENDOWMENT  
FUND

Employer identification number

37-1018692

**Part II Noncash Property** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	HELMETS	\$ 25,000.	01/12/12

Name of organization

TREE RESEARCH AND EDUCATION ENDOWMENT  
FUND

Employer identification number

37-1018692

**Part III:** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part I, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Transfers from previous years) ► S  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			(e) Transfer of gift
			Transferee's name, address, and ZIP + 4
			Relationship of transferor to transferee
			(e) Transfer of gift
			Transferee's name, address, and ZIP + 4
			Relationship of transferor to transferee
			(e) Transfer of gift
			Transferee's name, address, and ZIP + 4
			Relationship of transferor to transferee

**SCHEDULE D**

(Form 990)

Department of the Treasury  
Internal Revenue Service**Supplemental Financial Statements**

- Complete if the organization answered 'Yes' to Form 990, Part IV, line 8, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.  
 ► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0347

**2012**Open to Public  
InspectionName of the organization **TRRE RESEARCH AND EDUCATION ENDOWMENT FUND**Employer Identification number  
**37-1018692****Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Part II Conservation Easements.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)	
<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 6/30/06, and not on a historic structure listed in the National Register	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►	
4 Number of states where property subject to conservation easement is located ►	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►	
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(iii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XI, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered 'Yes' to Form 990, Part IV, line 9.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.	► \$ _____
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:	
(i) Revenues included in Form 990, Part VIII, line 1	► \$ _____
(ii) Assets included in Form 990, Part X	► \$ _____
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
a Revenues included in Form 990, Part VIII, line 1	► \$ _____
b Assets included in Form 990, Part X	► \$ _____

TREE RESEARCH AND EDUCATION ENDOWMENT  
FUND

Schedule D (Form 990) 2012

37-1018692 Page 2

**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.  
 a. 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" to 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
1c
1d
1e
1f

- 2a. Did the organization include an amount on Form 990, Part X, line 21?  Yes  No  
 b. If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.

**Part V. Endowment Funds.** Complete if the organization answered "Yes" to 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	993,509.	1,046,297.	942,339.	861,066.	913,323.
b. Contributions	57,553.	26,522.	13,616.	51,587.	187,306.
c. Net investment earnings, gains, and losses	194,957.	68,410.	142,501.	91,910.	-38,063.
d. Grants or scholarships	14,035.	6,300.	55,159.	32,352.	7,500.
e. Other expenditures for facilities and programs				38,000.	
f. Administrative expenses					
g. End of year balance	1,155,983.	998,509.	1,046,297.	942,339.	861,066.

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

- a. Board designated or quasi-endowment ► 0.00 %  
 b. Permanent endowment ► 86.00 %  
 c. Temporarily restricted endowment ► 14.00 %

The percentages in 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:

 Yes  No

- b. Unrelated organizations  
 c. Related organizations

 3a(i)  X

- b. If "Yes" to 3a(i), are the related organizations listed as required on Schedule R?

 3a(ii)  X

4. Describe in Part XI (the intended uses of the organization's endowment funds).

 3b **Part VI. Land, Buildings, and Equipment.** 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				
d. Equipment				
e. Other		30,120.	30,120.	0.

Total, Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ► 0.

Schedule D (Form 990) 2012

**TREE RESEARCH AND EDUCATION ENDOWMENT  
FUND**

Schedule D (Form 990) 2012

37-1018692 Page 3

**Part VII Investments - Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (not more than one 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)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col. (b)) must equal Form 990, Part X, col. (B), line 12.] ►		

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col. (b)) must equal Form 990, Part X, col. (B), line 13.] ►		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b)) must equal Form 990, Part X, col. (B), line 15.] ►	

**Part X Other Liabilities.** 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)	
(10)	
(11)	
Total. (Column (b)) must equal Form 990, Part X, col. (B), line 25.] ►	

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

TREE RESEARCH AND EDUCATION ENDOWMENT  
FUND

37-1010692 Page 4

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

1 Total revenue, gains, and other support per audited financial statements	1	1,344,963.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments	2a	186,688.
b Donated services and use of facilities	2b	121,475.
c Recoveries of prior-year grants	2c	
d Other (Describe in Part XII)	2d	185,080.
e Add lines 2a through 2d	2e	493,243.
3 Subtract line 2e from line 1	3	851,720.
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 XII)	4b	
c Add lines 4a and 4b	4c	0.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	851,720.

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

1 Total expenses and losses per audited financial statements	1	957,027.
2 Amounts included on line 1 but not on Form 990, Part X, line 25:		
a Donated services and use of facilities	2a	121,475.
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XII)	2d	185,080.
e Add lines 2a through 2d	2e	306,555.
3 Subtract line 2e from line 1	3	650,472.
4 Amounts included on Form 990, Part X, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XII)	4b	
c Add lines 4a and 4b	4c	0.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	650,472.

**Part XIII Supplemental Information**

Complete this part to provide the descriptions required for Part I, 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: FUNDING OF ARBORICULTURE OR RELATED CURRICULA IN HIGH****SCHOOL AND COLLEGE LEVEL PROGRAMS AS WELL AS PROMOTION OF THE****ARBORICULTURE PROFESSION AT ALL EDUCATIONAL LEVELS.****PART X, LINE 2: THE FUND FILES INCOME TAX RETURNS IN THE U.S. FEDERAL****JURISDICTION AND ILLINOIS. WITH FEW EXCEPTIONS, THE FUND IS NO LONGER****SUBJECT TO U.S. FEDERAL, STATE AND LOCAL, OR NON-U.S. INCOME TAX****EXAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE 2009. THE FUND DOES NOT**

Schedule D (Form 990) 2012

280024  
5-0012

TREE RESEARCH AND EDUCATION ENDOWMENT  
FUND

Schedule D (Form 990) 2012

37-1018692 Page 5

**Part XIII | Supplemental Information (continued)**

EXPECT A MATERIAL NET CHANGE IN UNRECOGNIZED TAX BENEFITS IN THE NEXT  
TWELVE MONTHS.

**PART XI, LINE 2D - OTHER ADJUSTMENTS:**

DIRECT EXPENSES OF SPECIAL EVENTS 185,080.

**PART XII, LINE 2D - OTHER ADJUSTMENTS:**

DIRECT EXPENSES OF SPECIAL EVENTS 185,080.

**SCHEDULE G**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding  
Fundraising or Gaming Activities**

OMB No. 1545-0047

**2012**

Open To Public  
Inspection

Name of the organization    **TREE RESEARCH AND EDUCATION ENDOWMENT FUND**    Employer identification number    **37-1018692**

**Part I Fundraising Activities.** Complete if the organization answered 'Yes' to 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 <input type="checkbox"/> Mail solicitations               | e <input type="checkbox"/> Solicitation of non-government grants |
| b <input type="checkbox"/> Internet and email solicitations | f <input type="checkbox"/> Solicitation of government grants     |
| c <input type="checkbox"/> Phone solicitations              | g <input type="checkbox"/> Special fundraising events            |
| d <input type="checkbox"/> In-person solicitations          |  |

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 ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$1,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have authority to conduct such activities?		(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			

Total ►

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.

## TREE RESEARCH AND EDUCATION ENDOWMENT

Schedule G (Form 990 or 990-EZ) 2012 FUND

37-1018692 Page 2

**Part II Fundraising Events.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 1b, 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 \$1,000.

	(a) Event #1 TOUR DES TREES (event type)	(b) Event #2 AUCTION (event type)	(c) Other events NONE total number	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts .....	591,671.	78,908.	670,579.
	2 Less: Contributions .....	360,410.	11,600.	372,010.
	3 Gross income (line 1 minus line 2) .....	231,261.	67,308.	298,569.
	4 Cash prizes .....			
	5 Noncash prizes .....		61,090.	61,090.
Direct Expenses	6 Rent/facility costs .....	66,246.		66,246.
	7 Food and beverages .....	20,367.		20,367.
	8 Entertainment .....			
	9 Other direct expenses .....	92,348.	6,119.	98,467.
	10 Direct expense summary. Add lines 4 through 9 in column (c) .....			► 246,170.
	11 Net income summary. Combine line 3, column (d), and line 10 .....			► 52,399.

**Part III Gaming.** Complete if the organization answered 'Yes' to Form 990, Part V, line 1b, 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 .....	Yes _____ % No _____	Yes _____ % No _____	Yes _____ % No _____
	7 Direct expense summary. Add lines 2 through 5 in column (c) .....			► ( )
	8 Net gaming income summary. Combine line 1, column (d), and line 7 .....			► ( )

9 Enter the state(s) in which the organization operates gaming activities:

- a Is the organization licensed to operate 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:

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## TREE RESEARCH AND EDUCATION ENDOWMENT

Schedule G (Form 990 or 990-EZ) 2012 FUND

37-1019692 Page 3

- 11 Does the organization operate gaming activities with non-members?  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 operated in:
- |                                     |     |   |
|-------------------------------------|-----|---|
| a The organization's facility ..... | 13a | % |
| b An outside facility .....         | 13b | % |
- 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.** Complete this part to provide the explanations required by Part I, line 2b, columns (ii) and (iv), and Part III, lines 9, 9b, 10b, 15b, 16a, 18, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

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**SCHEDULE I**  
(Form 990)Department of the Treasury  
Internal Revenue Service

GPO: 2015-2017

**2012**Open to Public  
Inspection

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

► Attach to Form 990.

Name of the organization: **TREE RESEARCH AND EDUCATION ENDOWMENT FUND**Employer identification number:  
**37-1019692****Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grants funds in the United States.

**Part II Grants and Other Assistance to Governments and Organizations in the United States**

Recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of grantor or government

(b) EIN

(c) IHC section  
if applicable

(d) Purpose of grant

(e) Non-cash  
assistance(f) Amount of  
non-cash  
assistance(g) Method of  
valuation (book,  
FMV, appraisal,  
other)(h) Purpose of grant  
or non-cash  
assistance(i) Non-cash  
assistance(j) Non-cash  
assistance(k) Non-cash  
assistance(l) Non-cash  
assistance(m) Non-cash  
assistance(n) Non-cash  
assistance(o) Non-cash  
assistance(p) Non-cash  
assistance(q) Non-cash  
assistance(r) Non-cash  
assistance(s) Non-cash  
assistance(t) Non-cash  
assistance(u) Non-cash  
assistance(v) Non-cash  
assistance(w) Non-cash  
assistance(x) Non-cash  
assistance(y) Non-cash  
assistance(z) Non-cash  
assistance(aa) Non-cash  
assistance(bb) Non-cash  
assistance(cc) Non-cash  
assistance(dd) Non-cash  
assistance(ee) Non-cash  
assistance(ff) Non-cash  
assistance(gg) Non-cash  
assistance(hh) Non-cash  
assistance(ii) Non-cash  
assistance(jj) Non-cash  
assistance

- 2 Enter total number of section 501(c)(3) organizations listed in the line 1 table
- 3 Enter total number of other organizations listed in the line 1 table
- 4A For Paperwork Reduction Act Notice, see the Instructions for Form 990.

TREE RESEARCH AND EDUCATION ENDOWMENT  
FUND

Schedule I Form 903 (2012)

Page 2

**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 903, Part IV, line 22.  
Part III can be used if additional space is needed.

(b) Type of grant, or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
HYLAND JOHNS GRANTS - SUPPORTS MULTI-YEAR RESEARCH PROJECTS WITH SPECIAL EMPHASIS ON ROOT AND SOIL MANAGEMENT, PLANT-BIOTIC AND ESTABLISHMENT, PLANT HEALTH CARE, RISK ASSESSMENT, WORKER SAFETY AND JUNK WILDLIFE GRANTS PROVIDE SEED MONEY OR PARTIAL SUPPORT FOR RESEARCH AND TECHNOLOGY TRANSFER PROJECTS THAT BENEFIT THE EVERYDAY WORK OF ARBORISTS AND URBAN FORESTERS	1	24,622.	0.		
ROBERT FELIX MEMORIAL SCHOLARSHIPS - FOR COLLEGE STUDENTS STUDYING ARBORICULTURE, URBAN FORESTRY OR A RELATED FIELD WITH THE INTENTION OF ENTERING THE PROFESSION OF ARBORICULTURE	3	43,284.	0.		
JOCEN WRIGHT MEMORIAL SCHOLARSHIP - FOR HIGH SCHOOL SENIORS AND FUTURE COLLEGE STUDENTS PURSUING CAREERS RELATED TO ARBORICULTURE	2	6,000.	0.		
UTILITY ARBOR INSTITUTE GRANT - SUPPORTS RESEARCH INTO ISSUES RELATED TO UTILITY ARBORICULTURE AND RIGHT OF WAY MANAGEMENT	1	2,000.	0.		

**Part IV Supplemental Information** Complete this part to provide the information required in Part II, line 2, Part I, column 1, and any other additional information.

**SCHEDULE I, PART I, LINE 2: GRANTEES ARE EXPECTED TO PROVIDE PROGRESS REPORTS AS REQUESTED BY TREE FUND AND STATED IN THE GRANT AGREEMENT.**

GRANTEES MUST REPORT USE OF FUNDS, WHETHER OBJECTIVES OF PROPOSAL WERE MET AND THE IMPACT THE RESEARCH HAS HAD ON THE FIELD OF ARBORICULTURE OR URBAN FORESTRY. ALSO REQUIRED IS A FINANCIAL REPORT BASED UPON THE ORIGINAL BUDGET SUBMITTED.

**PART III, COLUMN (A):**

(A) TYPE OF GRANT OR ASSISTANCE: HYLAND JOHNS GRANTS - SUPPORTS

31  
SICK PART IV FOR COLUMN (A) DESCRIPTIONS  
972 D 1 8/12

**Schedule Form 4501**

**Part III Continuation of Grants and Other Assistance to Individuals in the United States [See section 11 (2) (omitted)]**

(a) Type of grant or assistance	[b] Number of recipients	[c] Amount of cash grant	[d] Amount of non-cash assistance	[e] Method of valuation (book, fair, appraised, other)	(f) Description of transaction
CFCIO CHAPTER ISA EDUCATION GRANT FOCUS ON INCREASING U.S. ARBORICULTURE OR URBAN FORESTRY KNOWLEDGE VIA FUNDING AGRICULTURAL EDUCATION PROGRAMS OR PROJECTS WITHIN THE STATE OF OHIO.	1.	5,000.	C.		
CLACE KIRKEL - TO PROVIDE FUNDING FOR ARBORICULTURE RESEARCH PROJECTS ALL OVER THE WORLD	2.	16,264.	C.		
ECONOMICS GRANTS SPONSORSHIPS	2.	17,500.	C.		
ARBORICULTURE FOUNDATION GRANT - SUPPORTS THE DEVELOPMENT OF ARBORICULTURE EDUCATION PROGRAMME AND MATERIALS FOR K-12 STUDENTS	3.	7,500.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	4.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	5.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	6.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	7.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	8.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	9.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	10.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	11.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	12.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	13.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	14.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	15.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	16.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	17.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	18.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	19.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	20.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	21.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	22.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	23.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	24.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	25.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	26.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	27.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	28.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	29.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	30.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	31.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	32.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	33.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	34.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	35.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	36.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	37.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	38.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	39.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	40.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	41.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	42.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	43.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	44.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	45.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	46.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	47.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	48.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	49.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	50.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	51.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	52.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	53.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	54.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	55.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	56.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	57.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	58.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	59.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	60.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	61.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	62.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	63.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	64.	10,000.	C.		
FEDERAL GRANT FOR ARBORICULTURE EDUCATION	65.	10,000.	C.		

## TREE RESEARCH AND EDUCATION ENDOWMENT

Schedule I (Form 990)

FUND

37-1018692 Page 2

**Part IV Supplemental Information**

MULTI-YEAR RESEARCH PROJECTS WITH SPECIAL EMPHASIS ON ROOT AND SOIL MANAGEMENT, PLANTING AND ESTABLISHMENT, PLANT HEALTH CARE, RISK ASSESSMENT, WORKER SAFETY AND URBAN FORESTRY

(A) TYPE OF GRANT OR ASSISTANCE: OHIO CHAPTER ISA EDUCATION GRANT - FOCUS ON INCREASING ARBORICULTURE OR URBAN FORESTRY KNOWLEDGE VIA FUNDING ARBORICULTURAL EDUCATION PROGRAMS OR PROJECTS WITHIN THE STATE OF OHIO. THE GRANT IS OPEN TO 503(C)(3) ORGANIZATIONS INCLUDING, BUT NOT LIMITED TO, ARBORETUMS, PUBLIC GARDENS, HIGH SCHOOLS, VOCATIONAL SCHOOLS, 2-YEAR COLLEGES AND 4-YEAR COLLEGES, WHICH SERVE A TARGET POPULATION OF 16 YEARS OF AGE OR OLDER

**SCHEDULE M**  
**(Form 990)**Department of the Treasury  
Internal Revenue Service**Noncash Contributions**

OMB Form 1045-COMB

**2012**Open to Public  
Inspection

Name of the organization **TREE RESEARCH AND EDUCATION ENDOWMENT FUND** Employer identification number **37-1018692**

**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	1	5,823.	FAIR MARKET VALUE
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 ► (AUCTION ITEMS)	X	181	61,090.	FAIR MARKET VALUE
26 Other ► (TOUR ITEMS)	X	9	49,165.	FAIR MARKET VALUE
27 Other ► ( )				
28 Other ► ( )				

29 Number of Form 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 recorded in Part I, lines 1-24 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		X

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31	X
----	---

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a	X
-----	---

b If "Yes," describe in Part II.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) (2012)

**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.

OMB No. 1545-0041

**2012**

Open to Public  
Inspection

Name of the organization

TREE RESEARCH AND EDUCATION ENDOWMENT  
FUND

Employer identification number  
37-1018692

FORM 990, PART VI, SECTION B, LINE 11: THE EXECUTIVE DIRECTOR RECEIVES A COPY OF FORM 990 AND DISTRIBUTES ELECTRONICALLY TO THE TRUSTEES FOR THEIR REVIEW.

FORM 990, PART VI, SECTION B, LINE 12C: THE EXECUTIVE DIRECTOR REMINDS TRUSTEES ANNUALLY. CONFLICT OF INTEREST FORMS ARE COMPLETED ANNUALLY. IF THERE IS ANY POTENTIAL OR PERCEPTION OF A CONFLICT OF INTEREST IT IS IDENTIFIED BY THE TRUSTEE AND THE TRUSTEE LEAVES THE ROOM DURING DISCUSSION AND VOTE.

FORM 990, PART VI, SECTION B, LINE 15A: EXECUTIVE COMMITTEE USES THE ASSOCIATION OF SMALL FOUNDATIONS MANAGEMENT AND COMPENSATION SURVEY TO COMPARE WITH. ALL TRUSTEES EVALUATE EXECUTIVE DIRECTOR BY STANDARD FORM. THIS INFORMATION IS SUMMARIZED BY THE PRESIDENT AND PRESENTED TO THE EXECUTIVE COMMITTEE FOR DISCUSSION AND BENCHMARKED AGAINST OTHER EXECUTIVE DIRECTOR SALARIES IN THE REGION OF SIMILAR SIZE TO DETERMINE THE EXECUTIVE DIRECTOR'S COMPENSATION.

FORM 990, PART VI, SECTION C, LINE 19: UPON WRITTEN REQUEST

FORM 990, PART XII, LINE 2C:

COMMITTEE ASSUMES RESPONSIBILITY FOR OVERSIGHT OF AUDIT.  
THE PROCESS HAS NOT CHANGED FROM THE PREVIOUS YEAR.