	•	00	Returr	EXTE of O	ENDED TO rganiza	NOVEMB	ER 15 mpt l	, 2023 From I	ncome Tax	ŀ	OMB No. 1545-0047		
Form	¹ y	90							ept private foundation	ons)	2022		
		of the Treasury nue Service			cial security n s.gov/Form99			-	•		Open to Public Inspection		
			ar year, or tax yea		-		-	ending			mopeouon		
B CI	neck if plicab Addre	le: C Name of TREE END	organization RESEARCH	D Employer identi	ficatio	on number							
]chang Name]chang		usiness as						37-1018692				
	Initial return Final return	Number	and street (or P.0. PARK STRE		is not delivered t	o street address		Room/suite 109	E Telephone numb 630-369	er	0 0		
	termir ated Amen	City or to	own, state or provir RVILLE,II			foreign postal	code		G Gross receipts \$	roturo	831,535.		
]return]Applie]tion		H(a) Is this a group for subordinate										
	pendi		AS C ABOVE						H(b) Are all subordinates		···		
I Ta	ax-ex	empt status:] 501(c) () (in	sert no.) 🔲 4	4947(a)(1)	or 🗌 527	If "No," attach	a list.	See instructions		
	/ebsi	_	TREEFUND						H(c) Group exempt				
	orm o rt I	f organization: Summary	Corporation	X Trust	Associatio	on Other		L Year	of formation: 1975	M Sta	ate of legal domicile: IL		
	1	Briefly describe	e the organization's IRONMENTAI				SUPP	ORT SU	STAINABLE O	COMM	IUNITIES		
Governance	2	Check this box					s or dispos	sed of more	than 25% of its net a	seate			
veri	3		ing members of the	-						1	12		
ဗီ	4		ependent voting m	•	• • •	. ,				L I	12		
Activities &	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)									5			
iviti	6	 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, Part I, line 11 								12			
Act										0.			
	a	Net unrelated	DUSINESS TAXADIE IN	icome tror	n Form 990-1,	Part I, line 11		<u></u>			Current Year		
	8	Contributions a	and grants (Part VI	II. line 1h)					718,818	•	654,016.		
Revenue	9		ce revenue (Part VI						6,841		12,659.		
eve	10	Investment inc	come (Part VIII, colu	umn (A), lir	nes 3, 4, and 7	d)			0		177.		
۳	11		(Part VIII, column (0		1,335.		
	12		- add lines 8 throug				line 12)		725,659		668,187.		
	13		nilar amounts paid							_	<u>431,705.</u> 0.		
		<u>.</u>	o or for members (compensation, err		() (D)) (E 4 0)		287,107		308,943.		
Expenses	16a	Professional fu	undraising fees (Pa	rt IX. colur	nn (A). line 11e	e)	100 0 10)		0		0.		
per	b	Total fundraisi	ng expenses (Part	IX, columr	n (D), line 25)		100,8	63.					
۵		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 100,863. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)							136,199		162,032.		
	18	Total expenses	tal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)						642,800		902,680.		
	19	Revenue less e		82,859	_	-234,493.							
ts or	00	Tabala (7							ginning of Current Year	_	End of Year		
Asse Bala	20 21	Total assets (P							<u>6,282,789</u> 360,635		<u>5,360,565</u> 391,874.		
Net Assets or Fund Balances	21 22		(Part X, line 26) fund balances. Sub		21 from line 20				5,922,154		4,968,691.		
Pa	rt II	Signature							,,	1	,,		

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.

Т

Sign	Signature of off	icer		Date			
Here	PAUL PU	TMAN, PRESIDENT &	CEO				
	Type or print na	ime and title					
	Print/Type prep	arer's name	Preparer's signature	Date	Check	PTIN	
Paid	IZABELA	POLUDNIAK	IZABELA POLUDNIAK	09/26	/23 self-employed	P01959192	
Preparer	Firm's name	SASSETTI LLC			Firm's EIN 36-	2239746	
Use Only	Firm's address	2107 SWIFT DRIVE,	SUITE 210				
	Phone no. (708) 386-1433					
May the IF	RS discuss this	return with the preparer shown abo	ove? See instructions			X Yes No	
	IIIA F	an Damamurante Daduatian Aat Nati	a and the compute instructions			Gauss 000 (0000)	

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.

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Form 990 (2022)

Form	TREE RESEARCH AND EDUCATION ENDOWMENT 990 (2022) FUND 37-1018692 Page 2
Pa	t III Statement of Program Service Accomplishments
_	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: SUPPORT SCIENTIFIC 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?
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
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
4a	revenue, if any, for each program service reported. (code:)(Expenses \$ 583,856. including grants of \$ 401,705.) (Revenue \$ 12,659.) TREE FUND PROVIDES DIRECTED AND COMPETITIVE GRANTS TO SCHOLARS AND RESEARCHERS TO CONDUCT PRIMARY AND APPLIED RESEARCH TO INCREASE PRACTICAL KNOWLEDGE AND PROMOTE BEST TECHNIQUES IN ARBORICULTURE, URBAN FORESTRY, AND RELATED PROFESSIONAL FIELDS. IN FY 2022, TREE FUND ISSUED \$161,514 IN NEW RESEARCH GRANT FUNDING TO 7 RECIPIENTS IN 7 GRANT LINES WHILE CONTINUING TO MANAGE 24 MULTI-YEAR GRANTS FROM PRIOR FISCAL YEARS.
4b	(Code:)(Expenses \$5,000. including grants of \$5,000.) (Revenue \$) TREE FUND PROVIDES GRANTS TO CHARITABLE ORGANIZATIONS AND IMPLEMENTS PROGRAMS DESIGNED TO INCREASE AWARENESS OF ARBORICULTURE AND URBAN FORESTRY AMONG THE GENERAL PUBLIC, THEREBY ENCOURAGING PROPERTY OWNERS, BUSINESSES, AND MUNICIPALITIES TO MANAGE URBAN AND COMMUNITY FORESTS IN WAYS THAT PROMOTE INDIVIDUAL, CIVIC AND ENVIRONMENTAL HEALTH. TREE FUND ISSUED 1 COMMUNITY ENGAGEMENT GRANT VALUED AT \$5,000, WHILE OFFERING 6 WEBINARS WITH APPROXIMATELY 3,150 ATTENDEES, ADVERTISING WIDELY AROUND THE COUNTRY AND ISSUING A MONTHLY NEWSLETTER TARGETED TO LAY READERS.
4c	(Code:)(Expenses \$25,000. including grants of \$25,000.) (Revenue \$) TREE FUND PROVIDES SCHOLARSHIPS TO ENCOURAGE COLLEGE STUDENTS TO PURSUE CAREERS IN ARBORICULTURE AND URBAN FORESTRY. IN 2022, TREE FUND ISSUED 5 SCHOLARSHIPS VALUED AT A TOTAL OF \$25,000.
4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 613,856.
232002	Form 990 (2022)

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Part IV Checklist of Required Schedules

Form 990 (2022)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			37
_	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		v
~	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	6		х
7	provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i> Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		<u> </u>
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
0	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
Ŭ	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	x	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		x	
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	<u> </u>	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12a	x	
h	Schedule D, Parts XI and XII	12a		
U		12b		х
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	x	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	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 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		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	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		<u>X</u>
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		x	
00000	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		2022)
232000	3 12-13-22	LOUU	550 (2022)

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	990 (2022) FUND 37-101	3692	Р	age 4
Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? 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 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete			
	Schedule L. Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			1
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) 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 the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? 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
	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 on Schedule O for Part VI, lines 11b and 19?			
		38	х	
Par				
-	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	5		
b		ז		
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
_ `	(gambling) winnings to prize winners?	1c	х	
232004	12-13-22	Form	990	(2022)
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Form 990 (2022)

Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)						
		ſ		Yes	No		
	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	5					
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	[3a		X		
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b				
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		_		77		
	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	—					
Fa	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		Ea		x		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	r	5a 5b		X		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		50 50				
			50				
ou	any contributions that were not tax deductible as charitable contributions?		6a		x		
b	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts						
	were not tax deductible?		6b				
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the partly for goods and ser	ayor?	7a	Х			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	[7b	Х			
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required						
	to file Form 8282?		7c		X		
d	If "Yes," indicate the number of Forms 8282 filed during the year7d						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X X		
f							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required	?	7g		<u> </u>		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098	-C?	7h				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		8				
	sponsoring organization have excess business holdings at any time during the year?						
	Sponsoring organizations maintaining donor advised funds.		9a				
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b				
	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a						
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	+					
	Section 501(c)(12) organizations. Enter:						
	Gross income from members or shareholders 11a						
	Gross income from other sources. (Do not net amounts due or paid to other sources against						
	amounts due or received from them.) 11b						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a				
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state?		13a				
	Note: See the instructions for additional information the organization must report on Schedule O.						
b	Enter the amount of reserves the organization is required to maintain by the states in which the						
	organization is licensed to issue qualified health plans 13b						
	Enter the amount of reserves on hand						
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		14b				
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or		45		v		
	excess parachute payment(s) during the year?		15		X		
16	If "Yes," see the instructions and file Form 4720, Schedule N.		16		x		
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		16				
	If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities						
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17				
	If "Yes," complete Form 6069.						
232005	5 12-13-22		Form	990	(2022)		

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Form 990 (2022)

37-1018692 Page 6 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 on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI						X		
Sec	tion A. Governing Body and Management								
			-	_		Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		12					
	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 on Schedule O.								
b	Enter the number of voting members included on line 1a, above, who are independent	1b		12					
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		Х		
3	Did the organization delegate control over management duties customarily performed by or under the	e direc	t supervision						
	of officers, directors, trustees, or key employees to a management company or other person?			L	3		Х		
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?	[4		Х		
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		[5		Х		
6	6 Did the organization have members or stockholders?								
7a	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?								
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockho	lders, or						
	persons other than the governing body?			[7b		X		
8									
а	The governing body?			[8a	Х			
b	Each committee with authority to act on behalf of the governing body?			I	8b	Х			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched a	t the	ſ					
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9		X		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)				-		
			·	_		Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?			L	10a		Х		
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	, 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	y befoi	e filing the form	? [11a	Х			
b	b Describe on Schedule O the process, if any, used by the organization to review this Form 990.								
12a	2a Did the organization have a written conflict of interest policy? If "No," go to line 13								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	flicts?	[12b	Х			
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? /f ")	′es," a	escribe						
	on Schedule O how this was done			L	12c	Х			
13	Did the organization have a written whistleblower policy?			L	13	Х			
14	Did the organization have a written document retention and destruction policy?			[14	Х			
15	Did the process for determining compensation of the following persons include a review and approva	l by in	dependent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official			L	15a	Х			
b	Other officers or key employees of the organization			[15b		X		
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent w	ith a						
	taxable entity during the year?				16a		X		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its p	articipation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	izatior	ı's						
	exempt status with respect to such arrangements?				16b				
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed <u>SEE SCHEDULE</u>	0							
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	nd 990	-T (section 501(c	c)(3)s	only) a	availat	ole		
	for public inspection. Indicate how you made these available. Check all that apply.								
	X Own website X Another's website X Upon request Other (explain								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	nflict o	of interest policy,	, and	financ	ial			
	statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's boo	oks an	d records						
	THE ORGANIZATION - 630-369-8300								
	1755 PARK STREET, 109, NAPERVILLE, IL 60563					000			
232006	12-13-22				Form	990	(2022)		
	6								

2022.04030 TREE RESEARCH AND EDUCATI 6735___1

Form 990 (2022)

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

 List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

FUND

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

(A) Name and title	(B) Average	(do not check more than one					one	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	box		ss per	rson i	s both	n an	compensation from	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest com pensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) RUSSELL KING	40.00									
PRESIDENT/CEO				Х				108,462.	0.	12,202.
(2) STEVE GEIST	1.00									
CHAIRMAN		Х		Х				0.	0.	0.
(3) BEAU BRODBECK	1.00									
CHAIR ELECT		Х		Х				0.	0.	0.
(4) PATRICK FRANKLIN	1.00									
VICE CHAIR		Х		Х				0.	0.	0.
(5) JACQUES BRUNSWICK	1.00									
TREASURER/SECRETARY		Х		Х				0.	0.	0.
(6) DAN HERMS	1.00									
TRUSTEE		Х						0.	0.	0.
(7) DAVID GORDEN	1.00									
TRUSTEE		Х						0.	0.	0.
(8) GORDON MANN	1.00									
TRUSTEE		Х						0.	0.	0.
(9) JEFF EDGAR	1.00									
TRUSTEE		Х						0.	0.	0.
(10) KATHY WOLF	1.00									
TRUSTEE		Х						0.	0.	0.
(11) LORI BROCKELBANK	4.00									
TRUSTEE		Х						0.	0.	0.
(12) RACHEL BARKER	1.00									
TRUSTEE		Х						0.	0.	0.
(13) SHARON JEAN-PHILIPPE	4.00									
TRUSTEE		Х						0.	0.	0.
		L					L			
						<u> </u>				
		1								
		L		I		I	I	1		Gamma 990 (0000)

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Form 990 (2022)

13460926 707170 6735

2022.04030 TREE RESEARCH AND EDUCATI 6735___1

	EARCH AN	ID	ΕĽ	DUC	'AT	'IO	N	ENDOWMENT	27 1	010	- 0 0	_ 0
Form 990 (2022) FUND									37-1	0180	592	Page 8
		bloy	ees,			ghes	st C		. ,			(5)
	(B) Average			Pos	C) ition	ı		(D)	(E) Reportable		E at	(F)
Name and title	hours per			heck	more	than o		Reportable compensation				imated ount of
	week					s both pr/trus		from	compensatio			other
	(list any	tor						the	organization			ensation
	hours for	direc				Ð		organization	(W-2/1099-MIS			om the
	related	tee or	istee			ensate		(W-2/1099-MISC/	1099-NEC)		orga	inization
	organizations	I trus	nal tri		oyee	om pa		1099-NEC)			and	related
	below	Individual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	Former				orga	nizations
	line)	Ind	lnst	Officer	Key	Em	For					
		1										
1b Subtotal								108,462.		0.	12	2,202.
c Total from continuation sheets to Part VI	, Section A							0.		0.		0.
•								108,462.		0.	12	2,202.
2 Total number of individuals (including but no	ot limited to th	ose	liste	ed ab	ove) wh	o re	eceived more than \$100,	000 of reportable	Ð		1
compensation from the organization												 Yes No
3 Did the organization list any former officer,	director, trust	ee, k	(ev e	empl	ove	e, or	hic	hest compensated emp	oyee on	ĺ		
line 1a? If "Yes," complete Schedule J for su			-		-				•		3	Х
4 For any individual listed on line 1a, is the su	m of reportabl	e co	mpe	ensa	tion	and	oth	ner compensation from t	ne organization			
and related organizations greater than \$150											4	X
5 Did any person listed on line 1a receive or a											E	X
rendered to the organization? <i>If</i> "Yes." <i>com</i> Section B. Independent Contractors	plete Schedule	<u>ə J to</u>	or si	icn į	bers	on					5	
1 Complete this table for your five highest cor	npensated inc	lepe	nde	nt co	ontra	acto	rs tł	hat received more than \$	100,000 of com	oensat	ion fro	m
the organization. Report compensation for t	he calendar ye	ear e	endir	ng w	ith c	or wi	thir	the organization's tax y	ear.			
(A) Name and business	addraaa	370	` ` ` `	-				(B) Description of s	onviooo	0	(C) ompen	
	auuress	INC	ONI	<u>1</u>				Description of s		0	ompen	Sation
2 Total number of independent contractors (ir		ot lin	nited	d to	thos (ted	above) who received mo	ore than			
\$100,000 of compensation from the organiz	aliun				ι,							

Form 990 (2022)

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Form							37-1018	692 Page 9
Pa	rt V	Ш	Statement of Revenue					
			Check if Schedule O contains a response or no	ote to any line		(D)	(2)	
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ς, ω	1	а	Federated campaigns 1a					
ant	•		Membership dues 1b					
Contributions, Gifts, Grants and Other Similar Amounts				2,790.				
			Related organizations 1d					
			Government grants (contributions) 1e					
Sir			All other contributions, gifts, grants, and					
her		·		1,226.				
oti		a	Noncash contributions included in lines 1a-1f 1g \$ 1	3,247.				
Cor		-	Total. Add lines 1a-1f		654,016.			
<u> </u>				siness Code				
Ð	2	а	GRANT MANAGEMENT FEES 5	41900	12,192.	12,192.		
vice	-			00099	467.	467.		
Ser		õ						
E E		d						
gra Re		e						
Program Service Revenue			All other program service revenue					
			Total. Add lines 2a-2f		12,659.			
_	3		Investment income (including dividends, interest, a		,			
	-		other similar amounts)		177.			177.
	4		Income from investment of tax-exempt bond proce					
	5		Royalties	F				
	-) Personal				
	6	а	Gross rents 6a	<u> </u>				
			Less: rental expenses 6b					
			Rental income or (loss) 6c					
			Net rental income or (loss)					
	7		· · · · · · · · · · · · · · · · · · ·	(ii) Other				
	•	-	assets other than inventory 7a					
		b	Less: cost or other basis					
e		-	and sales expenses					
evenue		с	Gain or (loss)					
			Net gain or (loss)					
Other R	8		Gross income from fundraising events (not					
Ę	-		including \$ 172,790. of					
-			contributions reported on line 1c). See					
				3,348.				
		b		3,348.				
					0.			
	9		Gross income from gaming activities. See					
			Part IV, line 19 9a					
		b	Less: direct expenses 9b					
			Net income or (loss) from gaming activities					
	10	а	Gross sales of inventory, less returns					
			and allowances 10a					
		b	Less: cost of goods sold 10b					
		с	Net income or (loss) from sales of inventory					
s				siness Code				
io a	11	а	MISCELLANEOUS 9	00099	1,335.			1,335.
ane		b						
tevell Seve		с						
Miscellaneous Revenue			All other revenue					
_		е	Total. Add lines 11a-11d		1,335.	10 (50	-	1 510
	12		Total revenue. See instructions		668,187.	12,659.	0.	1,512.
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Form 990 (2022)

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).

FUND

0000	on 501(c)(3) and 501(c)(4) organizations must complete			ipiele column (A).	
	Check if Schedule O contains a respons	e or note to any line in t (A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service	Management and	Fundraising
			expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations	396,705.	396,705.		
-	and domestic governments. See Part IV, line 21	390,703.	390,705.		
2	Grants and other assistance to domestic	20 000	20 000		
	individuals. See Part IV, line 22	20,000.	20,000.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	15 000	15 000		
	individuals. See Part IV, lines 15 and 16	15,000.	15,000.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	100 400	50 600		
	trustees, and key employees	108,462.	58,692.	16,577.	33,193.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	147,293.	79,705.	22,511.	45,077.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	32,633.	17,659.	4,987.	9,987.
10	Payroll taxes	20,555.	11,116.	3,110.	6,329.
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
с	Accounting	42,226.		42,226.	
d					
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	18,254.		18,254.	
g					
5	column (A), amount, list line 11g expenses on Sch O.)	8,175.		7,925.	250.
12	Advertising and promotion	23,368.		23,368.	
13	Office expenses	4,937.		4,937.	
14	Information technology	4,609.		4,609.	
		1,005.			
15 16	Royalties	5,347.	2,893.	818.	1,636.
		34,301.	8,924.	25,377.	1,0501
17	Travel Payments of travel or entertainment expenses	J4, J01•	0,524.	23,377.	
18	,				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	70.	38.	11.	
22	Depreciation, depletion, and amortization	2,397.		367.	<u>21.</u> 733.
23	Insurance	4,39/.	1,297.	307.	/33.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)	F 100		= 100	
а	DUES AND SUBSCRIPTIONS	5,180.		5,180.	
b	PRINTING	3,834.		1,231.	2,603.
С	BANK CHARGES	3,491.		3,491.	
d	TELEPHONE	3,377.	1,827.	516.	1,034.
е	All other expenses	2,466.		2,466.	
25	Total functional expenses. Add lines 1 through 24e	902,680.	613,856.	187,961.	100,863.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
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		10			

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	τX	Balance Sheet				-	
		Check if Schedule O contains a response or	note to a	ny line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			725,679.	1	587,483.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net		194,066.	3	329,241.	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current	t or form	er officer, director,			
		trustee, key employee, creator or founder, su	ıbstantial	contributor, or 35%			
		controlled entity or family member of any of these persons				5	
	6	Loans and other receivables from other disqualified persons (as defined					
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)				6	
ţs	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use				8	
◄	9	Prepaid expenses and deferred charges			2,675.	9	3,038.
	10a	Land, buildings, and equipment: cost or othe					
		basis. Complete Part VI of Schedule D	<u>10a</u>	5,075.	-		1
	b	Less: accumulated depreciation	10b		0.	10c	1,327. 26,092.
	11	Investments - publicly traded securities			30,849.	11	26,092.
	12	Investments - other securities. See Part IV, lir				12	
	13	Investments - program-related. See Part IV, li				13	
	14	Intangible assets		14	4 44 2 2 2 4		
	15	Other assets. See Part IV, line 11			5,329,520.	15	4,413,384.
	16	Total assets. Add lines 1 through 15 (must e			6,282,789.	16	5,360,565.
	17	Accounts payable and accrued expenses	26,771.	17	38,750.		
	18	Grants payable	333,864.	18	353,124.		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple				21	
ies	22	Loans and other payables to any current or fo					
Liabilities		trustee, key employee, creator or founder, su					
Liak	00	controlled entity or family member of any of t		F		22	
_	23	Secured mortgages and notes payable to un		F		23	
	24 05	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on li					
				, ,		25	
	26	Total liabilities. Add lines 17 through 25			360,635.	25 26	391,874.
	20	Organizations that follow FASB ASC 958, or	chock be	re X	500,055.	20	551,0740
ŝ		and complete lines 27, 28, 32, and 33.					
ŭ	27				-110,081.	27	-141.703.
3ala	28	Net assets with donor restrictions		Г	6,032,235.	28	-141,703. 5,110,394.
Ē	20	Organizations that do not follow FASB ASC			.,,	20	•,==•,••
Τu		and complete lines 29 through 33.					
ç	29	Capital stock or trust principal, or current fun	nds			29	
ets	30	Paid-in or capital surplus, or land, building, or				30	
Ass	31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32	Total net assets or fund balances		E CONTRACTOR OF CO	5,922,154.	32	4,968,691.
2	33	Total liabilities and net assets/fund balances			6,282,789.	33	5,360,565.
					, , ,		Form 990 (2022)

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Form 990 (2022)

TREE	RESEARCH	AND	EDUCATION	ENDOWMENT
FIIND				

Form	990 (2022) FUND	37-10	18692	Page 12
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,187.
2	Total expenses (must equal Part IX, column (A), line 25)	2		,680.
3	Revenue less expenses. Subtract line 2 from line 1	3		,493.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		,154.
5	Net unrealized gains (losses) on investments	5	-718	,970.
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain on Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,			
	column (B))	10	4,968	,691.
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
			,,	Yes No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a		
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,		
	consolidated basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		. 3a	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	

Form **990** (2022)

232012 12-13-22

(Form 990) Concernment of the Treasury Internal Revenue Service		Public Charity Status and Public Support omplete 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. Go to www.irs.gov/Form990 for instructions and the latest information.					Employee	OMB No. 1545-0047 2022 Open to Public Inspection	
Name or	the organizati	FUND	RESEARCH A	AND EDUCATION	N ENDC	MWEN.I			identification number 7-1018692
Part I	Reason		Charity Status.	(All organizations must c	omplete th	is part.) S	ee instruction	IS.	/ 1010092
1 2 3 4 5 6	A church, con A school des A hospital or A medical res city, and state An organizati section 1700 A federal, sta	a private found nivention of chi cribed in secti a cooperative search organize e: on operated for (b)(1)(A)(iv). (C te, or local gov	ation because it is: (f urches, or associatio ion 170(b)(1)(A)(ii). (hospital service orga ation operated in cor or the benefit of a col complete Part II.) vernment or governm	For lines 1 through 12, cl n of churches described Attach Schedule E (Form anization described in se hjunction with a hospital lege or university owned hental unit described in	heck only c l in section n 990).) ection 170 described l or operate section 17	one box.) n 170(b)(1 (b)(1)(A)(iii in sectio ed by a go)(A)(i). i). n 170(b)(1)(A vernmental u iv).)(iii). Enter nit describe	ed in
7 X 8 9	section 170(A community An agricultura or university o university:	b)(1)(A)(vi). (Co trust describe al research org or a non-land-g	omplete Part II.) ed in section 170(b)(lanization described grant college of agricu	 (1)(A)(vi). (Complete Partin section 170(b)(1)(A)(i) in section 170(b)(1)(A)(i) ulture (see instructions). 	t II.) ix) operate Enter the r	ed in conju name, city,	nction with a and state of	land-grant the college	college 9 or
10	activities relations income and uncome and u	ted to its exem inrelated busir 509(a)(2). (Cor	npt functions, subject ness taxable income mplete Part III.)	than 33 1/3% of its supp t to certain exceptions; a (less section 511 tax) fro vely to test for public sat	and (2) no r om busines	nore than ses acquir	33 1/3% of it red by the org	s support fi	rom gross investment
12 a b c	An organizati more publicly lines 12a thro Type I. A se the support organizatio Type II. A se control or n organizatio	on organized a v supported orgough 12d that of upporting orga ted organization n. You must o supporting orgo nanagement o n(s). You mus	and operated exclusing ganizations described describes the type of unization operated, su on(s) the power to reg complete Part IV, Se anization supervised f the supporting orgative t complete Part IV, se	vely for the benefit of, to d in section 509(a)(1) of f supporting organization upervised, or controlled gularly appoint or elect a ections A and B. or controlled in connect anization vested in the sa	perform the or section 5 on and comp by its supp majority of tion with its ame persor	ne function 509(a)(2). S bolete lines ported orga f the direc s supporte ns that cor	ns of, or to ca See section 12e, 12f, and anization(s), ty tors or truste d organizatio htrol or manage	5 09(a)(3). (12g. ypically by y es of the su n(s), by hav ge the supp	Check the box on giving upporting ving ported
d	its supporte Type III no that is not f requiremen	ed organization n-functionally functionally intentionally intentionally intentionally intentionally intentionally intentional to the second	n(s) (see instructions) r integrated. A supp egrated. The organiz ons). You must con	b) You must complete f porting organization oper ation generally must sat nplete Part IV, Sections written determination from	Part IV, Se ated in cor isfy a distri 5 A and D ,	ctions A, I nnection w bution req and Part V	D, and E. rith its suppor uirement and V.	ted organiz I an attentiv	zation(s)
	functionally	integrated, or	Type III non-functior	nally integrated supportin	ng organiza	ation.		, rype iii	
g Pro		ing information	about the supporte (ii) EIN		(iv) Is the orga in your governir Yes	nization listed	(v) Amount or support (see in		(vi) Amount of other support (see instructions)
Total									

Schedule A (Form 990) 2022

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	A (Form 990) 2022	FUND			37-1018
Part II	Support Schedule	for Organizations	Described in Sections	170(b)(1)(A)(iv) and	170(b)(1)(A)(vi)

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

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Schedule A (Form 990) 2022

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Schedule A (Form 990) 2022 Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (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 per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 512						
iness under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disgualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	601(c)(3) orgar	nization,
check this box and stop here						
Section C. Computation of Publ	ic Support Per	rcentage				
15 Public support percentage for 2022 (line 8, column (f), d	livided by line 13,	column (f))		15	%
16 Public support percentage from 2021					16	%
Section D. Computation of Inves						
17 Investment income percentage for 20					17	%
18 Investment income percentage from					18	%
19a 33 1/3% support tests - 2022. If the						ine 17 is not
more than 33 1/3%, check this box a	nd stop here. The	organization qual	ifies as a publicly	supported organiza	tion	
b 33 1/3% support tests - 2021. If the	-					
line 18 is not more than 33 1/3%, che	ck this box and st	t op here. The orga	anization qualifies	as a publicly suppo	orted organiza	ition
20 Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	his box and see ins	structions	
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Schedule A (Form 990) 2022

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1

2

Yes No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.

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- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

232024 12-09-22

3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

Schedule A (Form 990) 2022

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Schedule A (Form 990) 2022 FUND 37-101		<u>37-10186</u>	<u>592</u>	2 Pa	age 5	
Par	rt IV	Supporting Organizations (continued)				
					Yes	No
11	Has t	he organization accepted a gift or contribution from any of the following persons?				
а	A per	son who directly or indirectly controls, either alone or together with persons described on lines 11b and				
	11c b	below, the governing body of a supported organization?	11	а		
b	A fam	nily member of a person described on line 11a above?	11	b		
с	A 35%	% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide				
	detail	in Part VI.	11	с		
Sec	tion E	B. Type I Supporting Organizations				
					Yes	No
1	more direct effect organ	The governing body, members of the governing body, officers acting in their official capacity, or membership of or supported organizations have the power to regularly appoint or elect at least a majority of the organization's off tors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) tively operated, supervised, or controlled the organization's activities. If the organization had more than one supp nization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among ported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	ficers,			
2		ne organization operate for the benefit of any supported organization other than the supported				
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in					
	Part V	$ extsf{VI}$ how providing such benefit carried out the purposes of the supported organization(s) that operated,				
<u></u>	super	vised, or controlled the supporting organization.	2			
Sec	tion (C. Type II Supporting Organizations		<u> </u>		
				_	Yes	No
1		a majority of the organization's directors or trustees during the tax year also a majority of the directors				
		stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control				
		anagement of the supporting organization was vested in the same persons that controlled or managed				
800	<u>the su</u>	upported organization(s). D. All Type III Supporting Organizations	1			<u> </u>
Sec				<u> </u>		
	B ¹ 1 11			-	Yes	No
1		ne organization provide to each of its supported organizations, by the last day of the fifth month of the				
	-	hization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax				
	•	(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the				
•	-	nization's governing documents in effect on the date of notification, to the extent not previously provided?	1			
2		any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported				
		nization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	2			
3		rganization maintained a close and continuous working relationship with the supported organization(s). ason of the relationship described on line 2, above, did the organization's supported organizations have a				
3		icant voice in the organization's investment policies and in directing the use of the organization's				
	-	ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's				
		-	3			
Sec	tion E	orted organizations played in this regard. E. Type III Functionally Integrated Supporting Organizations				L
1		k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see inst	ructions).			
a		The organization satisfied the Activities Test. Complete line 2 below.				
b		The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below</i> .				
с		The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity.	itv (see instruc	tions	2)	
2		ities Test. Answer lines 2a and 2b below.	-, ,000 1100 000		y. Yes	No
а	Did sı	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of				
		upported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify				
		e supported organizations and explain how these activities directly furthered their exempt purposes,				
		the organization was responsive to those supported organizations, and how the organization determined				
		hese activities constituted substantially all of its activities.	2a	1		
b		ne activities described on line 2a, above, constitute activities that, but for the organization's involvement,				
		r more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in				
		VI the reasons for the organization's position that its supported organization(s) would have engaged in				
		activities but for the organization's involvement.	2 k	,		
3		nt of Supported Organizations. Answer lines 3a and 3b below.				
а	Did th	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or				

trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. 232025 12-09-22

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3b Schedule A (Form 990) 2022

3a

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	TREE RESEARCH AND EDUCAT	ION	ENDOWMENT	
	dule A (Form 990) 2022 FUND	-		37-1018692 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust or	n Nov. 20, 1970(<i>explain</i>)	in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must of	complet	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
_3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
_7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	integra	ted Type III supporting or	ganization (see

Schedule A (Form 990) 2022

instructions).

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	dule A (Form 990) 2022 FUND			3	<u>7-1018692 ра</u>	age 7
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations _{(continu}	ied)	I	
Secti	on D - Distributions				Current Year	
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported				
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purpose	;	3			
_4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
6	Other distributions (describe in Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	e organization is responsive				
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2022 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	IS	(iii) Distributable Amount for 2023	2
1	Distributable amount for 2022 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2022 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2022					
а	From 2017					
b	From 2018					
с	From 2019					
d	From 2020					
е	From 2021					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
h	Applied to 2022 distributable amount					
i	Carryover from 2017 not applied (see instructions)					
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2022 from Section D,					
	line 7: \$					
а	Applied to underdistributions of prior years					
b	Applied to 2022 distributable amount					
с	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2022, if					
	any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2022. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2023. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
	Excess from 2018					
	Excess from 2019					
	Excess from 2020					
	Excess from 2021					
e	Excess from 2022					

Schedule A (Form 990) 2022

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	(=	TREE FUND	RESEARCH	AND	EDUCATION	ENDOWMENT	37-1018692 Page 8
Part VI	(Form 990) 2022 Supplemental Inform Part IV, Section A, lines 1, line 1; Part IV, Section D, Section D, lines 5, 6, and (See instructions.)	mation. , 2, 3b, 3c, lines 2 and	4b, 4c, 5a, 6, 9a, 3; Part IV, Sectio	9b, 9c, ⁻ n E, line:	11a, 11b, and 11c; I s 1c, 2a, 2b, 3a, and	Part IV, Section B, lin d 3b; Part V, line 1; Pa	a or 17b; Part III, line 12; es 1 and 2; Part IV, Section C, art V, Section B, line 1e; Part V,
232028 12-09-2	2				20		Schedule A (Form 990) 2022

SC	HEDULE D	Supplement	al Financial Statements	OMB No. 1545-0047				
(Forn	n 990)		nization answered "Yes" on Form 990,), 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12t	. 2022				
Depart	ment of the Treasury	Open to Public						
Interna	Go to www.irs.gov/Form990 for instructions and the latest information.							
Nam	e of the organization		EDUCATION ENDOWMENT	Employer identification number				
Par	t I Organiza	FUND ations Maintaining Donor Advise	d Funds or Other Similar Funds	37-1018692				
1 41		on answered "Yes" on Form 990, Part IV, lir						
	5		(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at er	nd of year						
2		of contributions to (during year)						
3		of grants from (during year)						
4		at end of year						
5			writing that the assets held in donor advise	ed funds				
	are the organizatio	on's property, subject to the organization's	exclusive legal control?	Yes No				
6	Did the organization	on inform all grantees, donors, and donor a	advisors in writing that grant funds can be u	used only				
	for charitable purp	poses and not for the benefit of the donor o	or donor advisor, or for any other purpose c	onferring				
Par	t II Conserv	ation Easements. Complete if the or	ganization answered "Yes" on Form 990, P	Part IV, line 7.				
1	Purpose(s) of cons	servation easements held by the organizati	on (check all that apply).					
	Preservation	n of land for public use (for example, recrea	ation or education)	a historically important land area				
	Protection o	of natural habitat	Preservation of	a certified historic structure				
		n of open space						
2			fied conservation contribution in the form o					
	day of the tax year			Held at the End of the Tax Year				
a								
b	•							
			ucture included in (a)	<u>2c</u>				
a		vation easements included in (c) acquired a						
3			leased, extinguished, or terminated by the					
3	year		leased, extinguished, or terminated by the	organization during the tax				
4		where property subject to conservation ea	sement is located					
5		ation have a written policy regarding the pe						
Ŭ		forcement of the conservation easements i		Yes No				
6			handling of violations, and enforcing conse					
-		5, 1 5,	5	5,				
7	Amount of expens	ses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservati	on easements during the year				
				5				
8	Does each conser	rvation easement reported on line 2(d) abov	ve satisfy the requirements of section 170(h	ı)(4)(B)(i)				
	and section 170(h))(4)(B)(ii)?		Yes No				
9	In Part XIII, describ	be how the organization reports conservati	on easements in its revenue and expense s	statement and				
	balance sheet, and	d include, if applicable, the text of the foot	note to the organization's financial stateme	nts that describes the				
	organization's acc	counting for conservation easements.						
Par			f Art, Historical Treasures, or Oth	ner Similar Assets.				
	Complete if	f the organization answered "Yes" on Form	n 990, Part IV, line 8.					
1 a	•		58, not to report in its revenue statement ar					
			blic exhibition, education, or research in fur					
			ncial statements that describes these items					
b	-		58, to report in its revenue statement and b					
			c exhibition, education, or research in furthe	erance of public service,				
	-	ing amounts relating to these items:		¢				
0	. ,		asures or other similar assets for financial					
2	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 FASB ASC 958 relating to these items:							
9	-		SC 956 relating to these items.	\$				
		eduction Act Notice, see the Instruction		Schedule D (Form 990) 2022				
	09-01-22							
	- ·		27					

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TREE RESEARCH AND EDUCATION ENDOWMEN

	TREE RES	SEARCH AND	EDUCATION	ENDOWMENT					
Sche	dule D (Form 990) 2022 FUND					37-10			age 2
Par	t III Organizations Maintaining Co	ollections of Art	, Historical Tre	asures, or Othe	er Simila	r Assets	(contin	ued)	
3	Using the organization's acquisition, accessio collection items (check all that apply):	n, and other records	s, check any of the f	ollowing that make s	significant	use of its			
~	Public exhibition	d		hange program					
a b	Scholarly research	u		nange program					
c	Preservation for future generations	e							
4	Provide a description of the organization's co	lloctions and ovalain	how thoy further th	o organization's evo	mot purpo	so in Part	V III		
5	During the year, did the organization solicit or					Se in r art.	A III.		
5	to be sold to raise funds rather than to be ma						Yes		No
Par	t IV Escrow and Custodial Arrang	jements. Comple	te if the organizatio	n answered "Yes" or	n Form 99), Part IV, I	ine 9, or		
	reported an amount on Form 990, Par		-						
1a	Is the organization an agent, trustee, custodia	n or other intermedi	ary for contributions	s or other assets not	included				
	on Form 990, Part X?						Yes		No
b	If "Yes," explain the arrangement in Part XIII a								
							Amount	i	
с	Beginning balance				1c				
	Additions during the year								
	Distributions during the year								
	Ending balance								
	Did the organization include an amount on Fo						Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the exp	planation has been j	provided on Part XIII					
Par	t V Endowment Funds. Complete if	the organization and	swered "Yes" on Fo	rm 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	5,845,455.	5,291,751.	5,044,344.	4,4	139,820.	4,	643,	785.
								981.	
	Net investment earnings, gains, and losses	-713,483.	620,856.	608,491.		725,175.	-	315,	651.
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs	181,808.	176,969.	417,012.	:	398,205.		257,	047.
f	Administrative expenses	20,845.	17,766.	16,964.		18,996.		13,	248.
g	End of year balance	5,028,073.	5,845,455.	5,291,751.	5,0)44,344.	4,	439,	820.
2	Provide the estimated percentage of the curre	ent year end balance	(line 1g, column (a)) held as:					
а	Board designated or quasi-endowment		_%						
b	Permanent endowment	%	_						
с	Term endowment	6							
	The percentages on lines 2a, 2b, and 2c should	lld equal 100%.							
3a	Are there endowment funds not in the posses	sion of the organizat	tion that are held an	d administered for t	he		_		
	organization by:							Yes	No
	(i) Unrelated organizations						3a(i)	Х	
	(ii) Related organizations						3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organizat						3b		
4	Describe in Part XIII the intended uses of the								
Par	t VI Land, Buildings, and Equipme								
	Complete if the organization answered	"Yes" on Form 990,	, Part IV, line 11a. S	ee Form 990, Part X	, line 10.				
	Description of property	(a) Cost or ot			Accumulat	ed	(d) Bool	k valu	ie.
		basis (investm	· · ·		epreciation		(,		
1a	Land								
b	Buildings								
	Leasehold improvements								
				5,075.	3,7	48.	1	। २	27.
	EquipmentOther			<u> </u>	5,1			-, 5	<u> </u>
	Add lines 1a through 1e. (Column (d) must ec		(column (P) line 1				-	1.3	27.

Schedule D (Form 990) 2022

TREE	RESEARCH	AND	EDUCATION	ENDOWMENT

	orm 990) 2022 FUND nvestments - Other Securities.			37-1018692 Pag
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line	e 12.
a) Descriptio	n of security or category (including name of security)	(b) Book value	(c) Method of valuation: C	Cost or end-of-year market value
Financial o	derivatives	0.		
	eld equity interests			
Other				
(A)				
(B) (C)				
(C) (D)				
(E)				
 (F)				
G)				
<u>(H)</u>				
ul. (Col. (b)	must equal Form 990, Part X, col. (B) line 12.)			
	nvestments - Program Related.	E E COO De MUL	11 - Ose Faun 000 Deat V lies	40
	Complete if the organization answered "Yes" (a) Description of investment	(b) Book value		o 13. Cost or end-of-year market value
(4)	(a) Description of investment	(b) BOOK value		Just of end-or-year market value
(1) (2)				
<u>2)</u> (3)				
<u>(4)</u>				
(5)				
(6)				
(7)				
(a)				
· /				
(8) (9)				
(9) al. (Col. (b))	must equal Form 990, Part X, col. (B) line 13.)			
(9) al. (Col. (b) art IX C	Other Assets.	on Form 990, Part IV, line	11d. See Form 990, Part X, line	9 15.
(9) 11. (Col. (b) art IX (Other Assets. Complete if the organization answered "Yes"	on Form 990, Part IV, line Description	11d. See Form 990, Part X, line	9 15. (b) Book value
(9) II. (Col. (b)) art IX C (1) BEN	Other Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN INTEREST			(b) Book value
(9) art IX (Col. (b)) art IX (Col. (b)) (1) BEN	Other Assets. Complete if the organization answered "Yes" (a)	Description		(b) Book value
(9) art IX Col. (b) art IX C (1) BEN (2) COM	Other Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN INTEREST	Description		(b) Book value
(9) il. (Col. (b) art IX C (1) BEN (2) COM (3) (4)	Other Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN INTEREST	Description		(b) Book value
(9) il. (Col. (b)) art IX C (1) BEN (2) COM (3) (4) (5)	Other Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN INTEREST	Description		(b) Book value
(9) art IX ((1) BEN (2) COM (3) (4) (5) (6)	Other Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN INTEREST	Description		(b) Book value
(9) art IX ((1) BEN (2) COM (3) (4) (5) (6) (7)	Other Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN INTEREST	Description		(b) Book value
(9) art IX (Col. (b)) art IX (Col. (b)) (1) BEN (2) COM (2) COM (3) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN INTEREST	Description		(b) Book value
(9) art IX Col. (b) art IX C (1) BEN (2) COM (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN IN MUNITY TRUST	Description VESTMENTS HEL	D BY CHICAGO	(b) Book value 4 , 413 , 38
(9) art IX (Col. (b)) art IX (Col. (b)) (1) BEN (2) COM (2) COM (3) (4) (5) (6) (7) (8) (9) al. (Column	Other Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN INTEREST	Description VESTMENTS HEL	D BY CHICAGO	(b) Book value 4,413,38
(9) il. (Col. (b) art IX C (1) BEN (2) COM (2) COM (3) (4) (5) (6) (7) (6) (7) (8) (9) al. (Column art X C	Dther Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN IN MUNITY TRUST n (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes"	Description VESTMENTS HELI	D BY CHICAGO	(b) Book value 4,413,38 4,413,38 4,413,38
(9) art IX ((1) BEN (2) COM (3) (4) (5) (6) (7) (8) (9) al. (Column art X (C	Dther Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN INT MUNITY TRUST n (b) must equal Form 990, Part X, col. (B) line Dther Liabilities. Complete if the organization answered "Yes" (a) Description of liability	Description VESTMENTS HELI	D BY CHICAGO	(b) Book value 4,413,38
(9) il. (Col. (b) art IX ((1) BEN (2) COM (3) (4) (5) (6) (7) (6) (7) (8) (9) al. (Columi art X ((0) (1) Federal	Dther Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN IN MUNITY TRUST n (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered "Yes"	Description VESTMENTS HELI	D BY CHICAGO	(b) Book value 4,413,38 4,413,38 4,413,38 X, line 25.
9) I. (Col. (b) art IX (C (1) BEN (2) COM (3) (4) (5) (6) (7) (8) (7) (8) (9) al. (Column art X (C (1) Federa (2)	Dther Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN INT MUNITY TRUST n (b) must equal Form 990, Part X, col. (B) line Dther Liabilities. Complete if the organization answered "Yes" (a) Description of liability	Description VESTMENTS HELI	D BY CHICAGO	(b) Book value 4,413,38 4,413,38 4,413,38 X, line 25.
(9) il. (Col. (b)) art IX C (1) BEN (2) COM (3) (4) (5) (6) (7) (6) (7) (8) (9) al. (Column (1) Federa (2) (3)	Dther Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN INT MUNITY TRUST n (b) must equal Form 990, Part X, col. (B) line Dther Liabilities. Complete if the organization answered "Yes" (a) Description of liability	Description VESTMENTS HELI	D BY CHICAGO	(b) Book value 4,413,38 4,413,38 4,413,38 X, line 25.
(9) I. (Col. (b) art IX ((1) BEN (2) COM (2) COM (3) (4) (5) (6) (7) (8) (6) (7) (8) (9) al. (Column art X ((2) (3) (4) (4)	Dther Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN INT MUNITY TRUST n (b) must equal Form 990, Part X, col. (B) line Dther Liabilities. Complete if the organization answered "Yes" (a) Description of liability	Description VESTMENTS HELI	D BY CHICAGO	(b) Book value 4,413,38 4,413,38 4,413,38 X, line 25.
(9) il. (Col. (b) art IX ((1) BEN (2) COM (2) COM (3) (4) (5) (6) (7) (8) (9) al. (Columi (7) (8) (9) (1) Federa (2) (3) (4) (5)	Dther Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN INT MUNITY TRUST n (b) must equal Form 990, Part X, col. (B) line Dther Liabilities. Complete if the organization answered "Yes" (a) Description of liability	Description VESTMENTS HELI	D BY CHICAGO	(b) Book value 4,413,38 4,413,38 4,413,38 X, line 25.
(9) il. (Col. (b) art IX C (1) BEN (2) COM (2) COM (3) (4) (5) (6) (7) (8) (9) al. (Column (7) (8) (9) al. (Column (1) Federa (2) (3) (4) (5) (6) (5) (6)	Dther Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN INT MUNITY TRUST n (b) must equal Form 990, Part X, col. (B) line Dther Liabilities. Complete if the organization answered "Yes" (a) Description of liability	Description VESTMENTS HELI	D BY CHICAGO	(b) Book value 4,413,38 4,413,38 4,413,38 X, line 25.
(9) il. (Col. (b) art IX C (1) BEN (2) COM (3) (4) (5) (6) (7) (8) (9) al. (Column (8) (9) al. (Column (1) Federa (2) (3) (4) (5) (6) (7) (6) (7)	Dther Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN INT MUNITY TRUST n (b) must equal Form 990, Part X, col. (B) line Dther Liabilities. Complete if the organization answered "Yes" (a) Description of liability	Description VESTMENTS HELI	D BY CHICAGO	(b) Book value 4,413,38 4,413,38 4,413,38 X, line 25.
(9) al. (Col. (b)) art IX ((1) BEN (2) COM (3) (4) (5) (6) (7) (8) (9) al. (Column art X (C	Dther Assets. Complete if the organization answered "Yes" (a) EFICIAL INTEREST IN INT MUNITY TRUST n (b) must equal Form 990, Part X, col. (B) line Dther Liabilities. Complete if the organization answered "Yes" (a) Description of liability	Description VESTMENTS HELI	D BY CHICAGO	(b) Book value 4,413,38 4,413,38 4,413,38 X, line 25.

Schedule D (Form 990) 2022

232053 09-01-22

TATATA

	aule D (Form 990) 2022 F OND				
Pa	t XI Reconciliation of Revenue per Audited Financial Statem	nents With	Revenue per Ret	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.			
1	Total revenue, gains, and other support per audited financial statements			1	155,674.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-718,970.		
b	Donated services and use of facilities	2b	61,363.		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	163,348.		
е	Add lines 2a through 2d			2e	-494,259.
3	Subtract line 2e from line 1			3	649,933.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	18,254.		
С	Add lines 4a and 4b			4c	18,254.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	668,187.
Pa	t XII Reconciliation of Expenses per Audited Financial State		n Expenses per R	letur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12				
1	Total expenses and losses per audited financial statements			1	1,109,137.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	61,363.		
b	Prior year adjustments	2 b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	163,348.		
е	Add lines 2a through 2d			2e	224,711.
3	Subtract line 2e from line 1			3	884,426.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	18,254.		
С	Add lines 4a and 4b			4c	18,254.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	902,680.
	t XIII Supplemental Information.				

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

THE ENDOWMENT FUND IS INTENDED TO FUND RESEARCH, EDUCATION, AND COMMUNITY ENGAGEMENT.

PART X, LINE 2:

THE ORGANIZATION IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF

THE INTERNAL REVENUE CODE (IRC). IN ADDITION, THE CENTER QUALIFIES FOR THE

CHARITABLE CONTRIBUTION DEDUCTION UNDER SECTION 170(B)(1)(A). AND HAS BEEN

CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER

SECTION 509(A)(1). THE ORGANIZATION IS SUBJECT TO INCOME TAXES ON ANY

UNRELATED BUSINESS INCOME. THE ORGANIZATION HAD NO UNRELATED BUSINESS

INCOME AND THERE WERE NO TAXES OWED FOR THE YEAR ENDED DECEMBER 31, 2022. 232054 09-01-22 Schedule D (Form 990) 2022

13460926 707170 6735

30

2022.04030 TREE RESEARCH AND EDUCATI 6735___1

THE ORGANIZATION HAS ADOPTED THE REQUIREMENTS FOR ACCOUNTING FOR UNCERTAIN TAX POSITIONS. THE ORGANIZATION HAS DETERMINED THAT IT IS NOT REQUIRED TO RECORD A LIABILITY RELATED TO UNCERTAIN TAX POSITIONS FOR THE YEAR ENDED DECEMBER 31, 2022.

THE FEDERAL AND STATE TAX RETURNS OF THE ORGANIZATION FOR PAST YEARS ARE SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE AND STATE TAXING AUTHORITIES, GENERALLY FOR THREE YEARS AFTER THEY WERE FILED.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

DIRECT EXPENSES RELATED TO SPECIAL EVENTS NETTED AGAINST

REVENUE

PART XI, LINE 4B - OTHER ADJUSTMENTS:

INVESTMENT MANAGEMENT FEES NETTED AGAINST REVENUE

PART XII, LINE 2D - OTHER ADJUSTMENTS:

DIRECT EXPENSES OF SPECIAL EVENTS NETTED AGAINST

FUNDRAISING REVENUE

PART XII, LINE 4B - OTHER ADJUSTMENTS:

INVESTMENT MANAGEMENT FEES NETTED AGAINST REVENUE

18,254.

163,348.

163,348.

18,254.

Schedule D (Form 990) 2022

232055 09-01-22

SC	HEDULE F	Stateme	nt of Act	ivities Outside the Un	ited Sta	tes	OME	3 No. 1545-0047
(Fo	rm 990)	Complete if the	2	022				
	tment of the Treasury	0.1		Attach to Form 990.				to Public
	al Revenue Service e of the organization		/ww.irs.gov/Form	990 for instructions and the latest in	itormation.	Employer	Inspec	ation number
		I AND EDUCA	TION END	OWMENT		Linployer	luentinu	auon number
FU						37-101		
Pa	rt I General I	nformation on A	ctivities Out	side the United States. Comple	te if the organ	ization answe	ered "Ye	es" on
		Part IV, line 14b.						
1	-	-		ds to substantiate the amount of its grai			X	Yes 🗌 No
	the grantees' eligib	lifty for the grants or a	assistance, and t	he selection criteria used to award the	grants or assis	tance?	[A]	res 🔝 No
2	For grantmakers.	Describe in Part V the	e organization's	procedures for monitoring the use of its	grants and ot	her assistanc	e outsid	le the
	United States.		0	Ŭ	0			
3	Activities per Regio			n be duplicated if additional space is no				
	(a) Region	(b) Number of	(c) Number of employees,	(d) Activities conducted in the region	• •	vity listed in (· / I	(f) Total expenditures
		offices in the region	agents, and independent	(by type) (such as, fundraising, pro- gram services, investments, grants to		gram service specific type	′ I	for and
		une region	contractors	recipients located in the region)		(s) in the regi		investments in the region
			in the region					une region
EAS	F ASIA AND THE							
PAC	IFIC	0	0	GRANTMAKING				10,000.
<u> </u>	Subtatal	0	0					10,000.
	Subtotal							10,000.
U	sheets to Part I		0					0.
с	Totals (add lines 3a							-
	and 3b)	0	0					10,000.

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

Schedule F (Form 990) 2022

232071 10-17-22

37-1018692

Schedule F (Form 990) 2022

Part II Gr

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
		EAST ASIA AND THE PACIFIC	RESEARCH	10,000.		0.		
	nization by the IRS, o	or for which the grantee	ecognized as charities by the f or counsel has provided a sect	ion 501(c)(3) equ	ivalency letter			1

Schedule F (Form 990) 2022

232073	10-17-22	

TREE RESEARCH AND EDUCATION ENDOWMENT FUND

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

37-1018692

Part III can be duplicated if	additional space is neede	d.					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
SCHOLARSHIP	NORTH AMERICA	1	5,000.	WIRE TRANSFER	0.		

Page 3

Schedu	ule F (Form 990) 2022 FUND	37-1018692	Page 4
Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)</i>	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)</i>	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2022

Schedule F	(Form 990)) 2022	FOND
Part V	Supple	mental	Information

FUND

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

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.

Schedule F (Form 990) 2022

232075 10-17-22

SCHEDULE G	Suppleme	ntal Information Regardi	ng Fund	raisi	ng or Gaming A	ctivities	OMB No. 1545-0047
(Form 990)		e organization answered "Yes" organization entered more than				r 19, or if the	2022
Department of the Treasury		Attach to Form 99					Open to Public
Internal Revenue Service		o www.irs.gov/Form990 for ins					Inspection
Name of the organizatior	TREE RE	SEARCH AND EDUCA	FION H	ENDC	OWMENT	Employer	identification number 18692
Part I Fundrais	ing Activities.	Complete if the organization an	swered "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990)-EZ filers are not
	complete this part						
	•	sed funds through any of the follo	°.		,		
a 🔄 Mail solicitat					overnment grants		
— _ · · · ·	email solicitations				nment grants		
c Phone solici		g 🛄 Spe	cial fundra	lising	events		
d In-person so		or oral agreement with any individ	lual (includ	ling of	ficara directora truc	toop or	
•		art VII) or entity in connection wit		•		·	Yes No
		viduals or entities (fundraisers) pu	•		e e		
compensated at le	• .						
			(iii) fundr	Did	(1) Q	(v) Amount pa	
(i) Name and addres or entity (fund		(ii) Activity	have c	ustody	(iv) Gross receipts from activity	to (or retained l fundraiser	^{yy)} to (or retained by)
or criticy (idire	indisci)		or con contribu	utions?	non activity	listed in col. (i) organization
			Yes	No	-		
Total							
3 List all states in whi or licensing.	ch the organizatio	n is registered or licensed to soli	cit contrib	utions	or has been notified	it is exempt fror	n registration

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

Schedule G (Form 990) 2022

232081 10-27-22

Sch	edule	G (Form 990) 2022	FUND			37-	1018692 Page 2			
Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,0										
of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5										
				(a) Event #1	(b) Event #2	(c) Other events	(d) Total events			
				TOUR DE	NONE	.,				
				TREES (INCL			(add col. (a) through			
۵ ۵				(event type)	(event type)	(total number)	col. (c))			
Jevenue	1 (Gross receipts		336,137.			336,137.			
Œ		_ess: Contributions		172,789.			172,789.			

163,348.

163,348.

(b) Pull tabs/instant

bingo/progressive bingo

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than

Yes

No

a Is the organization licensed to conduct gaming activities in each of these states?

(a) Bingo

b If "No," explain:	

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes **b** If "Yes," explain:

%

Yes

No

%

Yes

No

%

232082 10-27-22

Schedule G (Form 990) 2022

Yes

No

No

163,348.

163,348

163,348.

(d) Total gaming (add

col. (a) through col. (c))

(c) Other gaming

0

3 Gross income (line 1 minus line 2)

Food and beverages

Gross revenue

Other direct expenses

6 Volunteer labor

Direct Expenses

Revenue

Direct Expenses 3

1

4

5

7

9

4 Cash prizes

5 Noncash prizes

6 Rent/facility costs

8 Entertainment

Other direct expenses

\$15,000 on Form 990-EZ, line 6a.

2 Cash prizes

Noncash prizes

Rent/facility costs

7 Direct expense summary. Add lines 2 through 5 in column (d)

8 Net gaming income summary. Subtract line 7 from line 1, column (d)

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

10 Direct expense summary. Add lines 4 through 9 in column (d)

11 Net income summary. Subtract line 10 from line 3, column (d)

TREE RESI	EARCH ANI) EDUCATION	ENDOWMENT
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Schedule G (Form 990) 2022 FUND 37-1018692	Page 3
11 Does the organization conduct gaming activities with nonmembers?	
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?	No
13 Indicate the percentage of gaming activity conducted in:	
a The organization's facility	%
	<u> </u>
 b An outside facility 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: 	/0
Name	
Address	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes	No 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?	No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	
organization's own exempt activities during the tax year \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9	9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	
232083 10-27-22 Schedule G (Form	990) 2022

	(=)	TREE	RESEARCH	AND	EDUCATION	ENDOWMENT	37-1018692 Page
Schedule G	(Form 990) Supplemental Inform	FUND	(continued)				57-1010092 Page
	- approximental more	(continued)				
							Schedule G (Form 99

232084 04-01-22

SCHEDULE I (Form 990)	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990.										
Internal Revenue Service Go to www.irs.gov/Form990 for the latest information.											
Name of the organization TREE RESE FUND	ARCH AND E	EDUCATION E	NDOWMENT				Employer identification number 37-1018692				
Part I General Information on Grants a											
1 Does the organization maintain records t criteria used to award the grants or assis	stance?										
2 Describe in Part IV the organization's pro Part II Grants and Other Assistance to recipient that received more than \$	Domestic Organiz	ations and Domestic	Governments. C	complete if the orga	anization answered "Y	′es" on Form 990, Par	t IV, line 21, for any				
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance				
PENNSYLVANIA STATE UNIVERSITY 227 W. BEAVER AVENUE STATE COLLEGE, PA 16801	24-6000376		158,109.	0.			SUPPORT RESEARCH				
	24 0000370		150,105.								
CORNELL UNIVERSITY 516 THURSTON AVE											
THACA, NY 14850	15-0532082		10,000.	0.			SUPPORT RESEARCH				
NIVERSITY OF MASSACHUSETTS 10 EAST CAMPUS RD MHERST, MA 30602	54-2084125		25,000.	0.			SUPPORT RESEARCH				
YEST VIRGINIA UNIVERSITY NE WATERFRONT PLACE											
MORGANTOWN , WV 26506	55-0492006		49,572.	0.			SUPPORT RESEARCH				
CN UTILITY CONSULTING (CNUC) P.O. BOX 818 DES MOINES , IA 50304	20-8514056		30,000.	0.			SUPPORT RESEARCH				
TARLETON STATE UNIVERSITY 1333 W WASHINGTON ST			,								
STEPHENVILLE, TX 76401	75-6001870		22,950.	Ο.			SUPPORT RESEARCH				

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

Schedule I (Form 990) 2022

Schedule I (Form 990) FUND

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
PENNSYLVANIA STATE UNIVERSITY										
227 W BEAVER AVE										
STATE COLLEGE, PA 16801	24-6000376		87,082.	0.			SUPPORT RESEARCH			

Schedule I (Form 990)

Schedule I (Form 990) 2022

37-1018692

Page 2

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed.

(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, FMV, appraisal, other)	(f) Description of noncash assistance
CHOLARSHIPS	4	20,000.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

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.

SCHEDULE O (Form 990)

Department of the Treasury

Name of the organization

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 Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

TREE RESEARCH AND EDUCATION ENDOWMENT



Employer identification number 37-1018692

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

FUND

THE PRESIDENT/CEO DISTRIBUTES A COPY OF THE FORM 990 ELECTRONICALLY TO EACH

OF THE BOARD TRUSTEES FOR THEIR REVIEW

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

MEMBERS OF THE BOARD OF TRUSTEES COMPLETE CONFLICT OF INTEREST FORMS ON AN

ANNUAL BASIS. 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:

THE EXECUTIVE COMMITTEE USES THE ASSOCIATION OF SMALL FOUNDATIONS

MANAGEMENT AND COMPENSATION SURVEY TO IDENTIFY COMPENSATION STANDARDS.

THIS INFORMATION IS SUMMARIZED BY THE CHAIRMAN AND PRESENTED TO THE

EXECUTIVE COMMITTEE FOR DISCUSSION. THE PRESIDENT/CEO'S SALARY IS

BENCHMARKED AGAINST OTHER PRESIDENT/CEO'S SALARIES IN THE REGION OF SIMILAR

SIZE FOUNDATIONS TO DETERMINE THE PRESIDENT/CEO'S COMPENSATION.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

IL, MO, AL, AR, CA, CO, HI, MA, NC, NY, OH, OR, SC, VA, NH, MS, KS, MD, NM, TN, NJ, MI, MN, WI, AK

ND, OK, PA, KY, WV, CT, ME, WA, GA, FL, RI, UT, DC

FORM 990, PART VI, SECTION C, LINE 18:

UPON WRITTEN REQUEST

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

LHAFor Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.23221110-28-22

Schedule O (Form 990) 2022

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