			EXTENDED TO NOVEMBER 15,						
	Ω	00	Return of Organization Exempt Fi	rom lı	ncome Tax	OMB No. 1545-0047			
Form <b>990</b>			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue C	Code (exc	ept private foundations)	2023			
Dono	tmont	of the Treesury	Do not enter social security numbers on this form as i	Open to Public					
Intern	al Reve	of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and the	e latest in	formation.	Inspection			
AF	or th	e 2023 calenda	ar year, or tax year beginning and e	nding					
	heck if oplicab	lo:	organization		D Employer identification	tion number			
	⊃Addre	TREE	RESEARCH AND EDUCATION ENDOWMENT						
	chang Name	ge FUND				_			
	_chang	pe Doing bu	usiness as		37-1018692	2			
	_return ]Final	Number		loom/suite	E Telephone number				
	return termin	ñ-		09	630-369-83				
	ated JAmen	City or to	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	948,587.			
	_return ]Applie	NAPE.	RVILLE, IL 60563		H(a) Is this a group retu				
	_tion pendi	F Name ar	nd address of principal officer: PAUL PUTMAN		for subordinates?				
<u> </u>					H(b) Are all subordinates inclu				
		empt status:	$\underline{X}$ 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or TREEFUND.ORG	527	If "No," attach a lis				
	Vebsi	f organization:	Corporation X Trust Association Other	L Veen	<b>H(c)</b> Group exemption r				
	orm o n <b>rt l</b>	Summary		L Year		State of legal domicile: 11			
	1		e the organization's mission or most significant activities: SUPPO		STATNABLE COM	MIINTTES			
e	•		IRONMENTAL STEWARDSHIP	<u> </u>	DIAIMADDI COM				
Jan	2	Check this box		d of more	than 25% of its not assot				
Governance	3					14			
õ		3 Number of voting members of the governing body (Part VI, line 1a)       3         4 Number of independent voting members of the governing body (Part VI, line 1b)       4							
оо С	5								
itie	6	Total number of	<u> </u>						
Activities &	7 a			0.					
Ā			business taxable income from Form 990-T, Part I, line 11			0.			
					Prior Year	Current Year			
•	8	Contributions	and grants (Part VIII, line 1h)		654,016.	912,370.			
Revenue	9	Program servio	ce revenue (Part VIII, line 2g)		12,659.	11,867.			
eve	10	Investment inc	come (Part VIII, column (A), lines 3, 4, and 7d)		177.	1,905.			
æ	11	Other revenue	(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,335.	-218,129.			
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		668,187.	708,013.			
	13	Grants and sin	nilar amounts paid (Part IX, column (A), lines 1-3)		431,705.	166,570.			
	14		o or for members (Part IX, column (A), line 4)		0.	0.			
ŝ	15		compensation, employee benefits (Part IX, column (A), lines 5-10) $\dots$		308,943.	225,036.			
Expenses			undraising fees (Part IX, column (A), line 11e)	L	0.	0.			
, and the second			ng expenses (Part IX, column (D), line 25) 175, 12	2.	1.60.000	0.4.1 . 0.0.6			
ш	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)		162,032.	241,386.			
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)		902,680.	632,992.			
	19	Revenue less	expenses. Subtract line 18 from line 12	-234,493.	75,021.				
s or		=			ginning of Current Year	End of Year			
Net Assets or -und Balances	20	Total assets (F			5,360,565.	6,023,755.			
et A ind F	21		(Part X, line 26)	·····	<u>391,874.</u> 4,968,691.	<u>325,899.</u> 5,697,856.			
2,7	22	INET ASSETS OF 1	fund balances. Subtract line 21 from line 20		+,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	J,UJ/,0J0.			

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer	Date			
-	PAUL PUTMAN, PRESIDENT &				
	Type or print name and title				
	Print/Type preparer's name	Preparer's signature	Date	Check	PTIN
Paid	IZABELA POLUDNIAK	IZABELA POLUDNIAK		•	P01959192
Preparer	Firm's name SASSETTI LLC			Firm's EIN 36-	2239746
Use Only	Firm's address 2107 SWIFT DRIVE,	SUITE 210			
	OAK BROOK, IL 605	23		Phone no. (708	) 386-1433
May the IF	RS discuss this return with the preparer shown ab	ove? See instructions			X Yes No
LHA For	Paperwork Reduction Act Notice, see the sepa	rate instructions. 332001 12-21-23			Form <b>990</b> (2023)

	TREE RESEARCH AND EDUCATION ENDOWMENT990 (2023)FUND37-1018692Page 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 revenue, if any, for each program service reported.
4a	(Code:)(Expenses \$ 260,014. including grants of \$ 129,140.) (Revenue \$ 12,117.) TREE FUND PROVIDES DIRECTED AND COMPETITIVE GRANTS TO SCHOLARS AND RESEARCHERS TO CONDUCT PRIMARY AND APPLIED RESEARCH TO INCREASE PRACTICAL KNOWLEDGE AND PROMOTE THE BEST TECHNIQUES IN ARBORICULTURE, URBAN FORESTRY, AND RELATED PROFESSIONAL FIELDS. IN FY 2023, TREE FUND ISSUED \$129,140 IN NEW RESEARCH GRANT FUNDING TO FIVE RECIPIENTS IN FIVE GRANT LINES WHILE CONTINUING TO MANAGE 23 MULTI-YEAR GRANTS FROM PRIOR FISCAL YEARS.
4b	(Code:) (Expenses \$ 4,930. including grants of \$ 4,930. ) (Revenue \$) TREE FUND PROVIDES GRANTS TO CHARITABLE ORGANIZATIONS AND IMPLEMENTS PROGRAMS DESIGNED TO INCREASE AWARENESS OF ARBORICULTURE AND URBAN FORESTRY AMONG THE 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 ONE COMMUNITY ENGAGEMENT GRANT VALUED AT \$4,930, WHILE OFFERING FIVE WEBINARS WITH APPROXIMATELY 5,024 ATTENDEES, FROM AROUND THE WORLD AND ISSUING A MONTHLY NEWSLETTER TARGETED TO LAY READERS.
4c	(Code:) (Expenses \$ 32,500. including grants of \$ 32,500. ) (Revenue \$) TREE FUND PROVIDES SCHOLARSHIPS TO ENCOURAGE COLLEGE STUDENTS TO PURSUE
	CAREERS IN ARBORICULTURE AND URBAN FORESTRY. IN FY 2023, TREE FUND ISSUED SEVEN SCHOLARSHIPS.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses 297,444.
332002	Form <b>990</b> (2023) 2 12-21-23 <b>2</b>

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Part IV Checklist of Required Schedules

Form 990 (2023)

			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> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<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			
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			77
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
•	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	9		x
10	If "Yes," complete Schedule D, Part IV	9		<u></u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10	x	
11	or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X,	10		
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes." complete Schedule D.			
u	Part VI	11a	x	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
~	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
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	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u>X</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
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			v
45	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		x	
16	foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15	<u>^</u>	
16		16		х
17	or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		- 22
.,	column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
10	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		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	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			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	x	
			000	

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	990 (2023) FUND 37-101	8692	Р	age <b>4</b>
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		<u> </u>
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%			
	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?			
	"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 noncash contributions? If "Yes," complete Schedule M			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			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)?			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		1.00		
	Check if Schedule O contains a response or note to any line in this Part V			$\square$
		<u></u>	Yes	No
19	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	8	.03	
id h		0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	-		
U	(gambling) winnings to prize winners?	1c	х	
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Form 990 (2023)

Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)								
			Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return 2a 2	<u>.</u>							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b 3a	X	x					
3a									
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X					
b	If "Yes," enter the name of the foreign country								
Ee	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	5a		x					
5a h									
b C									
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	<u>5c</u>		<u> </u>					
u	any contributions that were not tax deductible as charitable contributions?	6a		x					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			<u> </u>					
~	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 payor?	7a	Х						
b	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 year 7d								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X X					
f									
g									
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?								
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
	sponsoring organization have excess business holdings at any time during the year?								
9	Sponsoring organizations maintaining donor advised funds.								
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:								
a ⊾	Initiation fees and capital contributions included on Part VIII, line 12	-							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter:	-							
11	Gross income from members or shareholders 11a								
	Gross income from other sources. (Do not net amounts due or paid to other sources against	1							
5	amounts due or received from them.)								
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.								
	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								
с	Enter the amount of reserves on hand 13c								
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		┝──					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			<u>-</u> -					
	excess parachute payment(s) during the year?	15		X					
	If "Yes," see the instructions and file Form 4720, Schedule N.			37					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X					
-	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities	4-		1					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17							
20000	If "Yes," complete Form 6069.	Form	990	(2023)					
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Form 990 (2023)

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

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	14							
	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	b Enter the number of voting members included on line 1a, above, who are independent 1b 14									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
	officer, director, trustee, or key employee?			2		X				
3										
	of officers, directors, trustees, or key employees to a management company or other person?									
4										
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?									
6	Did the organization have members or stockholders?			6		X				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap					37				
	more members of the governing body?			7a		<u> </u>				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	lockho	lders, or			v				
•	persons other than the governing body?			7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	-	-	0.	Х					
	The governing body? Each committee with authority to act on behalf of the governing body?			8a 0⊾	X					
b				8b						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i>			9		х				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re			9		23				
		venue	Code.)		Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?			10a		X				
	If "Yes," did the organization have written policies and procedures governing the activities of such ch									
		•	,,	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body			11a	Х					
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		C C							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х					
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? /f ">	/es," d	escribe							
	on Schedule O how this was done			12c	Х					
13	Did the organization have a written whistleblower policy?			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	ıl by ind	dependent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
	The organization's CEO, Executive Director, or top management official			15a	X					
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					v				
,	taxable entity during the year?			16a		X				
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat		-							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ			164						
Sec	exempt status with respect to such arrangements?			16b						
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, ar		T (section 501(c)(3)s	only);	availat	ole.				
10	for public inspection. Indicate how you made these available. Check all that apply.	10 000		Unity) (	avanak					
	X       Own website       Another's website       X       Upon request       Other (explain)	1 0n Sr	hedule ()							
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	financ	ial					
	statements available to the public during the tax year.		, and							
20	State the name, address, and telephone number of the person who possesses the organization's boo	oks and	l records							
	THE CHARITY CFO, LLC - (314) 390-1301									
	1310 PAPIN STREET, SUITE 300, SAINT LOUIS, MO 6310	) 3								
332006	12-21-23			Form	990	(2023)				
	6									

Form 990 (2023)

Part VII	Compensation of Officers,	Directors,	Trustees,	Key Employees,	Highest Compensated
	Employees, and Independe	ent Contra	ctors		

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.

(A) Name and title	(B) Average			( <b>(</b> Pos	ition	1		<b>(D)</b> Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated
	hours per week	box	, unles	heck i ss per id a di	rson i	s both	n an	compensation	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 compensated 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) PAUL PUTMAN	40.00							FF 000		0
PRESIDENT/CEO	1 0 0			X				55,000.	0.	0.
(2) PATRICK FRANKLIN	1.00	37		37				•	0	0
CHAIR ELECT (3) ARNOLD BRODBECK	1 00	Х		X				0.	0.	0.
(3) ARNOLD BRODBECK CHAIRMAN	1.00	x		x				0.	0.	0.
(4) JACQUES BRUNSWICK	1.00							0.	0.	0.
TREASURER	1.00	x		x				0.	0.	0.
(5) SHARON JEAN-PHILLIPPE	1.00									
TRUSTEE		х						0.	0.	0.
(6) SAM VANMAANEN	1.00									
TRUSTEE		Х						0.	0.	0.
(7) PETER SMITH	1.00									
TRUSTEE		Х						0.	0.	0.
(8) KATHLEEN WOLF	1.00									_
TRUSTEE		Х						0.	0.	0.
(9) JEFFREY EDGAR	1.00								0	0
TRUSTEE	1 0 0	X						0.	0.	0.
(10) LORI BROCKELBANK	1.00	v						0.	0.	0
TRUSTEE (11) GORDON MANN	1.00	Х						0.	0.	0.
TRUSTEE	1.00	x						0.	0.	0.
(12) DAVID GORDEN	1.00									
TRUSTEE	1.00	х						0.	0.	0.
(13) DANIEL HERMS	1.00									
TRUSTEE		х						0.	Ο.	0.
(14) STEVEN GEIST	1.00									
TRUSTEE		Х						0.	Ο.	0.
(15) RACHEL BARKER	1.00									
VICE CHAIR		Х		X				0.	0.	0.
		1		I .		L				000

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Form 990 (2023)

### 12251108 707170 6735

		EARCH AN	1D	ΕĽ	DUC	'AT	IC	N	ENDOWMENT	20 10	10/		_	•
Form Par	990 (2023) FUND	taan Kay Em				1 [];	abo	+ 0	Componented Employee	37-10	1186	92	P	age <b>8</b>
	(A) (B) Name and title Average (do hours per box					C) itior more rson i		one 1 an	<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation				
		(list any hours for related organizations below line)	Individual trustee or director	In stit utional trustee	Officer	Key em ployee	Highest compensated emplovee	Former	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)		com fro orga and	other oensa om th anizat I relat nizati	ie tion ted
			-											
	Subtotal Total from continuation sheets to Part VI								55,000.		0.			0.
	Total (add lines 1b and 1c) Total number of individuals (including but n								55,000. eceived more than \$100,	000 of reportable	0.			0.
3	compensation from the organization Did the organization list any <b>former</b> officer.	director. trust	ee. k	kev e	empl	ove	e. oi	hic	phest compensated emp	ovee on			Yes	No
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su	<i>uch individual</i> Im of reportabl	le co	ompe	ensa	tion	anc	l otł	ner compensation from t	ne organization		3		X
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a	accrue comper	nsati	on fi	rom	any	unre	elat	ed organization or individ	lual for services		4		X X
Sec	rendered to the organization? If "Yes," cont tion B. Independent Contractors	plete Schedule	e J f	or si	ich i	bers	on					5		Λ
1	Complete this table for your five highest co the organization. Report compensation for	-	-								ensat	ion fro	m	
	(A) Name and business	address	N	ONI	3				<b>(B)</b> Description of s	ervices	C	(C omper		n
2	Total number of independent contractors (i \$100,000 of compensation from the organi	•	ot lir	niteo	d to	thos (		ted	above) who received mo	ore than				

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Ра	τν			=			
		Check if Schedule O contains a response of	or note to any line I	e in this Part VIII (A)	(B)	(C)	[] [ (D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
							Sections 512 - 514
nts nts	1 :	a Federated campaigns 1a					
Gra		b Membership dues 1b					
Contributions, Gifts, Grants and Other Similar Amounts		c Fundraising events 1c	369,675.				
Gifi Iar		d Related organizations 1d					
imi		e Government grants (contributions) 1e	59,591.				
er S	1	f All other contributions, gifts, grants, and					
ibu othe		similar amounts not included above <b>1f</b>	483,104.				
d C	9	g Noncash contributions included in lines 1a-1f	17,000.				
a C		h Total. Add lines 1a-1f		912,370.			
			Business Code				
e	2 8	a GRANT MANAGEMENT FEES	541900	11,867.	11,867.		
evi	I	b					
Se		c					
am eve		d					
Program Service Revenue		e					
Pr	1	f All other program service revenue					
		g Total. Add lines 2a-2f		11,867.			
	3	Investment income (including dividends, interes	st, and				
		other similar amounts)		1,905.			1,905.
	4	Income from investment of tax-exempt bond pr	roceeds				
	5	Royalties					
		(i) Real	(ii) Personal				
	6 :	a Gross rents 6a					
	1	b Less: rental expenses 6b					
		c Rental income or (loss) 6c					
		d Net rental income or (loss)					
	7 :	a Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory <b>7a</b>					
	1	<b>b</b> Less: cost or other basis					
е		and sales expenses <b>7b</b>					
ent		c Gain or (loss) 7c					
Revenue		d Net gain or (loss)					
er		a Gross income from fundraising events (not					
Oth	-	including \$ 369,675. of					
•		contributions reported on line 1c). See					
		Part IV, line 18	22,195.				
		b Less: direct expenses 8b	240,574.				
		c Net income or (loss) from fundraising events		-218,379.			-218,379.
		a Gross income from gaming activities. See					
		Part IV, line 19					
		b Less: direct expenses 9b					
		c Net income or (loss) from gaming activities					
		a Gross sales of inventory, less returns					
		and allowances 10a					
		b Less: cost of goods sold 10b					
		c Net income or (loss) from sales of inventory					
		,,	Business Code				
snc	11 :	a MISCELLANEOUS	900099	250.	250.		
nec		b					
ella 3vel		c					
Miscellaneous Revenue		d All other revenue					
Σ		e Total. Add lines 11a-11d		250.			
	12	Total revenue. See instructions		708,013.	12,117.	0.	-216,474.
33200				•	· ·	·	Form <b>990</b> (2023)

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9

Form 990 (2023)

d

е

f

g

FUND

1000	ion 501(c)(3) and 501(c)(4) organizations must compl		0		Γ
	Check if Schedule O contains a respons not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	ise or note to any line in t (A) Total expenses	(B) Program service expenses	(C) Management and general expenses	L (D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	124,670.	124,670.		•
2	Grants and other assistance to domestic individuals. See Part IV, line 22	32,500.	32,500.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	9,400.	9,400.		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	55,000.	23,601.	7,441.	23,95
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	133,149.	57,135.	18,015.	57,99
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	21,739.	9,320.	2,945.	9,47
0	Payroll taxes	15,148.	6,191.	2,628.	6,32
1	Fees for services (nonemployees):				
а	Management				
b					
с	Accounting	45,303.		45,303.	

51,373.

29,350.

922.

121.

1,688.

2,546.

13,331.

6,684.

9,967.

805.

38.

533.

26,650.

26,086.

		51/5/61
12	Advertising and promotion	6,684.
13	Office expenses	24,587.
14	Information technology	26,650.
15	Royalties	
16	Occupancy	5,940.
17	Travel	26,086.
18	Payments of travel or entertainment expenses	
	for any federal, state, or local public officials $\dots$	
19	Conferences, conventions, and meetings	
20	Interest	
21	Payments to affiliates	
22	Depreciation, depletion, and amortization	280.
23	Insurance	3,936.
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.)	
а	BAD DEBTS	50,547.
b		

Lobbying

Professional fundraising services. See Part IV, line 17

Investment management fees

Other. (If line 11g amount exceeds 10% of line 25,

column (A), amount, list line 11g expenses on Sch 0.)

0,547. 50,547. С d e All other expenses 632,992. 297,444. 160,426. 175,122. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization 26 reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

10

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8,692.

13,698.

2,589.

121.

1,715.

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Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or	note to any	ine in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	587,483.	1	525,483		
	2	Savings and temporary cash investments				2	502,541
	3	Pledges and grants receivable, net			329,241.	3	65,924
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, s	ubstantial co	ntributor, or 35%			
		controlled entity or family member of any of	these perso	s		5	
	6	Loans and other receivables from other disc	ualified pers	ons (as defined			
		under section 4958(f)(1)), and persons descr	ibed in secti	on 4958(c)(3)(B)		6	
S	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Š	9	Prepaid expenses and deferred charges			3,038.	9	27,371
	10a	Land, buildings, and equipment: cost or oth	er				
		basis. Complete Part VI of Schedule D	10a	<u>1,397.</u> 349.			
	b	Less: accumulated depreciation	10b	349.	1,327.	10c	1,048 28,872
	11	Investments - publicly traded securities			26,092.	11	28,872
	12	Investments - other securities. See Part IV, I	ne 11			12	
	13	Investments - program-related. See Part IV,	ine 11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			4,413,384.	15	4,872,516
	16	Total assets. Add lines 1 through 15 (must			5,360,565.	16	6,023,755
	17	Accounts payable and accrued expenses _	38,750.	17	49,066		
	18	Grants payable			353,124.	18	270,895
	19	Deferred revenue		19	5,938		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Compl				21	
ŝ	22	Loans and other payables to any current or	former office	, director,			
Ě		trustee, key employee, creator or founder, s					
Liabilities		controlled entity or family member of any of		22			
	23	Secured mortgages and notes payable to un				23	
	24	Unsecured notes and loans payable to unre				24	
	25	Other liabilities (including federal income tax					
		parties, and other liabilities not included on	lines 17-24).	Complete Part X			
		of Schedule D			201 074	25	
	26	Total liabilities. Add lines 17 through 25			391,874.	26	325,899
s		Organizations that follow FASB ASC 958,	check here	X			
S		and complete lines 27, 28, 32, and 33.			1/1 702		02 007
alai	27	Net assets without donor restrictions	-141,703. 5,110,394.	27	92,097- 5,789,953-		
	28	Net assets with donor restrictions	5,110,394.	28	5,769,955		
ŝ		Organizations that do not follow FASB AS					
5		and complete lines 29 through 33.					
2	29	Capital stock or trust principal, or current fu				29	
200	30	Paid-in or capital surplus, or land, building, o		F		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulate			4,968,691.	31	5,697,856
ž	32	Total net assets or fund balances			5,360,565.	32	6,023,755
	33	Total liabilities and net assets/fund balances	i		5,500,505.	33	Form <b>990</b> (202

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Form 990 (2023)

TREE	RESEARCH	AND	EDUCATION	ENDOWMENT
FIIND				

Form	1 990 (2023) <b>FUND</b>	37-10	18692	Page <b>12</b>
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		,013.
2	Total expenses (must equal Part IX, column (A), line 25)	2		,992.
3	Revenue less expenses. Subtract line 2 from line 1	3		,021.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		,691.
5	Net unrealized gains (losses) on investments	5	654	,144.
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	<u>5,697</u>	<u>,856.</u>
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	<u> </u>
	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	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	

Form **990** (2023)

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SCHEDULE A (Form 990) Department of the Treasury Internal Revenue Service		Co	Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.						OMB No. 1545-0047 <b>2023</b> Open to Public Inspection identification number	
Name	of the organizat	FUND		AND EDUCATION	N ENDC				7-1018692	
Part	I Reason			(All organizations must c	omplete th	nis part.) S	ee instructior		, 1010092	
				For lines 1 through 12, cl						
1 [_ 2 [_ 3 [_ 4 [_	<ul> <li>A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).</li> <li>A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)</li> <li>A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).</li> <li>A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:</li> </ul>									
5	An organiza	tion operated fo	or the benefit of a col	llege or university owned	or operate	ed by a go	vernmental u	nit describe	ed in	
	section 170	<b>)(b)(1)(A)(iv).</b> (0	Complete Part II.)							
6 7 8 9	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
	or university	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or	
10	activities relation	ated to its exen unrelated busir	npt functions, subjec ness taxable income	than 33 1/3% of its supp t to certain exceptions; a (less section 511 tax) fro	and (2) no	more than	33 1/3% of it	s support f	rom gross investment	
11 🗌	_		mplete Part III.)	vely to test for public sat			O(-)(A)			
12 a [ b ]	An organiza more public lines 12a thr <b>Type I.</b> A the suppo organizati	tion organized a ly supported or ough 12d that supporting orga rted organizatio on. <b>You must o</b>	and operated exclusi ganizations describe describes the type or anization operated, s con(s) the power to rea complete Part IV, Se	vely for the benefit of, to d in <b>section 509(a)(1)</b> o f supporting organizatior upervised, or controlled gularly appoint or elect a	perform the section of and composite of the section	he function 509(a)(2). plete lines ported organised f the direct	ns of, or to ca See <b>section</b> 12e, 12f, and anization(s), t tors or truste	<b>509(a)(3).</b> ( I 12g. ypically by es of the su	Check the box on giving ıpporting	
	control or organizatio	management o on(s). <b>You mus</b>	f the supporting organities of the support of the s	anization vested in the sa Sections A and C.	ame perso	ns that co	ntrol or mana	ge the supp	ported	
c		-	• • • •	g organization operated				lly integrate	ed with,	
d [ e [	Type III not that is not requireme	on-functionally functionally int nt (see instruct	v integrated. A suppresented. A suppresented. The organizations). You must contract the supervisions of the supervision of the	). You must complete I porting organization oper ration generally must sat nplete Part IV, Sections written determination from	ated in con isfy a distri <b>A and D,</b>	nnection with the second se	vith its suppo quirement and <b>V.</b>	d an attentiv		
				nally integrated supporti			· )  ·, · )	, .,		
fΕ	Inter the number									
g P	Provide the follow	ving information	n about the supporte							
	(i) Name of sup		(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	inization listed ng document?	(v) Amount o	-	(vi) Amount of other	
	organizatio	11		above (see instructions))	Yes	No	support (see ii	istructions)	support (see instructions)	
Total										

chedule A (Form 990) 2023 FUND

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	A (Form 990)	2023
Part II	Suppor	t Scl

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	<b>(c)</b> 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	617,503.	665,501.	910,425.	878,727.	912,370.	3984526.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	617,503.	665,501.	910,425.	878,727.	912,370.	3984526.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						825,127.
6	Public support. Subtract line 5 from line 4.						3159399.
	tion B. Total Support				•		
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	617,503.	665,501.	910,425.	878,727.	912,370.	3984526.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources					1,905.	1,905.
9	Net income from unrelated business					-	-
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)					250.	250.
11	<b>Total support.</b> Add lines 7 through 10						3986681.
12	Gross receipts from related activities,	etc. (see instructio	ons)			12	348,675.
	First 5 years. If the Form 990 is for the	,	,			01(c)(3)	•
	organization, check this box and stop	-					
Sec	tion C. Computation of Publi		-				
14	Public support percentage for 2023 (I	ine 6, column (f), d	ivided by line 11, c	olumn (f))		14	79.25 %
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	80.82 %
	33 1/3% support test - 2023. If the					ore, check this bo	k and
	stop here. The organization qualifies	as a publicly supp	orted organization				X
b	33 1/3% support test - 2022. If the o	organization did no	t check a box on l				
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact						
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported o	rganization	-	
b	10% -facts-and-circumstances test	-			-		
	more, and if the organization meets th	-					
	organization meets the facts-and-circi						
18	Private foundation. If the organization						
	<u>_</u>		,	. , ,			(Form 990) 2023

Schedule A (Form 990) 2023

TREE RESEARCH AND EDUCATION ENDOWMEN	Т
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Schedule A (Form 990) 2023

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)
Section A. Public Support
Calendar year (or fiscal year beginning in)
(a) 2019
(b) 2020
(c) 2021
(d) 2022
(e) 2023
(f) Total

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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						
<b>3</b> Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
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 disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support			1	-	-	
Calendar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
<ul><li>c Add lines 10a and 10b</li><li>11 Net income from unrelated business</li></ul>						
activities not included on line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part VI.)					1	
14 First 5 years. If the Form 990 is for t		irst second third	fourth or fifth tax	vear as a section P		I
•	•			•		
check this box and stop here Section C. Computation of Pub	lic Support Per	rcentage				<u></u>
15 Public support percentage for 2023		-	column (f))		15	%
			.,,		16	%
16 Public support percentage from 202 Section D. Computation of Inve						%
			ing 12 column (f))		17	
17 Investment income percentage for 2					17	<u>%</u> %
<ul><li>18 Investment income percentage from</li><li>19a 33 1/3% support tests - 2023. If th</li></ul>						
more than 33 1/3%, check this box a	-	•				
<b>b 33 1/3% support tests - 2022.</b> If th line 18 is not more than 33 1/3%, ch	-					
20 Private foundation. If the organizati	on did hot check a	50x 011 III e 14, 19	a, or too, check th	INS DUX AND SEE INS		ule A (Form 990) 2023
332023 12-21-23		15	5		Sched	ME A (FUITH 330) 2023

Schedule A (Form 990) 2023

# 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.)

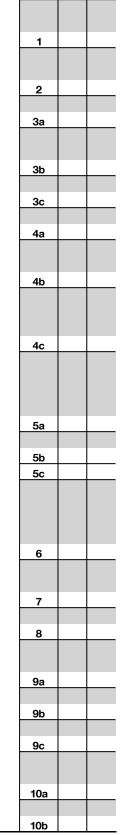
# Section A. All Supporting Organizations

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.)

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37-1	018692	Page 4

Yes No

Schedule A (Form 990) 2023

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Pa	rt IV	Supporting Organizations (continued)			
				Yes	No
11	Has th	he organization accepted a gift or contribution from any of the following persons?			
		son who directly or indirectly controls, either alone or together with persons described on lines 11b and			
u	-	elow, the governing body of a supported organization?	110		
			11a		<u> </u>
		ily member of a person described on line 11a above?	11b		
с		6 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
0	<u>detail</u>	<i>in</i> Part VI.	11c		
Sec		3. Type I Supporting Organizations			
				Yes	No
1		e governing body, members of the governing body, officers acting in their official capacity, or membership of on			
		supported organizations have the power to regularly appoint or elect at least a majority of the organization's offic	ers,		
		ors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			
		ively operated, supervised, or controlled the organization's activities. If the organization had more than one support			
		ization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among t orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	ne <b>1</b>		
2		e organization operate for the benefit of any supported organization other than the supported			
-		ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
		<i>I</i> how providing such benefit carried out the purposes of the supported organization(s) that operated,	0		
Sec	<u>super</u>	vised, or controlled the supporting organization.	2		
				Yes	No
1		a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trus	stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or ma	nagement of the supporting organization was vested in the same persons that controlled or managed			
	the su	ipported organization(s).	1		
Sec	tion L	D. All Type III Supporting Organizations			
				Yes	No
1	Did th	e organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organ	ization'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			
		ization'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			
-		ization(s) or (ii) serving on the governing body of a supported organization? If "No." explain in <b>Part VI</b> how			
			2		
2		ganization maintained a close and continuous working relationship with the supported organization(s).			
3		ason of the relationship described on line 2, above, did the organization's supported organizations have a			
	-	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			
<u> </u>	suppo	orted organizations played in this regard. E. Type III Functionally Integrated Supporting Organizations	3		
Sec					
1		k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	ictions).		
а		The organization satisfied the Activities Test. Complete line 2 below.			
b		The organization is the parent of each of its supported organizations. Complete line 3 below.			
с		The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity	/ (see instructic	n <u>s).</u>	
2	Activi	ties Test. Answer lines 2a and 2b below.		Yes	No
а	Did su	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the su	upported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those	supported organizations and explain how these activities directly furthered their exempt purposes,			
		he organization was responsive to those supported organizations, and how the organization determined			
		hese activities constituted substantially all of its activities.	2a		
b		e 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			
		I the reasons for the organization's position that its supported organization(s) would have engaged in			
		activities but for the organization's involvement.	2b		
3		t of Supported Organizations. Answer lines 3a and 3b below.	25		
		a composition have the neuron to regularly enclosed and ob below.			

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? 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. 332025 12-21-23

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3b Schedule A (Form 990) 2023

3a

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	TREE RESEARCH AND EDUCAT	ION	ENDOWMENT	
Sche	edule A (Form 990) 2023 <b>FUND</b>			37-1018692 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	j 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 o	rganization (see

instructions).

Schedule A (Form 990) 2023

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	dule A (Form 990) 2023 FUND			3	7-1018692 Pag	e 7
Par		a)(3) Supporting Orga	nizations (continu	ied)		
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	es of supported organizations	6	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 ( <i>describe in</i> <b>Part VI</b> ). 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 <b>Part VI</b> ). See instructions.			8		
9	Distributable amount for 2023 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount	(1)	(**)	10		
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	IS	(iii) Distributable Amount for 2023	
1	Distributable amount for 2023 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2023 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2023					
a	From 2018					
b	From 2019					
C	From 2020					
d	From 2021					
e	From 2022					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
h	Applied to 2023 distributable amount					
<u>i</u>	Carryover from 2018 not applied (see instructions)					
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2023 from Section D,					
	line 7: \$					
<u>a</u>	Applied to underdistributions of prior years					
b	Applied to 2023 distributable amount					
	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2024. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
	Excess from 2019					
	Excess from 2020					
	Excess from 2021					
	Excess from 2022					
e	Excess from 2023					

Schedule A (Form 990) 2023

332027 12-21-23

	(Form 990) 2023	TREE FUND	RESEARCH	AND	EDUCATION	ENDOWMENT	37-1018692 Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1,	mation. 2, 3b, 3c, lines 2 and	4b, 4c, 5a, 6, 9a, I 3; Part IV, Sectio	9b, 9c, 1 on E, line:	11a, 11b, and 11c; s 1c, 2a, 2b, 3a, an	Part IV, Section B, lin d 3b; Part V, line 1; P	a or 17b; Part III, line 12; les 1 and 2; Part IV, Section C, art V, Section B, line 1e; Part V,
332028 12-21-2	23				20		Schedule A (Form 990) 2023

SC	HEDULE D	Supplementa	al Financial Statements	OMB No. 1545-0047
	n 990)		nization answered "Yes" on Form 990,	2023
Depart	ment of the Treasury		, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b .ttach to Form 990.	Open to Public
	Revenue Service	Go to www.irs.gov/Form99	0 for instructions and the latest informat	ion. Inspection
Nam	e of the organization		EDUCATION ENDOWMENT	Employer identification number
<b>D</b> -		FUND		37-1018692
Par		n answered "Yes" on Form 990, Part IV, lin	d Funds or Other Similar Funds o	<b>Dr Accounts.</b> Complete if the
	organization	Tanswered Tes OffForm 990, Fartiv, in	(a) Donor advised funds	(b) Funds and other accounts
-	Total number at an	ad of yoor		
1 2		nd of year		
2		f contributions to (during year) f grants from (during year)		
4		t end of year		
-+ 5			writing that the assets held in donor advise	d funds
5	-		exclusive legal control?	
6			dvisors in writing that grant funds can be u	
Ŭ	•	<b>c</b>	r donor advisor, or for any other purpose of	2
Par			ganization answered "Yes" on Form 990, P	
1		ervation easements held by the organization		,
		of land for public use (for example, recrea		a historically important land area
		f natural habitat		a certified historic structure
	Preservation	of open space		
2	Complete lines 2a	through 2d if the organization held a qualit	ied conservation contribution in the form o	f a conservation easement on the last
	day of the tax year	2		Held at the End of the Tax Year
а	Total number of co	onservation easements		2a
b				
с	Number of conserv	vation easements on a certified historic stru	ucture included on line 2a	2c
d	Number of conserv	vation easements included on line 2c acqu	ired after July 25, 2006, and not	
	on a historic struct	ture listed in the National Register		2d
3	Number of conserv	vation easements modified, transferred, rel	eased, extinguished, or terminated by the o	organization during the tax
	year			
4		where property subject to conservation eas		
5		tion have a written policy regarding the per		
		orcement of the conservation easements it		
6	Staff and voluntee	r hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	ervation easements during the year
-				
7	Amount of expens	es incurred in monitoring, inspecting, nanc	lling of violations, and enforcing conservati	on easements during the year
8		wation assement reported on line 2d above	satisfy the requirements of section 170(h)(	4)/P)/j)
0		-		
9			on easements in its revenue and expense s	
•		•	note to the organization's financial statemen	
		ounting for conservation easements.		
Par			Art, Historical Treasures, or Oth	er Similar Assets.
		the organization answered "Yes" on Form		
1a	If the organization	elected, as permitted under FASB ASC 95	8, not to report in its revenue statement an	d balance sheet works
	of art, historical tre	asures, or other similar assets held for put	blic exhibition, education, or research in fur	therance of public
	service, provide in	Part XIII the text of the footnote to its finar	ncial statements that describes these items	i.
b	If the organization	elected, as permitted under FASB ASC 95	8, to report in its revenue statement and ba	alance sheet works of
	art, historical treas	ures, or other similar assets held for public	exhibition, education, or research in furthe	erance of public service,
	provide the followi	ng amounts relating to these items.		
	(i) Revenue inclue	ded on Form 990, Part VIII, line 1		\$
	(ii) Assets include	ed in Form 990, Part X		\$
2	If the organization	received or held works of art, historical tre	asures, or other similar assets for financial	
	-	unts required to be reported under FASB A	-	
LHA	For Paperwork Re	eduction Act Notice, see the Instructions	s for Form 990.	Schedule D (Form 990) 2023
332051	09-28-23		36	
			26	

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~	2		^	-	^	^	^

<b>FREE</b>	RESEARCH	AND	EDUCATION	ENDOWMENT

	TREE RES	SEARCH AND	EDUCATION	ENDOWMENT					
Sche	dule D (Form 990) 2023 <b>FUND</b>					37-10			age <b>2</b>
Par	t III Organizations Maintaining Co	ollections of Art	, Historical Tre	asures, or Othe	er Simi	lar Assets	s (contir	nued)	
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	significar	nt use of its		-	
~	Public exhibition	d		hange program					
a L		a		nange program					
b	Scholarly research	e							
c	Preservation for future generations		la a dla a 6dla a dla			n n n n in Daut	VIII		
4	Provide a description of the organization's co					pose in Part	XIII.		
5	During the year, did the organization solicit or to be sold to raise funds rather than to be ma		•				Yes		No
Par	t IV Escrow and Custodial Arrang	jements Complet							
	reported an amount on Form 990, Part								
1a	Is the organization an agent, trustee, custodia						_	_	_
	on Form 990, Part X?					L	Yes		No
b	If "Yes," explain the arrangement in Part XIII a	nd complete the foll	owing table:		_				
							Amoun	t	
С	Beginning balance				10	;			
d	Additions during the year				10	1			
	Distributions during the year					•			
f	Ending balance					F			
2a	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	provided in Part XIII					
Par	t V Endowment Funds Complete if	the organization ans	wered "Yes" on For	m 990, Part IV, line	10.				
		(a) Current year	(b) Prior year	(c) Two years back		ee years back	(e) Four	' years	back
1a	Beginning of year balance	5,028,073.	5,845,455.	5,291,751.	5	,044,344.	4	,439	820.
	Contributions	99,357.	98,754.			72,892.		296	550.
	Net investment earnings, gains, and losses	650,728.	-713,483.			608,491.	1. 725,175.		
	Grants or scholarships	,		,		,			
	Other expenditures for facilities								
C		172,548.	181,808.	176,969.		417,012.		398	205.
f	Administrative expenses	19,049.	20,845.			16,964.			996.
		5,586,561.	5,028,073.	,		,291,751.	-		
-	End of year balance	, ,		, ,		, 201, 101.		, • • • • ,	
2	Provide the estimated percentage of the curre	100		) held as:					
a	Board designated or quasi-endowment		_%						
a	Permanent endowment	%							
С	,	6							
_	The percentages on lines 2a, 2b, and 2c should				_				
3a	Are there endowment funds not in the posses	ision of the organizat	tion that are held ar	nd administered for t	he		ſ	V.	
	organization by:							Yes	No
	(i) Unrelated organizations?						3a(i)	Х	<b></b>
							3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organizat	ions listed as require	ed on Schedule R?				3b		
4	Describe in Part XIII the intended uses of the		vment funds.						
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	ther (b) Cost	or other (c)	Accumul	ated	<b>(d)</b> Boo	k valu	ie
		basis (investm	nent) basis	(other) d	epreciati	on			
1a	Land								
b	Buildings								
с	Leasehold improvements								
	Equipment			1,397.		349.		1,0	48.
	Other			-					
_	. Add lines 1a through 1e. (Column (d) must ed		K line 10c column	(B))				1,0	48.

Schedule D (Form 990) 2023

TREE	RESEARCH	AND	EDUCATION	ENDOWMENT

Schedule D	(Form 990) 2023	FUND		31	7-1018692 Page 3
Part VII	Investments	- Other Securities			
	Complete if the o	rganization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Descrip	otion of security or cat	egory (including name of security)	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1) Financi	al derivatives				
(2) Closely		ts			
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	b) must equal Form 9	90, Part X, line 12, col. (B))			
Part VIII	Investments	- Program Related.	1		
	Complete if the o	rganization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
	(a) Description		(b) Book value	(c) Method of valuation: Cost or er	id-of-year market value
(1)	., .				•
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Col. ( Part IX	b) must equal Form 9 Other Assets	90, Part X, line 13, col. (B))			
	Complete if the o	rganization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	1
			Description		(b) Book value
		INTEREST IN IN	VESTMENTS HELI	D BY CHICAGO	
(2) CC	MMUNITY T	RUST			4,872,516.
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colu			I. (B))		4,872,516.
Part X	Other Liabilit	ies			
	Complete if the o	rganization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	5.
1.	(a)	Description of liability			(b) Book value
(1) Feo	leral income taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	imn (h) must equal	Form 990. Part X. line 25. co	(B))		
	., ,		( )/	the organization's financial statements	that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII .... X

Schedule D (Form 990) 2023

	t XI Reconciliation of Revenue per Audited Financial Sta	tements With	Revenue per Re		LUIUUJZ Page
IU	Complete if the organization answered "Yes" on Form 990, Part IV, lir			carri	
1				1	1,663,820.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			-	1,005,020.
2 a		2a	654,144.		
a b	Net unrealized gains (losses) on investments	······	61,089.		
	Donated services and use of facilities		01,005.		
c d	Recoveries of prior year grants		240,574.		
	Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b>		-	2e	955,807.
e	0			 3	708,013.
3 4	Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part VIII, line 12, but not on line 1:			3	700,015.
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
a h					
D D				4c	0.
C					
E	Total revenue Add lines 2 and 40 (This and 15 and 15 and 16 and 1	1		<b></b>	
5 Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII Reconciliation of Expenses per Audited Financial Sta	) atements With	Expenses per F	5 Returr	708,013.
	rt XII Reconciliation of Expenses per Audited Financial Sta	atements With	Expenses per F		
	rt XII Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered "Yes" on Form 990, Part IV, lir	atements With	Expenses per F		
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	atements With	Expenses per F	Return	1
<b>Pa</b>	<b>rt XII Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lin         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:	atements With	Expenses per F	Return	1
Pa 1 2	<b>Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lin         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities	atements With ne 12a. 	Expenses per F	Return	1
Pa 1 2 a	<b>Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lir         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments	atements With           ne 12a.	Expenses per F	Return	1
Pa 1 2 a b	<b>Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lir         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses	atements With           ne 12a.           2a           2b           2c	Expenses per F	Return	1
Pa 1 2 a b	<b>Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lir         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a           2b           2c           2d	Expenses per F 61,089. 240,574.	Return	1
Pa 1 2 a b c d	<b>rt XII Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lin         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines <b>2a</b> through <b>2d</b>	2a           2b           2c           2d	Expenses per F 61,089. 240,574.	1	934,655.
Pa 1 2 b c d e	<b>Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lir         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a           2b           2c           2d	Expenses per F 61,089. 240,574.	1 2e	934,655. 301,663.
Pa 1 2 a b c d e 3	<b>TXII Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lin         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a           2b           2c           2d	Expenses per F 61,089. 240,574.	1 2e	934,655. 301,663.
Pa 1 2 a b c d e 3 4	<b>rt XII Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lin         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1	2a         2b         2c         2d	Expenses per F 61,089. 240,574.	1 2e	934,655. 301,663.
Pa 1 2 a b c d e 3 4 a	<b>Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lin         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	2a         2b         2b         2c         2d	Expenses per F 61,089. 240,574.	1 2e	934,655. 301,663.
Pa 1 2 a b c d e 3 4 a	<b>Reconciliation of Expenses per Audited Financial Sta</b> Complete if the organization answered "Yes" on Form 990, Part IV, lin         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)	2a           2b           2c           2d	Expenses per F 61,089. 240,574.	1 2e 3	934,655. 301,663. 632,992.

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, 2023. 332054 09-28-23 Schedule D (Form 990) 2023

12251108 707170 6735

29

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, 2023.

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 XII, LINE 2D - OTHER ADJUSTMENTS:

DIRECT EXPENSES OF SPECIAL EVENTS NETTED AGAINST

FUNDRAISING REVENUE

Schedule D (Form 990) 2023

240,574.

240,574.

332055 09-28-23

SC	HEDULE F		Stateme	nt of Act	ivities Outside the Un	ited Sta	ites	ON	IB No. 1545-0047
(Fo	rm 990)		Complete if the	organization a	nswered "Yes" on Form 990, Part IV,	line 14b, 15, o	or 16.	2	2023
	tment of the Treasury al Revenue Service		Gotow	ww.irs.cov/Form	Attach to Form 990. 1990 for instructions and the latest in	nformation		Open Inspe	to Public
Nam	e of the organization						Employer	identifi	cation number
		Infor	mation on A	ctivities Out	side the United States. Comple	ete if the organ	ization answ	/ered "Y	es" on
	Form 990, I								
1					ds to substantiate the amount of its gra he selection criteria used to award the			X	Yes 🗌 No
2	For grantmakers. United States.	Desc	ribe in Part V the	e organization's p	procedures for monitoring the use of its	grants and ot	her assistan	ce outsi	de the
3		on. (Th			n be duplicated if additional space is n				
	<b>(a)</b> Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	<ul> <li>(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)</li> </ul>	is a pro describe	vity listed in gram service specific typ (s) in the reg	e, De	(f) Total expenditures for and investments in the region
3 a	Subtotal		0	0					0.
	Total from continu	ation	~						
с	sheets to Part I Totals (add lines 3		0	0					0.
	and 3b)		0	0					٥.

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

Schedule F (Form 990) 2023

LHA 332071 11-29-23

37-1018692

Schedule F (Form 990) 2023

Part II G

**I** 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>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	<b>(h)</b> Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	TO SUPPORT RESEARCH	7,800.	ELECTRONIC FUNDS	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax

exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2023

Page 2

# 37-1018692

Schedule F (Form 990) 2023

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.

#### Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	<b>(b)</b> Region	(c) Number of recipients	<b>(d)</b> Amount of cash grant	<b>(e)</b> Manner of cash disbursement	<b>(f)</b> Amount of noncash assistance	(g) Description of noncash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2023

Page 3

Schedu	Ile F (Form 990) 2023 <b>FUND</b>	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 the 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 the 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? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)	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 the 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," <i>the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)</i>	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 the Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2023

Schedule F	(Form 990)	2023	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) 2023

12251108 707170 6735

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctivities	OMB No. 1545-0047
(Form 990)		e organization answered "Yes" on organization entered more than \$15				r 19, or if the	2023
Department of the Treasury	C	Attach to Form 990 of					Open to Public
Internal Revenue Service	Go t	o www.irs.gov/Form990 for instruc				ı.	Inspection
Name of the organization	TREE RE FUND	SEARCH AND EDUCATIO	ON E	ENDO	OWMENT	Employer 37-10	identification number
Part I Fundrais		Complete if the organization answe	red "Y	es" or	n Form 990. Part IV. li		
required to	complete this part	t.			,,, .		
<ul> <li>a Ail solicitat</li> <li>b Internet and</li> <li>c Phone solicitat</li> <li>d In-person so</li> <li>2 a Did the organization</li> <li>key employees list</li> </ul>	ions email solicitations tations licitations on have a written o ed in Form 990, Pa highest paid indiv	f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with pr viduals or entities (fundraisers) pursua	tion of tion of fundra (includ	non-g gover iising o ling of onal fu	overnment grants nment grants events ficers, directors, trust undraising services?		Yes No
(i) Name and address or entity (fund		(ii) Activity	(iii) fundr have cr or con contribu	ustody itrol of	(iv) Gross receipts from activity	(v) Amount pai to (or retained b fundraiser listed in col. (i	by) to (or retained by)
			Yes	No			
Total							
3 List all states in whi or licensing.	ch the organizatio	n is registered or licensed to solicit c	ontrib	utions	or has been notified	it is exempt fron	n registration

Schedule G (Form 990) 2023

LHA 332081 09-13-23

FUND

		Fundraising Events. Complete if the	ne organization answered	l "Yes" on Form 990, Part	IV, line 18, or reported	more than \$15,000
		of fundraising event contributions and gr	oss income on Form 990	-EZ, lines 1 and 6b. List e		s greater than \$5,000.
			(a) Event #1(b) Event #2(c) Other eventsTOUR DESNONETREES			
			(event type)	(event type)	(total number)	col. <b>(c)</b> )
Revenue	1	Gross receipts	391,870.			391,870.
	2	Less: Contributions	369,675.			369,675.
$\square$	3	Gross income (line 1 minus line 2)	22,195.			22,195.
	4	Cash prizes				
ő	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	101,175.			101,175.
rect	7	Food and beverages	14,771.			14,771.
ā	8	Entertainment				
		Other direct expenses				124,628.
		Direct expense summary. Add lines 4 through		· · ·		240,574.
	11	Net income summary. Subtract line 10 from I	ine 3, column (d)			-218,379.
Pa						
		\$15,000 on Form 990-EZ, line 6a.				
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Be	1	Gross revenue				
s		Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct I	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	│	└── Yes % └── No	└── Yes % └── No	
- 1			h 5 in column (d)			
	7	Direct expense summary. Add lines 2 through				
		Net gaming income summary. Subtract line 7				
9	8		' from line 1, column (d)			

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

332082 09-13-23

Schedule G (Form 990) 2023

No

TREE RESI	EARCH ANI	) EDUCATION	ENDOWMENT
-----------	-----------	-------------	-----------

Sch	edule G (Form 990) 2023	FUND		37-2	L018692	Page <b>3</b>
	Does the organization conduct ga	aming activities with nonme	embers?		Yes	No
	Is the organization a grantor, ben					
	to administer charitable gaming?				Yes	No
13	Indicate the percentage of gamin	a activity conducted in:				
	The organization's facility				13a	%
	• An outside facility				13b	%
	Enter the name and address of th					,,,
			organization o gaming, special			
	Name					
	Address					
15a	a Does the organization have a con	tract with a third party fron	n whom the organization receive	es gaming revenue?	Yes	No No
k	If "Yes," enter the amount of gam	ing revenue received by th	e organization \$	and the amount		
	of gaming revenue retained by th	e 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					
		<u> </u>				
	Director/officer	Employee	Independent contractor	ſ		
	Mandatory distributions:					
a	a Is the organization required unde	r state law to make charital	ble distributions from the gaming	g proceeds to		<b>—</b>
	retain the state gaming license?				Yes	└── No
k	Enter the amount of distributions	•	•	organizations or spent in the		
Do	organization's own exempt activit Int IV Supplemental Infor		\$			h 10h
10			ny additional information. See in	e 2b, columns (iii) and (v); and Pa	rt III, lines 9, 9	D, TUD,
	150, 150, 16, and 170, as	applicable. Also provide a	ny additional mormation. See i			
_						
3320	83 09-13-23			Sched	lule G (Form 9	990) 2023

		TREE	RESEARCH	AND	EDUCATION	ENDOWMENT		
Schedule G	(Form 990) Supplemental Inform	FUND mation	(continued)				37-1018692	Page 4
			continued)					
							Cabadula O (C-	orm 000'
							Schedule G (Fo	лтп <del>9</del> 90)

332084 04-01-23

SCHEDULE I	G	arants and Oth	ner Assistand	ce to Organ	izations.		OMB No	. 1545-0047
(Form 990)	Go	vernments, an ete if the organization	nd Individual	s in the Ŭni <sup>.</sup>	ted States		20	)23
Department of the Treasury Internal Revenue Service		Go to www.irs	Attach to Form a.gov/Form990 for		ation.			to Public ection
Name of the organization TREE RESE. FUND	ARCH AND	EDUCATION E	NDOWMENT				Employer identificat 37-10	tion number 018692
Part I General Information on Grants a	nd Assistance							
1 Does the organization maintain records t criteria used to award the grants or assis	tance?				•			🗌 No
2 Describe in Part IV the organization's pro Part II Grants and Other Assistance to I		<u> </u>			anization answord "V	os" on Form 000 Part	t IV line 21 for any	
recipient that received more than \$	•					es on on on 350,1 an		
<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose o or assistar	
WEST VIRGINIA UNIVERSITY ONE WATERFRONT PLACE MORGANTOWN, WV 26506	55-0492006	501(C)(3)	49,940.	0.			SUPPORT RESEARCH	ι
PENNSYLVANIA STATE UNIVERSITY 227 W BEAVER AVE STATE COLLEGE, PA 16801	24-6000376	E01/(C)/(2)	25,322.	0.			SUPPORT RESEARCH	,
UNIVERSITY OF VIRGINIA, SCHOOL OF ARCHITECTURE - PO BOX 400218 - CHARLOTTESVILLE, VA 22904	54-1682176		29,040.	0.			SUPPORT RESEARCH	
THE DAVEY INSTITUTE 1500 MANTUA ST KENT, OH 44240			14,888.	0.			SUPPORT RESEARCH	ſ
<ul> <li>2 Enter total number of section 501(c)(3) and</li> <li>3 Enter total number of other organizations</li> </ul>			e line 1 table				·····	<u> </u>

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2023

FUND

37-1018692

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. 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	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
HOLARSHIPS	7	32,500.	٥.		

**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 19:

UPON WRITTEN REQUEST

FORM 990, PART XII, LINE 2C

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. LHA 332211 11-14-23 42

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HERE	WAS	NO	CHANGE	IN	AUDIT	OVERSIGHT	PROCESS	FROM	THE	PR	IOR	YEAR.		
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