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TWP 06/17/2010 12 10 PM

Form **990** 

Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047 2009 Open to Public

Inspection

Form **990** (2009)

and ending For the 2009 calendar year, or tax year beginning Please **Employer identification number** Check if applicable C Name of organization use IRS TREES, WATER AND PEOPLE Address change label or 84-1462044 Doing Business As print or Name change type. Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Initial return See 970-484-3678 633 REMINGTON Specific Termination 1,562,146 City or town, state or country, and ZIP + 4 G Gross receipts\$ Instruc-80526 FORT COLLINS CO Amended return tions. Name and address of principal officer H(a) Is this a group return for Application pending X RICHARD FOX No affiliates? Yes H(b) Are all affiliates included? 633 REMINGTON CO 80526 FORT COLLINS If "No." attach a list (see instructions) **X** 501(c) ( 3 ) **◄** (insert no ) Tax-exempt status 4947(a)(1) or 527 website: ▶ treeswaterpeople.org **H(c)** Group exemption number ▶ Type of organization X Corporation Trust Other > Year of formation M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities IMPROVING PEOPLE'S LIVES BY HELPING COMMUNITIES PROTECT, CONSERVE AND SEANINED A LAGuiguides & Bollernance MANAGE THE NATURAL RESOURCES UPON WHICH THEIR LONG-TERM WELL-BEING DEPENDS. 2 Check this box | If the organization discontinued its operations or disposed of more than 25% of its net assets. 11 3 Number of voting members of the governing body (Part VI, line 1a) 11 Number of independent voting members of the governing body (Part VI, line 1b) 4 13 Total number of employees (Part V, line 2a) 5 111 6 Total number of volunteers (estimate if necessary) 6 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a 7b b Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** 8 Contributions and grante E 和 四以作的 1,265,404 1,528,825 Program service revenue (Part VIII, line 2a) Investment income (Part VIII, column (A), lines 3, 4, and 7d)

Other revenue (Part VIII, column (A), lines 5, 60, 8c, 9c, 10c, and 11e)

Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) -876 4,893 40,853 14,029 1,305,381 1,547,747 611,773 650,683 Grants and similar amounts pard (Hart IX Column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 364,801 391,648 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 100,118 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 315,538 306,816 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 1,349,147 1,292,112 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 13,269198,600 19 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 874,223 1,108,301 20 Total assets (Part X, line 16) 197,345 200,439 21 Total liabilities (Part X, line 26) 676,878 907,862 22 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have-gxamined this return, including accompanying schedules and statements, and to the best of my knowledge Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Sian NATIONA Date DINELFOR Here Signature of officer Type or print name and title Preparer's identifying number Check if Preparer's (see instructions) Paid 06/17/10 P00055827 signature employed > Preparer's KITTY PETERSON & ASSOCIATES, 84-1526311 FIN D Firm's name (or yours **Use Only** 231 W 4th St ıf self-employed), address, and ZIP + 4 ▶ 970-663-3564 Loveland, CO 80537-5524 May the IRS discuss this return with the preparer shown above? (see instructions) Yes

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Part III S	tatement of Program Se	rvice Accomplishments	~	
IMPROVI		ES BY HELPING COMMUNITIES		
MANAGE !	THE NATURAL RES	OURCES UPON WHICH THEIR	LONG-TERM WELL-BEIN	G DEPENDS.
2 Did the orga	nızatıon undertake any sıgnıfica	ant program services during the year which were r	not listed on	
-	m 990 or 990-EZ? cribe these new services on Sc	chedule O		Yes X No
3 Did the orga services?	nization cease conducting, or r	nake significant changes in how it conducts, any p	program	Yes X No
If "Yes," des	cribe these changes on Sched	ule O		
	• • •	s for each of the organization's three largest progi	•	
		ns and section 4947(a)(1) trusts are required to re nd revenue, if any, for each program service repor	-	
WATERSHI ENVIRONI SALVADOI REGIONA TECHNIC MONTANA COMMUNI & RESTO	TIONAL PROGRAM ED PROTECTION, MENTAL EDUCATION R, GUATAMALA, H L PROGRAM - PROT AL ASSISTANCE TO AND SO. DAKOTA TY RESOURCE PROT RATION.	- DEVELOPED TREE PLANTING FUEL EFFICIENT STOVE & N PROGRAMS IN HONDURAS, NAITI & NICARAGUA VIDING CAPACITY BUILDING WATERSHED GROUPS IN CO.	TRAINING & LO., WYO.,	)
	PROGRAM - WORKI CATION TRAINING	NG ON PINE RIDGE RESERVA	TION WITH RENEWABLE	ENERGY
4b (Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4c (Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4d Other progra	am services (Describe in Sche	dule O )		
(Expenses	\$	ncluding grants of \$)	(Revenue \$	
4e Total progra	am service expenses >	1,031,902		Form <b>990</b> (2009)
				rom 330 (2009)

# Part IV Checklist of Required Schedules

	_		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	_1_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	1		
	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? If "Yes," complete	_ i		
_	Schedule C, Part II	4		<u> </u>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	_		
_	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			3.5
_	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,"			x
^	complete Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	· · · · · · · · · · · · · · · · · · ·	9		
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	x	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	-10		
• •	VII, VIII, IX, or X as applicable	11	x	
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
•	Schedule D, Part VI			
_	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			
	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			
	Did the organization report an amount for other assets related 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			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
	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? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12	X	
I2A	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		_X_
l4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	_X_	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
_	If "Yes," complete Schedule G, Part III	19		<u> </u>
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
		Form	990	(2009)

# Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		Yes	No
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	x	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		x
24a				
<b>-</b> 7a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25	24a	,	x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception.  Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
·		24c		
d	to defease any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		•
	· · · · · · · · · · · · · · · · · · ·	240		<u> </u>
23a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	250		x
<b>.</b>	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	· · · · · · · · · · · · · · · · · · ·			
	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	256		x
26		25b		
20	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	20		x
27	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	-	
21	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?  If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	-21		
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	ŀ	X
a b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	20a		
U	Schedule L, Part IV	28b		x
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a	200		
٠	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		$\frac{\mathbf{x}}{\mathbf{x}}$
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	23		
-	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,			
<b>J</b> 1	Part I	31	i	x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
J_	Schedule N, Part II	32	ĺ	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u>  32</u>		
•	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, Parts II,	<del>  "</del>		
•	III, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	57		
•	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	┝╩┤		<del></del> -
•	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	┝╩┤		
٠,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	┝┷┤		<u></u>
,,	19? <b>Note</b> . All Form 990 filers are required to complete Schedule O	38		x
	o e equited to complete Schedule O			(0000)

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Form **990** (2009)

	Otatements Regarding other mes I imige and Tax combinance				_	
10	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1 1			Yes	No
ıa	U.S. Information Returns Enter -0- if not applicable	1a	3			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b				
c	Did the organization comply with backup withholding rules for reportable payments to vendors and rep				1	
·		Juliani	C	1c	1	x
2a	gaming (gambling) winnings to prize winners?  Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			10	<b></b>	-
Za	Statements, filed for the calendar year ending with or within the year covered by this return	2a	13			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	x	ŀ
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see				==	
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	d bv				
	this return?	,		3a	1	х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authori	tv			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin		•			
	account)?			4a	1	x
b	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Bank				
	and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?		5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega					
	Prohibited Tax Shelter Transaction?	_		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	е				
	organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or				
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	oods				
	and services provided to the payor?			7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	S				
	required to file Form 8282?	, ,		7c	ļ	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersona	ıl		1	
	benefit contract?			7e	ļ	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f	<del>ļ      </del>	X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			<u>7g</u>	<b>├</b> —	<u> </u>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C	as				
_	required?			7h	X	<del> </del>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting					
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				ĺ	ŀ
_	organization, have excess business holdings at any time during the year?			8		ļ
9	Sponsoring organizations maintaining donor advised funds.			100	1	İ
a	Did the organization make any taxable distributions under section 4966?			9a_	1	<del>                                     </del>
b 10	Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter			9b		<del>                                     </del>
10		10a				
a h	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a	<u>.</u> .			
b 11	Section 501(c)(12) organizations. Enter	.00				
ii a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against	, ia				
	amounts due or received from them )	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a	1	Ī
	If "Yes." enter the amount of tax-exempt interest received or accrued during the year	12b		120		

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Secti	ion C.	Disc	losure

with a taxable entity during the year?

17 List the states with which a copy of this Form 990 is required to be filed

the organization's exempt status with respect to such arrangements?

If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement

b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard

Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) 18 available for public inspection. Indicate how you make these available. Check all that apply

Own website Another's website X Upon request

- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public
- State the name, physical address, and telephone number of the person who possesses the books and records of the 20 633 REMINGTON organization > TREES, WATER & PEOPLE

CO 80537

970-484-3678

16a

X

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed
- 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. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

X Check this box if the organization		nsat	e an			offic	er, đ			
(A) Name and Title	(B) Average	Pos	ition (	•	C) k all i	that a	(viga	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	or director		Officer			,	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
JENNY BRAMHALL	-									-
DIRECTOR	5.00	X				1		0	0	0
LAURA DAVIS										
DIRECTOR	5.00	X						0	0	0
KATHY COSGROVE GE	REEN									-
DIRECTOR	5.00	X			Ĺ			0	0	0
JEREMY FOSTER										
DIRECTOR	5.00	X						0	0	0
GARTH ROGERS										
DIRECTOR	5.00	X						0	0	0
GERRY CONWAY, JR										···
DIRECTOR	5.00	X				İ		0	0	0
PATRICK FLYNN	]									
DIRECTOR	5.00	X						0	0	0
JIM VOLPA										
V-PRESIDENT	10.00		<u> </u>	X				0	0	0
JON BECKER								_		_
PRESIDENT	10.00		<u> </u>	X	L.		<b>—</b>	0	0	0
ADELE DINSMORE						ļ		_		_
SECRETARY	10.00	<u> </u>	<u> </u>	X	<u> </u>	_		0	0	0
KEVIN SHAW										_
TREASURER	10.00	$\vdash$		X	ļ			0	0	0
		$\vdash$			 	-				
			-							
	·	<u> </u>								
		T		<u> </u>				<del></del>		

Part VII	(A) ame and Title	(B) (C) Average Position (check all the					that a	oply)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of				
		week week week week week week week week		from the organization	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations									
1b Total								<b>&gt;</b>							
	umber of individuals (in ble compensation from	_		_	thos	e lis	ted a	bove	e) who received more than	\$100,000 in					
employ 4 For any the orgundividu	ree on line 1a? If "Yes,"	complete Schere 1a, is the sum rganizations gre	dule . of repater t	J for porta han	suci able \$150	com 0,00	lividu pens 02 lf	al atıo "Yes	yee, or highest compensation n and other compensation s," complete Schedule J for	from r such	Yes 3	X X			
service	s rendered to the organ ndependent Contractor	nzation? If "Yes,							y unrelated organization fo such person		5	х			
1 Comple		e highest comp	ensa	ted i	ndep	end	ent c	ontr	actors that received more						
	Name and	(A) business address							Descrip	(B) tion of services	(C) Compensat	tion			
-															
		· -						-							
					_										
			_				ed to	thos	se listed above) who receiv	red					
more th	nan \$100,000 in compe	nsation from the	orga	ınıza	tion	<u> </u>					0 Form <b>990</b>	(2005			

Pa	rt V	III Staten	nent of Reve	nue						
							(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
8 8	4 -			4-				revenue		512, 513, or 514
Contributions, gifts, grants and other similar amounts	ıa	Federated car	•	1a						
gra	b	Membership d		1b						
fts, rar	С	Fundraising ev		1c	<del></del>					
igi	d	Related organ	ızatıons	1d						
Sir	е	Government grants	(contributions)	1e		472,842				
e E	f	All other contribution								
햠	and similar amounts not included above 1f 1,0				1,	055,983				
out	g Noncash contributions included in lines 1a-1f \$									
	<u>h</u>	Total. Add line	es 1a-1f			<b>•</b>	1,528,825		***************************************	
Program Service Revenue						Busn. Code				
ven	2a									
Re	b									
/ice	С									
Sen	d							_		
E	е									
gra	f	All other progr	am service reve	nue						·
P		Total. Add line				<b>•</b>				.,
	3		come (including	dıvıder	ids intere	est and				
	•	other similar a	· -		,	<b>•</b>	4,893			4,893
	4		nvestment of tax	-evem	nt bond n	roceeds -			_	5,555
	5	Royalties	investment or tax	CACIII	pt bolia p	locceds P				
	3	Royallies	(ı) Real		(u) B	Personal				
	6-	Casas Danta	(i) iteal		(11) 1	CISOIIAI				
	_	Gross Rents								
	b	Less rental exps								
	C	Rental inc or (loss)								
	d 7a	7a Gross amount from (i) Securities (ii)			Oth				:	
		sales of assets	(I) Securities	-	(11)	Other				
		other than inventory			ļ					
	b	Less cost or other								
		basis & sales exps								
	С	Gain or (loss)								
	d	Net gain or (lo				<b>•</b>				
<b>a</b>	8a	Gross income from	om fundraising eve	nts						
Other Revenue		(not including \$								
ě		of contributions r	reported on line 1c)	)						
<u>بر</u>		See Part IV, line	18	а		23,731				
	b	Less direct ex	penses	ь		14,399				
0	С	Net income or	(loss) from fund	Iraising	events		9,332	9,332		
	9a	Gross income fro	om gaming activitie	s						
		See Part IV, line	19	а						
	b	Less direct ex	penses	b						
	С	Net income or	(loss) from gam	ing ac	tivities	•				
			f inventory, less	ا آ	•					
		returns and all		а						
	b	Less cost of g	loods sold	ь	_					
			(loss) from sale	~ [	ventory					
			ellaneous Revenue			Busn. Code				<u> </u>
	11a	FEES FOR			·		2,914	2,914		
	b	PRODUCT S					1,582	1,582		
						<del></del>	201	201		<del>-</del>
	d	All other reven	EOUS INCOME				201		-	<del>_</del>
		Total. Add line					4,697			<del></del>
	е 12		es Tra-Tro e. See instru <u>ctio</u>	ne			1,547,747	14,029	0	4,893
	14	<u> </u>	e. See mstructio	113			1,541,141		U U	- 4,093

Form 990 (2009)

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	All other organizations must co		not required to complete		)). 
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		CAPCIISCS	general expenses	схроносо
•	organizations in the U.S. See Part IV, line 21	343,885	343,885		
2	Grants and other assistance to individuals in				
_	the U S See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	306,798	306,798		
4	Benefits paid to or for members				***************************************
5	Compensation of current officers, directors,				
	trustees, and key employees				
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	296,082	127,024	117,979	51,079
8	Pension plan contributions (include section 401(k)				——————————————————————————————————————
	and section 403(b) employer contributions)				
9	Other employee benefits	71,900	45,668	26,232	
10	Payroll taxes	23,666	12,628	7,703	3,335
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	4,150		4,150	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	42,344	42,344		
12	Advertising and promotion	24,356	23,761	48	547
13	Office expenses	114,061	56,837	14,627	42,597
14	Information technology	10,924	8,945	1,979	
15	Royalties	10 110	10 500		
16	Occupancy	12,110	10,722	1,388	<del> </del>
17	Travel	46,021	39,550	6,471	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	A 6A6	1 207	1 630	1 600
19	Conferences, conventions, and meetings	4,646 11,832	1,387	1,630 11,832	1,629
20	Interest	11,632		11,632	
21	Payments to affiliates	12,458	10,668	1,790	
22	Depreciation, depletion, and amortization	12,428	10,000	12,428	
23	Insurance	12,420		12,420	
24	Other expenses Itemize expenses not				
24	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below )				
а	MISCELLANEOUS	3,260	<del></del>	3,260	<del></del>
b	EQUIPMENT RENT	2,531		2,531	
C	DUES & SUBSCRIPTIONS	2,153	285	1,868	
d	GIFTS	1,831	900	2,000	931
e	PRESENT VALUE ADJUSTMENT	983		983	
•	All other expenses	728	500	228	
25		1,349,147	1,031,902	217,127	100,118
	Joint costs. Check here ▶ If following				
	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation	ļ	İ		
DAA	randraising solicitation				Form <b>990</b> (2009)

$\overline{}$	art >	Balance Sheet					raye ii
	<b>4.1.1.</b>	Dalance Oncet		-	(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing		_	22,165	1	33,616
	2	Savings and temporary cash investments			200,146	2	425,112
	3	Pledges and grants receivable, net			31,991	3	10,000
	4	Accounts receivable, net			•	4	
	5	Receivables from current and former officers, directors,	trustee	s, kev			
		employees, and highest compensated employees Com		· · · · · · · · · · · · · · · · · · ·			
		Schedule L	•			5	
	6	Receivables from other disqualified persons (as defined	section			<del></del>	
	1	4958(f)(1)) and persons described in section 4958(c)(3)(		i i			
		Part II of Schedule L	,			6	
ţ	7	Notes and loans receivable, net			6,780	7	6,485
Assets	8	Inventories for sale or use			57.00	8	
ğ	9	Prepaid expenses and deferred charges			8,823	9	4,598
		Land, buildings, and equipment cost or	1 1	· · · · · · · · · · · · · · · · · · ·	- 0,023		
	IVA	other basis Complete Part VI of Schedule D	10a	496,044			
		•	10a	68,072	427,808	10c	127 972
		Less accumulated depreciation		00,012	8,936		427,972 7,378
	11	Investments—publicly traded securities		-		11	
	12	Investments—other securities See Part IV, line 11		-		12	<del></del>
	13	Investments—program-related See Part IV, line 11		}		13	
	14	Intangible assets	-	167 574	14	102 140	
	15	Other assets See Part IV, line 11		-	167,574	15	193,140
	16	Total assets. Add lines 1 through 15 (must equal line 34	4)		874,223	16	1,108,301
	17	Accounts payable and accrued expenses			21,980	17	26,121
	18	Grants payable			2 000	18	
	19	Deferred revenue		-	3,000	19	6,200
	20	Tax-exempt bond liabilities		-		20	
Liabilities	21	Escrow or custodial account liability Complete Part IV o				21	
≝	22	Payables to current and former officers, directors, truste	es, key				
ab		employees, highest compensated employees, and disqu	alified				
Ξ		persons Complete Part II of Schedule L		ļ		22	
	23	Secured mortgages and notes payable to unrelated third	parties	S		23	
	24	Unsecured notes and loans payable to unrelated third pa	arties	1		24	
	25	Other liabilities Complete Part X of Schedule D			172,365		168,118
	26	Total liabilities. Add lines 17 through 25			197,345	26	200,439
es		Organizations that follow SFAS 117, check here ▶ 🔀	and				
2	1	complete lines 27 through 29, and lines 33 and 34.					
<u>a</u>	27	Unrestricted net assets			327,167	27	309,722
m	28	Temporarily restricted net assets			182,137	28	405,000
nd	29	Permanently restricted net assets		_	167,574	29	193,140
I		Organizations that do not follow SFAS 117, check her	re 🕨 📗				
5		and complete lines 30 through 34.					
ŝ	30	Capital stock or trust principal, or current funds				30	
se	31	Paid-in or capital surplus, or land, building, or equipment	t fund			31	
AS	32	Retained earnings, endowment, accumulated income, o	r other	funds		32	
Net Assets or Fund Balances	33	Total net assets or fund balances		Ī	676,878	33	907,862
ž	34	Total liabilities and net assets/fund balances		Ţ	874,223		1,108,301

Form **990** (2009)

Forn	1 990 (2009) TREES, WATER AND PEOPLE 84-1462044		Pa	ge <b>12</b>
Pa	art XI Financial Statements and Reporting   o			
			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both			1
	Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

3b Form **990** (2009)

#### SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

TREES, WATER AND PEOPLE

Employer identification number 84-1462044

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II ) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). ß 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III ) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III-Functionally integrated b Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) (i) Name of supported (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of the organization in rganization in col organization (described on lines 1-9 in col (i) listed in your support col (i) of your (i) organized in the above or IRC section governing document? support? (see instructions)) Yes Yes Yes No No No

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

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

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2009

Page 3

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Sec	tion A. Public Support	sched the box c	bit line 5 of 1 a				-
	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	984,583	838,990	1,315,030	1,265,404	1,528,825	5,932,832
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	78,787	82,783	67,981	51,945	29,522	311,018
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	1,063,370	921,773	1,383,011	1,317,349	1,558,347	6,243,850
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	76,392	103,765	341,572	75,360		597,089
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	68,147	73,491	54,052	38,697	<del></del>	234,387
С 8	Add lines 7a and 7b  Public support (Subtract line 7c from	144,539	177,256	395,624	114,057		831,476
	ine 6)						5,412,374
	etion B. Total Support lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(a) 2007	(d) 2008	(e) 2009	(f) Total
	• , • • • .	(a) 2005	(b) 2006	(c) 2007		<del></del>	(f) Total
9	Amounts from line 6 Gross income from interest, dividends,	1,063,370	921,773	1,383,011	1,317,349	1,558,347	6,243,850
104	payments received on securities loans, rents, royalties and income from similar sources	603	2,622	7,738	6,721	4,894	22,578
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	603	2,622	7,738	6,721	4,894	22,578
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					0	
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)		4,760	2,164	730		7,654
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	1,063,973	929,155	1,392,913	1,324,800	1,563,241	6,274,082
14	First five years. If the Form 990 is for the	•	second, third, fou	rth, or fifth tax year	as a section 501	,c)(3)	
<del></del>	organization, check this box and stop her			<del></del>	_		<u> </u>
	ction C. Computation of Public Su			- (0)		145	
15	Public support percentage for 2009 (line 8	• •	•	ר (ז))		15	86.27%
16	Public support percentage from 2008 Sch					16	84.58%
	tion D. Computation of Investme					17	
17 18	Investment income percentage for 2009 (I		· ·	column (1))		18	
	Investment income percentage from 2008 33 1/3 % support tests—2009. If the orga			14 and line 15 ic.	more than 33 1/2 (	<u> </u>	
b	17 is not more than 33 1/3 %, check this b 33 1/3 % support tests—2008. If the orga	oox and <b>stop here</b> . <sup>-</sup> inization did not che	The organization q eck a box on line 1	ualifies as a public 4 or line 19a, and I	cly supported orgaine 16 is more tha	nization in 33 1/3 %, and	<b>▶</b> X
20	line 18 is not more than 33 1/3 %, check to Private foundation. If the organization did		-				▶
4U	- Frivate journation, if the organization did	L HOLCHECK A DOY OF	1 IIDE 14. 192 OF 1	SD. CHECK THIS DOX	and see mistruction	/113	

Schedule A (Form 990 or 990-EZ) 2009 TREES, WATER AND PEOPLE 84-1462044 Page 4

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10;
Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

Part III, Line 12 - Other Income Detail

\$

\$

SPACE RENTAL MISCELLANEOUS

7,114

540

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

## Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Open to Public

Inspection **Employer identification number** Name of the organization TREES, WATER AND PEOPLE 84-1462044 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) 3 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a a Total number of conservation easements 2b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes No 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

<u>Sche</u>	dule D (Form 990) 2009 TREES, WAT	ER AND PEOPL	<u>E</u>		84-14620	44			<u> Page 2</u>
Pa	ert III Organizations Maintaining (	Collections of Art, I	listorical Treas	sures,	or Other Simi	lar As	sets (co	<u>ntinuec</u>	d) (t
3	Using the organization's acquisition, accession collection items (check all that apply)	, and other records, chec	k any of the followir	ng that a	re a significant us	e of its			
а	Public exhibition	d Loan o	r exchange program	าร					
b	Scholarly research	e Other							
С	Preservation for future generations	_					_		
4	Provide a description of the organization's colle Part XIV	ections and explain how th	ney further the orga	nızatıon'	s exempt purpose	· in			
5	During the year, did the organization solicit or rassets to be sold to raise funds rather than to be						[-	Yes	No
Pa	ert IV Escrow and Custodial Arrai	ngements. Complete	e if the organiza	ation a	inswered "Yes	" to Fo	orm 990,	Part	
	IV, line 9, or reported an am	-	_				,		
1a	Is the organization an agent, trustee, custodiar			er asse	ts not		•		
	included on Form 990, Part X?	·						Yes	No
b	If "Yes," explain the arrangement in Part XIV as	nd complete the following	table						
	•						Am	ount	
С	Beginning balance					1c			
	Additions during the year					1d			
е	Distributions during the year					1e			
f						1f			
2a	Did the organization include an amount on For	m 990, Part X, line 21?						Yes	No
	If "Yes," explain the arrangement in Part XIV	, , ,							
	ert V Endowment Funds. Comple	te if organization an	swered "Yes" t	o Forn	n 990, Part IV	line 1	0.		
	•	(a) Current year	(b) Pnor year			hree years		Four year	rs back
1a	Beginning of year balance	167,574	228,029						
	Contributions		1,167	······································					<del></del>
С	Net investment earnings, gains,		·			••••••			
	and losses	36,535	-54,020						
d	Grants or scholarships		·						
	Other expenditures for facilities			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	and programs	8,805	4,946						
f	Administrative expenses	2,164	2,656					~~~~	·····
g	End of year balance	193,140	167,574						
2	Provide the estimated percentage of the year e	end balance held as			•			***************************************	
а	Board designated or quasi-endowment ▶	%							
b	Permanent endowment ► 100.00 %	_ <del>_</del> _							
3a	Are there endowment funds not in the possess	ion of the organization tha	at are held and adm	inistere	d for the				
	organization by	•						Yes	s No
	(i) unrelated organizations						3	a(i) X	
	(ii) related organizations							a(ii)	X
þ	If "Yes" to 3a(II), are the related organizations I	isted as required on Sche	dule R?				_ ;	3b	
4	Describe in Part XIV the intended uses of the c	organization's endowment	funds						
Рa	rt VI Investments—Land, Buildin	gs, and Equipment	. See Form 99	0, Part	X, line 10.				
	Description of investment	(a) Cost or other basis	(b) Cost or oth	er	(c) Accumulat	ed	(d) E	Book valu	е
		(investment)	basis (other)		depreciation	1			
1a	Land		52	,044	-				,044
b	Buildings		365	,000	14	,600		350	,400
С	Leasehold improvements		4	,600		694		3	,906
d	Equipment		74	,400	52	,778		21	, 622
	Other								
Γotal	. Add lines 1a through 1e (Column (d) must eq	ual Form 990, Part X, colu	ımn (B), line 10(c))			<u> </u>		427	<u>, 972</u>

168,118

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

Sche		<u>84-146204</u>		Page 4
₽₽	IRT XI Reconciliation of Change in Net Assets from Form 990 to Audited Fire	nancial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	<u>-</u>	1	1,547,747
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	1,349,147
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	198,600
4	Net unrealized gains (losses) on investments		4	32,383
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV )		8	
9	Total adjustments (net) Add lines 4 through 8		9	32,383
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		10	230,983
Pa	If XII Reconciliation of Revenue per Audited Financial Statements With Re	venue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements	•	1	1,646,497
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments 2a	32,383		
b	Donated services and use of facilities 2b	66,367		
d				
е	Add lines 2a through 2d		2e	98,750
3	Subtract line 2e from line 1		3	1,547,747
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b				
	Add lines 4a and 4b		4c	
5			5	1,547,747
	art XIII Reconciliation of Expenses per Audited Financial Statements With E	xpenses per F	Return	
1	Total expenses and losses per audited financial statements		1	1,415,514
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities 2a	66,367		
b		, , ,		
	Other losses 2c			
d	2.1			
	Add lines 2a through 2d		2e	66,367
3	Subtract line 2e from line 1		3	1,349,147
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а				
	Other (Describe in Part XIV )			
	Add lines 4a and 4b		4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	1,349,147
	art XIV Supplemental Information		<u> </u>	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F	Part IV. lines 1b	-	<del></del>
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b			
	part to provide any additional information			
	art V, Line 4 - Intended Uses for Endowment Funds			
_T	he_purpose_of_this_fund_is_to_build_and_provide_a_	<u>stable so</u>	urce	of funding
f	or the operational and capital needs of Trees, Wat	er and Pe	ople	Funds and
	ssets of the Foundation may only be used for the "			
				itboses
	escribed in the Articles of Incorporation of the F			
	ducational, scientific, literary, public or other			
_C <u>:</u>	arried on by organizations described in Sections 1	7 <u>0 (c) (1)</u>	<u>and</u>	170 (c) (2)

											LEK			P.E.	OP.	<u>نلان</u>							<u> </u>	14	02	<u>U4</u>	4					Page	: 0
P	irt)	(IV	S	upp	lem	enta	<u>il Inf</u>	forn	natio	on (	conti	nue	<u>d)</u>																				
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#### Schedule F (Form 990)

**Statement of Activities Outside the United States** 

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

TREES, WATER AND PEOPLE Employer identification number

84-1462044

Part I	"Yes" to Form 99		s Outside the United States. 4b.	Complete if the organizatio	n answered
assistand	tmakers. Does the org	anization maintain red	cords to substantiate the amount of the ssistance, and the selection criteria u	-	X Yes No
2 For gran United St		Part IV the organizatio	n's procedures for monitoring the use	e of grant funds outside the	
3 Activities	per Region (Use Sche	edule F-1 (Form 990)	if additional space is needed)		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL	AMERICA		CONSTRUCTION/EDUC	STOVES/TREE PLANTI	NG 306,798
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otals •					306,798
or Drivoov Ao	t and Danonwork Bodi	untion Ant Notice as	a tha lanturations for Form 000	6-1	andula E (Earm 000) 2000

Schedule F (Form 990) 2009 TREES, WATER AND PEOPLE

Page 2

84-1462044

<b>□</b>	(I) Method of valuation (book, FMV.	appraisal, other)										
\$5,000	(h) Description of non-cash assistance											
eived more than	(g) Amount of non-cash assistance	FERS	FERS	FERS	FERS							
ne recipient rec	(f) Manner of cash disbursement	WIRE TRANSFERS	WIRE TRANSFERS	WIRE TRANSFERS	WIRE TRANSFERS	CHECKS						
e than \$5,000. Check this box if no one recipient received more than \$5,000 ▶ □ needed.	(e) Amount of cash grant	32,686	89,649	55,891	43,625	27,607				!		
Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Use Schedule F-1 (Form 990) if additional space is needed.	(d) Purpose of grant	BUILD COOKSTOVES	COOKSTOVES & FACTORY	BUILD COOKSTOVES	TREE SEEDLINGS	TREES & COOKSTOVES						
Part IV, line 15, for any recipient who received more Use Schedule F-1 (Form 990) if additional space is	(c) Region	TH-T-GH	HONDURAS	NICARAGUA	EL SALVADOR	TRAL						
15, for any rec le F-1 (Form 9	(b) IRS code section and EIN (f applicable)								<b>\$</b>			
Part IV, line Use Schedu	1 (a) Name of organization											

<sup>3</sup> Enter total number of other organizations or entities

TWP 06/17/2010 12 10 PM

Schedule F (Form 990) 2009

84-1462044

TREES, WATER AND PEOPLE

(h) Method of valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2009 Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement PURCHASES 57,340 (d) Amount of cash grant Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of recipients GUATEMALA (b) Region (a) Type of grant or assistance WIRE TRANSFERS Part III

Schedule F (Form 990) 2009 TREES, WATER AND PEOPLE

84-1462044

Page 4

Part IV Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any other additional information.

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

Department of the Treasury Internal Revenue Service

Name of the organization

# **Supplemental Information Regarding**

Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ. See separate instructions

OMB No 1545-0047

**Employer identification number** 

TREES, WATER AND I					84-14620	
<b>Fundraising Activities.</b> Complete Form 990-EZ filers are not required				ered "Yes" to Form	n 990, Part IV, lir	ne 17.
1 Indicate whether the organization raised funds through	any of the following	g activ	ities	Check all that apply		•
a Mail solicitations	e Solicitation	of no	n-gov	ernment grants		
b Internet and email solicitations	f Solicitation	of go	vernn	nent grants		
c Phone solicitations	g Special fur	ndraisii	ng ev	ents		
d In-person solicitations						
2a Did the organization have a written or oral agreement workey employees listed in Form 990, Part VII) or entity						Yes No
b If "Yes," list the ten highest paid individuals or entities ( to be compensated at least \$5,000 by the organization		ant to a	agree	ments under which the	fundraiser is	
O (i) Name of individual or entity (fundraiser)	(ii) Activity	(III) Did raiser custo contr contrib	have dy or ol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
		4				
						<u>-</u>
		igwdown				
					-	
Total			•			

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

Page 2

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000. (a) Event #1 (c) Other events (b) Event #2 (d) Total events RENEW THE ROCKI OTHER EVENTS (add col (a) through None col (c)) (event type) (event type) (total number) 17,836 5,895 23,731 Gross receipts Less Charitable contributions Gross revenue (line 1 17,836 5,895 23,731 minus line 2) Cash prizes Noncash prizes Direct Expenses Rent/facility costs Food and beverages Entertainment 14,399 14,399 Other direct expenses 14,399 Direct expense summary Add lines 4 through 9 in column (d) Net income summary Combine line 3, column (d), and line 10 Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (Add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) Gross revenue Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes % Volunteer labor No No No Direct expense summary Add lines 2 through 5 in column (d) Net gaming income summary Combine line 1, column d, and line 7 Ye<u>s</u> No Enter the state(s) in which the organization operates gaming activities Is the organization licensed to operate gaming activities in each of these states? 9a If "No," Explain b Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b If "Yes," Explain 11 Does the organization operate gaming activities with nonmembers? 11 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

Sche	edule G (Form 990 or 990-EZ) 2009 TREES, WATER AND PEOPLE	84-146204	4	Р	age 3
				Yes	No
13	Indicate the percentage of gaming activity operated in				
а	The organization's facility	13a %			
b	An outside facility	13b %			
14	Provide the name and address of the person who prepares the organization's gaming/special events books				
	and records				
	Name				
	Address ►				
15a					
	revenue?		15a		
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$	and the			
	amount of gaming revenue retained by the third party ▶ \$				
С	If "Yes," enter name and address of the third party.				
	Name ►				
	Address ▶				
16	Gaming manager information				
	Name ▶				
	Gaming manager compensation ▶ \$				
	Description of services provided ▶				
	Director/officer Employee Independent contractor				
17	Mandatory distributions				
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to				
	retain the state gaming license?		17a		
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent				
	ın the organization's own exempt activities during the tax year ▶ \$				

Schedule G (Form 990 or 990-EZ) 2009

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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22.

▶ Attach to Form 990.

OMB No 1545-0047

Open to Public. 2009

Inspection

2 X TREE PLANTING/SOLAR WATER CONSERVATION WATER CONSERVATION Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed (h) Purpose of grant or assistance SOLAR ENERGY Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Employer identification number non-cash assistance (g) Description of 84-1462044 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (d) Amount of cash grant (e) Amount of non-cash (book, FMV, appraisa), assistance other) 10,918 246,858 13,552 72,557 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (c) IRC section if applicable General Information on Grants and Assistance (b) EIN Enter total number of section 501(c)(3) and government organizations WATER AND PEOPLE the selection criteria used to award the grants or assistance? (a) Name and address of organization S S LAKOTA SOLAR ENTERPRISES or government TREES, ROSEBUD RESERVATION Name of the organization SD WESTERN US PINE RIDGE PINE RIDGE WESTERN VARIOUS VARIOUS Part # TRIBAL Parti VISTA PWAW

Enter total number of other organizations

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

Schedule I (Form 990) 2009

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Part III	Grants and Other Assistance to Individuals in the United States. Com Use Part IV and Schedule I-1 (Form 990) if additional space is needed.	to Individuals in the (Form 990) if additio	• United States. Con nal space is needed	nplete if the organiza	United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. all space is needed.	m 990, Part IV, line 22.
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
				÷		
Part IV	Supplemental Information. Complete this part to pr	omplete this part to p	provide the information	on required in Part I,	rovide the information required in Part I, line 2, and any other additional information	ional information.

Schedule I (Form 990) 2009

SCHEDULE O

(Form 990)

**Supplemental Information to Form 990** 

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

• Attach to Form 990.

2009
Open to Public Inspection

Department of the Treasury internal Revenue Service

Name of the organization

TREES, WATER AND PEOPLE

Employer identification number 84-1462044

Form 990, Part I, Line 6

OFFICE & INTERN ASSISTANCE

TREE PLANTING / WATERSHED

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 Review of 990 conducted by Board of Directors.

Form 990, Part VI, Line 15a - Compensation Process for Top Official DETERMINED BY BOARD OF DIRECTORS

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

Form 4562

Department of the Treasury Internal Revenue Service

### **Depreciation and Amortization**

(Including Information on Listed Property)

Attach to your tax return.

2009
Attachment Sequence No 67

Name(s) shown on return

TREES, WATER AND PEOPLE

► See separate instructions.

Identifying number 84-1462044

	ess or activity to which this form relates	•								
	ndirect Depreciat			4: 470						
P	ert Election To Expen						anlata D			
_	Note: If you have a				e you	COL	ipiele P	arıı.	_	250,000
1	Maximum amount. See the instruc			ises					1	230,000
2	Total cost of section 179 property	•		-tt)					3	800,000
3	Threshold cost of section 179 proj	-	· ·	structions)						800,000
4	Reduction in limitation Subtract lii		·	ad films sons	ratalı a		mietione		5	·-·-·
5_	Dollar limitation for tax year Subtract lin (a) Description			b) Cost (busir				lected cost		
6	(a) Description	Tor property		b) Cost (busii	icas use	, orny)	(6)	iected cost		
		·								
7	Listed property Enter the amount	from line 20				7		<del></del>		
8	Total elected cost of section 179 p		te in column (c) line	e 6 and 7		L <u>-</u>	L	<del></del> -	8	
9	Tentative deduction Enter the sm		• •	s o and i					9	
9 10	Carryover of disallowed deduction								10	
11	Business income limitation Enter	•		than zero)	or line	5 (600	instruction	ne)	11	
12	Section 179 expense deduction A		•	•		J (300	mon donor	13)	12	
13	Carryover of disallowed deduction	•				13			12	
	: Do not use Part II or Part III below					. 13				I
*********	art II Special Depreciati			ciation (	Do no	at inc	lude list	ed prop	ertv )	(See instr.)
<del></del>	Special depreciation allowance for						iddo iiot	ou prop	J. (y.,	
	during the tax year (see instruction		Anor than hoted prop	city, piacea	501	•100			14	
15	Property subject to section 168(f)(	•							15	
16	Other depreciation (including ACR	•							16	12,256
	art III MACRS Depreciat		ude listed prope	rtv ) (See	instr	uctio	ns )			
- ,	m/terto poprodiat	1011 (20 1101 11101	Section		17.00	<u> </u>	,			<del>,</del>
17	MACRS deductions for assets pla	ced in service in tax	vears beginning befo	re 2009					17	202
18	If you are electing to group any assets p				asset a	ccounts	s. check here	• 🗖		<u> </u>
		Assets Placed in Se							stem	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreci (business/investmen only–see instructio	tuse	ecovery mod	(e) C	onvention	(f) Met	hod	(g) Depreciation deduction
19a	3-year property									
b	5-year property	1					·			
С	7-year property	1								
d	10-year property									
e	15-year property		-							
f	20-year property									
g				25	yrs			S/L		
h	Residential rental			27	5 yrs		MM	S/L		
	property			27 5	5 yrs		MM	S/L		
i	Nonresidential real				yrs		MM	S/L		
	property	_					MM	S/L		
	Section C—As	sets Placed in Serv	rice During 2009 Ta	x Year Usin	g the	Altern	ative Depr	eciation S	Systen	n
20a	Class life							S/L		
					-		_	S/L		-
b	12-year			12	yrs					
					yrs yrs		ММ	S/L		
С	12-year	structions.)			•		MM			
С	12-year 40-year				•		MM			
P	12-year 40-year art IV Summary (See ins	n line 28	lines 19 and 20 in co	40	yrs	21 Er				
c Pa 21	12-year 40-year surf IV Summary (See instance) Listed property Enter amount from	n line 28 lines 14 through 17,		40 lumn (g), ar	yrs					12,458
c Pa 21	12-year 40-year  Int IV Summary (See instance property Enter amount from Total. Add amounts from line 12,	n line 28 lines 14 through 17, l ur return Partnership	s and S corporation	lumn (g), ar	yrs				21	12,458

Form 990   For calendar year 2009, or tax year beginning   , and ending				Specia	al Event	s Sched	ule			
Employer Identification Number	Form <b>990</b>			- Poor						2009
TREES, WATER AND PEOPLE  (A) (B) (C) Others Total Gross receipts 2,676 0 0 0 0 2,67 Less contributions 0 0 0 0 0 Gross revenue 2,676 0 0 0 0 2,67 Less direct expenses 1,094 0 0 0 0 1,09 Net income (loss) 1,582 0 0 0 1,588  Description (A) PRODUCT SALES  (B) (C) Others Total O 0 0 2,67 O 0 0 0 1,09 O 0 1,09 O 0 1,09 O 0 0 1,58			For calendar year 2009, or	tax year beginr	ning		, and e	nding		
(A)	ame								Employer Id	entification Number
(A)	TREES, WA	ATER	AND PEOPLE						84-146	2044
Less contributions		_		(B)		(C)		Others		
Less contributions	Gross receipts				0				0	2,676
Less direct expenses   1,094   0   0   1,09	Less contributio	ns _								0
Net income (loss)         1,582         0         0         0         1,582           Description (A)         PRODUCT SALES         (B)         (C)         (C)	Gross revenue		2,676							2,676
Net income (loss)	Less direct expe	enses _	1,094							1,094
(B)			1,582		0		0		0	1,582
	(E	3)	PRODUCT SALE	S		_				
Others	(0	<i>•</i> )		<del></del>						
	0	thers				<u> </u>				
						_				
						_				

Forms	,	990-PF
330	•	99U-PF

#### Other Notes and Loans Receivable

, and ending

2009

Name

For calendar year 2009, or tax year beginning

84-1462044

Employer Identification Number

TREES, WATER AND PEOPLE

Form 990, Part X, Line 7 - Additional Information

Name of borrower	Relationship to disqualified person
(1) LOAN RECEIVABLE	
(2) ADVANCE	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

	Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1)					
(2)					
<u>(3)</u>					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Security provided by borrower	Purpose of loan
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year	Fair market value (990-PF only)
1)	6,780	6,285	
2)		200	
s)			
)			
)			
)			
)			
)			
)			
0)			
Totals	6,780	6,485	