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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.

		46 - 4	2010		
	AF	or the 2	2010 calendar year, or tax year beginning and ending		
	Bç	heck if	C Name of organization	D Employer ident	ification number
	at	plicable	TREE RESEARCH AND EDUCATION ENDOWMENT		
		Address change	FUND		
	\equiv	Name		 37_	1018692
		Johange]Initial	Doing Business As	-	
	누	Jreturn	Number and street (or P 0 box if mail is not delivered to street address) Room/s		
	<u> </u>	Termin- ated	552 S WASHINGTON STREET 109	630	-369-8300
		Amender return	City or town, state or country, and ZIP + 4	G Gross receipts \$	855 , 755.
		Applica-	NAPERVILLE, IL 60540	H(a) Is this a group	
		pending	F Name and address of principal officer:DAVID MCMASTER	for affiliates?	Yes X No
			SAME AS C ABOVE		
				H(b) Are all affiliates	
				527 If "No," attach	a list. (see instructions)
	<u>J W</u>	/ebsite	: ► WWW.TREEFUND.ORG	H(c) Group exempt	tion number 🕨
	K F	orm of o	rganization	ear of formation 1975	M State of legal domicile IL
	Pa	rt i	Summary		
			riefly describe the organization's mission or most significant activities: TO ADVAN	CE KNOWLEDGE	IN THE
	Activities & Governance		TIELDS OF ARBORICULTURE AND URBAN FORESTRY T		
	au	_			
	E.	2 C	heck this box $lacktriangle$ if the organization discontinued its operations or disposed of r	nore than 25% of its net	
	8	3 N	umber of voting members of the governing body (Part VI, line 1a)		3 17
	5	4 N	umber of independent voting members of the governing body (Part VI, line 1b)	[4	17
	S		otal number of individuals employed in calendar year 2010 (Part V, line 2a)	-	5 6
	iţie		· · · · · · · · · · · · · · · · · · ·	- -	100
	ξį		otal number of volunteers (estimate if necessary)	-	
	Ac		otal unrelated business revenue from Part VIII, column (C), line 12	<u> </u>	a 0.
	\square	<u> </u>	et unrelated business taxable income from Form 990-T, line 34	7	ь 0.
				Prior Year	Current Year
	a	8 C	ontributions and grants (Part VIII, line 1h)	503,532	763,135.
	Revenue		rogram service revenue (Part VIII, line 2g)	0	
	§		ivestment income (Part VIII, column-(A), lines, 3-4-and Vd)=[]	7,962	
	~~			-8,830	
			ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	-		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A) line 12)	502,664	
		13 G	irants and similar amounts paid (Part ፲ズ, column (A) ∭ines a 3 3	173,000	. 192,834.
		14 B	enefits paid to or for members (Part X, column (A), line 4)	0	. 0.
	ဖွ	15 S	alaries, other compensation, employee benefits (Part-IX, column (A), lines 5-10)	154,226	. 193,305.
	xpenses		rofessional fundraising fees (Part IX, column (A) Filine 119)	0	
	夏		otal fundraising expenses (Part IX, column (D), line 25) 153, 119.		
<i>5</i> 36	لقر			114,543	206 970
	<i>a</i>		ther expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		
6			otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	441,769	
0		19 R	evenue less expenses. Subtract line 18 from line 12	60,895	43,095.
6 -4	or			Beginning of Current Yea	r End of Year
ڪ	Net Assets Fund Balan	20 T	otal assets (Part X, line 16)	1,612,567	1,800,411.
AUG	ASS		otal liabilities (Part X, line 26)	150,168	
	ξĔ		let assets or fund balances. Subtract line 21 from line 20	1,462,399	
\Box		11 4	Signature Block	1/402/377	: 1,000,544.
Ш				 	
OFFINED			ies of perjury, I declare that I have examined this return, including accompanying schedules and sta		my knowledge and belief, it is
2	true,	correct,	and complete Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge	
Ę		- 11	M. Great Bornancin	9//	//
٧	Sign	, [[Signature of officer	Date /	
,	Here	4.	M. Jaket Bornanein Executive	1) contain	•
			Type or print name and title	DICCIOI	······
				Date Check	PTIN
			Print/Type preparer's name Preparer's signature]	—
	Paid		KAREN OLSON Koner M. Ulson	7-20-11 self-emp	
	Prep	arer [Firm's name DUGAN & LOPATKA, CPA'S PC	Firm's EIN	36-2886485
	Use	Only F	Firm's address ▶ 104 E. ROOSEVELT ROAD SUITE 102		
			WHEATON, IL 60187-5267	Phone no	630-665-4440
	May	the IDS	S discuss this return with the preparer shown above? (see instructions)	11 110110 110	[32]
	iviay	me inc	14. LAA For Panaguark Paduation Act Nation and the congrete instructions		X YesNo

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

TREE RESEARCH AND EDUCATION ENDOWMENT

Form	1990 (2010) FUND	37-1018692	Page 2
Pa	rt III Statement of Program Service Accomplishments		<u>×</u>
	Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission:		
	TO IDENTIFY AND FUND PROJECTS AND PROGRAMS THAT ADVANCE		
	THE FIELD OF ARBORICULTURE AND URBAN FORESTRY TO BENEFIT	r PEOPLE, TR	EES
	AND THE ENVIRONMENT		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	XNo
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for each of the organization's three largest program services by ex	penses.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of	grants and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported.		400
4a	(Code:) (Expenses \$ 223,930 · including grants of \$ 180,834 ·) (Received the control of the co		<u>403.</u>)
	RESEARCH SUPPORT - PROVIDE RESEARCH GRANTS TO INDIVIDUAL ORGANIZATIONS PERFORMING TREE-RELATED RESEARCH WHICH IS		
	ORGANIZATIONS PERFORMING TREE-RELATED RESEARCH WHICH IS PURPOSE	THE TRUST'S	
	FORFODE		
		-	
4b	(Code:) (Expenses \$14,517. including grants of \$12,000.) (R)
	EDUCATION - THE EDUCATIONAL PROGRAMS SUPPORT NUMEROUS PROBLEM OF THE HOUR PROGRAMS PROGRAMS SUPPORT NUMEROUS PROBLEM OF THE PR		TON
	ENDEAVORS. THE TOUR DES TREES PROVIDES EDUCATIONAL OPPORTHROUGH PRESENTATIONS AND MEDIA INTERVIEWS ON THE IMPORT		EC .
		ATION FOR	<u> ES</u>
	PRE-SCHOOL TO HIGH SCHOOL. PROGRAMS ALSO DESCRIBE THE		
		PROVIDED TO	
	UNDERWRITE STUDENT ATTENDANCE AT THE TCI EXPO.		
			
4c	(Code:) (Expenses \$ including grants of \$) (Re	evenue \$)
4d	Other program services. (Describe in Schedule O.)	,	
4-	(Expenses \$ Including grants of \$) (Revenue \$ Total program service expenses ▶ 238, 447.		
<u>4e</u>	Total program service expenses ► 238, 447.)O (CO : =:
03200 12-21		Form 9 9	30 (2010)

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	X	
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 candidates for	_		
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			v
_	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		
6	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
U	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," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	 		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u> </u>		
-	Schedule D, Part III	8		Х
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		Х
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	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			Х
4	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
u	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
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f				
	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, XII, and XIII	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, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	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,		v	
4-	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	X	<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	45		v
16	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		X
10	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	Х	
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		х
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	Х	
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		X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			
	operate one or more hospitals must attach audited financial statements (see instructions)	20b		<u> </u>
		Form	990 (2010)

Form	990 (2010) FUND 37-1018	<u>692</u>	P	age 4
Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
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	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 25	24a		X
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
ь		200		
•	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		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	255		
20		26		х
27	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
21	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21	<u> </u>	
20				
_	instructions for applicable filing thresholds, conditions, and exceptions):	20-	•	Х
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		X
b	, , , , , , , , , , , , , , , , , , , ,	200	<u> </u>	
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L. Part IV	202		х
20	•	28c	Х	Λ
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	·	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		х
24	contributions? If "Yes," complete Schedule M	30	<u> </u>	
31	Did the organization liquidate, terminate, or dissolve and cease operations?			X
20	If "Yes," complete Schedule N, Part I	31		
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		32	-	
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22	i	х
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity?			v
05	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	_	<u> </u>
а	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			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			J.
	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			v
	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 19?		.	
	Note. All Form 990 filers are required to complete Schedule O	38	X	(00.15)
		Form	990 ((2010)

Form	990 (2010) FUND 37-1018	692	P	age 5
Pa	TV Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
•	(gambling) winnings to prize winners?	1c	Ī	
20			<u> </u>	-
20	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 6			
	,		Х	1
Ь		2b		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	_	ł	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a_	<u> </u>	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<u>3b</u>		
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	ļ	X
b	If "Yes," enter the name of the foreign country: ►			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a_		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6ь		
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		X
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
я	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	<u> </u>	 	
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		1
a	Sponsoring organizations maintaining donor advised funds.	<u> </u>	 	-
а	Did the organization make any taxable distributions under section 4966?	9a	•	1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	30		
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:	1		
a	Gross income from members or shareholders			
-				
Ь				
120	,	40-	Ī	1
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ	
	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.	40-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	· · · · · · · · · · · · · · · · · · ·			
_	organization is licensed to issue qualified health plans 13b			
	Enter the amount of reserves on hand	-		X
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		 ^-
<u> </u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	000	(0040)
		rorm	33U	(2010)

TREE RESEARCH AND EDUCATION ENDOWMENT **FUND** 37-1018692 Form 990 (2010) 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 in Schedule O. See instructions. XCheck if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 X 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the 7a governing body? 7ь b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a 10a Does the organization have local chapters, branches, or affiliates? b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with those of the organization? 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise X 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this is done 12c X 13 Does the organization have a written whistleblower policy? 13 X Does the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х a The organization's CEO, Executive Director, or top management official 15a **b** Other officers or key employees of the organization Х 15b 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 with a X taxable entity during the year? 16a 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 the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ightharpoons I. Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. X 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 organization:

552 S WASHINGTON STREET, NAPERVILLE, IL 60540

M. JANET BORNANCIN - 630-369-8300

Form **990** (2010)

FUND

37-1018692

Page 7

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization 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.

(A)	(B)							(D)	(E)	(F)
Name and Title	Average	١.	Position (check all the					Reportable	Reportable	Estimated
	hours per week (describe hours for related organizations	rustee or director	institutional frustee	C all		Highest compensated of employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization
	in Schedule O)	Individua	Instituto	Officer	Key employee	Highest (employer	Former			and related organizations
ALLAN WEST										
CHAIRMAN EMERITUS	1.00	X		X				0.	0.	0
DAVID MCMASTER						İ				
PRESIDENT	10.00	X	<u> </u>	X		<u> </u>		0.	0.	0
MIKE NEAL						1				
VICE-PRESIDENT	4.00	X	<u> </u>	X	<u> </u>	<u> </u>		0.	0.	0
TOM PROSSER								_	_	
TREASURER	8.00	X	ļ.,	X	<u> </u>			0.	0.	0
HALLIE DOZIER	1 00								_	
DIRECTOR	1.00	X				<u> </u>	<u> </u>	0.	0.	0
JOHN HENDRICKSEN		l				ŀ				_
DIRECTOR	1.00	X	<u> </u>		ļ	ļ.,		0.	0.	0
JOHN LLOYD	1 00	١.,							•	
DIRECTOR	1.00	X	╂		ļ	 	_	0.	0.	0
RANDY MILLER	1 00			ŀ					•	
DIRECTOR	1.00	X	-			-		0.	0.	0
WARD PETERSON	1 00	x						0.	^	0
DIRECTOR DEPOSITOR	1.00	╀	\vdash	\vdash	<u> </u>	┢		0.	0.	0
PEPPER PROVENZANO DIRECTOR	1.00	X						0.	0.	0
RUTH STEIN	1.00	A	╁		<u> </u>	-		0.		
DIRECTOR	1.00	X						0.	0.	0
MARK HOENIGMAN	1.00	1	\vdash		╁	-				
DIRECTOR	1.00	X						0.	0.	0
KRISTIN WILD		 	╫			\vdash		-		
DIRECTOR	1.00	X				1		0.	0.	0
JIM ZWACK		 	\vdash		<u> </u>	-				
DIRECTOR	1.00	X			-			0.	0.	0
ANITA GAMBILL						T				
DIRECTOR	1.00	X						0.	0.	0
JEFFREY CARNEY		1	T	T -	t	Г				
DIRECTOR	1.00	X					1	0.	0.	0
MICHAEL ROBINSON										
DIRECTOR	1.00	X		ĺ				0.	0.	0

032007 12-21-10

Form 990 (2010)

_			_
H.	П	N	1
_	v	TA	1

Part VII Section A. Officers, Directors, Tr	ustees, Key Eı	mple	oyee	s, a	nd l	High	est	Compensated Employ	ees (continued)				
(A)	(B)			(C	•			(D)	(E)		ĺ	(F)	
Name and title	Average	Position (check all that apply)					L A	Reportable	Reportable			timate	
	hours per week	-	heck	(all 1	all that		iy)	compensation from	compensation from related	١		nount other	
	(describe	director						the	organizations			pensa	
	hours for	6 1	18 18			sated		organization	(W-2/1099-MIS	C)	1	om th	
	related organizations	trustee	la file		88	mper		(W-2/1099-MISC)				anızat	
	in Schedule	Individual	Institutional frustee	a	Key employee	estco	ĕ					d relat anızatı	
	O)	Ę	ig.	Officer	Ş	Highest compensated employee	臣	;				a near	
M. JANET BORNANCIN	60.00								·				24
EXECUTIVE DIRECTOR	60.00		┢	Х		-		99,759.		0.		6,3	24.
											L		
		 							<u> </u>				
		_	-										
		<u> </u>											
	-		-			╁							
1b Sub-total	1	1		1		\		99,759.		0.		6,3	
c Total from continuation sheets to Part V	II, Section A					>		0.		0.			0.
d Total (add lines 1b and 1c)						<u> </u>		99,759.		0.		6,3	24.
Total number of individuals (including but recompensation from the organization	not ilmited to tr	iose	IIST	eo ai	DOV:	e) WI	no r	eceived more than \$100	,υυυ in reportable	,			0
											,	Yes	No
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s			e, ke	y em	plo	yee,	or t	nighest compensated er	nployee on		3		Х
4 For any individual listed on line 1a, is the s			omo	Anes	ation	n and	d ot	her compensation from	the organization		- 3		
and related organizations greater than \$15	=		-					· ·	ine organization		4	: :	Х
5 Did any person listed on line 1a receive or	accrue compe	nsat	lon	from	any	y uni	relat	ed organization or indivi	dual for services				
rendered to the organization? If "Yes," con Section B. Independent Contractors	nplete Schedul	e J	for s	uch	per	son					5		X
Complete this table for your five highest co	ompensated in	dep	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of com	pens	ation f	rom	
the organization. NONE								(B)	Γ		(C		
Name and business	address							Description of s	ervices		ompe		n
													<u>-</u>
							\dashv						
2 Total number of independent contractors	including but r	not li	mite	d to	tho	se li	ster	1 above) who received n	ore than				
\$100,000 in compensation from the organ		.01 11				0	J.EC	2 45046/ 11110 16061460 11	ioro triuri				
											Form !	990 (2010)

37-1018692 Page **9**

Pa	rt VIII	Statement of Rever	nue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ıts ts	1 a	Federated campaigns	1a			,		
Contributions, gifts, grants and other similar amounts	ь	Membership dues	1b					
s, g	С	Fundraising events	1c	544,733.				
gift ar (d	Related organizations	1d					
S, III	е	Government grants (contribut	ions) 1e					
tion s	f	All other contributions, gifts, gran						
şē		similar amounts not included abo	ve 1f	218,402.				
ξğ	9	Noncash contributions included in lines	1a-1f \$	96,725.				
<u>2 9</u>	h	Total. Add lines 1a-1f		•	763,135.			
				Business Code				
9	2 a							
Š	ь							
Sign	c							
Program Service Revenue	d							
<u>6</u> ,	е							
•	f	All other program service reve	enue					
	9	Total. Add lines 2a-2f		•				
	3	Investment income (including	dividends, intere		10 760			12.760
		other similar amounts)		>	13,768.			13,768.
	4	Income from investment of ta	x-exempt bond p	oroceeds -				
	5	Royalties		<u> </u>				
			(i) Real	(II) Personal				
	6 a	Gross Rents						
	ь	Less: rental expenses						
	1	Rental income or (loss)						
	l	Net rental income or (loss)		•				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	Ь	Less: cost or other basis						
		and sales expenses						
	C	Gain or (loss)						
		Net gain or (loss)		<u> </u>				
ue	8 a	Gross income from fundraisin						
Ne.			733. of					
æ		contributions reported on line	•	70,449.				
Other Revenue		Part IV, line 18	a b	010640				
δ	1	Less: direct expenses Net income or (loss) from fund	_	213042.	-149,193.			-149193.
	1	Gross income from gaming a				ļ		
	" "	Part IV, line 19	ctivities. See a					
	h	Less: direct expenses	a b					
	1	Net income or (loss) from gar	_	•	Ī]		1
	1	Gross sales of inventory, less	-					
		and allowances	a					
	Ь р	Less: cost of goods sold	b					
	1	Net income or (loss) from sale	_			ĺ		
		Miscellaneous Revenu		Business Code				
	11 a			900099	8,403.	8,403.		1
	ь				,	,		
	c	-						
	d	All other revenue						
	e				8,403.			
_	12	Total revenue. See instructions			636,113.		0.	-135425.
0320 12-2	109 1-10				_: . _			Form 990 (2010)

Part IX Statement of Functional Expenses

	Section 501(c)(All other organizations must com		ations must complete all		
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and	12 000	12 000		
_	organizations in the U.S. See Part IV, line 21	13,000.	13,000.		
2	Grants and other assistance to individuals in	161 224	161 224		
_	the U.S. See Part IV, line 22	161,234.	161,234.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.	10 600	10 600		
_	See Part IV, lines 15 and 16	18,600.	18,600.		Hillian
4	Benefits paid to or for members				<u></u>
5	Compensation of current officers, directors,	106 002		106 002	
•	trustees, and key employees	106,083.		106,083.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	64 542	21 016	2 012	40 614
7	Other salaries and wages	64,543.	21,016.	2,913.	40,614.
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)	10,119.	2 400	1 117	2 104
9	Other employee benefits	12,560.	2,488. 2,204.	4,447. 9,436.	3,184. 920.
10	Payroll taxes	12,300.	2,204.	9,430.	920.
11	Fees for services (non-employees):				
a	Management	200.		200.	
b	Legal	17,118.	413.	16,375.	330.
C	Accounting Lobbying	17,110.	412.	10,373.	330.
d	, ,				
e f	Professional fundraising services See Part IV, line 17 Investment management fees				
	Other				
9 12	Advertising and promotion	1,514.	930.	125.	459.
13	Office expenses	34,038.	7,990.	15,433.	10,615.
14	Information technology	31,030.	17550.	15/4556	10,013.
15	Royalties				
16	Occupancy	14,900.	1,758.	4,575.	8,567.
17	Travel	16,135.	4,907.	9,776.	1,452.
18	Payments of travel or entertainment expenses	10/133.	1,307.		1/132.
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	904.	116.	289.	499.
20	Interest	3010		2031	
21	Payments to affiliates	-			
22	Depreciation, depletion, and amortization	5,179.	777.	1,191.	3,211.
23	Insurance	6,963.	82.	6,807.	74.
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
2	INDIRECT SPECIAL EVENT	80,792.			80,792.
a b	BOARD EXPENSES	12,597.		12,597.	00,152.
c	MISCELLANEOUS	8,888.		6,911.	1,977.
d	CONTRACT LABOR	7,651.	2,932.	4,294.	425.
e		.,,002	2,752.	-,	123.
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	593,018.	238,447.	201,452.	153,119.
26	Joint costs. Check here Inf following SOP				
	98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	44.00.000			I	F 000 (0040)

032010 12-21-10

Form **990** (2010)

rm 990 (2010)	FUN
Transition of the second	

t X	Balance Sheet			
		(A) Beginning of year		(B) End of year
1	Cash · non-interest-bearing	93,155.	1	69,132.
2	Savings and temporary cash investments		2	1,613,975. 104,426.
3	Pledges and grants receivable, net	110,784.	3	104,426.
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II			
	of Schedule L		5	
6	Receivables from other disqualified persons (as defined under section			
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instructions)		6	
7	Notes and loans receivable, net		7_	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	4,726.	9	5 , 799.
10a				
	basis. Complete Part VI of Schedule D 10a 30, 120.			
b	Less: accumulated depreciation 10b 23,041.	12,258.	10c	7,079.
11	Investments - publicly traded securities		11	
12	Investments - other securities. See Part IV, line 11		12	
13	Investments · program·related. See Part IV, line 11			
	Intangible assets			
	Other assets. See Part IV, line 11	1 610 567		1 000 411
	···			1,800,411. 21,635.
				21,635.
	· · ·	125,960.		105,732.
	F			6,500.
	·			
	· · · · · · · · · · · · · · · · · · ·		21	
22				
00	· · ·			
			_	
	· · · · · · · · · · · · · · · · · · ·			
	·	150 168		133,867.
20		130,100.	20	133,007.
27	-	394.332.	27	469,438.
	la contraction of the contractio			308,304.
	, ,			888,802.
	. —	,		= = = 7 = 3 = 0
	l control of the cont			
30			30	
	, , ,			
32	Retained earnings, endowment, accumulated income, or other funds	-· · · · · · · · · · · · · · · · · · ·	32	
				1 666 544
33	Total net assets or fund balances	1,462,399.	33	1,666,544.
	1 2 3 4 5 6 7 8 9 10a b 11	2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b Less: accumulated depreciation 11 Investments - publicity traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - other securities. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities. Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 20 Organizations that on of follow SFAS 117, check here and complete lines 30 through 34.	1 Cash - non-interest-bearing 93,155. 2 Savings and temporary cash investments 1,391,644. 3 Pledges and grants receivable, net 110,784. 4 Accounts receivable, net 110,784. 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(8), and contributing employees and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 4, 726. 10a Land, buildings, and equipment: cost or other basis. Complete Part Vi of Schedule D 10a 30, 120. b Less: accumulated depreciation 10b 23,041. 12,258. 11 Investments - program-related. See Part IV, line 11 1 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV, line 11 1 Interestments - other securities. See Part IV	X Balance Sheet

Form **990** (2010)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

3b

SCHEDULE A

Department of the Treasury Internal Revenue Service

(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.

2010

Open to Public Inspection

Name of the organization

TREE RESEARCH AND EDUCATION ENDOWMENT FUND

Employer identification number 37–1018692

· 17111												_
Part I	Reason	<u>for Public Char</u>	ity Status (All organiz	zations mu	st complet	e this part	t.) See inst	ructions.				
The orga	nization is not a	a private foundation	because it is: (For lines	1 through ⁻	11, check d	only one b	ox.)					
1 🖳	A church, co	church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).										
2	A school des	described in section 170(b)(1)(A)(ii). (Attach Schedule E.)										
3 🔲	A hospital or	ospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4 🔲	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,											
	city, and stat	e:										
5 🔲	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
	section 170(b)(1)(A)(iv). (Complete Part II.)											
6			ent or governmental uni	t described	d in sectio	n 170(b)(1)(A)(v).					
7 X		-	eives a substantial part				• • • • •	r from the	general r	nublic desc	nhed i	n
•		(b)(1)(A)(vi). (Comple	·	or no oupp	on nom a	governine	intai unit c	1 110111 1110	gonorar	Jabilo acso	ibca i	
8 🗀			section 170(b)(1)(A)(vi).	(Complete	Port II \							
9 🗆	-				•	-	hutiana m	ambambi	n food or	d araaa ra	oloto :	f
<i>•</i>	=	•	eives: (1) more than 33						•	-	•	
			nctions - subject to certa							_		
			axable income (less sec	นอกราเล	x) from bu	sinesses a	acquirea b	y the orga	inization a	mer June 3	U, 197	5.
40		509(a)(2). (Complete	•	-1			- 500(-)(
10	-		perated exclusively to te	•	•			•				
11	-	- '	perated exclusively for the		•				-			or
			ations described in secti		-		2). See se c	tion 509(a)(3). Che	ck the box	that	
			organization and compl		_							
	a Type		* *	с 📖 Тур		-	-		d [Type III · C		
е 📖			at the organization is not									n
	foundation m	nanagers and other t	han one or more publicly	y supporte	ed organiza	itions desi	cribed in s	ection 509	9(a)(1) or s	section 509	(a)(2).	
f	If the organiz	ation received a writ	ten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting o	rganization, check th	nis box									
9	Since Augus	t 17, 2006, has the c	organization accepted ar	ny gift or c	ontribution	from any	of the follo	owing pers	sons?			
	(i) A perso	n who directly or ind	lirectly controls, either al	lone or tog	ether with	persons o	lescribed i	ın (II) and (III) below,		Yes	No
	the gove	erning body of the si	upported organization?							11g(i)		
	(ii) A family	member of a persor	n described in (i) above?	,						11g(ii)		
	(iii) A 35%	controlled entity of a	person described in (i)	or (II) above	e?					11g(iii)		
h	Provide the f	ollowing information	about the supported or	ganization	(s).							
(i) Nam	e of supported	(ii) EIN	(iii) Type of	(iv) Is the d	rganization	(v) Did voi	u notify the	(vi) Is		(vii) Am	ount o	f
	ganization	(,	organization		sted in your			organization (i) organiz		sup		•
	,		(described on lines 1-9 above or IRC section	governing	document?	(i) of you	r support?	ÜS				
			(see instructions))	Yes	No	Yes	No	Yes	No			
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										-		

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Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2010

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (e) 2010 (f) Total Calendar year (or fiscal year beginning in) (a) 2006 **(b)** 2007 (c) 2008(d) 2009 1 Gifts, grants, contributions, and membership fees received. (Do not 311,834. 759,557. 503,532. 763,135 175,663. 2,513,721. include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 311,834. 759,557. 503,532. 763,135. 175,663. 2,513,721. 4 Total. Add lines 1 through 3 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, 334,010. column (f) 2,179,711. 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (c) 2008 (d) 2009 (e) 2010 (f) Total (a) 2006 **(b)** 2007 759,557. 175,663. 311**,**834. 503,532 763,135. 7 Amounts from line 4 2,513,721. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 13,768. 137,191. 42,459 42,418 30,584 7,962. and income from similar sources 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 4,704. 8,403. 13,107. assets (Explain in Part IV.) 2,664,019. 11 Total support. Add lines 7 through 10 1,484,255. 12 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 81.82 14 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 84.01 15 15 Public support percentage from 2009 Schedule A, Part II, line 14 16a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and $\triangleright X$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

Schedule A (Form 990 or 990-EZ) 2010

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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 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	ovij pisaso cem	piete Fait II.j		·		
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and	1-7	(-)	(4)	X47 = 3 = 3		1,2
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						•
are not an unrelated trade or bus-						
iness under section 513						
_					-	
4 Tax revenues levied for the organ-						
ization's benefit and either paid to			i			
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
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons				ļ		
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		1				
amount on line 13 for the year	_					
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support						•
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	•				•	
10a Gross income from interest,						<u> </u>
dividends, payments received on						
securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						"
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
· · · · · · · · · · · · · · · · · · ·	v					+
c Add lines 10a and 10b 11 Net income from unrelated business				 		
activities not included in line 10b,						
whether or not the business is					į	
regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						J
14 First five years. If the Form 990 is for t	he organization'	s first, second, thii	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3) organ	zation,
check this box and stop here						▶∟
Section C. Computation of Public					1 1	
15 Public support percentage for 2010 (lin			column (f))		15	
16 Public support percentage from 2009 s					16	
Section D. Computation of Invest						
17 Investment income percentage for 201			ne 13, column (f))		17	9/
18 Investment income percentage from 20					18	%
19a 33 1/3% support tests - 2010. If the o	rganization did i	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line	17 is not
more than 33 1/3%, check this box and	d stop here. The	e organization qua	lifies as a publicly	supported organiza	ation	
b 33 1/3% support tests - 2009. If the c						and
line 18 is not more than 33 1/3%, chec	k this box and s	t op here. The orga	anızatıon qualifies	as a publicly supp	orted organization	h ▶□
20 Private foundation. If the organization	did not check a	box on line 14, 19	a, or 19b, check t	his box and see ins	structions	▶□

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

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.

2010 Open to Public Inspection

Name of the organization

TREE RESEARCH AND EDUCATION ENDOWMENT

Employer identification number 37-1018692

		FUND					3/-1018	
Par	tl	Organizations Maintaining Donor Advise		Other Similar Funds	s or Ac	count	S. Complete	f the
		organization answered "Yes" to Form 990, Part IV, line		· · · · · · · · · · · · · · · · · · ·				
			(a) Doi	nor advised funds	(b) Funds a	and other acc	ounts
1	Total	number at end of year						
2	Aggre	egate contributions to (during year)						
3		egate grants from (during year)						
4		egate value at end of year	L					
5		ne organization inform all donors and donor advisors in			sed fund	S		
		e organization's property, subject to the organization's	_				Yes	L No
6		ne organization inform all grantees, donors, and donor a						
		aritable purposes and not for the benefit of the donor of	or donor adviso	or, or for any other purpose	conferri	ng	П.,	
Par		missible private benefit?			2-4 1/4 10	7	Yes	No_
		Conservation Easements. Complete if the org			art IV, II	ne /.		
1	Purpo	ose(s) of conservation easements held by the organization			- 4 11.		- 	
	H	Preservation of land for public use (e.g., recreation or e	education)	Preservation of an his	•	•		
	H	Protection of natural habitat		Preservation of a cert	illea nis	toric stru	cture	
2	Come	Preservation of open space blete lines 2a through 2d if the organization held a quality	fied concentrati	ion contribution in the form	of a com			a tha laat
2		f the tax year.	ned conservati	ion contribution in the form	or a cor	servation	1 easement o	i the last
	uay 0	tille tax year.			Γ	Но	ld at the End of	the Tay Year
а	Total	number of conservation easements			ŀ	2a		THE TEXT COL
b		acreage restricted by conservation easements			F	2b		
c		per of conservation easements on a certified historic str	ructure include	d in (a)	t	2c		
d		per of conservation easements included in (c) acquired		` '	ure			
_		in the National Register	u, 0, 1, 7, 0, 0, 1			2d		
3		per of conservation easements modified, transferred, re	leased, exting	uished, or terminated by the	∟ e organi		ring the tax	
	year			-,-,, ., ., ., ., ., ., ., ., ., ., ., ., .	-			
4	Numb	per of states where property subject to conservation ea	sement is loca	ited >				
5	Does	the organization have a written policy regarding the pe	riodic monitori	ng, inspection, handling of				
	violat	ions, and enforcement of the conservation easements i	t holds?				Yes	☐ No
6	Staff	and volunteer hours devoted to monitoring, inspecting,	and enforcing	conservation easements d	luring th	e year 🟲		
7	Amou	int of expenses incurred in monitoring, inspecting, and	enforcing cons	servation easements during	the yea	ır ▶ \$ _		
8	Does	each conservation easement reported on line 2(d) above	ve satisfy the r	equirements of section 170	(h)(4)(B)	(1)		
	and s	ection 170(h)(4)(B)(ii)?					Yes	No
9		rt XIV, describe how the organization reports conservat						
	ınclud	de, if applicable, the text of the footnote to the organiza	tion's financial	statements that describes	the orga	ınızatıon'	s accounting	for
S'Ann		ervation easements.	4 A - A 111 - A -	deal Taranasa au O	4L C	·!!	A 4 -	
Par	1111	Organizations Maintaining Collections of Complete if the organization answered "Yes" to Form			πner 3	ımılar <i>i</i>	Assets.	
	IS Ale a					4 11		-6 -4
18		organization elected, as permitted under SFAS 116 (AS	=	•				
		rical treasures, or other similar assets held for public extent of the feetness to its financial statements that decor	-	•	ince or p	Jublic ser	vice, provide,	in Part Aiv,
h		ext of the footnote to its financial statements that descr organization elected, as permitted under SFAS 116 (AS			t and ha	lanca ah	aat warka af a	et biotogool
b								
		ures, or other similar assets held for public exhibition, e ng to these items:	ducation, or re	search in furtherance of pu	iblic serv	ice, prov	Ide the follow	ing amounts
		levenues included in Form 990, Part VIII, line 1				▶ \$		
		ssets included in Form 990, Part X				• s		
2		organization received or held works of art, historical tre	asures, or oth	er similar assets for financia	al gain. n	rovide		-
_		ollowing amounts required to be reported under SFAS 1			yunı, þ	, 5 , 145		
а		nues included in Form 990, Part VIII, line 1				▶ \$		
b		ts included in Form 990, Part X				▶ \$		
		· · · · · · · · · · · · · · · · · · ·				· -		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 032051 12-20-10

Schedule D (Form 990) 2010

Schedule D (Form 990) 2010

7,079.

7,079.

23,041

Other

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

30,120.

Part VII Investments - Other Securities. See	Form 990, Part X, III	ne 12.		
(a) Description of security or category (including name of security)	(b) Book value	Co	(c) Method of valual ost or end-of-year mar	
(1) Financial derivatives				
(2) Closely-held equity interests			·	
(3) Other			1-4	
(A)				
(B)				
(C)				
(D)			·	
(E)				
(F)				
(G)				
(H) (l)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12) ▶				·
Part VIII Investments - Program Related. Se	o Form 000 Port Y	llino 13		
		illie 13.	(c) Method of valua	tion:
(a) Description of investment type	(b) Book value	Co	est or end-of-year mar	
(1)			<u> </u>	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				······
Total. (Col (b) must equal Form 990, Part X, col (B) line 13) ▶				
Part IX Other Assets. See Form 990, Part X, line				(b) Destaudes
* **-	Description			(b) Book value
				
(2)				
<u>(3)</u> (4)				
(5)	· 			
(6)				*** **********************************
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	15.)		>	
Part X Other Liabilities. See Form 990, Part X, I				
1. (a) Description of liability		(b) Amount		1 W-1007 1
(1) Federal income taxes				
(2)				
(3)				
(4)			_	
(5)				
(6)			1	
(7)			1	
(8)			4	
(9)	-		-	
(10)	,		+	
(11) Total (Column (b) must occupi Form 900. Part V. col (P) line	25)		1	
Total. (Column (b) must equal Form 990, Part X, col (B) line FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote to EIN 48 (ASC 740)	231		I	
2. FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote to FIN 48 (ASC 740) 032053 1320-10	the organization's financial	statements that reports the organ	nization's liability for uncertai	n tax positions under

Schedule D (Form 990) 2010

Sche	dule D (Form 990) 2010 FUND		37-3	1018692 Page 4
Pa	TXI Reconciliation of Change in Net Assets from Form 990 to Audited Fit	nancial Sta	atement	S
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		636,113.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		593,018.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		43,095.
4	Net unrealized gains (losses) on investments	4		<u>161,050.</u>
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		161,050.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		204,145.
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Re	evenue pe	r Return	
1	Total revenue, gains, and other support per audited financial statements		1	1,006,629.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments 2a	161,05	0.	
b	Donated services and use of facilities 2b	86,54	9.	
C	Recoveries of prior year grants		_	
d	Other (Describe in Part XIV.)	122,91	7.	
е	Add lines 2a through 2d		2e	370,516.
3	Subtract line 2e from line 1		3	636,113.
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			
þ	Other (Describe in Part XIV.)			•
С	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	636,113.
	TXIII Reconciliation of Expenses per Audited Financial Statements With E	xpenses p		
1	Total expenses and losses per audited financial statements		1	802,484.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	06 54	.	
a	Donated services and use of facilities 2a	86,54	9.	
b	Prior year adjustments 2b			
C	Other losses 2c	122,91	7	
d	Other (Describe in Part XIV.)	122,91	 1 1	209,466.
е	Add lines 2a through 2d		2e	593,018.
3 4	Subtract line 2e from line 1		3	333,010.
•	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 XIV.) 4a 4b			
	Other (Describe in Part XIV.) Add lines 4a and 4b		- 4	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		4c	593,018.
	t XIV Supplemental Information		1 5 1	3337010.
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4: Bort IV line	n 1b and 2	Do Port V Inc 4: Port
	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to			
	RT V, LINE 4: FUNDING OF ARBORICULTURE OR RELATED			
SCI	HOOL AND COLLEGE LEVEL PROGRAMS AS WELL AS POROMOT	TION OF	THE	
				
ARI	BORICULTURE PROFESSION AT ALL EDUCATIONAL LEVELS.			
-				
PAI	RT X, LINE 2: THE FUND FILES INCOME TAX RETURNS IN	THE U	.S. FI	EDERAL
-	·			
JU	RISDICTION AND ILLINOIS. WITH FEW EXCEPTIONS, THE	FUND	IS NO	LONGER
SUI	BJECT TO U.S. FEDERAL, STATE AND LOCAL, OR NON-U.S	. INCO	ME TAX	Κ
Б	MINIMIONA DV MIN INMUNDITURA DOS DESCRIPTOS	\ -		
EX	AMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE 200)/. TH		DOES NOT
03205	4		Sched	ule D (Form 990) 2010

TREE RESEARCH AND EDUCATION ENDOWMENT

Schedule D (Form 990) 2010 FUND 37-1018692 Pag	<u>e 5</u>
Part XIV Supplemental Information (continued)	_
EXPECT A MATERIAL NET CHANGE IN UNRECOGNIZED TAX BENEFITS IN THE NEXT	_
TWELVE MONTHS.	
PART XII, LINE 2D - OTHER ADJUSTMENTS:	_
DIRECT EXPENSES OF SPECIAL EVENTS 122,91	<u>7.</u>
PART XIII, LINE 2D - OTHER ADJUSTMENTS:	
DIRECT EXPENSES OF SPECIAL EVENTS 122,91	7.
	—
	—
	—
Schedule D (Form 990)	2010

032055 12-20-10

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization TREE RESEARCH AND EDUCATION ENDOWMENT **Employer identification number**

37-1018692

to Form 990, Par	t IV, line 14b.				
			ds to substantiate the amount of the graselection criteria used to award the gra		Yes No
2 For grantmakers. Desc	ribe in Part V the	organization's	procedures for monitoring the use of gi	rant funds outside the United S	tates.
3 Activities per Region. (Ti	he following Part	I, line 3 table c	an be duplicated if additional space is r	needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, 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 and investments in region
EAST ASIA AND THE		·			
PACIFIC	0	0	GRANT		8,600.
NORTH AMERICA	0	0	GRANT		10,000.
3 a Sub-total	0	0		rr ·	18,600.
b Total from continuation					
sheets to Part I	0	0			0.
c Totals (add lines 3a					
and 3b)	0	0			18,600.
LHA For Paperwork Reduct	tion Act Notice,	see the instruc	ctions for Form 990.	Schedule I	F (Form 990) 2010

37-1018692

Page 2

Schedule F (Form 990) 2010 FUND 37–1018692

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, 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

Schedule F (Form 990) 2010

TREE RESEARCH AND EDUCATION ENDOWMENT FUND

37-1018692

Schedule F (Form 990) 2010

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2010
(g) Description of non-cash assistance						Schedule F
(f) Amount of non-cash assistance	.0	0.				_
(e) Manner of cash disbursement	8,600,CHECK PAYMENT	10,000,CHECK PAYMENT				
(d) Amount of cash grant	2,009,8	2,000,01				
(c) Number of recipients	1	1				
(b) Region	BAST ASIA AND THE	NORTH AMERICA				
(a) Type of grant or assistance (b) Region	SCHOLARSHIP					

TREE RESEARCH AND EDUCATION ENDOWMENT

Sched	dule F (Form 990) 2010 FUND	37-1018692	Page 4
Par	Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ 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 file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	☐ 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 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? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	☐ Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	☐ Yes	X No

Schedule F (Form 990) 2010

TREE RESEARCH AND EDUCATION ENDOWMENT

Schedule F (Form 990) 2010 F UND 37-1018692 Page 5
Part V Supplemental Information
Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method);
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.
SCHEDULE F, 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 G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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

Open To Public Inspection

Name of the organization

TREE RESEARCH AND EDUCATION ENDOWMENT

Employer identification number

FUND					37-1018	692
Part I Fundraising Activities. required to complete this part	. Complete if the organization answert.	ered "\	es" to	Form 990, Part IV, I	line 17. Form 990-EZ	filers are not
a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, Pab If "Yes," list the ten highest paid indicompensated at least \$5,000 by the	e Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursi	ion of ion of fundra (includerofess	non-g gover alsing o ding o ional f	overnment grants nment grants events fficers, directors, true undraising services?	stees or Yes	□ No be
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundi have c or con contrib	trol 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			- "
		ļ				
Fotal			•			
3 List all states in which the organizatio or licensing.	on is registered or licensed to solicit o	contrib	outions	s or has been notified	d it is exempt from re	egistration
						
						
						
	<u>.</u>					
						
						

032081 01-13-11

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

Schedule G (Form 990 or 990-EZ) 2010

TREE RESEARCH AND EDUCATION ENDOWMENT 37-1018692 Page 2 Schedule G (Form 990 or 990-EZ) 2010 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (c) Other events (a) Event #1 (b) Event #2 (d) Total events TOUR DES NONE (add col. (a) through TREES AUCTION col. (c)) (total number) (event type) (event type) 432,091. 183,091. 615,182. 1 Gross receipts 425,158. 119,575. 544,733. Less: Charitable contributions 6,933. 63,516. 70,449. Gross income (line 1 minus line 2) Cash prizes 96,725. 96,725. Noncash prizes Expenses 39,049. 38,608. 441. Rent/facility costs 26,373. 119 26,492. Food and beverages Entertainment 50,548. 6,828. 57,376. Other direct expenses 219,642 10 Direct expense summary. Add lines 4 through 9 in column (d) -149,193.11 Net income summary. Combine line 3, column (d), and line 10 Part III | Garning. 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. (d) Total gaming (add (b) Pull tabs/instant Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes % Yes Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Combine line 1, column d, and line 7 **9** Enter the state(s) in which the organization operates gaming activities: Yes a is the organization licensed to operate gaming activities in each of these states? **b** If "No," explain: Yes 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? **b** If "Yes," explain:

Schedule G (Form 990 or 990-EZ) 2010

032082 01-13-11

TREE RESEARCH AND EDUCATION ENDOWMENT 37-1018692 Schedule G (Form 990 or 990-EZ) 2010 FUND Does the organization operate gaming activities with nonmembers? 12 is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? 13 Indicate the percentage of gaming activity operated in: a The organization's facility 13b **b** An outside facility 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: Yes No 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party > \$ c If "Yes," enter name and address of the third party: Name > Address -Gaming manager information: Name ▶ Gaming manager compensation ▶ \$ Description of services provided Director/officer Independent contractor 17 Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to Yes No retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$ Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Schedule G (Form 990 or 990-EZ) 2010

SCHEDULE (Form 990)

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

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

OMB No 1545-0047	0107	Open to Public
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Schedule I (Form 990) (2010) **2 Employer identification number** BIOMECHANIC GRANTS TO 24 37-1018692 Inspection (h) Purpose of grant INDIVIDUALS FOR 24 or assistance RESEARCH PROJECTS X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to 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. Part II can be duplicated if additional space is needed address of organization (b) EIN (c) IRC section or government (c) RC section if applicable cash grant or government (c) IRC section if applicable cash grant or government (c) IRC section if applicable cash grant or government (c) IRC section if applicable cash grant or government (c) IRC section if applicable cash grant or government (c) IRC section if applicable cash grant or government (c) IRC section if applicable cash grant or government (c) IRC section if applicable cash grant or government (c) IRC section if applicable cash grant or government Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection ö Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. 13,000 TREE RESEARCH AND EDUCATION ENDOWMENT LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 37-1004119 501(C)(5) Enter total number of section 501(c)(3) and government organizations General Information on Grants and Assistance criteria used to award the grants or assistance? Enter total number of other organizations ARBORICULTURE - 2101 W PARK CT P O 1 (a) Name and address of organization BOX 3129 - CHAMPAIGN, IL 61826 FUND INTERNATIONAL SOCIETY OF Name of the organization Department of the Treasury Internal Revenue Service Part Part II

34

37-1018692

FUND

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed Schedule I (Form 990) (2010) Part III

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) FUNDS, WHETHER OBJECTIVES OF PROPOSAL WERE MET THE RESEARCH HAS HAD ON THE FIELD OF ARBORICULTURE OR URBAN Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. 2: GRANTEES ARE EXPECTED TO PROVIDE PROGRESS A FINANCIAL REPORT BASED UPON THE ORIGINAL REPORTS AS REQUESTED BY TREE FUND AND STATED IN THE GRANT AGREEMENT (d) Amount of non-cash assistance 。 ٥. ö 。 90,634. 49,600 9 000 12,000, (c) Amount of cash grant 9 (b) Number of recipients STUDENTS STUDYING ARBORICULTURE, URBAN FORESTRY OR A RELATED FIELD WITH THE INTENTION OF ENTERING THE JOHN DULING GRANTS - PROVIDE SEED MONEY OR PARTIAL IMPORTANCE OF TREES AND THE ROLE OF TREE RESEARCH. THROUGH PRESENTATIONS AND MEDIA INTERVIEWS ON THE HYLAND JOHNS GRANTS - SUPPORT MULTI-YEAR RESEARCH ROBERT FELIX MEMORIAL SCHOLARSHIPS - FOR COLLEGE ENDEAVORS AND PROVIDES EDUCATIONAL OPPORTUNITIES PROJECTS WITH SPECIAL EMPHASIS ON ROOT AND SOIL MANAGEMENT, PLANTING AND ESTABLISHMENT, PLANT EDUCATION - SUPPORT NUMEROUS PUBLIC EDUCATION SUPPORT FOR RESEARCH AND TECHNOLOGY TRANSFER PROJECTS THAT BENEFIT THE EVERYDAY WORK OF GRANTEES MUST REPORT USE OF FORESTRY. ALSO REQUIRED IS (a) Type of grant or assistance PART I, LINE ARBORISTS AND URBAN FORESTERS HEALTH CARE AND WORKER SAPETY PROFESSION OF ARBORICULTURE BUDGET SUBMITTED AND THE IMPACT SCHEDULE I,

Schedule I (Form 990) (2010)

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form
990, Part IV, lines 29 or 30.

Open to

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

TREE RESEARCH AND EDUCATION ENDOWMENT

TREE RESEARCH AND EDUCATION ENDOWME FUND

Employer identification number 37–1018692

Par	Types of Property						
		(a) Check if	(b) Number of	(c) Noncash contribution	(d) Method of de	termining	
		applicable	contributions or	amounts reported on	noncash contribu		ts
			items contributed	Form 990, Part VIII, line 1g			
1	Art - Works of art						
2	Art - Historical treasures						
3 4	Art - Fractional interests					·	
5	Books and publications Clothing and household goods		·				
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property					· · ·	
9	Securities - Publicly traded						
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or						
	trust interests						
12	Securities · Miscellaneous						
13	Qualified conservation contribution ·						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies		·				
21	Taxidermy	ļ. <u>. </u>					
22 23	Historical artifacts						
23 24	Scientific specimens Archeological artifacts						
25	Other (AUCTION ITEMS)	X	215	96,725.	FAIR MARKET	VAT.IJF	
26	Other ()		213	30/123.	THE IMMEDI	V 2111101	
27	Other ()						
28	Other ()						
29	Number of Forms 8283 received by the organiz	zation durin	a the tax vear for o	contributions			
	for which the organization completed Form 82						
				<u></u>		Yes	No
30a	During the year, did the organization receive by	y contribution	on any property re	ported in Part I, lines 1-28 th	at it must hold for		
	at least three years from the date of the initial	contribution	, and which is not	required to be used for exer	npt purposes for		
	the entire holding period?					30a	X
b	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?					31 X	<u> </u>
32a	Does the organization hire or use third parties	or related o	rganızatıons to sol	ıcıt, process, or sell noncash)		
	contributions?					32a	<u> </u>
b	If "Yes," describe in Part II.						
33	If the organization did not report an amount in	column (c)	for a type of prope	rty for which column (a) is ci	necked,		
	describe in Part II.				<u> </u>	LL	1

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

Schedule M (Form 990) (2010)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

TREE RESEARCH AND EDUCATION ENDOWMENT FUND

Employer identification number 37–1018692

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:			
RESEARCH AND EDUCATION. GRANTS ARE MADE TO UNIVERSITIES AND RESEARCHERS			
THROUGH VARIOUS GRANT PROGRAMS AWARDING ANNUALLY AN AVERAGE OF			
\$250,000. GRANT PROGRAMS SUPPORT CUTTING EDGE RESEARCH IN THE STUDY OF			
TREE PRESERVATION, CONSERVATION AND SOCIETAL IMPACT. SCHOLARSHIPS ARE			
PROVIDED TO STUDENTS WHO ARE ENTERING THE FIELD OF ARBORICULTURE. THE			
EDUCATIONAL PROGRAM SUPPORTS THE EDUCATION OF YOUNG CHILDREN ABOUT THE			
IMPORTANCE OF TREES IN THEIR ENVIRONMENT.			

FORM 990, PART VI, SECTION B, LINE 11: THE EXECUTIVE DIRECTOR RECEIVES A

COPY OF FORM 990 AND DISTRIBUTES ELECTRONICALLY TO THE TRUSTEES FOR THEIR

REVIEW.

FORM 990, PART VI, SECTION B, LINE 12C: THE EXECUTIVE DIRECTOR REMINDS

TRUSTEES ANNUALLY. CONFLICT OF INTEREST FORMS ARE COMPLETED ANNUALLY. IF

THERE IS ANY POTENTIAL OR PERCEPTION OF A CONFLICT OF INTEREST IT IS

IDENTIFIED BY THE TRUSTEE AND THE TRUSTEE LEAVES THE ROOM DURING DISCUSSION

AND VOTE.

FORM 990, PART VI, SECTION B, LINE 15A: EXECUTIVE COMMITTEE USES THE

ASSOCIATION OF SMALL FOUNDATIONS MANAGEMENT AND COMPENSATION SURVEY TO

COMPARE WITH. ALL TRUSTEES EVALUATE EXECUTIVE DIRECTOR BY STANDARD FORM.

THIS INFORMATION IS SUMMARIZED BY THE PRESIDENT AND PRESENTED TO THE

EXECUTIVE COMMITTEE FOR DISCUSSION AND BENCHMARKED AGAINST OTHER EXECUTIVE

DIRECTOR SALARIES IN THE REGION OF SIMILAR SIZE TO DETERMINE THE EXECUTIVE

DIRECTOR'S COMPENSATION.

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

Schedule O (Form 990 or 990-EZ) (2010)

Name of the organization TREE RESEARCH AND EDUCATION ENDOWMENT FUND	Employer identification number 37–1018692
FORM 990, PART VI, SECTION C, LINE 19: UPON WRITTEN REQUE	EST
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
NET UNREALIZED GAINS ON INVESTMENTS:	161,050.
FORM 990, PART XII, LINE 2C:	
COMMITTEE ASSUMES RESPONSIBILITY FOR OVERSIGHT OF AUDIT.	
THE PROCESS HAS NOT CHANGED FROM THE PREVIOUS YEAR.	

Form **8868**

(Rev. January 2011)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Internal Reve	mue Service	File a sepi	arate app	lication for each return.				
• If you a	re filing for an Aut	omatic 3-Month Extension, comple	te only Pa	art I and check this box		>	X	
•	_		_	complete only Part II (on page 2 of this				
•	-	· · · · · · · · · · · · · · · · · · ·	-	itic 3-month extension on a previously fi				
		* =		a 3-month automatic extension of time t			oration	
				sion of time. You can electronically file F				
				Form 8870, Information Return for Tran				
				(see Instructions). For more details on t				
visit www.	.irs.gov/efile and c	ick on e-file for Charitles & Nonprofits	Ŀ					
Part I	Automatic	3-Month Extension of Time	only su	ibmit original (no copies needed).				
A corpora	tion required to file	Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and con	nplete			
Part I only	<i>,</i>							
	corporations (includ ome tax returns.	fling 1120-C filers), partnerships, REM	IICs, and t	rusts must use Form 7004 to request ar	exter	nsion of time		
Type or	Name of exempt	t organization			Emp	loyer identification	number	
print	TREE RES	EARCH AND EDUCATION	N ENDO	OWMENT	37-1018692			
_	FUND							
File by the due date for	Number, street,	and room or sulte no. If a P.O. box, s	ee instruc	tions.	1			
filing your return. See	552 S WA	SHINGTON STREET, NO). 109	9				
Instructions.	• • • • • • • • • • • • • • • • • • • •	st office, state, and ZIP code. For a fo LE,IL 60540	oreign add	iress, see instructions.				
	TARE DICATE	EB/ 12 00310						
Enter the f	Return code for the	e return that this annication is for file	a senara	te application for each return)			0 1	
Enter the i	10.01110000101111	-VENUE SERVICE	, a sopula	to application to the first terms of the first term				
Application	THE PARTY AND THE		Return	Application			Return	
ls For	W W & I - FIR		Code	ls For	'		Code	
Form 990	DOWNERS	GPÓVE II 69515	01	Form 990-T (corporation)			07	
Form 990-	BL MA	Y 1 3 2011	02	Form 1041-A				
Form 990-	F7	التعليمان المتعلقات المتعل	03	Form 4720			09	
Form 990-	PF R		04	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) \$70.90//			05	Form 6069				
	T (trust other than	/ 10-3-3 6	06	Form 8870	i		12	
		M. JANET BORNAN	CIN					
• The box	oks are in the care	of ▶ 552 S WASHINGTO	ON STI	REET - NAPERVILLE, I	L 6	0540		
	one No. ► 630			FAX No. ► 630-369-8332				
•			in the Un	ited States, check this box				
	~	•		emption Number (GEN) If thi			neck this	
box ▶ [ch a list with the names and EINs of all				
				to file Form 990-T) extension of time unt				
	AUGUST 15	, 2011 , to file the exempt	t organizat	tion return for the organization named a	bove.	The extension		
	r the organization's		_	·				
▶□	X calendar year	2010 or			;			
►C	tax year begini	ning	, and	d ending		•		
					ŀ			
2 If the	e tax year entered	in line 1 is for less than 12 months, ci	neck reaso	on: 🔲 Initial return 🔲 Fina	l retur	n		
	Change in accou	inting period						
3a If this	s application is for	Form 990-BL, 990-PF, 990-T, 4720, o	x 6069, er	nter the tentative tax, less any				
nonrefundable credits. See instructions.					\$	<u> </u>		
b If this	s application is for	Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and	, 1		_	
estin	nated tax payment	s made. Include any prior year overp	ayment al	lowed as a credit.	3b	\$	0.	
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,					_			
						0.		
Caution, if	f you are going to i	make an electronic fund withdrawal w	ith this Fo	orm 8868, see Form 8453-EO and Form	<u>8879-</u>			
LHA Fo	r Paperwork Red	uction Act Notice, see Instructions.				Form 8868 (Re	v. 1 -2 011)	