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Return of Organization Exempt From Income Tax

2011

Open to Public

OMB No 1545-0047

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

Department of the Treasury Inspection ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service For the 2011 calendar year, or tax year beginning 2011, and ending 20 C Name of organization Michigan Forest Products Council D Employer identification number Check if applicable: Address change Doing Business As 20-0301559 Number and street (or P O box if mail is not delivered to street address) Name change Room/suite E Telephone number 00 W Michigan Ave Initial return 517 853-8880 City or town, state or country, and ZIP + 4 Terminated П Amended return Lansing, MI 48933 G Gross receipts \$ Application pending F Name and address of principal officer: H(a) is this a group return for affiliates? Yes No H(b) Are all affiliates included? Yes No If "No." attach a list, (see instructions) Tax-exempt status 501(c)(3) **☑** 501(c) () ◀ (insert no) ☐ 4947(a)(1) or Website: ▶ H(c) Group exemption number ▶ Form of organization: Corporation Trust ✓ Association Other ► L Year of formation: M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: To exchange of information about laws, standards, regulations and procedures of governmental units, Activities & Governance and to initiate and sponsor research on issues affecting the forest products industry Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 5 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 5 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from 990-T. line 34 7b RECEIVED **Current Year** Contributions and grants (Part VIII, line 1h) 236,734 214,682 Program service revenue (Part VIII, line 2q) 9 33,162 42,153 Investment income (Part VIII, column (A), lines 3, 4, and 2019 .2012. 10 545 279 Other revenue (Part VIII, column (A), lines 5, 6d; 8e; 9c, 10c, and 11e) 13,600 12,000 11 Total revenue—add lines 8 through 11 (must equal Partyll, column (A), line (2) 12 284,041 269,114 Grants and similar amounts paid (Part IX, column (A); lines 1-3) 13 Benefits paid to or for members (Part IX, column (A), line 4) 14 15 194,612 149,836 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 164,655 118.963 18 268,799 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 359,267 19 Revenue less expenses. Subtract line 18 from line 12 -75,226 315 **Beginning of Current Year** End of Year 355,328 480,336 20 Total assets (Part X, line 16) 469,624 21 344,931 Total liabilities (Part X, line 26) . 22 Net assets or fund balances. Subtract line 21 from line 20 10,397 10,712 Signature Block Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here LOR D うといい Type or print name and title Print/Type preparer's name Paid Check 🗹 if Lisa Fittante, CPA self-employed P01550318 Preparer Firm's name > Self-employed Firm's EiN ▶ Use Only Firm's address ▶ 1100 Westwood Ave, Kingsford, MI 49802 906-250-5173

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

For Paperwork Reduction Act Notice, see the separate Instructions.



✓ Yes 🗌 No Form **990** (2011)

Phone no

Cat. No. 11282Y

Form 99	90 (2011)				Page 2
Part		ement of Program Service A			
	Che	ck if Schedule O contains a re	sponse to any question in this Part	<u>: III </u>	<u> 🗆</u>
1		scribe the organization's missio			
	The excha	nge of information about laws, stand	dards, regulations and procedures of		
	governmer	ntal units, and researching issues af	fecting the forest products industry		
2	Did the or	ganization undertake any signif	icant program services during the ye	ear which were not listed on the	
	prior Form	n 990 or 990-EZ?			Yes 🗹 No
_		lescribe these new services on			
3	services?		, or make significant changes in h		Vaa 🖂 Na
		lescribe these changes on Sche			Yes 🗹 No
4		_	vice accomplishments for each of its	three largest program conject of	managered by
•	expenses	. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a expenses, and revenue, if any, for each	a)(1) trusts are required to report th	
4a	(Code:) (Expenses \$	including grants of \$) (Revenue \$)

4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
		*****	-		

4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
		~			
		• 			
4d	Other pro	gram services (Describe in Scho	edule O.)	· · · · · · · · · · · · · · · · · · ·	
	(Expenses	s \$ including gr)	
4e	lotal pro	gram service expenses 🕨 👚			

Part			·	age o
			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		>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		>
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		>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		•
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	~	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		~
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		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 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		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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	~	-
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		v
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		v
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		~
e f	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	11e		~
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .	11f		~
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		~
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		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ	1
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	 	~
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	146		,
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	14b		,
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		,
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		,
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	 	~
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		,
20 a	management and the second and the se	20a		~
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part	Checklist of Required Schedules (continued)			3-
04	District the second of the sec		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	24		,
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States	21		-
_	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		~
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			,
24a	employees? If "Yes," complete Schedule J	23		_
240	\$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		~
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?			
d	to defease any tax-exempt bonds?	24c 24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	240		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L. Part I.	OEL		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	25b		
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		~
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	07		,
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	27		-
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		~
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		,
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		~
29	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 contributions? If "Yes," complete Schedule M	30		,
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		<u> </u>
	Part I	31		•
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
33	complete Schedule N, Part II	32		_
~	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? If "Yes," complete Schedule R, Parts II, III,		-	
06-	IV, and V, line 1	34		~
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<u> </u>	~
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		~
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	1		<u> </u>
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		_
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	~	<u> </u>
		C	000	12011

Part				
	Check if Schedule O contains a response to any question in this Part V	<u> </u>		
4.	sum a constant de la la constant de		Yes	No
18	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
b	Did the organization comply with backup withholding rules for reportable payments to vendors and			i
Ŭ	reportable gaming (gambling) winnings to prize winners?	1c		ŀ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		'
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	١.		,
	account)?	4a		-
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		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
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		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		•	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		,
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	ĺ	~
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		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	ļ	-
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7h		ļ
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		1	
	organization, have excess business holdings at any time during the year?	8		Ì
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter.]	ļ
a	Initiation fees and capital contributions included on Part VIII, line 12	-		ļ
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b] Section 501(c)(12) organizations. Enter:	1		
a	Gross income from members or shareholders			ł
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		<u> </u>	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		-
ь	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which		1	
D	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
-	If "You " hop it filed a Form 720 to report those neumente? If "No " provide an evalenation in Schodule O	14h	t	1

Part \	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
	Check if Schedule O contains a response to any question in this Part VI			
Section	on A. Governing Body and Management	• •	• •	<u> </u>
0000	The development and management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 5			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 5			ĺ
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		,
3	Did the organization delegate control over management duties customarily performed by or under the direct	-		_
·	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		-
4	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	Did the organization have members or stockholders?	6		~
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	_		
	one or more members of the governing body?	7a		~
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		~
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	7.5		
•	the year by the following:			
а	The governing body?	8a	v ~	
þ	Each committee with authority to act on behalf of the governing body?	8b	>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			١.
01	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	ada l	10
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	~	<u> </u>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b		-
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
С	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		1
14	Did 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			ł
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45	ما	1
a	The organization's CEO, Executive Director, or top management official	15a 15b		
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130	-	\vdash
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	1	}	
	with a taxable entity during the year?	16a		~
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		1	1
C+:	organization's exempt status with respect to such arrangements?	16b	<u> </u>	<u> </u>
<u>Section</u>	on C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	n 501	(c)(3)s	only
	available for public inspection. Indicate how you made these available. Check all that apply.		,	,
	☐ Own website ☐ Another's website ☑ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of	f inte	rest p	oolicy,
~~	and financial statements available to the public during the tax year.	of the		
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: ► Kevin Korpi, 100 W Michigan Ave, Lansing, MI 48933 (517) 853-8880	OI IN	7	
	G 100 tr miningairthe, Edining, in 1000 (011) 000 0000			

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and
	Independent Contractors
	Check if Schedule O contains a response to any question in this Part VII

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

Form

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.

☐ Check this box if neither the organization nor	anv relate	d ora	aniz	atio	n c	ompe	nsa	ted anv curren	t officer, director	or trustee.
				(([<u>,</u>
(A)	(B)	(do o	a. a.	Pos		e than o		(D)	(E)	(F)
Name and Title	Average	box,	unles	s pe	rson	is both	an	Reportable	Reportable	Estimated
	hours per week					or/trust		compensation from	compensation from related	amount of other
	(describe hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	related	ecto	ut or	막	퓇	oyee	₹	(W-2/1099-MISC)	(17 22 1033 111100)	organization
	organizations in Schedule	trus	al tr		Q M	omp	ļ	ļ ·		and related organizations
	O)	tee	uste			ensa				•
			ů			8	L			
(1) Kevin Korpi								}		
Executive Director	40	~						90,000		
(2) Michael Sussman							┢	,		
Chairman	1 1	~						o		
(3) Adam St John										· · · · · · · · · · · · · · · · · · ·
Director	1	•			İ			0		
(4) Ron Salisbury										
Vice-Chair	1	•						0		
(5) Mark Sherman								•		· · · · · · · · · · · · · · · · · · ·
Treasurer	1	•						0		
(6) Todd Johnson								ŀ		
Secretary	1	•	L_		L.		_	0		
<u>(7)</u>								i i		
(8)										
(9)										
(10)			-							
(11)			 	-						· · · · · · · · · · · · · · · · · · ·
(12)								1		
(13)										•
(14)										

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	yee	s, aı	nd H	lighe	st C	ompensated E	mployees (c	ontinued	<u> </u>		
					•	C)								
	(A)	(B)	(do n	ot ch		mon	e than e	one	(D)	(E)		-	(F)	
	Name and title	Average hours per					is both or/trus		Reportable compensation	Reportable compensation			mated unt of	
		week			_	_			from	related		ot	her	
		(describe hours for	Individual trustee or director	Institutional trustee	Officer	Key e	Highest compensated employee	Former	the organization	organization (W-2/1099-Mi			ensation n the	1
		related organizations	o dual	ซื้อ		employee	yee c	۳ ا	(W-2/1099-MISC)			_	nzation	
		in Schedule	trus	멸	1	8	ğ	1			1		related izations	ı
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1b	Sub-total			•	•		•		90,000	· ·	0			0
c d	Total from continuation sheets to Part	•		•	•	•	•		90,000		0		 · ·	0
	Total (add lines 1b and 1c)							<u></u>	<u> </u>	 		<u> </u>		
2	reportable compensation from the organ		1 10 11	iose	115	iea i	above	e) w	mo receivea m	ore than \$10	0,000 6			
	· · · · · · · · · · · · · · · · · · ·								•				Yes	No
3	Did the organization list any former of	ficer, direc	tor, c	or tr	ust	ee,	key e	emp	oloyee, or high	est compen	sated			
	employee on line 1a? If "Yes," complete	Schedule J	for s	uch	ind	ivid	ual					3		~
4	For any individual listed on line 1a, is the													
	organization and related organizations									edule J for	such			
_	individual											4		~
5	Did any person listed on line 1a receive of for services rendered to the organization											ا ہا		
Saction	on B. Independent Contractors	: 11 100, 0	,Giiipi	Cic		,cu	216 0 1		sacii persori	• • • •	•	5		_
1	Complete this table for your five highest	compensat	ed in	den	and	ent	contr	act	ore that receive	ed more than	\$100.0	nn of		
•	compensation from the organization. Rep													ıχ
	year.	•							,		J			
	(A)								(B)			(C)		
	Name and business add	tress						<u>. </u>	Description of s	ervices	Co	mpens	ation	
								\Box						
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	Table number of independent activity	um Gradust		_				<u></u>	(:					
2	Total number of independent contractor received more than \$100,000 of compensations.							ט ע	TUSE IISTEO AD	ove) who				
	10001100 more than \$100,000 or compar		<u> </u>	. <u>y</u> ai	114.63	.,011	_						. 000	(2011)

Part	VIII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated campaigns 1a					
ar a	b	Membership dues 1b	214,682				
A G	С	Fundraising events 1c					
Sift lar,	d	Related organizations 1d					
IS, (е	Government grants (contributions) 1e		İ			
r S	f	All other contributions, gifts, grants,					
tt lb		and similar amounts not included above 1f				'	
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f: \$					
္ န	h	Total. Add lines 1a-1f		214,682			
Program Service Revenue		<u> </u>	Business Code				
ě.	2a	Contract Services Income	999999	42,153	42,153	0	0
æ	ь						
Ş	С						
Š	d						
ä	e						
ğ	f	All other program service revenue.					L
	g	Total. Add lines 2a-2f		42,153			
	3	Investment income (including divide and other similar amounts)		270	070		
		· · · · · · · · · · · · · · · · · · ·		279	279	0	0
	4	Income from investment of tax-exempt bo	-				
	5	Royalties	(ii) Personal				
	60	Gross rents	(ii) r Classifia				
	6a						
	b	Less: rental expenses Rental income or (loss)					
	d	Al-AA-l ! (l)	•		1		
	7a	Gross amount from sales of (i) Securities	► (ii) Other				
		assets other than inventory					
	b	Less: cost or other basis					
		and sales expenses .					•
	Ι.	Gain or (loss) .					
	ď	Net gain or (loss)	<u> ▶</u>				
Revenue	8a	Gross income from fundraising events (not including \$					
		of contributions reported on line 1c). See Part IV, line 18 a					
Other		Less: direct expenses b					
-		Net income or (loss) from fundraising	events . >				
1	9a	Gross income from gaming activities.					
,	1	See Part IV, line 19 a					
		Less: direct expenses b				•	
		Net income or (loss) from gaming activ	ities >				
	10a	Gross sales of inventory, less returns and allowances a					
	b	Less: cost of goods sold b					
	С	Net income or (loss) from sales of inve					
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	C	All other revenue		42.000	42.000	0	0
	d	All other revenue [Total. Add lines 11a-11d	•	12,000 12,000		· · · · · ·	· · · · · ·
	12	Total revenue. See instructions		269,114		0	0
					31,102		<u> </u>

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).

Do 20	Check if Schedule O contains a response to any question in this Part IX								
	, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses				
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21								
2	Grants and other assistance to individuals in the United States. See Part IV, line 22								
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16								
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	90,000		90,000					
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 8	Other salaries and wages	38,288		38,288					
9	Other employee benefits	21,549		21,549					
10	Payroll taxes	12,634		12,634					
11	Fees for services (non-employees):	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			•				
а	Management								
b	Legal	2,325	2,325		<u> </u>				
C	Accounting	2,484	2,484						
d	Lobbying								
e	Professional fundraising services. See Part IV, line 17								
f	Investment management fees				 				
g	Other								
12	Advertising and promotion	1,895	1,895						
13	Office expenses	4,115	4,115						
14	Information technology	1,371	1,371		_ ,				
15	Royalties	10.000	40.000						
16	Occupancy	16,230 12,728	16,230						
17 18	Travel	12,728	12,728		 				
10	Payments of travel or entertainment expenses for any federal, state, or local public officials								
19	Conferences, conventions, and meetings .	5,410	5,410		· · · · · · · · · · · · · · · · · · ·				
20	Interest	2,563	2,563						
21	Payments to affiliates								
22	Depreciation, depletion, and amortization .	7,353	7,353						
23	Insurance	2,838	2,838						
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)								
а	Advocacy	4,417	4,417						
b	Equipment rental & maintenance	15,367	15,367						
c	Postage and delivery	1,806	1,806						
d	Printing and reproduction	6,777	6,777						
e	All other expenses	18,649	18,649						
25	Total functional expenses. Add lines 1 through 24e	268,799	106,328	162,471					
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				000				

	art X	Balance Sheet	(4)	———	(B)
			(A) Beginning of year		End of year
	1	Cash—non-interest-bearing	81,858	1	145,989
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	<u> </u>
ı	4	Accounts receivable, net	229,559	4	300,993
Ì	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of Schedule L \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots \ldots		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)			
ets	_	· ·	0.004	6	
Assets	7	Notes and loans receivable, net	3,204	7	0
٦	8	Inventories for sale or use	2 400	8	2.400
	9 10a	Prepaid expenses and deferred charges	3,160	9	3,160
	IVa				
	L		-l	40-	20 104
1	b	• • • • • • • • • • • • • • • • • • • •	37,547	11	30,194
	11 12	Investments—publicly traded securities		12	
	13	Investments—other securities. See Part IV, line 11		13	
	14	Intangible assets		14	
1	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	355,328	16	480,336
-	17	Accounts payable and accrued expenses	303,662	17	438,323
l	18	Grants payable	000,002	18	100,020
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
8	22	Payables to current and former officers, directors, trustees, key			
Liabilities		employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties	41,629	23	31,302
	24	Unsecured notes and loans payable to unrelated third parties	,,,,,,	24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	344,931	26	469,624
ses		Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
E E	27	Unrestricted net assets		27	
3a	28	Temporanly restricted net assets		28	
<u> </u>	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
ş	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds .	10,397	32	10,712
é	33	Total net assets or fund balances	10,397	33	10,712
~	34	Total liabilities and net assets/fund balances	355,328	34	480,336

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3b

Form 990 (2011)

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

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2011

OMB No 1545-0047

pen to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

Section 501(c)(3) organizations that have NOT filed form 5788 (election under section 501(n)). Complete Part II-B. Do not complete Part II-B. Section 501(c)(d), (5), or (6) organizations: Complete Part III. Name of organization Michigan Forest Products Council Provide a description of the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. Political expenditures. Volunteer hours. Subject to Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-B. Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955. Enter the amount of any excise tax incurred by organization under section 4955. The triangle of the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No Was a correction made? First I-C. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities The triangle of the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function activities Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL. Did the filing organization file Form 1120-POL for this year? Did the filing organization file Form 1120-POL for this year? Did the filing organization file Form 1120-POL for this year? Did the filing organization file Form 1120-POL for this year? Did the filing organization is the form organization is necessed and enter the amount of political contributions received that were promptly and directly delivered to a separate political organizations from the organization is necessed. Pol	• Se	ction 501(c)(3) organizations	that have filed Form 5768 (election und	der section 501(h)): (Complete Part II-A. Do not co	mplete Part II-B
Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization Michigan Forest Products Council Provide a description of the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. Political expenditures Volunteer hours Part I-3 Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 \$ If the organization incurred a section 4955 tax, did it file Form 4720 for this year? If the organization incurred a section 4955 tax, did it file Form 4720 for this year? If the organization incurred a section 4955 tax, did it file Form 4720 for this year? If the organization incurred a section 4955 tax, did it file Form 4720 for this year? If the organization incurred a section 4955 tax, did it file Form 4720 for this year? If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Total exempt function activities Total exempt function activities Total exempt function activities Total exempt function activities Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 170 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 170 Total exempt function expenditures and lines 1 and 2. Enter here and on Form 1120-POL, line 170 Part I-3 If Yes No Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization organization in Part IV. (a) Name (b) Address (c) EIN (d) Amount pad from the filing organization organization in Part IV. (e) In additional space is neede	• Se	ction 501(c)(3) organizations	that have NOT filed Form 5768 (electio	n under section 501	(h)): Complete Part II-B. Do n	not complete Part II-A.
Michigan Forest Products Council Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. Political expenditures S S	If the c	rganization answered "Yes	" to Form 990, Part IV, line 5 (Proxy 1	Tax) or Form 990-E	Z, Part V, line 35c (Proxy Ta	ıx), then
Michigan Forest Products Council Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. Political expenditures			anizations: Complete Part III.			
Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political expenditures	Name	of organization			Employer ider	ntification number
Provide a description of the organization's direct and Indirect political campaign activities in Part IV. Political expenditures	Michig	<u> </u>				
Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made?	Part					organization.
Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Senter the amount of any excise tax incurred by organization under section 4955 Senter the amount of any excise tax incurred by organization under section 4955 Senter the amount of any excise tax incurred by organization under section 4955 Senter the amount of any excise tax incurred by organization under section 4955 Senter the amount of any excise tax (id it file Form 4720 for this year? Yes No No If "Yes," describe in Part IV.	1	Provide a description of t	the organization's direct and Indire	ect political campa	aign activities in Part IV.	
Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 .	2	Political expenditures .			▶ \$)
Enter the amount of any excise tax incurred by the organization under section 4955 . Enter the amount of any excise tax incurred by organization managers under section 4955 . If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	3	Volunteer hours				
Enter the amount of any excise tax incurred by the organization under section 4955 . Enter the amount of any excise tax incurred by organization managers under section 4955 . If the organization incurred a section 4955 tax, did it file Form 4720 for this year?						
2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?						
If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No Was a correction made? Yes No If "Yes," describe in Part IV.						
Was a correction made? b If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization isted, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. Also enter filing organization's fund						, ,
b If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities	_	_		_		= =
Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filling organization for section 527 exempt function activities						Yes No
Enter the amount directly expended by the filing organization for section 527 exempt function activities						/ \/a\
activities						(C)(3).
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	1				•	
Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b	•				_	
Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b	2		• •	-		
line 17b	_	•			•	
Did the filing organization file Form 1120-POL for this year?	3					
Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filling organization made payments. For each organization listed, enter the amount paid from the filling organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0- filing organization's funds. If none, enter -0- (e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0 (1) (2)						
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the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0- (e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0 (1) (2) (3)	5					
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(a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0- (e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0 (1) (2) (3)						
filing organization's funds. If none, enter -0- funds. If none, enter		as a separate segregated	rand or a position action committee	T AOJ. II additio	T T Treeded, prov	de information in that iv.
funds. If none, enter -0- promptly and directly delivered to a separate political organization If none, enter -0 (1) (2) (3)		(a) Name	(b) Address	(c) EIN		
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(5)	(0)			1		
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Page	4

Par	art II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).					
4 (Check ► ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).					
3 (check 🕨 🗌 if the filing organization of	hecked box A	and "limited con	trol" provisions a	pply.	
	Limits on Loi (The term "expenditures"	bying Expendit means amounts		.)	(a) Filing organization's totals	(b) Affiliated group totals
18	Total lobbying expenditures to influence	e public opinion	(grass roots lobby	/ing)		
t	Total lobbying expenditures to influence	e a legislative be	ody (direct lobbyin	g)		
c	Total lobbying expenditures (add lines	1a and 1b) .				
d	Other exempt purpose expenditures .					
e	Total exempt purpose expenditures (a	dd lines 1c and 1	id)			
f	Lobbying nontaxable amount. Enter columns.	the amount f	rom the following	g table in both		
	If the amount on line 1e, column (a) or (b)	is: The lobbying	nontaxable amoun	rt is:		
	Not over \$500,000	20% of the a	mount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	s 15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	s 10% of the excess	over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	s 5% of the excess of	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000.				
8	•	•				
h	3					
i	Subtract line 1f from line 1c. If zero or	· • · · · · · · · · · · ·			L <u></u>	
j	if there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?					
	4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)					
	Lobbyi	ng Expenditures	During 4-Year A	veraging Period	· · · · · · · · · · · · · · · · · · ·	
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
28	Lobbying nontaxable amount					•
t	Lobbying ceiling amount (150% of line 2a, column (e))					
•	Total lobbying expenditures					
	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
	Grassroots lobbying expenditures					

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT fi (election under section 501(h)).	led	Form	5768	1	
For e	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(8	2)		(b)	
		Yes	No	A	mount	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			<u> </u>		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	Other activities?					
j	Total. Add lines 1c through 1i	:				·
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912	•				
c d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	1				
	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5))r so	ction		
Tare	501(c)(6).	(0), (<i>)</i> 1 36	Cuon		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	1	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	1	1
	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes." Dues, assessments and similar amounts from members				line 3	3, is
1 2	Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
a	Current year		2a			
b	Carryover from last year		2b			
C	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby	ing				
_	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5	L		
	Supplemental Information lete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Fo, complete this part for any additional information.	Part II	I-A; a	nd Par	t II-B,	line
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					

Schedule C (Form 990 or 990-EZ) 2011 Page <b>4</b>				
Part IV	Supplemental Information (continued)			
·		***************************************		
**				
*************				
	·			
		***************************************		

#### SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

2011

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

Open to Public Inspection

Employer identification number

20-0301559 Michigan Forest Products Council Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990. Part IV. line 6. (b) Funds and other accounts Total number at end of year . . . . . 1 Aggregate contributions to (during year) . 2 Aggregate grants from (during year) . . 3 Aggregate value at end of year . . . . 4 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? . . . . . . . . ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No 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 education) ☐ Preservation of an historically important land area Protection of natural habitat Preservation of a 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 Number of conservation easements on a certified historic structure included in (a) . . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a **2**ď Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax 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 5 violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No 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 170(h)(4)(B) ☐ Yes ☐ No 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. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Assets included in Form 990, Part X .

Part	Organizations Maintaining	Collections of	Art, His	torical 1	Treasures,	, or Ot	her Similar As	sets (continued)
3	Using the organization's acquisition, a collection items (check all that apply):							
а	☐ Public exhibition		d	☐ Loan	or exchang	e proq	rams	
ь	☐ Scholarly research						•••	
С	☐ Preservation for future generations			_			***	
4	Provide a description of the organizat		and expla	ain how t	hev further	the ord	anization's exer	not purpose in Part
	XIV.				, , , , , , , , , , , , , , , , , , , ,		,	
5	During the year, did the organization	solicit or receive	donation	s of art	historical tr	easure	s or other simil	ar
_	assets to be sold to raise funds rather							
Part								
· ar	line 9, or reported an amoun				jui ii zutioi i	21134461	100 103 1011	)
1a	Is the organization an agent, trustee,				or contribut	ione or	other assets n	
	included on Form 990, Part X?							□ Yes □ No
h	If "Yes," explain the arrangement in Pa							☐ 162 ☐ 140
Ь	ii res, explain the arrangement in Fa	an Aiv and comp	iele lile il	mowing t	able.		T	mount
_	Designing halans					-	<del></del>	ariount
Ç	Beginning balance					1c	<del></del>	
d	Additions during the year					1d	<del> </del>	
e	Distributions during the year					1e	<del></del>	
f	Ending balance					1f		
2a	Did the organization include an amoun		art X, line	217 .				🗌 Yes 🗌 No
	If "Yes," explain the arrangement in Pa			· · · · · ·	<i>***</i>			
Par	V Endowment Funds. Comple							<del></del>
_	<u> </u>	(a) Current year	(b) Pn	or year	(c) Two year	s back	(d) Three years bac	k (e) Four years back
1a	Beginning of year balance							
ь	Contributions		<u> </u>					
C	Net investment earnings, gains, and				}	j		1
	losses							
d	Grants or scholarships							<u> </u>
e	Other expenditures for facilities and							
	programs							1
f	Administrative expenses		T					
g	End of year balance							
2	Provide the estimated percentage of the	he current year e	nd balanc	e (line 1g	, column (a	)) held	as:	
а	Board designated or quasi-endowmer	nt 🕨	%	` .	,	••		
b	Permanent endowment ▶	%						
C	<b>-</b>	%						
	The percentages in lines 2a, 2b, and 2		00%.					
3a	Are there endowment funds not in the			zation the	at are held	and ad	ministered for th	ne
	organization by:	·	•					Yes No
	(i) unrelated organizations							3a(i)
	## 1 1 1 11							3a(ii)
b	If "Yes" to 3a(ii), are the related organi	zations listed as	required o	on Sched	lule R?			3b
4	Describe in Part XIV the intended uses							\
Part						-		
	Description of property	(a) Cost or o		r	or other basis	(c)	Accumulated	(d) Book value
		(investr			other)		epreciation	(-,
1a	Land			1				
b	Buildings	` <u> </u>		<del>                                     </del>				
C	Leasehold improvements	·		<del>                                     </del>				
d	Equipment	·	·	<del> </del>		•		
e	00.	·	47,283	<del> </del>	0		17,089	30,194
		unt aqual Fare 1		V 001:	1	1/01 1		
i otal.	Add lines 1a through 1e. (Column (d) m	iust equal Form S	ssu, Part	r, columi	ור e), ווחפ זע,	/(C).)	<u> ▶  </u>	30,194

Part VII	Investments - Other Securitie	s. See Form 990, Part >	(, line 12.	
(6	a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year m	
(1) Financia	derivatives			
(2) Closely-	held equity interests			
(3) Other				
(A)				<del>_</del>
(B)				
(C)				<del> </del>
(D)				
(E)				
(F)				
(G)				
(H)				
(I)	A)			
	(b) must equal Form 990, Part X, col. (B) line 12.) I Investments—Program Relat		V line 12	· · · · · · · · · · · · · · · · · · ·
Part VIII	_ · _ · _ · _ · _ ·	<del></del>	<u> </u>	
	(a) Description of investment type	(b) Book value	(c) Method of val Cost or end-of-year m	
_(1)				
(2)			<u> </u>	.=
(3)				
_(4)				
(5)				<del> </del>
(6)		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
<u>(7)</u>				
(8)				
<u>(9)</u> (10)			<del>-  </del>	
	(b) must equal Form 990, Part X, col. (B) line 13.)	<u> </u>	<u> </u>	
Part IX	Other Assets. See Form 990,			
		(a) Description	· · · · · · · · · · · · · · · · · · ·	(b) Book value
(1)				
(2)				· · · · · · · · · · · · · · · · · · ·
(3)				
(4)				
(5)				
(6)				
(7)	· · · · · · · · · · · · · · · · · · ·			
(8)				
(9)				
(10)	4) (5, 000 5, 1)	- 1 (D) (1 - 45 )		<del></del>
	ımn (b) must equal Form 990, Part X,		<u> </u>	
Part X	Other Liabilities. See Form 99 (a) Description of liability	U, Paπ X, line 25.  (b) Book value	<del></del>	<del> </del>
	income taxes	(b) book value	<del>- </del>	
(2)	income taxes	.		
(3)				
(4)				
(5)	······································		-	
(6)	····	<del></del>	-	
(7)	<del></del>		╡	
(8)	<del></del>		╡	
(9)		<del>- </del>	-	
(10)		<u> </u>		
(11)	<del></del>		7	
	(b) must equal Form 990, Part X, col. (B) line 25.) I	<u> </u>	7	
	SC 740) Footnote. In Part XIV, provide		to the organization's financial staten	nents that reports the
organizatio	n's liability for uncertain tax positions	under FIN 48 (ASC 740).		

Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem	ents
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1
2	Total expenses (Form 990, Part IX, column (A), line 25)	2
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3
4	Net unrealized gains (losses) on investments	4
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
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
а	Net unrealized gains on investments	
ь	Donated services and use of facilities	]
C	Recoveries of prior year grants	] }
d	Other (Describe in Part XIV.)	<u>]</u>
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	_
b	Other (Describe in Part XIV.)	_]
C	Add lines 4a and 4b	4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
а	Donated services and use of facilities	
р	Pnor year adjustments	_
C	Other losses	-
d	Other (Describe in Part XIV.)	-  _
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	<b>- </b>
b	Other (Describe in Part XIV.)	-   _
С 5	Add lines <b>4a</b> and <b>4b</b>	4c   5
	XIV Supplemental Information	<u> </u>
	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; I	Port IV lines 1b and 2b:
	, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also com	
	dditional information.	April 10 part 10 provide
•		
	,	
		**-

Schedule D (Form 990) 2011

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

# Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Name of the organization	Employer identification number
Michigan Forest Products Council	20-0301559
Part VI-B Line 11a Form 990 is distributed at meeting for review	
Part VI-B Line 15a Approval by board of directors	
Tall VPD Line 13a Approval by coald of directors	
De AM Dil mar APh. Assessmeller have designed at designed	
Part VI-B Line 15b Approval by board of directors	
Form 990, Page 10, Line 24e All Other Expenses	
Program Services	
Program expense \$11,862	
49	
Property taxes 967	
Telecommunications 5,820	
1000/11114111041110411104111041111111111	
Total other expenses \$18,649	
Total dular expenses \$10,040	
•••••••••••••••••••••••••••••••••••••••	
•••••••••••••••••••••••••••••••••••••••	
	•