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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)

2011 Open to Public

Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

<u>A</u>	For the	2011 cale	endar year, or tax year b	eginning		, 2011, a	nd ending			, 20			
В	Check if a	applicable:	C Name of organization Mi	chigan Fores	t Resource Alliand	ce			D Employ	er identific	ation nur	nber	
	Address o	change	Doing Business As					-		38-2973	3453		
	Name cha	ange	Number and street (or P C	box if mail is n	ot delivered to street	address)	Room/suite		E Telephor	ne number			
\Box	Initial retu		100 W. Michigan Ave				10	0	517 853-8880				
ñ	Terminate	nated City or town, state or country, and ZIP + 4											
Amended return Lansing, MI 48933 G Gross receipts \$													
ñ											☐ Yes	V No	
_	Арріюція	on pending	Kevin Korpi, Executive		rc				l affiliates in				
	Tax-exem	ot ctatue:	☑ 501(c)(3) [] 501(c) (1947(a)(1) or	527		o," attach a				
	Website:		<u> </u>	2 301(0) () \ (\(\text{(iii3ci(\text{110.})}\) \(\text{\text{1.5}}\)	1541 (a)(1) OI	<u> </u>	ł	exemption	,		•	
_			Corporation Trust	Association [Other▶	I Yea	r of formation			of legal do		MI	
	art I	Summ					or torridation		III Outlo	or logal do	THORE.		
-4			escribe the organization	n'e mission o	r most significan	t activities:							
	I	_	TION OF HEALTHY FORI		-		HBLIC				******		
9	1 .		ATION, EDUCATIONAL I										
Activities & Governance	-	MANAGE				0. 112000							
Ver			is box ▶☐ if the organ		entinued its open	ations or dis	enocod of	more than	25% of	ite not a	cote		
Ĝ	L		of voting members of t					nore man	3	no net ac	33C13.	4	
مح	1		-					• • •	4				
ië	ľ		of independent voting				-	• • • •					
ξ			mber of individuals emp	•	•		2a)		5		 .		
AC	1		mber of volunteers (est		• •				6				
	1		elated business revenu		• • •			• • •	7a				
	b	Net unre	lated business taxable	income from	i Form 990-1, line	34		Prior Ye	7b		rrent Yea		
Revenue	١ ,	.		an e 415			-	Prior re	ar		ment rea	<u></u>	
			tions and grants (Part \		1000		 -						
	i .	-	service revenue (Part \				· ·		167,702		2	200,608	
ě			nt income (Part VIII, co		783			724					
_			enue (Part VIII, column		100 100								
			enue-add lines 8 throu				ie 12)		168,485		2	201,332	
			nd similar amounts pai										
			paid to or for members				í· ·						
98	1		other compensation, em			ın (A), lines s	5–10)		35,513			35,039	
Expenses	16a	Professio	onal fundraising fees (P	art IX, colum	n (A), line 11e)	11 1157	· ·						
Ř	b ·	Total fund	draising expenses (Par	t IX, column[(D), line 25) 🕨 🗆	ر الحق والا							
ш	17 (Other exp	penses (Part IX, columi	n (A), lines 11	la-11d, 11f-24e)		∟		121,551			37,822	
	18	Total exp	enses. Add lines 13-1	7 (must equa	il Part IX, column	(A), line 25)		157,064			72,861	
	19	Revenue	less expenses. Subtra	ct line 18 fro	m line 12	<u> </u>	<u> </u>		11,421			28,471	
58							Beg	inning of Cu	rrent Year	En	d of Year	, 	
atan	20	Total ass	ets (Part X, line 16) .				· ·		355,207		3	58,483	
Net Assets (Fund Balanc	21	Total liab	ilities (Part X, line 26) .						25,195			0	
			ts or fund balances. Su	ubtract line 2	1 from line 20	<u></u>	<u> </u>		330,012		3	58,483	
Pa	art II	Signat	ture Block	·									
			ry, I declare that I have exam							ny knowled	lge and b	elief, it is	
_tru	e, correct,	and compi	ete Declaration of preparer (other than office	r) is based on all infor	mation of which	n preparer na	s any knowi	eage				
	ł	\leq	Terr	115									
Sig		Sign	ature of officer	3	1 1			Da	ر سے le	1.1	/		
He	re	\	+DEUIN 1	<u> </u>	zonpi				_5/	14/	12		
		4	or print name and title				· · · · · · · · · · · · · · · · · · ·						
Рa	id	Pnnt/Ty	pe preparer's name	Prepa	arer's signature	4	Date	1,1.	Check [
	eparer	Lisa Fitt	tante, CPA		usa til	arte	5/	6/12	self-emp	loyed	P01550	318	
	e Only							Firm	's EIN 🕨				
		Firm's a	ddress ► 1100 Westwoo					Pho	ne no.	9906	-250-517	<u>, </u>	
			s this return with the pr			structions)	<u>· · · · · · · · · · · · · · · · · · · </u>	<u> </u>			✓ Yes [
For	Paperwe	ork Redu	ction Act Notice, see the	separate ins	tructions.		Cat No	11282Y			Form 99	0 (2011)	

OIII 93	50 (2011)	Page Z								
Part										
1	Check if Schedule O contains a response to any question in this Part III	· · · <u>Ľ</u>								
•	PROMOTION OF HEALTHY FORESTS THROUGH BROAD PROGRAMS OF PUBLIC									
	INFORMATION EDUCATIONAL PROCESARS AND PROMOTION OF RESOURCE									
	MANAGEMENT									
2	Did the organization undertake any significant program services during the year which were not listed on the									
	prior Form 990 or 990-EZ?	es 🗹 No								
_	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?	aa 🖾 Na								
	f "Yes," describe these changes on Schedule O.									
4	Describe the organization's program service accomplishments for each of its three largest program services, as n	neasured by								
•	expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the									
	grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.									
4a	(Code:) (Expenses \$172,861 including grants of \$) (Revenue \$200),608)								
	***************************************	·								

	······································									
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	·····								
40	(Code) (Expenses \$ Including grains of \$) (nevenue \$	/								
		-								

4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)								
	•••••••••••••••••••••••••••••••••••••••									
4d	Other program services (Describe in Schedule O.)	· · · · · · · · · · · · · · · · · · ·								
Tu	(Expenses \$ including grants of \$) (Revenue \$)									
4e	Total program service expenses ▶									

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,"	١.	١.	1
_	complete Schedule A	1	~	<u> </u>
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? If "Yes," complete Schedule C, Part II	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		~
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, 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	V	
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		•
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		,
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		~
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		,
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		v
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		~
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 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		<i>V</i>
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			.,
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	16		.,
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 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	17		/
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18		•
20 -	If "Yes," complete Schedule G, Part III	19		V
20 a	·	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)	•		
			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	21		~
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		~
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		~
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		~
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		v
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		v
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		,
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 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	27		~
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		V
С	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	28c		~
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29		V
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30		~
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		<u>,</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<i>y</i>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		•
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		~
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	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,			
38	Part VI	37		~
	19? Note. All Form 990 filers are required to complete Schedule O	38 Form	990	(2011)
		1 0/1		12011)

Part				
	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 1a 0		165	140
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		
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 0			
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
20	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 3b		
b 4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30		
14	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		~
ь	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		
p	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
68	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		/
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Oa		<u> </u>
-	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	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		<u> </u>
þ	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?	, ,		,
d	If "Yes," indicate the number of Forms 8282 filed during the year	7c		
6	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	1	/
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		
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 organization, or a donor advised fund maintained by a sponsoring			
9	organization, have excess business holdings at any time during the year?	8		
a	Sponsoring organizations maintaining donor advised funds. 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:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b		i	
11	Section 501(c)(12) organizations. Enter:	. [İ	
a b	Gross income from members or shareholders	1	}	
U	against amounts due or received from them.)		l	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	Ì	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.	- 1		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	the organization is licensed to issue qualified health plans	1	j	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		
	, and the second		990	(2011)

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through /b 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	ee in:	struct				
Secti	ion A. Governing Body and Management	· · ·	_ <u>:</u>	· <u>Ľ</u>			
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	ĺ	[ĺ			
	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.	i i					
ь	Enter the number of voting members included in line 1a, above, who are independent . 1b 4						
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		v			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1			
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1			
6	Did the organization have members or stockholders?	6		1			
7a	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,						
	stockholders, or persons other than the governing body?	7b		ļ			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
a	The governing body?	8a	>				
b	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 the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		~			
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.))			
			Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		~			
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	~				
Ь	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		~			
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		ļ			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c					
13	Did the organization have a written whistleblower policy?	13		~			
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 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
a	The organization's CEO, Executive Director, or top management official	15a	~	ļ			
þ	Other officers or key employees of the organization	15b	~	ļ			
165	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						
16a	with a taxable entity during the year?	16a		~			
ь	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						
	organization's exempt status with respect to such arrangements?	16b	L	L			
	on C. Disclosure						
17 18	List the states with which a copy of this Form 990 is required to be filed ► Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(c)(3)s	only)			
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict or	f inte	rest n	nolicy			
	and financial statements available to the public during the tax year.			, oney,			
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	of the)				

2000	7

Form	aan	(201	1

Part VII	Compensation of Officers, Director	s, Trustees	, Key Employees,	Highest	Compensated	Employees,	anc
	Independent Contractors						. ,

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- 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 no	any relate	d org	aniz	atic	n c	ompe	nsa	ited any curren	t officer, directo	r, or trustee.
				((C)					
(A)	(B)	l			ition			(D)	(E)	(F)
Name and Title	Average					than one south		Reportable	Reportable	Estimated
	hours per					or/trus		compensation	compensation from	
	week		,		,			from	related	other
	(describe hours for	ë, ₹	stit	Officer	Key employee	ᇴ	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	related	ec da	ğ	*	ğ	yes c	4	(W-2/1099-MISC)		organization
	organizations in Schedule	~ _ =	巨		ν	3				and related organizations
•	O)	Individual trustee or director	institutional trustee		ď) ens				Organizations
		•	8			Highest compensated employee				_
Al Maria Kara										
(1) Kevin Korpi	4.0		ŀ							
Executive Director	40	~	<u> </u>		<u> </u>	ļ	-	0		
(2) Todd Johnson		_		ļ						
Director	1	~	<u> </u>	<u> </u>	<u> </u>	ļ	<u> </u>	0		
(3) Mark Sherman								1 _		
Director	11	~	<u> </u>	<u> </u>	<u> </u>	ļ		0		
(4) Michel Sussman]					ļ	1	J		
Director	1	•	<u> </u>	L			<u> </u>	0		
(5)										
(6)										
(7)						Ĺ				
(0)					li		-			
							l			
(9)										
(10)										
					ļ		<u> </u>			
(11)										
(12)										
(13)										
(14)										

Par	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A) Name and title		box,	unles	Pos neck ss pe	rson	than on the than of the the than the	an	(D) Reportable compensation from	(E) Reportal compensation related	on from	am	(F) imated ount of	
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizati (W-2/1099-	ons	comp fro orga and	ensation the nization related	n i
(15)														
(16)														
(17)										_				
(18)														
(19)														
(20)														
(21)														
(22)												<u> </u>		
(23)														
(24)														
(25)														
1b c d	Sub-total	-				 	- -	* * *	0					
2	Total number of individuals (including but reportable compensation from the organi	not limited		_			above	e) w	ho received mo	ore than \$1	00,00	0 of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete 8	ficer, direct						mp	loyee, or high	est compe	ensate	d 3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of rep greater tha	oortat an \$1	ole (50,	com 000	per? If	satio "Ye:	n aı s,"	nd other comp	ensation fi	rom the	е		_
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or inc	dividua 			,
Section	on B. Independent Contractors													
1	Complete this table for your five highest of compensation from the organization. Replyear.													ax
	(A) Name and business addi	ess							(B) Description of se	ervices		(C) Compens	ation	
												······································		
	······································													
2	Total number of independent contractor received more than \$100,000 of compens							the	ose listed abo	ve) who				

Par	t 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
ts ts	1a	Federated campaigns 1a				
ra z	ь	Membership dues 1b 200,	608	1		}
چ چ و	С	Fundraising events 1c				
# F	d	Related organizations 1d		1		
a ii	е	Government grants (contributions) 1e				
ig ig	f	All other contributions, gifts, grants,			i	
ig je		and similar amounts not included above				
重Ω	g	Noncash contributions included in lines 1a-1f:\$		}		
Contributions, Gifts, Grants and Other Similar Amounts	h		200,608			
		Business Co	de	1		
<u> </u>	2a					
æ	Ь					
Program Service Revenue	ြင					
Š	d					
8	е					
2	f	All other program service revenue .				
Ę	g	Total. Add lines 2a–2f	>			
	3	Investment income (including dividends, intere				
	}	and other similar amounts)	724	724		<u> </u>
	4	Income from investment of tax-exempt bond proceeds	>			
	5	Royalties	>			
		(i) Real (ii) Personal				
	6a	Gross rents		1		
	b	Less: rental expenses				
	С	Rental income or (loss)		{		
	d	1101707101111001110011100111000	>			
	7a	Gross amount from sales of (i) Securities (ii) Other				
	_	assets other than inventory		i		
	b	Less: cost or other basis				
		and sales expenses				
	C	Gain or (loss)		•		
	d	Net gain or (loss)	<u> </u>			
9	8a	Gross income from fundraising				
enueve		events (not including \$				
		of contributions reported on line 1c).				
Other R		See Part IV, line 18 a			:	
ŧ	ь	Less: direct expenses b		•		
J		· · · · · · · · · · · · · · · · · · ·	>			
		Gross income from gaming activities.				
		See Part IV, line 19 a				
		Less: direct expenses b		<u> </u>		
			>			
	10a	Gross sales of inventory, less			'	
		returns and allowances a		ļ		
		Less: cost of goods sold b		1		
	С		•			
	4.4.	Miscellaneous Revenue Business Cod	19			
	11a			 		<u> </u>
	b					
	d	All other revenue	·			
			>			
	12		201,332	724		

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).

Check if Schedule O contains a response to any question in this Part IX								
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses			
1	Grants and other assistance to governments and 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							
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 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)							
9	Other employee benefits							
10	Payroll taxes							
11	Fees for services (non-employees):		-					
а	Management	35,039	35,039					
b	Legal							
С	Accounting	1,241	1,241					
d	Lobbying			· · · · · · · · · · · · · · · · · · ·				
е	Professional fundraising services. See Part IV, line 17							
f	Investment management fees							
g	Other	12,020	12,020					
12	Advertising and promotion			· · · · · · · · · · · · · · · · · · ·				
13	Office expenses							
14	Information technology							
15	Royalties							
16	Occupancy	16,000	16,000					
17	Travel							
18	Payments of travel or entertainment expenses for any federal, state, or local public officials							
19	Conferences, conventions, and meetings .							
20	Interest							
21	Payments to affiliates			 				
22	Depreciation, depletion, and amortization	1,231	1,231		ļ 			
23	Insurance							
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	American Tree Farm expenses	4,528	4,528					
b	Field Audit expense	3,471	3,471					
c	Communications and Website	4,974	4,974					
d	Logger conference and training expense	86,865	86,865					
e	All other expenses	7,492	7,492					
25	Total functional expenses. Add lines 1 through 24e	172,861	172,861					
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)							

ГС	irt X	Balance Sheet	/A\	· · · · · · · · · · · · · · · · · · ·	/D\
			(A) Beginning of year		(B) End of year
\top	1	Cash-non-interest-bearing		1	
١	2	Savings and temporary cash investments	242,773	2	109,36
j	3	Pledges and grants receivable, net		3	
1	4	Accounts receivable, net	11,775	4	58,78
	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)			
210221	7		56,599	7	84,61
2	7	Notes and loans receivable, net	30,339	8	04,01
`	8 9	Inventories for sale or use	31,550	9	94,43
	10a	Prepaid expenses and deferred charges	31,030	9	34,40
	ь	Less: accumulated depreciation 10b 3,702	12,510	100	11,27
	11	Investments—publicly traded securities	12,010	11	11,21
-	12	Investments—other securities. See Part IV, line 11		12	
- 1	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
- 1	15	Other assets. See Part IV, line 11		15	
ŀ	16	Total assets. Add lines 1 through 15 (must equal line 34)	355,207	16	358,48
7	17	Accounts payable and accrued expenses	25,195	17	
- 1	18	Grants payable		18	
-	19	Deferred revenue		19	
1	20	Tax-exempt bond liabilities		20	
- }	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
- 1	24	Unsecured notes and loans payable to unrelated third parties		24	
- 1	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			
	ne	<u></u>	25,195	25 26	
十	26	Total liabilities. Add lines 17 through 25	25,195	26	
	27	Unrestricted net assets		27	
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.			
3	30	Capital stock or trust principal, or current funds		30	
}	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds .	330,012	32	358,48
!	33	Total net assets or fund balances	330,012	33	358,48
1.	34	Total liabilities and net assets/fund balances	355,207	34	358,48

Form 9	90 (2011)			Pa	age 12
Par	t XI Reconciliation of Net Assets		•		
	Check if Schedule O contains a response to any question in this Part XI				. 🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	11		20	1,332
2	Total expenses (must equal Part IX, column (A), line 25)	2		17	2,861
3	Revenue less expenses. Subtract line 2 from line 1	3		2	8,471
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		35	8,483
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		35	8,483
Part	XII Financial Statements and Reporting	1			
	Check if Schedule O contains a response to any question in this Part XII				. 🗇
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plaın ir	<u> </u>		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		/
b	Were the organization's financial statements audited by an independent accountant?				1
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account	_	,		
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.		<u> </u>	<u>-</u>	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the ye issued on a separate basis, consolidated basis, or both:	ar were	•		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		1		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	forth ir	1 3a		,
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rao the		 	<u> </u>
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
			For	₂ 990	(2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service 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.

Open to Public Inspection

Name of the organization

Employer identification number

Michigan Forest Resource Alliance 38-2973453 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions--subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type II-Functionally integrated b ☐ Type II e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and No 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) is the organization (v) Did you notify (vii) Amount of (vi) Is the organization in col (described on lines 1-9 in col (i) listed in your the organization in organization support col (i) of your governing document? (i) organized in the above or IRC section US? support? (see instructions)) No Yes Yes Yes No No (A) (B) (C) (D) (E)

Total

Page 2

Part	Support Schedule for Organiza	itions Desci	ribed in Sect	ions 170(b)(1)(A)(iv) and	170(b)(1)(A)(v	i)	_
	(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 unde	er the tests lis	sted below, p	lease comple	ete Pa	art III.)		
	on A. Public Support	4.) 2007	4.) 0000	(-) 0000	(0 0040	1 .		10 T :	
Caler	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(е	2011	(f) Tota	1
1	Gifts, grants, contributions, and membership fees received. (Do not 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								
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, column (f)								
6	Public support. Subtract line 5 from line 4.								
	on B. Total Support					,			
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e)	2011	(f) Tota	<u>!</u>
7	Amounts from line 4					ļ			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties 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 assets (Explain in Part IV.)								
11 12	Total support. Add lines 7 through 10 [Gross receipts from related activities, etc.	(see instruction	ons)			12			
13	First five years. If the Form 990 is for th	•	•			ear as	a sectio	n 501(c)(3)	
	organization, check this box and stop her						<u> </u>	▶	
Secti	on C. Computation of Public Suppor								
14	Public support percentage for 2011 (line 6	,	-			14			%
15	Public support percentage from 2010 Sch					15			<u>%</u>
16a	331/a% support test—2011. If the organize box and stop here. The organization qual							ieck this	_
b	331/3% support test-2010. If the organ	ization did no	ot check a box	on line 13 or	16a, and line			or more,	
17a	check this box and stop here . The organization qualifies as a publicly supported organization								
Þ	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizati Explain in Part IV how the organization me	ion meets the eets the "facts	e "facts-and-ci s-and-circumst	rcumstances" tances" test. T	test, check th	nis bo	x and ste	op here.	_
18	Private foundation. If the organization did	not check a		16a, 16b, 17a					
	instructions	<u> </u>	· · · ·	<u> </u>	· · · ·		· · ·		Ц

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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	188,794	208,338	199,707	167,702	200,608	965,149
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the		ĺ			i	
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid					•	
	to or expended on its behalf						
5	The value of services or facilities		l	1		1	
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	188,794	208,338	199,707	167,702	200,608	965,149
7a	Amounts included on lines 1, 2, and 3	ļ	į		į	-	
	received from disqualified persons .						
Ь	Amounts included on lines 2 and 3						
	received from other than disqualified			İ			
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			İ		İ	
_							
8 8	Add lines 7a and 7b						
_	line 6.)	•	1	[{		965,149
Secti	on B. Total Support					 1	
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	188,794	208,338	199,707	167,702	200,608	965,149
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,			Ì		Ì	
	royalties and income from similar sources .	6,616	2,182	196	783	724	10,501
b	Unrelated business taxable income (less					1	
	section 511 taxes) from businesses			ĺ	Ì		
	acquired after June 30, 1975						
C	Add lines 10a and 10b	6,616	2,182	196	783	724	10,501
11	Net income from unrelated business	Į		į		ł	
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets	4.700	22.470	42.004	ا		44.000
13	(Explain in Part IV.)	4,760	23,472	13,391	0	0	41,623
13	and 12.)	1					1,017,273
14	First five years. If the Form 990 is for the	e organization	'e firet second	1 third fourth	or fifth tax ve	ar as a section	
	organization, check this box and stop her	_					
Secti	on C. Computation of Public Suppor			· · ·			
15	Public support percentage for 2011 (line 8			3, column (f))		15	94 88 %
16	Public support percentage from 2010 Sch		-	<u> </u>		16	94 46 %
Secti	on D. Computation of Investment Inc	come Percer	ntage				
17	Investment income percentage for 2011 (I		• • • • •			17	1 03 %
18	Investment income percentage from 2010					18	1 37 %
19a	331/3% support tests-2011. If the organi						
	17 is not more than 331/2%, check this box						
b	331/3% support tests—2010. If the organiz						
00	line 18 is not more than 331/3%, check this b						
20	Private foundation. If the organization de	u not check a t	JUX ON IINE 14,	າອa, or ເ9D, Cl	HECK (NIS DOX 8	and see instruc	tions 🕨 🔛

Schedule A (F	Form 990 or 990-EZ) 2011	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	-
Other Incom	ne Part III, Line 12	
Description	Other Revenue	
2007 4,76	0	
2008 23,4	72	
2009 13,3	91	
,		

·		

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB № 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

Michigan Forest Resource Alliance 38-2973453 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) . 3 Aggregate grants from (during year) . . . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 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 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose 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 Preservation of a certified historic structure ☐ Protection of natural habitat ☐ 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 a Total number of conservation easements . . . 2a 2b Number of conservation easements on a certified historic structure included in (a) . . . Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 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 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 ▶\$ R Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) 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: **b** Assets included in Form 990, Part X . . .

1	Da	'n	۵	2

Parl	III Organizations Maintaining	Collections of	Art, His	torical	Treasures	, or O	ther Similar	Assets	(contin	nued)
3	Using the organization's acquisition, collection items (check all that apply):		ther reco	ords, chec	ck any of th	ne follo	wing that are a	signific	ant use	of its
а	☐ Public exhibition		d	☐ Loan	or exchanç	ge prog	rams			
b	☐ Scholarly research		е	☐ Othe	r					~
C	Preservation for future generations									
4	Provide a description of the organiza XIV.	tion's collections	and expl	ain how t	hey further	the or	ganization's ex	empt pı	ırpose	in Part
5	During the year, did the organization assets to be sold to raise funds rather	solicit or receive than to be maint	donation	ns of art, part of th	historical to e organizat	reasure ion's co	s, or other sin	nilar · 🗀	Yes [∃ No
Part	line 9, or reported an amount	_	-	_	janization	answe	red "Yes" to	Form 9	90, Pai	rt IV,
1a	Is the organization an agent, trustee included on Form 990, Part X?	, custodian or otl	her interr	nediary fo					Yes [
b	If "Yes," explain the arrangement in P	art XIV and comp	lete the f	ollowing t	able:			_	_	_
		·						Amoun	t	
С	Beginning balance					10	;]			
d	Additions during the year					10	1			
е	Distributions during the year					16	;			
f	Ending balance					11				
2a	Did the organization include an amount	nt on Form 990, P	art X, line	e 21? .					Yes [] No
b	If "Yes," explain the arrangement in P									
Par	V Endowment Funds. Compl									
		(a) Current year	(b) Pn	or year	(c) Two year	rs back	(d) Three years b	ack (e)	Four years	s back
1a	Beginning of year balance									
Ь	Contributions	<u>.</u>	<u> </u>							
C	Net investment earnings, gains, and		ł		ĺ			ł		
	losses				ļ		 -			
d	Grants or scholarships						· · · · · · · · · · · · · · · · · · ·			
е	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of t			e (line 1g	, column (a)) held	as:			
а	Board designated or quasi-endowmer	nt ▶	%							
b	Permanent endowment >									
С	Temporarily restricted endowment ▶									
	The percentages in lines 2a, 2b, and 2							. L_		
3a	Are there endowment funds not in the organization by:	e possession of tr	ne organi	zation tha	at are neid	ano ao	ministered for	tne	36	Т.
	-							20	Yes	No
	(i) unrelated organizations							. 38		+
ь	(ii) related organizations		· · ·	 on Schod	ulo D2			. 3	(ii)	+
4	Describe in Part XIV the intended uses							. [3	<u> </u>	
Part										
	Description of property	(a) Cost or of (investment)	ther basis	(b) Cost o	or other basis ther)	٠.	Accumulated epreciation	(d)	Book valu	ie
1a	Land	_		<u> </u>						
b	Buildings									
c	Leasehold improvements		11,950				1,621	**	1	10,329
d	Equipment		3,031				2,081			950
е	Other									
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90, Part	X, column	(B), line 10)(c).)	>		1	11,279

Part VII	Investments-Other Securities	s. See Form 990, Part X	, line 12.
(1	a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financia	l derivatives		
(2) Closely-	held equity interests		
(3) Other	·		
(A)			
(B)			
(C) (D)			
(E)			
(F)			
(G)			
(H)			
(f)			
	(b) must equal Form 990, Part X, col. (B) line 12.)	>	
Part VIII	Investments—Program Relate	ed. See Form 990, Part >	(, line 13.
<u> </u>	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)	· · · · · · · · · · · · · · · · · · ·		
(2)			
(3)			
(4)		<u> </u>	<u>-</u>
(5) (6)		- 	
(7)			
(8)			-
(9)			
(10)			
	b) must equal Form 990, Part X, col. (B) line 13.) ▶		<u> </u>
Part IX	Other Assets. See Form 990, F		(h) Perlumbur
		(a) Description	(b) Book value
(1)			
(2)			
(4)		 , , , , , , , -	
(5)			
(6)			
(7)			
(8)	· · · · · · · · · · · · · · · · · · ·		
(9)			
(10)	mn (b) must equal Form 990, Part X,	ool (D) line 15)	
Part X	Other Liabilities. See Form 990		
1.	(a) Description of liability	(b) Book value	
	income taxes		-
(2)		 	-
(3)			
(4)			
(5)			
(6)			
(7)			_
(8)			4
(9) (10)		+	-
(11)			4
	b) must equal Form 990, Part X, col. (B) line 25.)		4
			the organization's financial statements that reports the
organization	's liability for uncertain tax positions	under FIN 48 (ASC 740).	

Sched	ale D (Form 990) 2011			Page 4
Par	XI Reconciliation of Change in Net Assets from Form 990 to A	udited Financial Stater	nents	
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	Pnor 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		10	
Par				
1	Total revenue, gains, and other support per audited financial statements		11	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	,		
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	7	
c	Recoveries of prior year grants		-	
ď	Other (Describe in Part XIV.)		-	
ē	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
-4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i . i	-	
a	Investment expenses not included on Form 990, Part VIII, line 7b	42		
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			
Part				
1	Total expenses and losses per audited financial statements			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		· -	
	Donated services and use of facilities	2a		
a	Prior year adjustments	2b	-	
b			-	
C C	Other losses	2d	-l i	
q	Other (Describe in Part XIV.)		 	
6	Add lines 2a through 2d		2e	
3			-	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4-		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV.)	4b	- _	
C	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 10.)	5	
Part		O. Dawl III. Barrada ara 1.4	D-4 N/ 8 4	h and Ob
	lete this part to provide the descriptions required for Part II, lines 3, 5, and , line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII,			
	ditional information.			
•				

Schedule D (Form 990) 2011

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2011

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

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OMB No 1545-0047

Department of the Treasury ▶ Attach to Form 990 or 990-EZ. Internal Revenue Service

Name of the organization **Employer identification number Michigan Forest Resource Alliance** 38-2973453 Part VI-B Line 11a Form 990 is distributed at meeting for review Part VI-B Line 15 Approval by board of directors Part VI-B Line 15 Approval by board of directors Form 990, Page 10, Line 24f All other expenses Program Services Outreach/Landowner expenses \$4,612 Meetings expense 1,243 Supplies & Materials 1,637 Total other expenses \$7,492