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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31-2012

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization
AMERICAN FOREST FOUNDATION

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
1111 NINETEENTH ST NW NO 780

City or town, state or country, and ZIP + 4
WASHINGTON, DC 20036

D Employer identification number
52-1235124

E Telephone number
(202) 463-2462

G Gross receipts $ 14,704,504

F Name and address of principal officer
THOMAS D MARTIN
1111 NINETEENTH ST NW NO 780
WASHINGTON, DC 20036

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)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website:** ▶ WWW FORESTFOUNDATION ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1981

M State of legal domicile DC

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
THE AMERICAN FOREST FOUNDATION WORKS ON-THE-GROUND WITH FAMILIES, TEACHERS, AND ELECTED OFFICIALS TO PROMOTE STEWARDSHIP AND PROTECT OUR NATION'S FOREST HERITAGE

2 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)	3	18
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	18
5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	43
6	Total number of volunteers (estimate if necessary)	6	7,600
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	52,057
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	1,954,540	2,588,392
	9	Program service revenue (Part VIII, line 2g)	750,057	751,294
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	128,440	2,492,344
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	188,020
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,833,037	6,020,050
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,454,575	1,238,724
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	3,562,928	3,749,266
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶709,482		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	4,908,806	5,358,700
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	9,926,309	10,346,690
	19	Revenue less expenses Subtract line 18 from line 12	-7,093,272	-4,326,640

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	128,731,728	138,890,995
	21	Total liabilities (Part X, line 26)	1,287,452	572,692
	22	Net assets or fund balances Subtract line 21 from line 20	127,444,276	138,318,303

Part II Signature Block

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

Sign Here

▶ Signature of officer | Date 2013-05-15

▶ THOMAS D MARTIN PRESIDENT & CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
CRAIG A STEVENS CPA		2013-05-15		P01289490

Firm's name ▶ CALIBRE CPA GROUP PLLC | Firm's EIN ▶ 47-0900880

Firm's address ▶ 7501 WISCONSIN AVENUE SUITE 1200 WEST BETHESDA, MD 20814 | Phone no (202) 331-9880

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response to any question in this Part III . . . . ☑

1 Briefly describe the organization's mission

WE ENSURE THE SUSTAINABILITY OF AMERICA'S FAMILY FORESTS FOR PRESENT AND FUTURE GENERATIONS IN CONJUCTION WITH OUR STRATEGIC PARTNERS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ Yes ☑ 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? . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 4,434,664 including grants of $ 872,821) (Revenue $ 276,405)

WOODLANDS THE AMERICAN FOREST FOUNDATION (AFF) WORKS NATIONWIDE AND IN PARTNERSHIP WITH LOCAL, STATE, AND NATIONAL GROUPS TO PROVIDE HANDS-ON SUPPORT FOR AMERICA'S 10 MILLION FAMILY FOREST OWNERS, GIVING THEM THE TOOLS THEY NEED TO MANAGE HEALTHY AND SUSTAINABLE WOODLANDS THE AMERICAN TREE FARM SYSTEM, A PROGRAM OF AFF, IS A NETWORK OF MORE THAN 95,000 WOODLAND OWNERS SUSTAINABLY MANAGING 26 MILLION ACRES OF FOREST LAND IT IS THE LARGEST AND OLDEST SUSTAINABLE WOODLAND SYSTEM IN AMERICA, INTERNATIONALLY RECOGNIZED, MEETING STRICT THIRD PARTY CERTIFICATION STANDARDS

4b (Code) (Expenses $ 2,132,259 including grants of $ 365,903) (Revenue $ 367,364)

EDUCATION PROJECT LEARNING TREE (PLT), A PROGRAM OF AFF, WORKS WITH TENS OF THOUSANDS OF TEACHERS EACH YEAR, PROVIDING THEM WITH TOOLS, TRAINING, AND RESOURCES TO ENGAGE THEIR STUDENTS IN LEARNING ABOUT THE ENVIRONMENT, AND TO TAKE THEIR STUDENTS OUTDOORS TO LEARN PLT USES FORESTS AS A WINDOW ON THE WORLD AND PROVIDES EDUCATORS WITH ENVIRONMENTAL EDUCATION CURRICULUM REASOURCES THAT CAN BE INTEGRATED INTO LESSON PLANS FOR ALL GRADES AND SUBJECT AREAS PLT TEACHES STUDENTS HOW TO THINK, NOT WHAT TO THINK, ABOUT COMPLEX ENVIRONMENTAL ISSUES, AND HELPS THEM ACQUIRE THE SKILLS THEY NEED TO MAKE SOUNDS CHOICES ABOUT THE ENVIRONMENT

4c (Code) (Expenses $ 1,535,069 including grants of $ 0) (Revenue $ 104,855)

AFF'S COMMUNICATION PROGRAM RAISES AWARENESS OF AFF'S GOALS AND STRATEGIC PRIORITIES, SUPPORTS ITS SIGNATURE PROGRAMS, PROMOTES SUSTAINABILITY TO A LARGER PUBLIC AUDIENCE, AND DEVELOPS NEW PARTNERSHIPS WITH THE FORESTRY, CONSERVATION, AND EDUCATION COMMUNITIES

(Code) (Expenses $ 735,649 including grants of $ 0) (Revenue $ 2,670)

4d Other program services (Describe in Schedule O)

(Expenses $ 735,649 including grants of $) (Revenue $ 2,670)

4e **Total program service expenses** ▶ 8,837,641

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
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		No
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	Yes	
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		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
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		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
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		No
c	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		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
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*	15		No
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		No
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		No
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		No
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		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV 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	Yes	
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		No
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	Yes	
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		No
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		No
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	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	46			
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	Yes	
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	43			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		No
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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
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 as charitable contributions?			6a		No
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).**					
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		No
b	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		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
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 organization, have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	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		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	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.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
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	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

Part VI **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response to any question in this Part VI . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . .	**1a** 18			
	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** 18			
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**		No
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**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . .		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		**5**		No
6	Did the organization have members or stockholders? . . .		**6**		No
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**		No
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**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body? . . .		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body? . . .		**8b**	Yes	
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**		No

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates? . . .	**10a**	Yes	
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**	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . .	**11a**	Yes	
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**	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . .	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done* . . .	**12c**	Yes	
13	Did the organization have a written whistleblower policy? . . .	**13**	Yes	
14	Did the organization have a written document retention and destruction policy? . . .	**14**	Yes	
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**	Yes	
b	Other officers or key employees of the organization . . .	**15b**	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . .	**16a**		No
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 organization's exempt status with respect to such arrangements? . . .	**16b**		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶AL , AK , AZ , AR , CA , CT , DC , FL , GA , IL , KS , KY , ME , MD , MA , MI , MN , MS , NH , NJ , NM , NY , NC , OH , OK , OR , PA , RI , SC , TN , UT , VA , WA , WV , WI , MO , ND , CO , HI

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (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 ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

▶SCOTT SMILEY 1111 19TH ST NW WASHINGTON, DC (202)463-2796

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or 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 any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JOHN W BURKE III INDIVIDUAL TRUSTEE, CHAIR	1 00	X		X				0	0	0
(2) CLINT BENTZ INDIVIDUAL TRUSTEE, PAST CHAIR	1 00	X		X				0	0	0
(3) CONNIE BEST INDIVIDUAL TRUSTEE, VICE-CHAIR	1 00	X		X				0	0	0
(4) SHORNA BROUSSARD ALLRED INDIVIDUAL TRUSTEE, SECRETARY	1 00	X		X				0	0	0
(5) KENNETH STEWART INDIVIDUAL TRUSTEE, TREASURER	1 00	X		X				0	0	0
(6) JUDD BROOKE INDIVIDUAL TRUSTEE	1 00	X						0	0	0
(7) WANDA BARRS INDIVIDUAL TRUSTEE	1 00	X						0	0	0
(8) FRANK GALLAGHER INDIVIDUAL TRUSTEE	1 00	X						0	0	0
(9) DAVID GRAY INDIVIDUAL TRUSTEE	1 00	X						0	0	0
(10) STEVE QUARLES INDIVIDUAL TRUSTEE	1 00	X						0	0	0
(11) SARA VICKERMAN INDIVIDUAL TRUSTEE	1 00	X						0	0	0
(12) SALLY COLLINS INDIVIDUAL TRUSTEE	1 00	X						0	0	0
(13) NAT FRAZER INDIVIDUAL TRUSTEE	1 00	X						0	0	0
(14) JAMES BUZZARD INDIVIDUAL TRUSTEE	1 00	X						0	0	0
(15) DANIEL BEARD INDIVIDUAL TRUSTEE	1 00	X						0	0	0
(16) TOM GIDEON INDIVIDUAL TRUSTEE	1 00	X						0	0	0
(17) TOM BEALL INDIVIDUAL TRUSTEE	1 00	X						0	0	0

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(18) TOM LINDQUIST INDIVIDUAL TRUSTEE	1 00	X						0	0	0
(19) THOMAS D MARTIN PRESIDENT & CEO	40 00			X				256,655	0	44,298
(20) SCOTT M SMILEY VP, FINANCE & ADMINISTRATION	40 00			X				143,337	0	22,973
(21) KATHY MCGLAUFLIN SVP, EDUCATION	40 00				X			188,418	0	28,654
(22) JERRY GREENBERG SVP, CONSERVATION	40 00				X			170,960	0	36,234
(23) RITA HITE VP, PUBLIC AFFAIRS	40 00					X		169,182	0	21,022
(24) JENNIFER JONES VP, COMMUNICATIONS	40 00					X		147,325	0	29,072
(25) ALLEN STENSTRUP DIRECTOR, CURRICULUM PROGRAMS	40 00					X		107,798	0	18,505
(26) PAUL TRIANOSKY DIRECTOR, SOUTHER FOREST CONSERVATION	40 00					X		119,140	0	19,911

		(D)	(E)	(F)
1b	**Sub-Total** ▶			
c	**Total from continuation sheets to Part VII, Section A** ▶			
d	**Total (add lines 1b and 1c)** ▶	1,302,815	0	220,669

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶8

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
DJ CASE 317 EAST JEFFERSON BLVD MISHAWAKA IN 46545	WEBSITE DESIGN/MAINTENANCE	275,860
GRAPHTEC 8620 OLD DORSEY RUND RD JESSUP MD 20794	PRINTING/DESIGN SERVICES	244,859
EUCLID TECHNOLOGY 8120 WOODMONT AVENUE BETHESDA MD 20814	DATABASE CONSULTING	122,597
PRICEWATERHOUSECOOPERS 250 HOWE ST 700VANCOUVERBCCA	CERTIFICATION AUDITS	121,674
ALDO LEOPOLD FOUNDATION E13701 LEVEE ROAD BARABOO WI 53913	TECHNICAL ASSISTANCE	120,877

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶8

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII . . . . ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	**1a** Federated campaigns	1a	10,692				
	b Membership dues	1b	8,034				
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	1,511,429				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,058,237				
	g Noncash contributions included in lines 1a-1f $						
	h Total. Add lines 1a-1f ▶			2,588,392			
Program Service Revenue			Business Code				
	2a SALES OF EDUCATIONAL M		900099	475,967	475,967		
	b MEETING REVENUES		900099	118,418	118,418		
	c SUBSCRIPTIONS		900099	104,852	104,852		
	d ADVERTISING		541800	52,057		52,057	
	e						
	f All other program service revenue						
	g Total. Add lines 2a–2f ▶			751,294			
Other Revenue	**3** Investment income (including dividends, interest, and other similar amounts) ▶			3,590,851			3,590,851
	4 Income from investment of tax-exempt bond proceeds ▶						
	5 Royalties ▶						
		(i) Real	(ii) Personal				
	6a Gross rents						
	b Less rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss) ▶						
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory	7,585,947					
	b Less cost or other basis and sales expenses	8,684,454					
	c Gain or (loss)	-1,098,507					
	d Net gain or (loss) ▶			-1,098,507			-1,098,507
	8a Gross income from fundraising events (not including $ ______ of contributions reported on line 1c) See Part IV, line 18	a					
	b Less direct expenses	b					
	c Net income or (loss) from fundraising events ▶						
	9a Gross income from gaming activities See Part IV, line 19	a					
	b Less direct expenses	b					
	c Net income or (loss) from gaming activities ▶						
	10a Gross sales of inventory, less returns and allowances	a					
	b Less cost of goods sold	b					
	c Net income or (loss) from sales of inventory ▶						
	Miscellaneous Revenue		Business Code				
	11a MANAGEMENT FEES		900099	188,020			188,020
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a–11d ▶			188,020			
	12 Total revenue. See Instructions ▶			6,020,050	699,237	52,057	2,680,364

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)

Check if Schedule O contains a response to any question in this Part IX . . . . ☑

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	1,237,099	1,237,099		
2 Grants and other assistance to individuals in the United States See Part IV, line 22	1,625	1,625		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,085,677	766,952	166,618	152,107
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,025,855	1,666,354	204,446	155,055
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	166,635	138,054	16,196	12,385
9 Other employee benefits	266,383	214,244	29,813	22,326
10 Payroll taxes	204,716	160,960	24,046	19,710
11 Fees for services (non-employees)				
a Management	91,960		91,960	
b Legal	36,668	21,583	14,715	370
c Accounting	39,800		39,800	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	104,295		104,295	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,793,635	1,498,258	244,829	50,548
12 Advertising and promotion	153,776	152,516	1,260	
13 Office expenses	95,779	83,681	9,398	2,700
14 Information technology	110,363		110,363	
15 Royalties . .				
16 Occupancy	409,575		409,575	
17 Travel	700,935	535,341	92,108	73,486
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	273,704	248,639	24,949	116
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	285,921		285,921	
23 Insurance	87,733		87,733	
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)				
a PRINTING	435,892	377,605	11,385	46,902
b DESIGN/PRODUCTION	231,199	194,470		36,729
c POSTAGE/FREIGHT	192,747	149,583	4,702	38,462
d RESEARCH/EVALUATION	187,054	186,469		585
e All other expenses	127,664	1,204,208	-1,174,545	98,001
25 **Total functional expenses.** Add lines 1 through 24e	10,346,690	8,837,641	799,567	709,482
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)				

Part X **Balance Sheet**

Check if Schedule O contains a response to any question in this Part X . . . . ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	491,288	2	737,832
	3	Pledges and grants receivable, net	480,268	3	536,007
	4	Accounts receivable, net	178,530	4	185,609
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other 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) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	158,046	8	232,514
	9	Prepaid expenses and deferred charges	105,025	9	31,006
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D — 10a: 1,203,869			
	b	Less accumulated depreciation — 10b: 1,080,640	379,820	10c	123,229
	11	Investments—publicly traded securities	126,938,751	11	137,044,798
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	128,731,728	16	138,890,995
Liabilities	17	Accounts payable and accrued expenses	1,171,152	17	468,107
	18	Grants payable		18	
	19	Deferred revenue	116,300	19	104,585
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Loans and other 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	
	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	1,287,452	26	572,692
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	127,435,595	27	138,298,303
	28	Temporarily restricted net assets	8,681	28	20,000
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	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		32	
	33	Total net assets or fund balances	127,444,276	33	138,318,303
	34	Total liabilities and net assets/fund balances	128,731,728	34	138,890,995

Part XI **Reconcilliation 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)	1	6,020,050
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,346,690
3	Revenue less expenses Subtract line 2 from line 1	3	-4,326,640
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	127,444,276
5	Net unrealized gains (losses) on investments	5	15,200,667
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	138,318,303

Part XII **Financial Statements and Reporting**

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," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
AMERICAN FOREST FOUNDATION

Employer identification number
52-1235124

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and 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)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

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

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	**11g(i)**		
(ii) A family member of a person described in (i) above?	**11g(ii)**		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 9 above or IRC section **(see instructions))**	**(iv)** Is the organization in col **(i)** listed in your governing document?		**(v)** Did you notify the organization in col **(i)** of your support?		**(vi)** Is the organization in col **(i)** organized in the U S ?		**(vii)** Amount of monetary support
			Yes	**No**	**Yes**	**No**	**Yes**	**No**	
Total									

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	1,773,545	1,791,856	2,235,534	1,954,540	2,588,392	10,343,867
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	1,773,545	1,791,856	2,235,534	1,954,540	2,588,392	10,343,867
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						10,343,867

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	1,773,545	1,791,856	2,235,534	1,954,540	2,588,392	10,343,867
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,768,455	3,087,886	3,236,939	3,468,757	3,590,851	18,152,888
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 **Total support** (Add lines 7 through 10)						28,496,755

12 Gross receipts from related activities, etc (see instructions) | 12 | 3,401,100

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** . . . . ▶☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) | 14 | 36 300 %

15 Public support percentage for 2011 Schedule A, Part II, line 14 | 15 | 29 990 %

16a **33 1/3% support test—2012.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support test—2011.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2012.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

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

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business 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 (Explain in Part IV)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2012** (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from **2011** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2012.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶☐

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).

Facts And Circumstances Test

Explanation

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.
▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

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 filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization	Employer identification number
AMERICAN FOREST FOUNDATION	52-1235124

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 ▶ $

3 Volunteer hours

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? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

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? ☐ Yes ☐ No

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 listed, 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 If none, enter -0-	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A 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)

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying Expenditures **(The term "expenditures" means amounts paid or incurred.)**	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	36,710	
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	66,043	
c	Total lobbying expenditures (add lines 1a and 1b)	102,753	
d	Other exempt purpose expenditures	9,534,455	
e	Total exempt purpose expenditures (add lines 1c and 1d)	9,637,208	
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	631,860	

If the amount on line 1e, column (a) or (b) is:	**The lobbying nontaxable amount is:**
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

		(a)	(b)
g	Grassroots nontaxable amount (enter 25% of line 1f)	157,965	
h	Subtract line 1g from line 1a If zero or less, enter -0-	0	
i	Subtract line 1f from line 1c If zero or less, enter -0-	0	
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?	☐ **Yes**	☐ **No**

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.)

Lobbying Expenditures During 4-Year Averaging Period

	Calendar year (or fiscal year beginning in)	**(a)** 2009	**(b)** 2010	**(c)** 2011	**(d)** 2012	**(e)** Total
2a	Lobbying nontaxable amount	580,089	524,983	580,813	631,860	2,317,745
b	Lobbying ceiling amount (150% of line 2a, column(e))					3,476,618
c	Total lobbying expenditures	34,414	35,787	77,459	102,753	250,413
d	Grassroots nontaxable amount	145,022	131,246	145,203	157,965	579,436
e	Grassroots ceiling amount (150% of line 2d, column (e))					869,154
f	Grassroots lobbying expenditures	1,824	2,383	37,410	36,710	78,327

Part II-B **Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a) Yes	(a) No	(b) Amount
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			
a 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?			
e 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?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i 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 If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

		Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	**1**		
2 Did the organization make only in-house lobbying expenditures of $2,000 or less?	**2**		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	**3**		

Part III-B **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

1 Dues, assessments and similar amounts from members	**1**	
2 Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
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 the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	**4**	
5 Taxable amount of lobbying and political expenditures (see instructions)	**5**	

Part IV **Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier	Return Reference	Explanation

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
AMERICAN FOREST FOUNDATION

Employer identification number
52-1235124

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
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 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

2 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 Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶______________

4 Number of states where property subject to conservation easement is located ▶______________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶______________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ______________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, 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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (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 XIII, 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

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ______________

(ii) Assets included in Form 990, Part X ▶ $ ______________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ______________

b Assets included in Form 990, Part X ▶ $ ______________

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☐

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	b (c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ►

b Permanent endowment ►

c Temporarily restricted endowment ►

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		290,302	234,736	55,566
d Equipment		913,567	845,904	67,663
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ►				123,229

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(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) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

2. Fin 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	21,220,717
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	15,200,667		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	15,200,667
3	Subtract line **2e** from line **1**			3	6,020,050
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	6,020,050

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	10,346,690
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	10,346,690
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	10,346,690

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	AFF ACCOUNTS FOR INCOME TAXES IN ACCORDANCE WITH THE ACCOUNTING STANDARDS CODIFICATION (ASC) TOPIC "INCOME TAXES " THESE PROVISIONS PROVIDE CONSISTENT GUIDANCE FOR THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND PRESCRIBE A THRESHOLD OF "MORE LIKELY THAN NOT" FOR RECOGNITION AND DERECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN AFF PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YEARS ENDED DECEMBER 31, 2012 AND 2011, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE AN EFFECT ON ITS TAX-EXEMPT STATUS AS OF DECEMBER 31, 2012, THE STATUTE OF LIMITATIONS FOR TAX YEARS 2009 THROUGH 2011 REMAINS OPEN WITH THE U S FEDERAL JURISDICTION AND THE DISTRICT OF COLUMBIA IT IS AFF'S POLICY TO RECOGNIZE INTEREST AND/OR PENALTIES RELATED TO UNCERTAIN TAX POSITIONS, IF ANY, IN UNRELATED BUSINESS INCOME TAX EXPENSE

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
AMERICAN FOREST FOUNDATION

Employer identification number
52-1235124

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 49

3 Enter total number of other organizations listed in the line 1 table . . . . ▶ 21

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

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance

Part IV **Supplemental Information.**

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	**Return Reference**	**Explanation**
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 SMALL GRANTS (UNDER $10,000) REQUIRE A REPORT AT THE END OF THE GRANT PERIOD AFTER THE PROJECT IS COMPLETED LARGER GRANTS REQUIRE MULTIPLE REPORTING DATES AND ARE ESTABLISHED ON A CASE-BY-CASE BASIS DEPENDING ON THE PROJECT GRANTEES ARE NOT ELIGIBLE TO APPLY FOR OTHER GRANTS UNTIL ANY CURRENT GRANTS HAVE BEEN FULFILLED AND ALL REQUIRED REPORTS ARE FILED

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 52-1235124
Name: AMERICAN FOREST FOUNDATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALABAMA TREE FARM COMMITTEE555 ALABAMA STREET MONTGOMERY,AL 36104	63-0756161	501C3	38,442				LANDOWNER OUTREACH
ALDO LEOPOLD FOUNDATION INCE 13701 LEVEE ROAD BARABOO,WI 53913	39-1423225	501C3	38,239				ENVIRONMENT EDUCATION
ANROE200 W 35TH AVE 1007 ANCHORAGE,AK 99503	94-3074169	501C3	9,086				ENVIRONMENT EDUCATION
CALIFORNIA COMMUNITY FORESTSP O BOX 1384 SACRAMENTO,CA 95812	68-0388295	501C3	10,000				ENVIRONMENT EDUCATION
COLORADO ALLIANCE FOR P O BOX 25286 DENVER,CO 80225	84-1134814	501C3	10,000				ENVIRONMENT EDUCATION
CONNECTICUT FOREST & PARK16 MERIDEN ROAD ROCKFALL,CT 06481	06-0613430	501C3	10,000				ENVIRONMENT EDUCATION
EMPIRE STATE FORESTRY 47 VAN ALSTYNE DRIVE RENSSELAER,NY 12144	14-1801693	501C3	10,000				ENVIRONMENT EDUCATION
ENVIRONMENTAL EDUCATION ASSOP O BOX 36958 ALBUQUERQUE,NM 87176	85-0435778	501C3	10,000				ENVIRONMENT EDUCATION
ENVIRONMENTAL EDUCATION ASSOCI1505 N BROADWAY AVE URBANA,IL 61801	36-2837731	501C3	9,838				ENVIRONMENT EDUCATION
FOREST & WOODLAND ASSOCIATION503 E NIJONG COLUMBIA,MO 65201	27-2716415	501C3	15,000				ENVIRONMENT EDUCATION
HUBBARD BROOK RESEARCHPO BOX 282 NORTH WOODSTOCK,NH 03262	02-0474938	501C3	89,244				RESEARCH
IDAHO FOREST PROD COMMISSION350 N 9TH ST 304 BOISE,ID 83702	82-0454604	501C3	10,000				ENVIRONMENT EDUCATION
IFEFPLT5785 GLENN ROAD INDIANAPOLIS,IN 46216	31-1081924	501C3	8,840				ENVIRONMENT EDUCATION
KANSAS ASSOCIATION FOR CONSERV2610 CLAFLIN MANHATTAN,KS 66502	48-0850919	501C3	10,000				ENVIRONMENT EDUCATION
KENTUCKY ASSOCIATION FORPO BOX 1208 FRANKFORT,KY 40602	61-1208924	501C3	10,000				ENVIRONMENT EDUCATION
LOUISIANA FORESTRY ASSNPO DRAWER 5067 ALEXANDRIA,LA 71307	72-0428001	501C6	9,960				ENVIRONMENT EDUCATION
MAINE TREE FOUNDATION P O BOX 5470 AUGUSTA,ME 04332	01-0453264	501C3	10,000				ENVIRONMENT EDUCATION
MANOMETP O BOX 1770 MANOMET,MA 02345	22-3051362	501C3	15,001				OWNER OUTREACH
MICHIGAN SOCIETY OF AMERICAN F8717 N ROSCOMMON ROAD ROSCOMMON,MI 48653	53-0204630	501C3	8,000				ENVIRONMENT EDUCATION
MSU EXTENSION FORESTRY 32 CAMPUS DRIVE MS 0606 MISSOULA,MT 59812	81-6010045	501C3	10,000				ENVIRONMENT EDUCATION
NH PLT54 PORTSMOUTH STREET CONCORD,NH 03301	02-0493547	501C3	10,000				ENVIRONMENT EDUCATION
OHIO PROJECT LEARNING TREE2045 MORSE RD H-1 COLUMBUS,OH 43229	31-1286951	501C3	9,650				ENVIRONMENT EDUCATION
PACIFIC EDUCATION INSTITUTE724 COLUMBIA ST NW OLYMPIA,WA 98501	75-3108166	501C3	10,000				ENVIRONMENT EDUCATION
SD PROJECT LEARNING TREE10164 W HIGHWAY 14 SPEARFISH,SD 57783	80-0046020	501C3	10,000				ENVIRONMENT EDUCATION
SIERRA NEVADA JOURNEYS 1301 CORDONE AVE RENO,NV 89502	01-0881587	501C3	10,000				ENVIRONMENT EDUCATION
SOUTHWEST BADGER1370 N WATER ST PLATTEVILLE,WI 53818	39-1759169	501C3	63,646				RESEARCH
ST COLUMBA CATHOLIC SCHOOL1801 EAST 3RD AVE DURANGO,CO 81301	74-2723439	501C3	7,000				ENVIRONMENT EDUCATION
STATE TREE FARM COMMITTEE GA551 N FRONTAGE RD P O BOX 1217 FORSYTH,GA 31029	58-1888283	501C3	9,700				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE OR2185 CARMEL AVE EUGENE,OR 97401	93-1116398	501C3	19,639				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE PA340 LIBERTY SYREET CLARION,PA 16214	25-1195315	501C3	22,647				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE WA2943 STATE RT 6 RAYMOND,WA 98577	26-1191417	501C3	10,071				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE WYPO BOX 639 NEWCASTLE,WY 82701	83-0290255		5,400				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE-AR1213 W 4TH LITTLE ROCK,AR 72201	71-0262084	501C6	24,761				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE-CA1777 LAKESIDE DRIVE REDDING,CA 96001	94-3272196	501C3	15,491				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE-CO1000 RIM DRIVE DURANGO,CO 81301	58-2667238	501C3	19,091				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--FL402 EAST JEFFERSON STREET TALLAHASSEE,FL 32301	59-0975338	501C6	14,220				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--GA551 N FRONTAGE RD P O BOX 1217 FORSYTH,GA 31029	58-1888283	501C3	8,700				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--IA4331 DOVE ROAD ELGIN,IA 52141	46-0849117		7,713				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE-ID204 E SHERMAN AVE COEURD ALENE,ID 83814			15,026				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--IL2317 E LINCOLN WAY SUITE A STERLING,IL 61081	37-6002057		8,865				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--IN2896 CENTENNIAL ROAD MARTINSVILLE,IN 46151	90-0918785		18,705				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--KY106 PROGRESS DRIVE FRANKFORT,KY 40601	90-0498279	501C3	10,559				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--LA2316 S MACARTHUR DR ALEXANDRIA,LA 71301	72-0428001	501C6	11,905				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--MD13403 BLACK VALLEY ROAD NE FLINTSTONE,MD 21530	25-1917645		17,912				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--ME407 WELD STREET DIXFIELD,ME 04224	01-0530256		14,522				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--MI6865 W 10 MILE RD DAFTER,MI 49724	41-2202748		8,720				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--MN20 NORTH 22ND ST CLOQUET,MN 55720	41-0626915	501C6	21,718				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--MO520 WEST 103RD ST 347 KANSAS CITY,MO 64114	27-2707991		11,619				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--MSBOX 9680 MISSISSIPPI STATE,MS 39762	64-0205299	501C4	24,511				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE-MT21 COLUMBINE COURT MISSOULA,MT 59802	81-0456078	501C3	9,286				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--NC1807 DUNWICK COURT CARY,NC 27523	56-0515838	501C3	22,148				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--NH54 PORTSMOUTH ST CONCORD,NH 03301	02-0222237	501C3	20,369				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--NY6 GARDEN ST WALTON,NY 13856	22-3497160		14,955				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--OH4080 S HIGH ST COLUMBUS,OH 43207	31-8050550		22,656				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--SC5500 BROAD RIVER ROAD COLUMBIA,SC 29221	56-2087360		41,783				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--TX1903 ATKINSON DRIVE LUFKIN,TX 75901	27-2501071	501C3	24,320				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE--VAP O BOX 121 WOODSTOCK,VA 22664	54-0419098	501C6	17,694				LANDOWNER OUTREACH
STATE TREE FARM COMMITTEE-VT19 SPELLMAN TERR RUTLAND,VT 05701	03-0342303	501C3	15,806				LANDOWNER OUTREACH
TENNESSEE FORESTRY ASSOCIATIONPO BOX 290693 NASHVILLE,TN 37229	62-0702146	501C3	10,000				LANDOWNER OUTREACH
TRI-ISLE RC&D HEEABOX 338 KAHULUI,HI 96733	99-0278397	501C3	9,253				ENVIRONMENT EDUCATION
UNIVERSITY OF FLORIDA 219 GRINTER HALL GAINESVILLE,FL 32611	59-6002052	501C6	14,940				ENVIRONMENT EDUCATION
LINCOLN CHARTER SCHOOL7834 GALWAY LANE DENVER,NC 28037	56-6001570	501C3	6,000				ENVIRONMENT EDUCATION
UNIVERSITY OF MASSACHUSETTS70 BUTTERFIELD TERRACE AMHERST,MA 01003	03-6000274	501C3	5,000				ENVIRONMENT EDUCATION
UTAH SOCIETY FOR ENVIRONMENT466 E 500 S STE 100 SALT LAKE CITY,UT 84111	94-2792054	501C3	10,000				ENVIRONMENT EDUCATION
VIRGINIA FORESTRY ASSOCIATION3808 AUGUSTA AVE RICHMOND,VA 23230	54-0419098	501C3	10,000				ENVIRONMENT EDUCATION
WESTERN FOOTHILLS LAND TRUSTP O BOX 107 NORWAY,ME 04270	01-6083123	501C3	31,055				RESEARCH
WHITE RIVER PARTNERSHIPPO BOX 705 SOUTH ROYALTON,VT 05068	03-0371746	501C3	5,516				RESEARCH
WI DNR101 S WEBSTER ST MADISON,WI 53707	39-6006436	501C3	14,000				ENVIRONMENT EDUCATION
WYANDOTTE HIGH SCHOOL 2501 MINNESOTA AVENUE KANSAS CITY,MO 66102	48-6031181	501C1	5,470				ENVIRONMENT EDUCATION
WYOMING PLTPO BOX 699 MOORCROFT,WY 82721	31-1581080	501C3	10,000				ENVIRONMENT EDUCATION

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
AMERICAN FOREST FOUNDATION

Employer identification number
52-1235124

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☑ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☑ Compensation committee ☑ Independent compensation consultant ☑ Form 990 of other organizations ☐ Written employment contract ☑ Compensation survey or study ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation reported as deferred in prior Form 990
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
(1)THOMAS D MARTIN PRESIDENT & CEO	**(i)**	255,827	0	828	27,500	16,798	300,953	0
	(ii)	0	0	0	0	0	0	0
(2)SCOTT M SMILEY VP, FINANCE & ADMINISTRATION	**(i)**	142,819	0	518	15,877	7,096	166,310	0
	(ii)	0	0	0	0	0	0	0
(3)KATHY MCGLAUFLIN SVP, EDUCATION	**(i)**	184,609	0	3,809	24,765	3,889	217,072	0
	(ii)	0	0	0	0	0	0	0
(4)JERRY GREENBERG SVP, CONSERVATION	**(i)**	169,464	0	1,496	19,043	17,191	207,194	0
	(ii)	0	0	0	0	0	0	0
(5)RITA HITE VP, PUBLIC AFFAIRS	**(i)**	165,930	0	3,252	18,650	2,372	190,204	0
	(ii)	0	0	0	0	0	0	0
(6)JENNIFER JONES VP, COMMUNICATIONS	**(i)**	146,556	0	769	16,541	12,531	176,397	0
	(ii)	0	0	0	0	0	0	0

Part III **Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II
Also complete this part for any additional information

Identifier	Return Reference	Explanation
	PART I, LINE 1A	AFF REIMBURSES EMPLOYEES FOR 50% OF THE COST OF HEALTH CLUB DUES UP TO A MAXIMUM ANNUAL REIMBURSEMENT OF $100

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
AMERICAN FOREST FOUNDATION

Employer identification number
52-1235124

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE BOARD OFFICIALLY DESIGNATED AUTHORITY TO REVIEW THE TAX RETURN TO THE FINANCE, INVESTMENT & COMPENSATION COMMITTEE WITH THE UNDERSTANDING THAT A COPY WILL BE PROVIDED TO EACH TRUSTEE PRIOR TO THE RETURN BEING FILED
	FORM 990, PART VI, SECTION B, LINE 12C	AT THE FIRST BOARD MEETING OF EACH YEAR, FORMS ARE DISTRIBUTED AND COLLECTED ANY FORM NOTING A CONFLICT IS SENT TO LEGAL COUNSEL WHO FOLLOWS UP WITH EACH INDIVIDUAL AND MAKES A REPORT TO THE CHAIR
	FORM 990, PART VI, SECTION B, LINE 15	AN INDEPENDENT CONSULTING FIRM WAS ENGAGED TO PERFORM AN EXECUTIVE COMPENSATION REVIEW FOR THE PRESIDENT & CEO, SENIOR VICE PRESIDENTS, AND VICE PRESIDENT OF FINANCE AND ADMINISTRATION THE CONSULTING FIRM ESTABLISHED A SURVEY PEER GROUP THAT INCLUDED A VARIETY OF ENVIRONMENTAL AND CONSERVATION NON-FOR-PROFIT ORGANIZATIONS TO BENCHMARK COMPETITIVE TOTAL COMPENSATION FOR SIMILAR OFFICERS IN LIKE ENTERPRISES AFF'S CURRENT COMPENSATION FOR THE COVERED OFFICERS WAS THEN COMPARED AGAINST THE COMPENSATION DEVELOPED FOR SIMILAR SURVEY PEER GROUP EXECUTIVES TO DETERMINE WHO THEY COMPARE TO FROM AN EXTERNAL MARKET PERSPECTIVE BASED ON THAT REVIEW, AFF'S TOTAL OFFICERS' SALARIES WERE DETERMINED TO BE COMPETITIVE, REASONABLE, AND IN COMPLIANCE WITH IRC SECTION 4958 BASED ON RECOMMENDATIONS FROM THIS REVIEW, AFF ESTABLISHED A WRITTEN EXECUTIVE COMPENSATION POLICY THAT WAS ADOPTED BY THE BOARD OF TRUSTEES DURING THE YEAR THAT POLICY REQUIRES SUCH A REVIEW TO BE COMPLETED EVERY THREE YEARS TO ENSURE THAT SALARIES REMAIN REASONABLE OVER TIME IN ADDITION TO THE EXECUTIVE COMPENSATION REVIEW, AFF ALSO ENGAGED AN INDEPENDENT CONSULTING FIRM TO PERFORM A MARKET ANALYSIS ON THE STAFF POSITIONS BELOW THE OFFICER LEVEL TO DETERMINE THE COMPETITIVENESS AND REASONABLENESS OF THOSE SALARIES BASED ON THE RECOMMENDATIONS OF THIS REVIEW, A WRITTEN GENERAL COMPENSATION POLICY WAS ADOPTED BY THE BNOARD OF TRUSTEES THAT POLICY REQUIRES SUCH A REVIEW TO BE COMPLETED EVERY THREE YEARS TO ENSURE THAT SLARIES REMAIN REASONABLE OVER TIME
	FORM 990, PART VI, SECTION C, LINE 19	THE AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON AFF'S WESBITE OTHER DOCUMENTS ARE AVAILABLE UPON REQUEST
OTHER FEES	FORM 990, PART IX, LINE 11G	OTHER PROGRAM SERVICE EXPENSES 1,498,258 MANAGEMENT AND GENERAL EXPENSES 244,829 FUNDRAISING EXPENSES 50,548 TOTAL EXPENSES 1,793,635