

Applicant/Program:

Trees Louisville 2017 Jefferson County High School Freshman 10,000 Tree Giveaway

Additional Disclosure and Signatures

Additional Council Office Disclosure

List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.

Councilman James Peden is a teacher with JEPS.

Council Member Signature and Amount

District 1	_____	\$ _____
District 2	_____	\$ _____
District 3	_____	\$ _____
District 4	_____	\$ _____
District 5	_____	\$ _____
District 6	_____	\$ _____
District 7	_____	\$ _____
District 8	_____	\$ _____
District 9	_____	\$ _____
District 10	_____	\$ _____
District 11	<i>Kevin J. Kramer</i>	\$ <i>1,000.00</i>
District 12	_____	\$ _____
District 13	_____	\$ _____
District 14	_____	\$ _____
District 15	_____	\$ _____

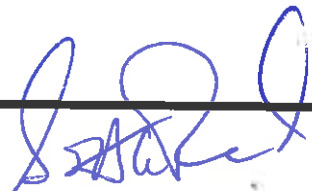

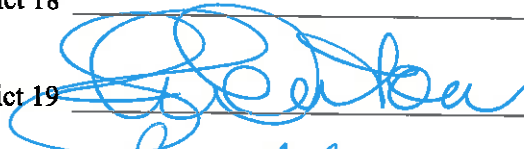

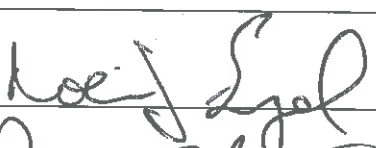
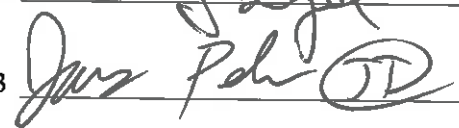
Applicant/Program:

Trees Louisville 2017 Jefferson County High School Freshman 10,000 Tree Give Away

Additional Disclosure and Signatures

Additional Council Office Disclosure

List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.

District 16		\$ 500
District 17		\$ 1000
District 18		\$
District 19		\$ 2,500.00
District 20		\$ 500.00
District 21		\$
District 22		\$ 500.00
District 23		\$ 500.00
District 24		\$
District 25		\$
District 26		\$

**LOUISVILLE METRO COUNCIL
NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

Legal Name of Applicant Organization	
Program Name and Request Amount	
	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the funding proposed by Council Member(s) less than or equal to the request amount?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the proposed public purpose of the program viable and well-documented?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Will all of the funding go to programs specific to Louisville/Jefferson County?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Has prior Metro Funds committed/granted been disclosed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the application properly signed and dated by authorized signatory?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
If Metro funding is for a separate taxing district is the funding appropriated for a program outside the legal responsibility of that taxing district?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the entity in good standing with: <ul style="list-style-type: none"> ▶ Kentucky Secretary of State? ▶ Louisville Metro Revenue Commission? ▶ Louisville Metro Government? ▶ Internal Revenue Service? ▶ Louisville Metro Human Relations Commission? 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the current Fiscal Year Budget included?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the entity's board member list (with term length/term limits) included?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is recommended funding less than 33% of total agency operating budget?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Does the application budget reflect only the revenue and expenses of the project/program?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the cost estimate(s) from proposed vendor (if request is for capital expense) included?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the most recent annual audit (if required by organization) included?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is a copy of Signed Lease (if rent costs are requested) included?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the Articles of Incorporation of the Agency included?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the IRS Form W-9 included?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Is the IRS Form 990 included?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Are the evaluation forms (if program participants are given evaluation forms) included?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant met the BBB Charity Review Standards?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Prepared by: _____	Date: _____

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
Legal Name of Applicant Organization: TreesLouisville, Inc. <i>(as listed on: http://www.sos.ky.gov/business/records)</i>			
Main Office Street & Mailing Address: 3110 Lexington Road Louisville KY 40206			
Website: Http://TreesLouisville.org			
Applicant Contact:	Joshua Isaac White	Title:	Volunteer Project Manager
Phone:	502-767-1722	Email:	joshuaiwhite1@gmail.com
Financial Contact:	Cindi Sullivan	Title:	Executive Director
Phone:	502-648-6707	Email:	cindi@treeslouisville.org
Organization's Representative who attended NDF Training: Joshua White			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s): Jefferson County			
Council District(s):	1-26	Zip Code(s):	Jefferson County
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME: 2017 Jefferson County High School Freshman Tree Giveaway			
Total Request: (\$)	15,100	Total Metro Award (this program) in previous year: (\$)	0
Purpose of Request (check all that apply):			
<input type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget) <input checked="" type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals <input type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)			
The Following are Required Attachments:			
<input checked="" type="checkbox"/> IRS Exempt Status Determination Letter <input checked="" type="checkbox"/> Current year projected budget <input checked="" type="checkbox"/> Current financial statement <input checked="" type="checkbox"/> Most recent IRS Form 990 or 1120-H <input checked="" type="checkbox"/> Articles of Incorporation (current & signed) Cost estimates from proposed vendor if request is for capital expense		Signed lease if rent costs are being requested <input checked="" type="checkbox"/> IRS Form W9 <input checked="" type="checkbox"/> Evaluation forms if used in the proposed program Annual audit (if required by organization) Faith Based Organization Certification Form, if applicable	
For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.			
Source:	N/A	Amount: (\$)	
Source:		Amount: (\$)	
Source:		Amount: (\$)	
Has the applicant contacted the BBB Charity Review for participation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the applicant met the BBB Charity Review Standards? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

TreesLouisville is a 501(c)(3) dedicated to a more livable and healthy community for Louisville's future generations through a robust tree canopy. TreesLouisville was launched by Mayor Greg Fischer in March 2015 in partnership with Henry Heuser, Jr. in response to the findings of the 2015 Louisville Urban Tree Canopy Assessment.

The assessment documents a steady decline in tree canopy coverage that if not addressed will have a devastating impact on the health and quality of life of Louisville. Louisville lost the equivalent of more than 54,000 trees per year constituting a 7% rate of change between 2004 and 2012. To compound this trend, Louisville will experience a significant canopy loss due to the exotic pest emerald ash borer (EAB). Ash trees comprise 10%-17% of suburban and rural forests, meaning hundreds of thousands of ash trees will be lost in Louisville within the next five to ten years. Given the historic trend of tree loss combined with the inevitable loss of ash trees from EAB, aggressive steps must be taken to address canopy levels, or Louisville will experience a further decrease in urban tree canopy (UTC) from 37% to as low as 21% over the next decades.

TreesLouisville's mission is to raise public awareness of the value of the community forest and Louisville's tree canopy deficit and to fund tree planting in areas of greatest need. work TreesLouisville's work serves the entire population of Jefferson County, but currently focuses tree planting efforts in areas of lowest canopy as identified by the UTC Assessment. In 2015, TreesLouisville initiated a groundbreaking partnership with Jefferson County Public Schools (JCPS), virtually creating mini arboreta across the Louisville community, and has helped fund and manage the planting of hundreds of trees of a diverse selection of species on over 15 campuses.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date
Henry V Heuser	2017
Charles Marsh	2018
Katherine Schneider	2018
Allen F Steinbock	2017
James R Allen	2018
Charles Denny	2017
Greg Heitzman	2018
Mike Mountjoy	2017
Dan Barbercheck	2018
Paul Thompson	2017
Pattie Dale Tye	2018
Linda Danna	2017
Franklin Jelsma	2017

Describe the Board term limit policy:

Terms are 1 year or 2 year terms. There is no limit to how many terms a person have.

Three Highest Paid Staff Names	Annual Salary
Cindi Sullivan	79,200
Charlotte Jones	33,000

Applicant's Initials 

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 5 -- PROGRAM/PROJECT NARRATIVE

A: Describe the program/project start and end dates, a description of the program/project and applicable data with regards to specific client population the program will address (attach related flyers, planning minutes, designs, event permits, proposals for services/goods, etc.):

The 2017 Jefferson County Freshman Tree Giveaway Project (project plan attached)

Summary:

As evidenced by the 2015 Urban Tree Canopy Assessment, Jefferson County is experiencing a rapid decline in tree canopy cover – a problem that, if not aggressively faced, could have serious repercussions in terms of environmental and human health in our area. This project proposes a cost-effective and large-scale approach to tree planting, while also engaging and educating a large percentage of Jefferson County's high school-aged demographic. Through a series of organized giveaways, freshman students at 20 high schools will each receive a tree seedling (along with protective materials and instructional information) which they will be encouraged to plant and nurture at home or at another designated location. Planting 10,000 saplings (at a cost \$2-3 each), of which an estimated 50% will survive to maturity, would yield 5,000 trees. While the survival rate of more mature trees is much higher, the cost drastically increases, therefore decreasing the number of trees capable of being planted with the same amount of money (~180 trees at \$150/ea).

The project is anticipated to begin in March.

B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s):

See Attached Budget

In Summary:

Money will be spent on tree saplings and materials to increase the yield of surviving trees.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

C: If this request is a fundraiser, please detail how the proceeds will be spent:

No fundraising will be performed. All money received will be spent on the program or be returned to the grantors.

D: For Expenditure Reimbursement Only – The grant award period begins with the Metro Council approval date and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances:

The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement:

- ✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application.

The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement.

Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment):

- ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application.
- ✓ Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

E: Describe the program's benefits to those being served (measurable outcomes). Include the program's process for collecting data and the indicators that will be tracked to measure the benefits to those being served:

The effects of this program will help restore the tree canopy in Jefferson County. With an expected yield of 5,000 trees county wide, we will yield in this one tree planting as many trees all other tree planting programs combined.

Trees provide many health and environmental benefits, including improved air quality (and therefore reduction in rates of respiratory and heart disease, stroke, etc.), stormwater mitigation and shade from heat in the summer. Numerous studies have shown that neighborhoods with larger tree canopies report fewer incidences of violent crime, and that students with access to trees in close proximity to where they work and play tend to perform better in school. By targeting a youthful population, we hope to foster a culture of stewardship that will carry forward to the future.

We plan to conduct follow-up surveys among students who participated in the program as they progress through high school, tracking tree location, tree health/growth and other factors that will help us determine the success rate of the project.

F: Briefly describe any existing collaborative relationships the organization has with other community organizations. Describe what those partners are bringing to the relationship in general and to this program/project specifically.

Organizations that are lending their name and resources to this project in some way:

- Highlands Douglass Neighborhood - Volunteers, donations and marketing
- Sierra Club of Greater Louisville - Volunteers, donations and marketing
- The Nature Center - volunteers, marketing

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 6 – PROGRAM/PROJECT BUDGET SUMMARY

THE PROGRAM/PROJECT BUDGET SHOULD REALISTICALLY ESTIMATE WHAT AMOUNT IS NEEDED FROM METRO GOVERNMENT AND WHAT IS EXPECTED FROM OTHER SOURCES.

Program/Project Expenses	Column 1	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non- Metro Funds	Total Funds
A: Personnel Costs Including Benefits	0	0	0
B: Rent/Utilities	\$180	\$270	\$450
C: Office Supplies	0	0	0
D: Telephone	0	0	0
E: In-town Travel	0	0	0
F: Client Assistance (See Detailed List on Page 8)	0	0	0
G: Professional Service Contracts	0	0	0
H: Program Materials	\$15,100	\$16,900	\$27,000
I: Community Events & Festivals (See Detailed List on Page 8)	0	0	0
J: Machinery & Equipment	0	0	0
K: Capital Project	0	0	0
L: Other Expenses (See Detailed List on Page 8)	0	0	0
*TOTAL PROGRAM/PROJECT FUNDS	\$15,280	\$17,170	\$32,450
% of Program Budget	37.5 %	62.5 %	100%

List funding sources for total program/project costs in Column 2, Non-Metro Funds:

Other State, Federal or Local Government	\$16,000 MSD
United Way	0
Private Contributions (do not include individual donor names)	\$400
Fees Collected from Program Participants	0
Other (please specify)	\$500 Sierra Club
Total Revenue for Columns 2 Expenses **	

*Total of Column 1 MUST match "Total Request on Page 1, Section 2"

**Must equal or exceed total in column 2.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

Detail of In-Kind Contributions for this PROGRAM only: Includes Volunteers, Space, Utilities, etc. (Include anything not bought with cash revenues of the agency).

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
Volunteer Labor Hours	\$2700.00	\$12.00/hr at 225 hours
5 Gallon Buckets	\$750.00	\$5.00/bucket
Paper Handouts	\$1000.00	\$0.05/handout
Newspaper	\$500.00	\$0.05/sheet
<i>Total Value of In-Kind</i> <i>(to match Program Budget Line Item.</i> <i>Volunteer Contribution & Other In Kind)</i>	\$4950.00	

*** DONOR INFORMATION REFERS TO WHO MADE THE IN KIND CONTRIBUTION. VOLUNTEERS NEED NOT BE LISTED INDIVIDUALLY, BUT GROUPED TOGETHER ON ONE LINE AS A TOTAL NOTING HOW MANY HOURS PER PERSON PER WEEK**

Agency Fiscal Year Start Date: January 01 2017

Does your Agency anticipate a significant increase or decrease in your budget from the current fiscal year to the budget projected for next fiscal year? NO YES

If YES, please explain:

We have secured a \$1M challenge grant and anticipate matching that grant in 2017.

Applicant's Initials 

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 7 – CERTIFICATIONS & ASSURANCES

By signing Section 7 of the Grant Application, the authorized official signing for the applicant organization certifies and assures to the best of his or her knowledge and/or belief the following Assurances and Certifications. If there is any reason why one or more of the assurances or certifications listed cannot be certified or assured, please explain in writing and attach to this application.

Standard Assurances

1. Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of expenditure is subject to Kentucky's open records law.
2. Applicant understands if the grant agreement is not returned to Louisville Metro within 90 days of its mailing to the applicant, the approval is automatically revoked and the funds will not be disbursed to our organization.
3. Applicant and any sub grantee will give Louisville Metro Government access to and the right to examine all paper or electronic records related to the awarded grant for up to five years of the grant agreement date.
4. Applicant assures compliance with the grant requirements and will monitor the performance of any third party (sub-grantee).
5. The Agency is in good standing with the Kentucky Secretary of State, Louisville Metro Government, the Jefferson County Revenue Commission, the Internal Revenue Service, and the Louisville Metro Human Relations Commission.
6. Applicant understands failure to provide the services, programs, or projects included in the agreement will result in funds being withheld or requested to be returned if previously disbursed.
7. Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal year end.
8. Applicant understands they must provide proof of all expenditures (canceled checks, receipts, paid invoices). The Applicant understands the failure to provide proof of expenditures as required in the grant agreement could result in funding being withheld or request to be returned if previously disbursed.
9. Applicant understands if this application is approved, the grant agreement will identify an award period that begins with the Metro Council approval date, and will end with June 30 of the fiscal year in which the grant is approved. Expenditures associated with this award expected to occur prior to the award period (approval date) must be disclosed in this application in order to be considered compliant with the grant agreement.
10. Applicant understands if we choose to incur expenditures prior to the approval of the application by the Metro Council, there is no guarantee that funding will be reimbursed, as the Council may choose not to award the application.
11. Applicant will establish safeguards to prohibit employees or any person that receives compensation from awarded funds from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.

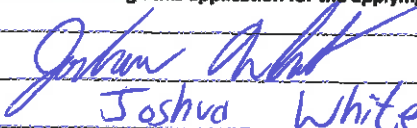
Standard Certifications

1. The Agency certifies it will not use Louisville Metro Government funds for any religious, political or fraternal Activities.
2. The Agency has a written Affirmative Action/Equal Opportunity Policy.
3. The Agency does not discriminate in employment or in provision of any service/program/activity/event based on age, color, disabled status, national origin, race, religion, sex, gender identity or sexual orientation, or Vietnam era veteran status.
4. The Agency certifies it will not require clients, recipients, or beneficiaries to participate in religious, political, fraternal or like activities in order to receive services/benefits provided with Louisville Metro Government funds.
5. The Agency understands the Americans with Disabilities Act (ADA) and makes reasonable accommodations.

Relationship Disclosure: List below any relationship you or any member of your Board of Directors or employees has with any Councilperson, Councilperson's family, Councilperson's staff or any Louisville Metro Government employee.

SECTION 8 – CERTIFICATIONS & ASSURANCES

I certify under the penalty of law the information in this application (including, without limitation, "Certifications and Assurances") is accurate to the best of my knowledge. I am aware my organization will not be eligible for funding if investigation at any time shows falsification. If falsification is shown after funding has been approved, any allocations already received and expended are subject to be repaid. I further certify that I am legally authorized to sign this application for the applying organization and have initialed each page of the application.

Signature of Legal Signatory:		Date:	2/14/2017
Legal Signatory: (please print):	Joshua White	Title:	Project Manager
Phone:	502-767-1702	Extension:	
		Email:	joshua.white1@gmail.com

Project Plan:
*2017 Jefferson County High
School Tree Giveaway*



Supporting Organization: TreesLouisville | Exec. Director: Cindi Sullivan | Volunteer Project Manager: Joshua White

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2017 Jefferson County High School Tree Giveaway Project Plan

Project Overview

Jefferson County currently faces an alarming rate of decline in tree canopy cover, an average of 54,000 trees every year over the last 8 years. Due to the scale of this problem, implementing simple, inexpensive and effective solutions are imperative to countering the loss of canopy.

Benefits of Using a School Giveaway Model

Historically, tree giveaway programs are conducted on a specific day, at a specific location, where interested homeowners arrive and receive free saplings. While the overall effectiveness and long-term viability of these saplings may be lower than if participants received larger, more established trees, this giveaway model has the advantage of being both cost-effective and easily scaled in order to distribute a greater number of trees, thus increasing the number of trees that survive to maturity at a lower cost per tree.



The 2017 Jefferson County High School Tree Giveaway Project intends to utilize and expand upon this model. We feel this model is ideal because of the following advantages:

- **Reach a large population / maximize attendance** - By selecting schools as the location of a giveaway and students as the recipients, we are able to easily reach a large number of program participants. By relocating the giveaway to the area where participants already convene, it removes the burden on would-be participants of having to make a special trip away from their normal routine.
- **Make an impression** - School age children can be one of the best populations to target for tree giveaways as they are impressionable and because they are also the future beneficiaries of the trees being planted. Cultivating a sense of awareness and curiosity

and instilling the value of trees in the minds of young people is an investment in the future, and may inspire future generations to take interest in preserving our tree canopy.

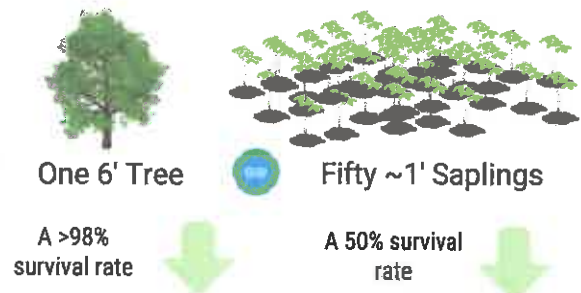
- **Incentivize participation** - An added advantage to targeting school-aged youth is the potential to incorporate school-related incentives, for example:
 - Biology and science teachers incorporate the trees into their lessons
 - Volunteer hour requirements; Beta Club, Key Club, and other clubs
 - Extra credit can be given by teachers for students who bring in a picture of their planted tree (thus potentially increasing the overall number of trees planted)

Optimizing program efficacy and rate of tree survival through an Enhanced Giveaway

Certain age groups and demographics are more likely to be receptive and spend more time learning about and caring for the saplings, which in turn leads to a higher rate of success with this model of tree planting program. Building on the high rate of success observed in previous programs conducted at Atherton, Assumption, Manual and Saint Xavier high schools, we have chosen 31 schools in Jefferson County for the 2017 Giveaway Project and will distribute a tree to each Freshman year student.

This program seeks to optimize by targeting efficacy instead of just cost or quantity. Whereas a typical giveaway in Louisville of ~\$4-\$6 per tree where the trees cost ~\$0.55 a tree, 41 surviving give away trees out of every 453 given away are still cheaper than a single tree planted by the public sector for the same price. Meaning, that even if 452 trees died and one survived, it would be more cost effective than a \$250 tree planted.¹ Adding cost effective protective materials to the giveaway (such as mesh tubes, stakes, etc.) further increases the likelihood of the tree surviving, which can further increase the efficacy and certainly increase the yield. At a 75% survival rate and 2.50 price point, an enhanced giveaway achieves an efficacy of 3.33 dollars per tree, meaning that 75 trees can be give away for the price of a single \$250 public sector tree.

For 100 tax dollars, you can get:



In 3-4 years you'll end up with...




SAPLINGS...
THE ECONOMICAL CHOICE

¹ Public plantings are still more optimal for specific locations such as in easements along busy roads/sidewalks or high pedestrian areas.

Tree Planting Efficacy - Treeconomics

	Cost Per Tree	Tree Survival Rate	Efficacy (dollars per surviving tree)
Consumer Marketing	Variable	variable	variable
Giveaway	\$0.60	10%-15%	\$4-\$6 per tree
Enhanced Giveaway	\$1.50-\$2.51	40%-75%	\$2.00-\$6.28 per tree*
MSD Grant Rate for community plantings	\$70-\$240	>98%	\$71.43-\$244.90 per tree
Public Planting	\$250-\$500	<90%	>\$250 - 555.00

*Enhanced giveaway's result in a higher yield for a similar or lower price per surviving tree as the regular giveaway

How the tree giveaway works

Volunteer coordinators will first seek out champions from the faculty of each selected school to help organize the giveaway event. They will then determine a giveaway day and develop a communication schedule. Volunteers will prepare trees the week before the giveaway and then students will be presented with several trees to choose from. Tree seedlings and protective materials (stakes, mesh tubes, etc.) will be given away to the entire freshman class at each selected school. Instructions provided on the day, combined with instructions sent home a week before, will give students and faculty the necessary information to facilitate a high yield, productive tree planting.

Budget for 2017 Spring Tree Giveaway

Budget for 10,000 trees

Item	Price	Unit	Quantity	Total
1-year-old Seedlings	~\$0.60	1	10,000	\$6000.00
Tree Guards	\$1.38	1	10,000	\$13800.00
Protective Mesh Tubes	~\$0.67	1	9900	\$6593.40
Bamboo Stakes	\$0.0975	500	20	\$975.00
Plastic Tree Sleeve	\$0.02	1	10,000	\$200
Newspaper	Free	1	10,000	0
Handout 1	Free	1	2,000	0
Handout 2	Free	1	10,000	0
Printed Tag	\$0.43	1	10,000	\$4,300
Bucket	Free	1	133	0
Facility Rental	50.00	1 Hour	9	\$450.00
Digital Marketing	500.00	Total	Market Pricing	\$500.00
Total				\$32,818.40

*Program is scalable from 500 - 10,000 trees. Not receiving sufficient funds to purchase 10,000 still allows for the program to move forward with fewer schools.

Overall Time Budget

- 20 Schools x 1 hr allotted per giveaway = 20h
- Tree Prep for ~10,000 Trees = ~1 minute per tree x ~20 volunteers x ~3 Hrs per weekend x ~3 weekends

Tree prep will be broken into once a week sessions. About 20 people will need to prepare 3333 trees per week in 133 buckets to store the trees.

Developing a school for a giveaway

Roles

Each school will have an External Coordinator and an Internal Champion. These two roles can be the same person, however the External Coordinator is typically responsible for multiple schools.

Coordinator Description

The External Coordinator's responsibility is to act as a liaison for the Organization to the school and help determine what resources are required for that school. The External Coordinator is responsible for finding a Champion at each school they are coordinating. The Coordinator makes sure the Champion knows what their responsibilities are and ensures they are staying on schedule to meet goals.

The Coordinator's responsibilities:

- Find and make contact with a champion at each school
- Relay information from the school to the giveaway project manager/director
- Train the champion on how the giveaway is supposed to work
- Ensure the champion is staying on schedule with project timeline
- Bring the trees and other materials to the school on the giveaway day
- Responsible for getting photographs if permission has been obtained

Internal Champion Description

The Internal Champion is a person internal to the school. Champions report to their assigned External Coordinator.

The Champion's responsibilities:

- Work with students and other faculty to ensure the success of the tree giveaway
- Establish the best date for the planting (free of conflicting events)
- Print informational handouts (provided by Project Manager) and distribute to students
- Procure tables and student volunteers to help pass trees and materials out on the giveaway day
- Establish permission and guidelines for photography

Together the Coordinator and Champion will work to craft announcements, select giveaway times and facilitate a successful giveaway.

Time Commitment

The time commitment for a giveaway is between 30-45 minutes for the actual giveaway (including transportation time to the event). Giveaways will happen around 2:00 p.m. on a weekday.

- 5 Minutes for sign in
- 10 minutes for setup
- 25 minutes for giveaway (2:00 to 2:25)
- 10 minutes for break down

Giveaway Planning

Some specific information is necessary from each school for planning purposes.

Information **required** from each school:

- Number of High School Freshmen to determine number of trees needed

Information **requested/desired** from each school:

- Percentages of High School freshmen that live in a home vs. living in an apartment or condo.²

² Some of the council persons are interested in ensuring every student can participate by finding properties where students can plant if they don't live in a suitable residence type for planting a tree (i.e. condos, apartments, etc.). Developing this part of the program may be postponed until a future year.

Preparation

Preparing Trees

Trees come in bundles of 100, piled together in a durable bag. Volunteers must remove tree seedlings one at a time, wrap them in a sheet of newspaper, dip the newspaper into a bucket of water, and then place the tree and wet newspaper in a plastic sleeve.

Materials:

- Newspaper
- Tree
- Bag

Facility requirements for prep:

Unheated facility, 5 - 6 tables, at least 800 square feet, can be done outside if weather is not inclement.



Ideally, each student will receive the following:

- Tree (see preparing trees)
- Protective mesh
- HDPE trunk protector
- Bamboo stake



Communications

Two handouts are provided to each student. Historically, Champions have offered to use school resources to print and distribute the handouts.

Handout 1

Handout 1: Information in advance of the giveaway. The information is meant for students and parents/guardians. Handout 1 is given 1 week before the giveaway.

- Explanation of the program, who is doing it, and why it is being done.
- Types of trees that will be available.
- Emphasizes requirement to call 811 in advance so trees can be planted on the giveaway day without delays.
- Guidelines for where the tree should be placed.

Handout 2

Handout 2: Instructions for planting, written with the intended audience being both students and parents/guardians. Handout 2 is given on the day of the giveaway.

- Thanks the participant.
- Provides guidelines for placing the tree with respect to sidewalks, utility lines, foundations and structures.
- Planting instructions.
- Reiterates the need to call 811 first before planting.
- How to keep the tree alive while waiting for 811.

Giveaway Day

Giveaway day materials:

- 1x bucket for every 25-30 trees.
- 1x 3x5 card stock sign for each tree species
- Tape for attaching signs to tables
- 1x 2'x6' table for every 2x species to be given away
- Handout 2 for each student.

Each giveaway is scheduled to occur on a non-testing day, when students can be dismissed 15-20 minutes before the end of day bell tolls. This gives students time to select their tree and materials and make their way to buses and cars.



Giveaways are staged in a central hall where there is ample room to set up and where there are many exits and entrances to reduce bottlenecks. Tables are set up with 1 or 2 species of tree on each table. A species sign is attached to the wall behind the tables (optionally, a teacher or student can hold them up) so that students can quickly find the trees they are interested in. Depending on the level of interest, some students will have utilized Handout 1 to predetermine which

tree they want.

Students who are interested in more than one tree (and/or teachers) can wait until the end of the giveaway, as there are usually extra trees. People who have enough interest to take more than one are believed to yield a higher success rate.

Follow-Up Surveys

In years following the giveaways, surveys will be conducted to determine the survival rates of the trees. Parameters of the survey will be as such:

- Has your tree survived?
- How often did you really water your tree the first summer?
- Did you use any of the following to protect your tree (select all that apply)
 - Mesh
 - Stake or pole
 - Trunk Guard
 - Other _____
- If your tree did not survive, what was the cause of the loss?
 - Lawnmower
 - Weed whacker
 - Animal
 - Pedestrian
 - Lack of watering
 - Disease
 - Other _____

Appendix A: Schools

School prioritization was based on the following criteria:

- School already has been developed for a tree giveaway in previous years
- Student's residence proximity to Downtown
- Inside or near the Watterson Expressway
- School has reached out and is willing to participate
- Funding or donations earmarked for a specific school

School Name	Priority	2017 Freshmen	2017 with Household Addresses**	School System	Budget Allocation	Council Request	%	Metro District
The Academy at Shawnee	1	183	164	JCPS A1	\$457.50	\$160.00	34.97%	5
Assumption	1	235		Catholic	\$587.50	\$230.00	39.15%	8
Central	1	288	229	JCPS A1	\$720.00	\$280.00	38.89%	4
Trinity	1	290		Catholic	\$725.00	\$300.00	41.38%	9
Southern	1	362	294	JCPS A1	\$905.00	\$350.00	38.67%	24
Atherton	1	393	348	JCPS A1	\$982.50	\$400.00	40.71%	8
Butler Traditional High School	1	467	429	JCPS A1	\$1,167.50	\$480.00	41.11%	3
Dupont Manual	1	489	461	JCPS A1	\$1,222.50	\$500.00	40.90%	6
Saint Xavier	1			Catholic	\$0.00		#DIV/0!	10
Sacred Heart	2	217		Catholic	\$542.50	\$220.00	40.55%	9
Waggener	2	283	215	JCPS A1	\$707.50		0.00%	26
Seneca	2	340	255	JCPS A1	\$850.00	\$350.00	41.18%	26
Iroquois	2	460	361	JCPS A1	\$1,150.00		0.00%	21 and 15
Ballard	2	519	443	JCPS A1	\$1,297.50	\$550.00	42.39%	7
Male	2	586	551	JCPS A1	\$1,465.00	\$600.00	40.96%	21
Collegiate	2			Private	\$0.00		#DIV/0!	8
DeSales High School	2				\$0.00		#DIV/0!	21
Western High	2				\$0.00		#DIV/0!	14
Portland Christian School	2				\$0.00			7
Westport TAPP School	2				\$0.00			7
Valley	3	279	257	JCPS A1	\$697.50	\$280.00	40.14%	14

Doss	3	312	255	JCPS A1	\$780.00	\$300.00	38.46%	25
Fern Creek	3	402	t	JCPS A1	\$1,005.00	\$400.00	39.80%	22
Pleasure Ridge Park High School	3	435	408	JCPS A1	\$1,087.50	\$420.00	38.62%	12 and 14
Eastern	3	544	504	JCPS A1	\$1,360.00	\$520.00	38.24%	19
Presentation	3				\$0.00		#DIV/0!	4, and 6
St. Francis	3			Private	\$0.00		#DIV/0!	4
Liberty	3			JCPS Alternative	\$0.00		#DIV/0!	2
Jeffersontown	4	331	262	JCPS A1	\$827.50	\$350.00	42.30%	11
Fairdale	4	337	265	JCPS A1	\$842.50	\$320.00	37.98%	13
Kentucky Country Day School	4			Private	\$0.00		#DIV/0!	16
Jefferson County High	5	17	16	JCPS Alternative	\$42.50		0.00%	
Breckenridge	5	75	59	JCPS Alternative	\$187.50		0.00%	4,8

Appendix B: Purchasing Schedule

- Trees will all be reserved as soon as project is approved and funding becomes available. Trees will be delivered in installations 3-5 days before each of the 3 prep sessions in the month of March.
- Materials will be purchased on a Net 45 schedule.

TreesLouisville, Inc.
Organization Budget 2016

Ordinary Income/Expense			
Direct Public Support	500,000		
Total Income		500,000	
Cost of Goods Sold			
Direct Costs			
Contractors	110,000		
Materials	230,000		
Labor	90,000		
Payroll Tax	7,800		
Other	<u>7,200</u>		
Total Direct Costs		<u>445,000</u>	
Gross Profit			55,000
Expense			
Contract Services			
Accounting Fees	4,000		
Merchant Services	1,080		
Legal Fees	2,000		
Website Expense	1,200		
Other	<u>2,500</u>		
Total Contract Expense		10,780	
Facilities and Equip	<u>14,400</u>		
Total Facilities and Equip		14,400	
Operations			
Postage	400		
Supplies	<u>2,500</u>		
Total Operations		2,900	
Insurance, D&O, Liability	<u>1,200</u>		
Total Insurance		1,200	
Payroll Expense			
Salary Expense	10,000		
Payroll Expense Other	<u>870</u>		
Total Payroll Expense		10,870	
Organizational Development			
Travel and Meetings	4,000		
Conference, Convention	<u>5,500</u>		
Total Organizational Development		<u>9,500</u>	
Total Expense			<u>49,650</u>
Net Income			5,350

TreesLouisville, Inc.
Organization Budget 2017

Ordinary Income/Expense			
Direct Public Support		<u>550,000</u>	
Total Income			550,000
Cost of Goods Sold			
Direct Costs			
Contractors		121,000	
Materials		253,000	
Labor		99,000	
Payroll Tax		8580	
Other		<u>7920</u>	
Total Direct Costs			<u>489,500</u>
Gross Profit			60,500
Expense			
Contract Services			
Accounting Fees		4,400	
Merchant Services		1,180	
Legal Fees		2,200	
Website Expense		1,320	
Other		<u>2,750</u>	
Total Contract Expense			11,858
Facilities and Equip		<u>15,840</u>	
Total Facilities and Equip			15,840
Operations			
Postage		440	
Supplies		<u>2,750</u>	
Total Operations			3,190
Insurance, D&O, Liability		<u>1,320</u>	
Total Insurance			1,320
Payroll Expense			
Salary Expense		11,000	
Payroll Expense Other		<u>957</u>	
Total Payroll Expense			11,957
Organizational Development			
Travel and Meetings		4,400	
Conference, Convention		<u>6,050</u>	
Total Organizational Development			<u>10,450</u>
Total Expense			<u>54,615</u>
Net Income			5,885

0918051.09

amcray
ADD

Alison Lundergan Grimes
Kentucky Secretary of State
Received and Filed:
3/27/2015 3:17 PM
Fee Receipt: \$8.00

ARTICLES OF INCORPORATION
OF
TREESLOUISVILLE, INC.

The undersigned incorporator executes these Articles of Incorporation for the purpose of forming, and does hereby form, a nonprofit corporation (the "Corporation") under the laws of the Commonwealth of Kentucky (KRS 273.161 et seq.), with all the rights, privileges and immunities of a corporation organized within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (or corresponding section of any future federal tax code), in accordance with the following provisions:

ARTICLE I
Name

The name of the Corporation is TreesLouisville, Inc.

ARTICLE II
Purposes and Powers

The Corporation is organized and operated exclusively for charitable, religious, scientific, and educational purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (or corresponding section of any future federal tax code). The Corporation shall receive contributions and fees, and shall distribute its funds for charitable or educational purposes. In carrying out its corporate purposes, the Corporation shall have all the powers allowed corporations by Chapter 273 of the Kentucky Revised Statutes.

Any other provision of these articles to the contrary notwithstanding, the Corporation shall have no capital stock and no power to issue certificates of stock nor to declare dividends; no part of the net earnings of the Corporation shall inure to the benefit of, or be distributable to its members, trustees, directors, officers, or other private persons, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make distributions in furtherance of Section 501(c)(3) purposes; no substantial part of the activities of the Corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the Corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office; and the Corporation shall not carry on any activities denied to: (a) a corporation described in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (or corresponding section of any future federal tax code) or (b) a corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code of 1986, as amended (or corresponding section of any future federal tax code).

ARTICLE III
Registered Office and Registered Agent

The street address of the initial registered office of the Corporation is 2000 PNC Plaza, 500 West Jefferson Street, Louisville, Kentucky 40202. The name of the initial registered agent at that address is SKO - Louisville Services, LLC.

ARTICLE IV
Principal Office

The mailing address of the Corporation's principal office is TreesLouisville, Inc., 1700 Cherokee Road, Louisville, KY 40205.

ARTICLE V
Directors

The Corporation shall be governed by a Board of Directors consisting of not less than three (3) nor more than nine (9) members, the exact number and the terms of each to be set in the manner provided for in the Bylaws. The initial Board of Directors of the Corporation shall consist of three (3) persons who shall serve until the first annual election of Directors or until their successors are elected and qualify. The names and mailing addresses of said directors are:

Henry V. Heuser, Jr.
222 South First Street, Suite 500
Louisville, KY 40202

Allen F. Steinbock
1700 Cherokee Road
Louisville, KY 40205

Katherine M. Schneider
1219 Summit Avenue
Louisville, KY 40204

ARTICLE VI
Officers

The Bylaws shall provide for such officers and committees as are necessary for the proper administration of the Corporation's activities. The officers of the Corporation shall be elected for such term and in such manner as is provided in the Bylaws.

ARTICLE VII
Bylaws

The Bylaws for the Corporation shall be adopted, and may be amended or repealed, by the Board of Directors.

ARTICLE VIII
Exemption From Liability and Indemnification

The private property of the directors of the Corporation shall be exempt from liability for any and all debts of the Corporation.

The Corporation shall have the power to indemnify any person who was or is a party, or is threatened to be made a party, to any threatened, pending or completed action, suit or proceedings, whether civil, criminal, administrative or investigative (other than an action by or on behalf of the Corporation) by reason of the fact that he is or was a director, officer, employee or agent of the Corporation, against expenses (including attorneys' fees), judgments, fines and amounts paid in settlement, actually and reasonably incurred by him in connection with such action, suit or proceeding. Further provisions for indemnification of officers and directors may be specified in the Bylaws.

ARTICLE IX
Limitation of Director Liability

No director shall be personally liable to the Corporation for monetary damages for breach of his duties as a director except for liability:

- (a) For any transaction in which the director's personal financial interest is in conflict with the financial interests of the Corporation;
- (b) For acts or omissions not taken in good faith or which involve intentional misconduct or are known to the directors to be a violation of law; or
- (c) For any transaction from which the director derived an improper personal benefit.

If the Kentucky Revised Statutes are amended after the effective date of these Articles of Incorporation to authorize corporate action further eliminating or limiting the personal liability of directors, then the liability of a director of the Corporation shall be eliminated or limited to the fullest extent permitted by the Kentucky Revised Statutes, as amended. Any repeal or modification of this Article shall not adversely affect any right or protection of a director of the Corporation existing at the time of such repeal or modification.

ARTICLE X
Dissolution

Dissolution shall be accomplished in accordance with Chapter 273 of the Kentucky Revised Statutes or its successor.

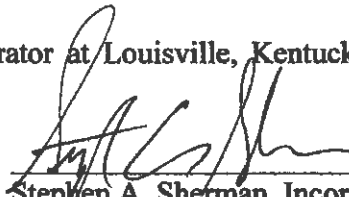
Upon dissolution of the Corporation, the Board of Directors shall, after paying or making provisions for the payment of, all liabilities of the Corporation, dispose of all corporate assets to such organizations organized and operated exclusively for charitable, educational, religious or scientific purposes as shall at the time qualify as an exempt organization or organizations under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (or corresponding section of any future federal tax code), or to such organizations described under Section 170(c)(1) of the Internal Revenue Code of 1986, as amended (or corresponding section of any future federal tax code), as the Board of Directors shall determine. Any such assets not disposed of by the Board of Directors shall be disposed of by the Circuit Court of the County in which the principal office of the Corporation is then located, to such organization or organizations organized and operated exclusively for charitable, educational, religious or scientific purposes as shall, at that time, qualify as an exempt organization or organizations under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (or corresponding section of any future federal tax code).

**ARTICLE XI
Incorporator**

The name and mailing address of the Incorporator is:

Stephen A. Sherman
2000 PNC Plaza, 500 West Jefferson Street
Louisville, Kentucky 40202

Signed and acknowledged by the Incorporator at Louisville, Kentucky, on March 27,
2015.

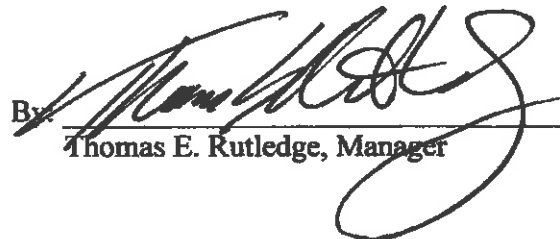


Stephen A. Sherman, Incorporator

WRITTEN CONSENT OF INITIAL REGISTERED AGENT

The undersigned, SKO - Louisville Services, LLC, a Kentucky limited liability company, hereby consents to serve as initial registered agent of this company.

SKO - LOUISVILLE SERVICES, LLC

By: 

Thomas E. Rutledge, Manager

THIS INSTRUMENT PREPARED BY:



Stephen A. Sherman
Stoll Keenon Ogden PLLC
2000 PNC Plaza
500 West Jefferson Street
Louisville, KY 40202-2874
(502) 333-6000

991157.871157/1204907.1

0918051.09 mstratton
AMD
Allison Lundergan Grimes
Kentucky Secretary of State
Received and Filed:
7/14/2016 10:07 AM
Fee Receipt: \$8.00

ARTICLES OF AMENDMENT
OF
THE ARTICLES OF INCORPORATION
OF
TREESLOUISVILLE, INC.

Pursuant to the provisions of Chapter 14A.2 and Chapter 273 of the Kentucky Revised Statutes, the undersigned corporation adopts the following Articles of Amendment to its Articles of Incorporation, which were originally filed March 27, 2015. The amendment below was unanimously adopted by its Board of Directors on behalf of TREESLOUISVILLE, INC., a Kentucky non-profit corporation, (the "Corporation") on the 20th day of June, 2016, in the manner prescribed by the Kentucky Business Corporation Act.

ARTICLE I

Article V of the Articles of Incorporation is amended to read as follows:

ARTICLE V

The Corporation shall be governed by a Board of Directors consisting of not less than three (3) nor more than twenty-five (25) members, the exact number and the terms of each to be set in the manner provided for in the Bylaws. The initial Board of Directors of the Corporation shall consist of three (3) persons who shall serve until the first annual election of Directors or until their successors are elected and qualify. The names and mailing addresses of said directors are:

Henry V. Heuser, Jr.
222 South First Street, Suite 500
Louisville, KY 40202

Allen F. Steinbock
1700 Cherokee Road
Louisville, KY 40205

Katherine M. Schneider
1219 Summit Avenue
Louisville, KY 40204

IN WITNESS WHEREOF, the Corporation has caused these Articles of Amendment to be signed by its duly authorized officer this 20 day of June 2016, and effective on the date of acceptance and filing with the Kentucky Secretary of State's office.

TREESLOUISVILLE, INC.
a Kentucky non-profit corporation

By: 
Cindi Sullivan, President

COMMONWEALTH OF KENTUCKY)
)
COUNTY OF JEFFERSON)

Before me on this 20th day of June, 2016, personally appeared Cindi Sullivan, as President, of TreesLouisville, Inc., a Kentucky non-profit corporation, to me personally known or satisfactorily proven to me to be the signer of the foregoing instrument, who acknowledged that she signed the foregoing instrument and that the same was the act and deed of said corporation.



My commission expires: May 5, 2019

Christina F. Lee
Notary Public: State at Large, Kentucky

Prepared by:

Pamela M. Greenwell
Pamela M. Greenwell, Attorney
SEILLER WATERMAN LLC
462 S. Fourth Street, Suite 2200
Louisville, KY 40202
Telephone: (502) 584-7400

Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary of State

NARP
0918051
Alison Lundergan Grimes
KY Secretary of State
Received and Filed
2/23/2016 3:48:22 PM
Fee receipt: \$15.00

Alison Lundergan Grimes
Secretary of State
P. O. Box 1150
Frankfort, KY 40602-1150
(502) 564-3490
<http://www.sos.ky.gov>

Annual Report
Online Filing

ARP

Company: TREESLOUISVILLE, INC.
Company ID: 0918051
State of origin: Kentucky
Formation date: 3/27/2015 12:00 00 AM
Date filed: 2/23/2016 3:48:22 PM
Fee: \$15.00

Principal Office

PO BOX 5816
LOUISVILLE, KY 40255

Registered Agent Name/Address

SKO-LOUISVILLE SERVICES, LLC
2000 PNC PLAZA
500 WEST JEFFERSON STREET
LOUISVILLE, KY 40202

Current Officers

Chairman	Henry V Heuser	PO Box 5816 Louisville, KY 40255
President	cindi Sullivan	PO Box 5816 Louisville, KY 40255
Vice President	Katherine Schneider	PO Box 5816 Louisville, KY 40255
Treasurer	Allen F Steinbock	PO Box 5816 Louisville, KY 40255
Secretary	Allen F Steinbock	PO Box 5816 Louisville, KY 40255

Directors

Director	Henry V Heuser	PO Box 5816 Louisville, KY 40255
Director	Katherine Schneider	PO Box 5816 Louisville, KY 40255
Director	Allen F Steinbock	PO Box 5816 Louisville, KY 40255
Director	James R Allen	PO Box 5816 Louisville, KY 40255
Director	Charles Denny	PO Box 5816 Louisville, KY 40255
Director	Greg Heitzman	PO Boc 5816 Louisville, KY 20255
Director	Mike Mountjoy	PO Box 5816 Louisville, KY 40255
Director	Austin Musselman	PO Box 5816 Louisville, KY 40255
Director	Paul Thompson	PO Box 5816 Louisville, KY 40255
Director	Pattie Dale Tye	PO Box 5816 Louisville, KY 40255

Signatures

Signature	Allen F Steinbock
Title	Secretary-Treasurer

1:17 PM

02/10/17

TreesLouisville, Inc.
Reconciliation Summary

10000 - Stock Yards Bank xxxx8662, Period Ending 01/31/2017

	<u>Jan 31, 17</u>
Beginning Balance	155,119.59
Cleared Transactions	
Checks and Payments - 13 items	-10,304.19
Deposits and Credits - 10 items	12,140.34
	<u>1,836.15</u>
Total Cleared Transactions	1,836.15
Cleared Balance	156,955.74
	<u>156,955.74</u>
Uncleared Transactions	
Checks and Payments - 3 items	-1,750.00
	<u>-1,750.00</u>
Total Uncleared Transactions	-1,750.00
Register Balance as of 01/31/2017	155,205.74
	<u>155,205.74</u>
New Transactions	
Checks and Payments - 7 items	-12,174.29
	<u>-12,174.29</u>
Total New Transactions	-12,174.29
Ending Balance	143,031.45
	<u>143,031.45</u>

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **AUG 06 2015**

TREESLOUISVILLE INC
PO BOX 5816
LOUISVILLE, KY 40255

Employer Identification Number:

[REDACTED]

17053176341015
Contact Person:
CHITRA MAMLATDARNA ID# 52471
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
March 27, 2015
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible requests, devises, transfers or gifts under section 2055, 2106 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

-2-

TREESLOUISVILLE INC

Sincerely,



Jeffrey I. Cooper
Director, Exempt Organizations
Rulings and Agreements

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. TreesLouisville, Inc.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <small>Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.</small> <input type="checkbox"/> Other (see instructions) ▶ _____	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>	
	5 Address (number, street, and apt. or suite no.) P. O. Box 5916	Requester's name and address (optional)
	6 City, state, and ZIP code Louisville, KY 40255	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number	
OR	
Employer identification number	[REDACTED]

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here Signature of U.S. person ▶ *By Keith H. Lewis / TreesLouisville, Inc.* Date ▶ *8 December 2015*

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2015

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public. Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2015 calendar year, or tax year beginning 03-27-2015, and ending 12-31-2015

- B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending

C Name of organization: TREESLOUISVILLE INC. Number and street: PO BOX 5816. City or town: LOUISVILLE, KY 40255

D Employer identification number. E Telephone number: (502) 208-8746. F Group Exemption Number

G Accounting Method: Cash, Accrual, Other (specify)

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: N/A

J Tax-exempt status (check only one): 501(c)(3), 501(c), 4947(a)(1), or 527

K Form of organization: Corporation, Trust, Association, Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. \$195,991

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

Table with 21 rows and 2 columns. Rows include Revenue (1-9), Expenses (10-17), and Net Assets (18-21). Values include 195,982, 9, 195,991, 33,000, 30,443, 1,800, 169, 35,062, 100,474, 95,517, 0, 0, 95,517.

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	0	22 139,351
23 Land and buildings		23
24 Other assets (describe in Schedule O)		24
25 Total assets	0	25 139,351
26 Total liabilities (describe in Schedule O)	0	26 43,834
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	0	27 95,517

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations, optional for others)

What is the organization's primary exempt purpose?
TRESLOUISVILLE, INC 'S EXISTS IS TO ENSURE THAT THE PUBLIC AND PRIVATE INVESTMENTS FOR INCREASING THE URBAN TREE CANOPY ARE USED STRATEGICALLY AND COLLABORATIVELY

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28 TRESLOUISVILLE, INC PROVIDES A FRAMEWORK FOR SUPPORTING AND COORDINATING EXISTING TREE PLANTING ORGANIZATIONS AND EFFORTS SUCH AS BRIGHTSIDE, LOUISVILLE GROWS AND THE LOUISVILLE SUSTAINABILITY COUNCIL'S TREE ACTION TEAM MEMBERS AND NEIGHBORHOOD ASSOCIATIONS THROUGH GRANTS, THUS REDUCING DUPLICATION OF SERVICES AND CONSERVING RESOURCES. OUR RELATIONSHIP WILL BE TO SUPPORT THEIR EXISTING TREE PLANTING EFFORTS AND TO PARTNER WITH THEM ON NEW PROJECTS IN ORDER TO SYNERGIZE EFFORTS TO IMPROVE OUR TREE CANOPY (Grants \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	82,273
29 (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30 (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31 Other program services (describe in Schedule O) (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a)	32	82,273

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV.

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
JAMES R ALLEN DIRECTOR	0 50	0	0	0
CHARLES DENNY DIRECTOR	0 50	0	0	0
GREG HEITZMAN DIRECTOR	0 50	0	0	0
MIKE MOUNTJOY DIRECTOR	0 50	0	0	0
AUSTIN MUSSELMAN DIRECTOR	0 50	0	0	0
PAUL THOMPSON DIRECTOR	0 50	0	0	0
PATTI DALE TYE DIRECTOR	0 50	0	0	0
HENRY V HEUSER CHAIRMAN	1 00	0	0	0
ALLEN F STEINBOCK SECRETARY/TREASURER	1 00	0	0	0
KATHERINE SCHNEIDER VICE CHAIR	1 00	0	0	0
CYNTHIA SULLIVAN EXECUTIVE DIRECTOR	20 00	33,000	0	0

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V.

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?
35b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O
35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N
37a Enter amount of political expenditures, direct or indirect, as described in the instructions
37b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38b If "Yes," complete Schedule L, Part II and enter the total amount involved
39 Section 501(c)(7) organizations Enter
39a Initiation fees and capital contributions included on line 9
39b Gross receipts, included on line 9, for public use of club facilities
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955
40b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I
40c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
40d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization
40e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T
41 List the states with which a copy of this return is filed
42a The organization's books are in care of Cynthia Sullivan Telephone no (502) 208-8746 Located at PO BOX 5816 LOUISVILLE, KY ZIP +4 40255
42b 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)? If "Yes," enter the name of the foreign country
42c See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)
42c At any time during the calendar year, did the organization maintain an office outside the U S? If "Yes," enter the name of the foreign country
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44c Did the organization receive any payments for indoor tanning services during the year?
44d If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)

	Yes	No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI

	Yes	No
47 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		No
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
49a Did the organization make any transfers to an exempt non-charitable related organization?		No
49b If "Yes," was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000 **0**

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? **NOTE.** All Section 501(c)(3) organizations must complete Schedule A

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 the taxpayer) is based on all information of which the preparer has knowledge.

Sign Here *****
Signature of officer
CYNTHIA SULLIVAN EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name MICHAEL B MOUNTJOY Preparer's signature
Firm's name ▶ MOUNTJOY CHILTON MEDLEY LLP
Firm's address ▶ 462 S FOURTH ST SUITE 2600
LOUISVILLE, KY 402023445

May the IRS discuss this return with the preparer shown above? See instructions



TY 2015 Transfers Personal Benefits Contracts Declaration

Name: TREESLOUISVILLE INC

EIN: [REDACTED]

Declaration: THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY,OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT.THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMIUMS, DIRECTLY,OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.

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.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
TREESLOUISVILLE INC

Employer identification number
[REDACTED]

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 (Form 990 or 990-EZ))
- 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
 - f Enter the number of supported organizations _____
 - g 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 (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			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)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants.)					195,982	195,982
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					195,982	195,982
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)						46,080
6 Public support. Subtract line 5 from line 4						149,902

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
7 Amounts from line 4					195,982	195,982
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					9	9
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 VI.)						
11 Total support. Add lines 7 through 10						195,991
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. <input checked="" type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	
15 Public support percentage for 2014 Schedule A, Part II, line 14	15	
16a 33 1/3% support test—2015. 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 <input type="checkbox"/>		
b 33 1/3% support test—2014. 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 <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2015. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2014. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
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 <input type="checkbox"/>		

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)2011	(b)2012	(c)2013	(d)2014	(e)2015	(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)2011	(b)2012	(c)2013	(d)2014	(e)2015	(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 VI.)						
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 section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	

- 19a 33 1/3% support tests—2015.** 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—2014.** 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 Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).		
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		

Part IV Supporting Organizations (continued)

Section B. Type I Supporting Organizations

- 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).*
- 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.*

	Yes	No
1		
2		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)
 - a The organization satisfied the Activities Test. Complete line 2 below.
 - b The organization is the parent of each of its supported organizations. Complete line 3 below.
 - c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

2 Activities Test Answer (a) and (b) below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*

3 Parent of Supported Organizations Answer (a) and (b) below.

- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*
- b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

	Yes	No
2a		
2b		
3a		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income

	(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain		
2 Recoveries of prior-year distributions		
3 Other gross income (see instructions)		
4 Add lines 1 through 3		
5 Depreciation and depletion		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)		
7 Other expenses (see instructions)		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)		

Section B - Minimum Asset Amount

	(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)		
a Average monthly value of securities		
b Average monthly cash balances		
c Fair market value of other non-exempt-use assets		
d Total (add lines 1a, 1b, and 1c)		
e Discount claimed for blockage or other factors (explain in detail in Part VI)		
2 Acquisition indebtedness applicable to non-exempt use assets		
3 Subtract line 2 from line 1d		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)		
6 Multiply line 5 by 0.35		
7 Recoveries of prior-year distributions		
8 Minimum Asset Amount (add line 7 to line 6)		

Section C - Distributable Amount

	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	
2 Enter 85% of line 1	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	
4 Enter greater of line 2 or line 3	
5 Income tax imposed in prior year	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	
7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
d From 2013.			
e From 2014.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 3j and 4c			
8 Breakdown of line 7			
c Excess from 2013.			
d From 2014.			
e From 2015.			

Part VI

Supplemental Information.

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference

Explanation

PART IV

TREESLOUISVILLE INC'S INCEPTION WAS 03/27/2015 WITH A YEAR ENDING 12/31/2015 CAUSING A SHORT-YEAR

2015

Open to Public Inspection

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization
TREESLOUISVILLE INC

Employer identification number
[REDACTED]

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART I, LINE 4 - OTHER INVESTMENT INCOME	DESCRIPTION INTEREST AMOUNT 9
FORM 990-EZ, PART I, LINE 16 - OTHER EXPENSES	DESCRIPTION TREE SERVICES AMOUNT 24,301 DESCRIPTION CREDIT CARD PROCESSING FEES AMOUNT 636 DESCRIPTION OFFICE EXPENSES AMOUNT 1,178 DESCRIPTION INSURANCE AMOUNT 1,186 DESCRIPTION PAYROLL TAX EXPENSE AMOUNT 2,581 DESCRIPTION TRAVEL AMOUNT 2,152 DESCRIPTION CONFERENCE, CONVENTIONS AND MEETINGS AMOUNT 3,028 TOTAL TO FORM 990-EZ, LINE 16 35,062
FORM 990-EZ, PART II, LINE 26 - OTHER LIABILITIES	DESCRIPTION ACCOUNTS PAYABLE & ACCRUED EXPENSES BEG OF YEAR AMOUNT 0 END OF YEAR AMOUNT 43,834

TREESLOUISVILLE, INC.**General Information**

Organization Number	0918051
Name	TREESLOUISVILLE, INC.
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	3/27/2015
Organization Date	3/27/2015
Last Annual Report	2/23/2016
Principal Office	3110 LEXINGTON ROAD LOUISVILLE, KY 40206
Registered Agent	SKO-LOUISVILLE SERVICES, LLC 2000 PNC PLAZA 500 WEST JEFFERSON STREET LOUISVILLE, KY 40202

Current Officers

Chairman	Henry V Heuser
President	cindi Sullivan
Vice President	Katherine Schneider
Secretary	Allen F Steinbock
Treasurer	Allen F Steinbock
Director	Henry V Heuser
Director	Katherine Schneider
Director	Allen F Steinbock
Director	James R Allen
Director	Charles Denny
Director	Greg Heitzman
Director	Mike Mountjoy
Director	Austin Musselman
Director	Paul Thompson
Director	Pattie Dale Tye

Individuals / Entities listed at time of formation

Director	HENRY V. HEUSER, JR.
Director	ALLEN F STEINBOCK
Director	KATHERINE M SCHNEIDER
Incorporator	STEPHEN A SHERMAN