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990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052

**ഉ**⋒**1**∩

Departm	nent of the Treasury Revenue Service	Note. The foundation may b	e able to use a copy of the	is retum to sati	n sfy state reg	orting requirements	∠WIU
		or tax year beginning		<sup>7</sup> 01 <b>, 2010,</b>			09/30,2011
	eck all that apply	Initial return	Initial return of			<del></del>	Final return
J (),1	cot an trut appry	Amended return		ss change		Name change	<b>J</b> · · · · · · · · · · · · · · · · · · ·
Name	of foundation	, anonada rotam				A Employer identifi	cation number
•44,710	0,102.102.00						
тне	TRIO FOUNDATI	ON				48-	1104136
		ox number if mail is not delivered	to street address)		Room/suit	e B Telephone number (s	see page 10 of the instructions)
•	5, 4,1 <b>4</b> 61,661 (61,7 6 25		,				. •
1111	ll WEST 95TH S	STREET NO. 204				(91	3) 307-0910
	town, state, and ZIP c			····-		C If exemption applicati	ion is
only of	town, otato, and en					pending, check here	<b>.</b>
OVEE	RLAND PARK, KS	66214				D 1 Foreign organizati  2. Foreign organizati	
	eck type of organiza	<del></del>	c)(3) exempt private for	undation		85% test, check he	ere and attach
$\overline{}$	* -		Other taxable pri		<b>50</b>	computation •	
		nexempt chantable trust	unting method X C			E if private foundation s	
	ir market value of all	, C		asn Acc	ruai	under section 507(b)(	
	year (from Part II, co		ther (specify) column (d) must be or	cach hagie l		F If the foundation is in	_ 1
		<del></del>	· · · · · · · · · · · · · · · · · · ·	l Casii basis j		under section 507(b)(	(1)(B), check here
rart	Analysis of Reve	nue and Expenses (The columns (b), (c), and (d)	(a) Revenue and	(b) Net inve	stment	(c) Adjusted net	(d) Disbursements for chantable
	may not necessarily	equal the amounts in	expenses per books	incom		ıncome	purposes
	column (a) (see pag	ge 11 of the instructions))					(cash basis only)
1	Contributions, gifts, grants,	etc , received (attach schedule) .	0.				<u></u>
2		foundation is not required to					
3		temporary cash investments	825.		825.		ATCH 1
4	Dividends and intere	st from securities	99,399.	9	9,399.		ATCH 2
5 a	Gross rents						
Ŀ	Net rental income or (lo	ss)		- 8	RECE	WED	
	Net gain or (loss) from s	sale of assets not on line 10	-17,462.			JU	-1
t	Gross sales price for all assets on line 6a	1,695,974.		8	ALIC OF	2012	
6 a	assets of time on	me (from Part IV, line 2)		8	AUG Z	7017	-
8	· -	al gain					
9		s			<b>OGDE</b>	N. UT	
	Gross sales less returns	; l		<u> </u>			-
	and allowances • • • • Less Cost of goods sol	1 -				-	
	=	(attach schedule)				<del> </del>	·· · =
		schedule)					_
11		rough 11	82,762.	10	0,224.		
1			0.				
13		s, directors, trustees, etc	52,000.				52,00
14	• •	nes and wages	544.				54
15		oyee benefits	318.		159.	0.	15
16 a		hedule) ATCH 3	13,952.		6,976.	0.	6,97
	• •	ach schedule) ATCH 4	28,185.		4,585.	0.	3,60
٩	·	es (attach schedule) . * .	20,105.		4,000.	·	3,60
17	Interest		4 004		700	<del></del>	3 07
18	Taxes (attach schedule)	) (see page 14 of the instructions)* *	4,824.		729.		3,97
19	Depreciation (attach	schedule) and depletion .					
20	Occupancy						
21	Travel, conferences,	and meetings					
22	Printing and publicati	ions					
23	Other expenses (atta	nch schedule) ATCH 7	4,395.		969.		3,42
24	Total operating and	administrative expenses.					
16 a 17 18 19 20 21 22 23 24	Add lines 13 through		104,218.	3	3,418.	0.	70,68
25	_	grants paid	299,400.				299,40
26		rsements Add lines 24 and 25	403,618.	3	3,418.	0.	370,08
27	Subtract line 26 from						
1		penses and disbursements	-320,856.				
i i		me (if negative, enter -0-)		6	6,806.		
		e (if negative, enter -0-)		·		<del></del>	
		ct Notice, see page 30 of th	e instructions	* AT	CH 5 Js	* ** ATCH 6	Form <b>990-PF</b> (201
1 000	88444S A10P		:21 PM V 10-8.			46710	PAG
	COTTAN WICE	-, -, 3.22		-		· <del></del> -	170

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Page 2

Į.	art II	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year
	all I	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	161,038.	150,013.	150,013.
	2	Savings and temporary cash investments	20,714.	36,538.	36,538.
	3	Accounts receivable			,
	1	Less allowance for doubtful accounts			,
	4	Piedges receivable		•	
	7	Less allowance for doubtful accounts			
	_				
	5	Grants receivable  Receivables due from officers, directors, trustees, and other		F	
	6	,,			
		disqualified persons (attach schedule) (see page 15 of the instructions)			
	7	Other notes and loans receivable (attach schedule)		1	
		Less allowance for doubtful accounts		·	<u> </u>
ţ	8	Inventones for sale or use			
Assets	9	Prepaid expenses and deferred charges		<del></del>	
Ą	10 a	Investments - U S and state government obligations (attach schedule) . *.*		394,879.	
	ь	Investments - corporate stock (attach schedule) ATCH 9	1,895,690.	1,488,634.	
	С	Investments - corporate bonds (attach schedule) ATCH 10	367,887.	639,046.	621,923.
	11	Investments - land, buildings, and equipment basis		•	-
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and			
		equipment basis Less accumulated depreciation (attach schedule) Other assets (describe			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
	'	instructions Also, see page 1, item I)	3,021,624.	2,709,110.	2,632,556.
_	17	Accounts payable and accrued expenses	0.	6,419.	
	18				•
co.		Grants payable			
labilities	19	Deferred revenue	,		
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia					
	22	Other liabilities (describe			
				C 410	
_	23	Total liabilities (add lines 17 through 22)	0.	6,419.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
Ses	24	Unrestricted		<del></del>	
ances	25	Temporanly restricted			
Bal	26	Permanently restricted			
_	ı	Foundations that do not follow SFAS 117,			
Ë		check here and complete lines 27 through 31. ► X			
or Fund	27	Capital stock, trust principal, or current funds	6,306,000.	6,306,000.	
ţ	28	Paid-in or capital surplus, or land, bldg , and equipment fund	-3,284,376.	-3,603,309.	
Se	29	Retained earnings, accumulated income, endowment, or other funds			
Ä	30	Total net assets or fund balances (see page 17 of the			
Net Assets		instructions)	3,021,624.	2,702,691.	•
	31	Total liabilities and net assets/fund balances (see page 17			-
		of the instructions)	3,021,624.	2,709,110.	
E	art II			· · · · · ·	
		net assets or fund balances at beginning of year - Part		must agree with	
-				i i	3,021,624.
2		r amount from Part I, line 27a			-320,856.
		r increases not included in line 2 (itemize) ATTACHI	MENT 11	3	2,015.
		lines 1 2 and 3		<del>-</del>	2,702,783.
		eases not included in line 2 (itemize) ATTACHI	 MFNT 12	5	92.
		I net assets or fund balances at end of year (line 4 minus line	<b></b>	<del></del>	2,702,691.
<u>~</u>	iota	**ATCH 8	<u>σ, ταιτι, ωιαιπητύ), ι</u>		Form <b>990-PF</b> (2010)
		AICH 0			. 5 555 1 1 (2010)

G	art IV Capital Gains	and Losses for Tax on Inv	estment Income			
		d describe the kind(s) of property sold (enck warehouse, or common stock, 200 s		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
12	SEE PART IV SCHE	DULE				
_	b					
_	<u> </u>			<u> </u>		
_(	d			ļ <u>.</u>		
_6	<del></del>		<del></del>		<u> </u>	<u> </u>
	(e) Gross sales pnce		(h) Gain or (loss) (e) plus (f) minus (g)			
_6	1			ļ		
_t	)					
_(						
_(	1	<del></del>				
_		<u> </u>	<u> </u>	-	-	
_	Complete only for assets s	howing gain in column (h) and owned b	<u> </u>		Gains (Col (h) g	
_	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (ı), ıf any	COI	(k), but not less t Losses (from co	
_2	1			ļ <u>.</u>		
<u>_t</u>	)			ļ		
	;			<u> </u>		<del></del>
_	<u> </u>			<u> </u>		
_6	<u> </u>		gain, also enter in Part I, line 7	1		
2	Capital gain net income or (	2		-17,462.		
3		or (loss) as defined in sections 1222				
	-	ine 8, column (c) (see pages 13 and				
-		ne 8	<del> </del>	3		
_		1.4	uced Tax on Net Investment In ection 4940(a) tax on net investmen			
W			able amount of any year in the base on ot complete this part.	period?		Yes X No
1	Enter the appropriate amou	unt in each column for each year; se	ee page 18 of the instructions before	making a	ny entries.	
	(a)  Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution rat (col (b) divided by	
	2009	288,459.	3,002,325.	1		0.096079
_	2008	377,809.	2,885,098.			0.130952
	2007	388,499.	3,908,976.			0.099386
	2006	351,233.	4,217,453.			0.083281
	2005	392,440.	3,279,480.		-	0.119665
2	Total of line 1, column (d)			2		0.529363
		or the 5-year base period - divide th				
	•	ation has been in existence if less the	• • •	3		0.105873
4	Enter the net value of nonc	charitable-use assets for 2010 from	Part X, line 5	4	2,	942,545.
5	Multiply line 4 by line 3			5		311,536.
6	Enter 1% of net investment	t income (1% of Part I, line 27b)		6	· · · · · · · · · · · · · · · · · · ·	668.
7	Add lines 5 and 6			7		312,204.
8	Enter qualifying distribution		in Part VI, line 1b, and complete	8		370,083.
	Part VI instructions on pag		in rait vi, line to, and complete	uiat pait	uəniy a 170 (a)	a.c. 366 IUE

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

Form 990-PF (2010)

Х

8b

10

names and addresses

Х

χ

Form 9	90-PF (201	0) 48-1104136			Page <b>5</b>
Part	VII-A	Statements Regarding Activities (continued)			
		ne during the year, did the foundation, directly or indirectly, own a controlled entity within the			
••		of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		Х
12	_	nundation acquire a direct or indirect interest in any applicable insurance contract before			
12		7, 2008?	12		Х
13	•	nundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
		N1 / 7			
14	The book	address N/A s are in care of KAREN ROTH WB FAMILY OFFICE Telephone no 913-30	7-09	.0	
14	Located a	11111 WEST 95TH STREET, SUITE 204 OVERLAND PARK, KS ZIP+4 ▶ 66214			
4 5		947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 - Check here			TT
15		the amount of tax-exempt interest received or accrued during the year	• • •	,	
16		time during calendar year 2010, did the foundation have an interest in or a signature or other authority		Yes	No
10		nk, securities, or other financial account in a foreign country?	16	.03	X
		e 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter			
		of the foreign country			
Part	_	Statements Regarding Activities for Which Form 4720 May Be Required			
		n 4720 if any item is checked in the "Yes" column, unless an exception applies.	T	Yes	No
				163	140_
	•	e year did the foundation (either directly or indirectly)			
		ge in the sale of exchange, or leasing of property with a disqualified person.		1	
	` '	w money from, lend money to, or otherwise extend credit to (or accept it from) a			
		allined person?	1	, ,	
		sir goods, services, or radiities to (or accept them from) a disqualified person?	.		
		ompensation to, or pay of reinfourse the expenses of, a disqualified person			-
		fer any income or assets to a disqualified person (or make any of either available for			
		shellt of use of a disqualified person)			
		to pay money or property to a government official? (Exception. Check "No" if the		-	
		ation agreed to make a grant to or to employ the official for a period after  Yes X No	İ	· .	
		nation of government service, if terminating within 50 days )			
		swer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1b	-	
		3 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	-"		
	_	ions relying on a current notice regarding disaster assistance check here			
		foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1c	!	x
		corrected before the first day of the tax year beginning in 2010?	"		
		failure to distribute income (section 4942) (does not apply for years the foundation was a private		'	
		foundation defined in section 4942(j)(3) or 4942(j)(5))			
		of tax year 2010, did the foundation have any undistributed income (lines 6d and IIII) for tax year(s) beginning before 2010?			
		st the years			
		e any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
		to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	1		
		sted, answer "No" and attach statement - see page 22 of the instructions)	2b		!
	-	risions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
·	•				
3 a		undation hold more than a 2% direct or indirect interest in any business enterprise			
		e during the year?	1		
		did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or			
		d persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	•	oner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
		15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			_
		n had excess business holdings in 2010)	3ь		_
		undation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
		foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
		purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b	<u> </u>	_x
			om 99	0-PF	(2010)

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Form 990-PF (2010)		48-110	4136		Page 6
Part VII-B Statements Regarding Activities fo	r Which Form 47	20 May Be Requi	red (continued)		
5a During the year did the foundation pay or incur any amoun	t to				
(1) Carry on propaganda, or otherwise attempt to influence			. [ ] Yes [ _^ ] No	<b>'</b>	
(2) Influence the outcome of any specific public election (s			Van Y		
directly or indirectly, any voter registration drive?			· H. H.		
(3) Provide a grant to an individual for travel, study, or oth		•	TesNC	'	
(4) Provide a grant to an organization other than a chantal			T Vos X No		1
section 509(a)(1), (2), or (3), or section 4940(d)(2)? (se			ies nc	'	]
(5) Provide for any purpose other than religious, charitable	•		Ves X No	,	
purposes, or for the prevention of cruelty to children or b If any answer is "Yes" to 5a(1)-(5), did any of the trans				´	
Regulations section 53 4945 or in a current notice regard		·		5h	
Organizations relying on a current notice regarding disaste			<b>▶</b>		
c If the answer is "Yes" to question 5a(4), does the foundation					
because it maintained expenditure responsibility for the gra	· ·		Yes No	,	
If "Yes," attach the statement required by Regulations sect					
6a Did the foundation, during the year, receive any funds, dire		v promume			
on a personal benefit contract?			Yes X No	,	
b Did the foundation, during the year, pay premiums, directly				6b	x
If "Yes" to 6b, file Form 8870			• • • • • • • • • •		
7a At any time during the tax year, was the foundation a party	to a prohibited tax she	elter transaction?	Yes X No	,	-
b If "Yes," did the foundation receive any proceeds or have a	•			7b	
Part VIII Information About Officers, Directors				loyees,	
and Contractors  1 List all officers, directors, trustees, foundation mar	pagers and their co	mpensation (see pa	ge 22 of the instructi	ions).	<del></del>
(a) Name and address	(b) Title, and average	(c) Compensation (if not paid, enter	(d) Contributions to	(e) Expen	
(4) (4)	hours per week devoted to position	-0-)	and deferred compensation	otner all	owances
					^
ATTACHMENT 13		0.	0.		0
	<del> </del>				
	_				
2 Compensation of five highest-paid employees (other	er than those inclu	ded on line 1 - see p	age 23 of the instruc	tions).	
If none, enter "NONE."	I	· ·	(d) Contributions to		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		
	devoted to position		compensation		
		50 000	ا		0
ATTACHMENT 14	ļ	52,000.	0.		
	<del>                                     </del>				
otal number of other employees paid over \$50,000 .	<del></del>		Yes X No  Yes X No  A contract?  Yes X No Yes X No  Yes X No  A contract?  Yes X No Yes X No  Yes X No  Yes X No  A contract?  Yes X No Yes X No Yes X No  A contract?  Yes X No A contract?  O con		
the first of one of the order o	· · · · · · · · · · · · · · · · · · ·			Form QC	0 PE (2010)

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Part VIII	Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	n Managers, Highly Paid Emp	loyees,
3 Five	highest-paid independent contractors for professional services (see	page 23 of the instructions). If	none, enter "NONE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total numb	er of others receiving over \$50,000 for professional services	<u> </u>	NONE
Part IX-A	Summary of Direct Charitable Activities		
List the four organization	ndation's four largest direct charitable activities during the tax year include relevant stati s and other beneficianes served, conferences convened, research papers produced, etc	stical information such as the number of	Expenses
1 N/A			
2			
3		·	
4			
Part IX-B	Summary of Program-Related Investments (see page 24 of the	ne instructions)	
Describe the	two largest program-related investments made by the foundation during the tax year on lines 1	1 and 2	Amount
1 <u>N/A</u>			
2			
All other prop	gram-related investments. See page 24 of the instructions		

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3 NONE

Pa	art X Minimum Investment Return (All domestic foundations must complete this part. For see page 24 of the instructions)		ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, et	С,	
	purposes.		
а	Average monthly fair market value of secunties	. 1a	2,743,604.
þ	Average of monthly cash balances	. 1b	243,751.
С	Fair market value of all other assets (see page 25 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	2,987,355.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,987,355.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25 o	f · ·	<del></del>
		4	44,810.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,942,545.
6	Minimum investment return. Enter 5% of line 5	6	147,127.
_	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) pi	nvate operating	
	foundations and certain foreign organizations check here  and do not complete the		
1	Minimum investment return from Part X, line 6	· <del>-</del>	147,127.
	1 1	68.	
b			
_	Add been On and Oh		668.
3		• • •	146,459.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	146,459.
6	Deduction from distribution property of the medicine.	• • • • • • • • • • • • • • • • • • • •	140,433.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
•		7	146,459.
	line 1	••   •	140,439.
Pa	art XII Qualifying Distributions(see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes	-	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	.   1a	370,083.
b			0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.	s.	
	purposes		0.
3	Amounts set aside for specific charitable projects that satisfy the		
а		3a	0.
b			0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	370,083.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
-	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	668.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	369,415.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when	• •	
	qualifies for the section 4940(e) reduction of tax in those years	Calculating Wil	enier nie ivandation

Form 990-PF (2010)

48-1104136 Page 9 Part XIII Undistributed Income (see page 26 of the instructions) (b) (c) (d) Corpus Years prior to 2009 2009 2010 Distributable amount for 2010 from Part XI, 146,459. line 7 Undistributed income, if any, as of the end of 2010 a Enter amount for 2009 only . . . . . . . . b Total for prior years 20 08 ,20 07 ,20 06 Excess distributions carryover, if any, to 2010 230,920. From 2005 . . . . . . 145,160. From 2006 . . . . . . 194,856. c From 2007 234,910. d From 2008 . . . . . . 145,292. From 2009 . . . . . . 951,138. Qualifying distributions for 2010 from Part XII. 370,083. line 4 ▶ \$ \_\_\_\_\_ a Applied to 2009, but not more than line 2a b Applied to undistributed income of prior years (Election required - see page 26 of the instructions) c Treated as distributions out of corpus (Election required - see page 26 of the instructions) . . . . 146,459. d Applied to 2010 distributable amount 223,624. e Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2010 . (If an amount appears in column (d), the same amount must be shown in column (a) ) Enter the net total of each column as indicated below: 1,174,762. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Pnor years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . . . . . . . . d Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount - see page f Undistributed income for 2010 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the applied on line 5 or line 7 (see page 27 of the 230,920. Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a ..... 943,842. 10 Analysis of line 9 145,160. a Excess from 2006 . . . 194,856. b Excess from 2007 . . . 234,910. c Excess from 2008 . . . 145,292. d Excess from 2009 . . . 223,624. e Excess from 2010 . . .

Form 990-PF (2010)

48-1104136

	1 990-1 1 (2010)				(1014 6 6)	
	rt XIV Private Oper					NOT APPLICABLE
1 a	If the foundation has			t it is a private opera	ating	
	foundation, and the ruling				. ►	11
þ	Check box to indicate who	ether the foundation is a p	nvate operating foundatio	n described in section	4942(J)	(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Pnor 3 years	T	(e) Total
	justed net income from Part	(a) 2010	(b) 2009	(c) 2008	(d) 2007	,,,
	I or the minimum investment return from Part X for each					
	year listed					
ь	85% of line 2a				•	
_	Qualifying distributions from Part					
·	XII, line 4 for each year listed .					
d	Amounts included in line 2c not					
	used directly for active conduct				}	
e	of exempt activities					
_	directly for active conduct of					
	exempt activities Subtract line					ĺ
3	2d from line 2c Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying					
	under section					
b	4942(j)(3)(B)(i)				<del></del>	
-	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	line 6 for each year listed					
С	"Support" alternative test - enter			!		
	(1) Total support other than gross investment income					
	(interest, dividends, rents,					
	payments on secunties loans (section 512(a)(5)),					
	or royalbes)					
	(2) Support from general public and 5 or more					
	exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup-					
	port from an exempt organization					
	(4) Gross investment income	<u> </u>				
Pa	rt XV Supplement	ary Information (C	omplete this part	only if the founda	ation had \$5,000	or more in assets
	at any time o	during the year - se	e page 28 of the in	structions.)		
1	Information Regarding					
а	List any managers of	the foundation who h	ave contributed more	than 2% of the tota	contributions receive	ed by the foundation
	before the close of any	tax year (but only if tr	iey nave contributed i	nore trian \$5,000) (S	ee section 507(d)(2) )	
	ATTACHME	ENT 15				
b	List any managers of	the foundation who	own 10% or more of	the stock of a corpo	oration (or an equally	large portion of the
	ownership of a partner	ship or other entity) of	which the foundation	has a 10% or greater	ınterest.	
	N/A					
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarshi	p, etc., Programs:		
	Check here ► X If t	he foundation only r	makes contributions	to preselected charit	able organizations a	nd does not accept
	unsolicited requests f	or funds If the found	dation makes gifts, g	rants, etc (see page	28 of the instruction	ns) to individuals or
	organizations under of	her conditions, comple	ete items 2a, b, c, and	d		
а	The name, address, an	d telephone number of	the person to whom a	pplications should be a	ddressed	
	ATTACHME		·			
b	The form in which appli		nitted and information	and materials they sho	uld ınclude	
_	- · · · · · · · · · · · · · · · · · · ·			•		
	SEE STATEME	ENT 17				
-	Any submission deadling	<del></del>		· · · · · · · · · · · · · · · · · · ·		
•	, ary caprillodion decam					
	SEE STATEME	ENT 17				
	Any restrictions or la		such as by geogra	phical areas charital	ble fields kinds of	institutions or other
u	factors:	illiadions on awards,	caus as by geogra	piliodi diodo, Gidilla		
	SEE STATEME	เท <b>า</b> 17				

Part XV Supplementary Information (	continued)			
3 Grants and Contributions Paid Durin	o the Year or Appr	oved for F	Future Payment	,
Reapient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	
а Paid duпng the year				
- ,				
ATTACHMENT 17				
			İ	
		-		
				•
		<u> </u>		
Total	<u></u>	<del></del>	▶ 3a	299,400.
b Approved for future payment				
		ı		
			1	
Total		1	<u>▶</u> 3h	

Part XVI	-A Analysis of Income-Prode	ucing Act	ivities			
	amounts unless otherwise indicated	1	ated business income (b)	Excluded by	section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	n service revenue	Business code	Amount	Exclusion code	Amount	(See page 28 of the instructions)
a						
b			<u>-</u>			
c						
d						
е						···
f	·					
g Fees	and contracts from government agencies				· · · · · · · · · · · · · · · · · · ·	
2 Member	rship dues and assessments				-,	
	on savings and temporary cash investments			14	825.	
	ds and interest from secunties	ļ		14	101,430.	
5 Net rent	tal income or (loss) from real estate					
	t-financed property					
b Not	debt-financed property					
6 Net renta	al income or (loss) from personal property					
7 Other in	vestment income					
8 Gain or (	loss) from sales of assets other than inventory			18	-19,493.	
9 Net inco	ome or (loss) from special events					
10 Gross p	rofit or (loss) from sales of inventory					·
11 Other re	evenue a		·			<u> </u>
b MI	SCELLANEOUS INCOME					
c						
d						· <u> </u>
e						
12 Subtota	Add columns (b), (d), and (e)		<u> </u>		82,762.	
13 Total. A	add line 12, columns (b), (d), and (e)				13	82,762.
	neet in line 13 instructions on page 29 to				·	<u> </u>
Part XVI						<u></u>
Line No.	Explain below how each activity					
▼	accomplishment of the foundation	on's exemp	t purposes (other thar	n by providing	funds for such purpose	s) (See page 29 of the
	instructions.)				<del></del>	
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Part	XVII	Information Exempt Orga		Transfers 7	To and T	ransa	ctions	and R	elatior	ships	With I	Vonc		tabl
		e organization directle tion 501(c) of the Cations?			=	-		-	-			-	Yes	No
а	Transfe	rs from the reporting for	undation to a non	chantable exem	pt organizatio	on of								
	(1) Cas	sh										1a(1)		X
	(2) Oth	er assets										1a(2)	<u> </u>	X
ь	Other tr	ansactions												
		es of assets to a noncha										1b(1)	ļ	X
		chases of assets from a										1b(2)	ļ	Х
		ntal of facilities, equipme										1b(3)		Х
		mbursement arrangeme										1b(4)		X
	( <b>5</b> ) Loa	ns or loan guarantees										1b(5)		X
	• •	formance of services or	•	-								1b(6)		X
		of facilities, equipment,										_1c		X
		answer to any of		•		-								
		of the goods, other		-	•	-								
		n any transaction or	1											
(a) Lir	e no	(b) Amount involved	(c) Name of I	nonchantable exen	npt organizatio	n		scription of t	ransters, tr	ansactions	, and shan	ng arran	igemen	ts
		N/A	<del></del>				N/A				<del>.</del>			
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	describe	foundation directly ed in section 501(c) of complete the following	the Code (other t						-	-	Г	Ye	es 📝	No
		(a) Name of organization	) <u> </u>	(b) T	ype of organiza	ation			(c) D	escription o	f relations	nip		
				•				<del>.</del>						
			•											
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Use	Only	Firm's address ▶ 11			PARKWAY									

Form **990-PF** (2010)

Phone no 913.234.1000

LEAWOOD, KS

66211

### SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service **Capital Gains and Losses** 

► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2010

Employer identification number Name of estate or trust 48-1104136 THE TRIO FOUNDATION Note: Form 5227 filers need to complete onlyParts I and II Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (b) Date acquired (c) Date sold (e) Cost or other basis (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (d) Sales price the entire year Subtract (e) from (d) (mo , day, yr ) (see instructions) 1a **b** Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b 13,852. Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2009 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back 13,852. Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (f) Gain or (loss) for (e) Cost or other basis (b) Date acquired (c) Date sold (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (d) Sales price the entire year Subtract (e) from (d) (mo , day, yr ) (mo, day, yr) (see instructions) 6a -31,314. b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 8 Capital gain distributions Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2009 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, -31,314.Schedule D (Form 1041) 2010 For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

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77-46710

Page 2 Schedule D (Form 1041) 2010 Summary of Parts I and II (2) Estate's (1) Beneficianes' Part III (3) Total Caution: Read the instructions before completing this part. or trust's (see instr) 13,852. Net short-term gain or (loss) 14 Net long-term gain or (loss): -31,314.**b** Unrecaptured section 1250 gain (see line 18 of the wrksht) 14c Total net gain or (loss). Combine lines 13 and 14a . . . . . . . . ▶ 15 Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a) If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheets necessary **Capital Loss Limitation** Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of 3,000.) a The loss on line 15, column (3) or b \$3,000 16 Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the Capital Loss Carryove/Worksheeton page 7 of the instructions to figure your capital loss carryover Tax Computation Using Maximum Capital Gains Rates Form 1041 filers. Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero Caution: Skip this part and complete the worksheet on page 8 of the instructions if. Either line 14b, col (2) or line 14c, col (2) is more than zero, or Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero Form 990-T trusts. Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the worksheet on page 8 of the instructions if either line 14b, col (2) or line 14c, col (2) is more than zero Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) 17 18 Enter the smaller of line 14a or 15 in column (2) 18 Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) 19 20 20 If the estate or trust is filing Form 4952, enter the amount from line 4g, otherwise, enter -0-22 Subtract line 21 from line 20 If zero or less, enter -0-Subtract line 22 from line 17 If zero or less, enter -0-23 23 Enter the smaller of the amount on line 17 or \$2,300 24 25 Is the amount on line 23 equal to or more than the amount on line 24? Yes. Skip lines 25 and 26, go to line 27 and check the "No" box No. Enter the amount from line 23 26 Subtract line 25 from line 24 . . . . . . . . . 26 27 Are the amounts on lines 22 and 26 the same? Yes. Skip lines 27 thru 30; go to line 31 NO. Enter the smaller of line 17 or line 22 28 Enter the amount from line 26 (If line 26 is blank, enter -0-) Subtract line 28 from line 27 29 30 Multiply line 29 by 15% (.15) Figure the tax on the amount on line 23 Use the 2010 Tax Rate Schedule for Estates and Trusts 31 31 32 Figure the tax on the amount on line 17 Use the 2010 Tax Rate Schedule for Estates and Trusts Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule

Schedule D (Form 1041) 2010

### **SCHEDULE D-1** (Form 1041)

Continuation Sheet for Schedule D
(Form 1041)

► See instructions for Schedule D (Form 1041).

OMB No 1545-0092

Department of the Treasury Internal Revenue Service

► Attach to Schedule D to list additional transactions for lines 1a and 6a.

Name of estate or trust

THE TRIO FOUNDATION

Employer identification number 48-1104136

Short-Term Capital Gains and Losses - Assets Held One Year or Less  (b) Date (c) Date (d) Sales pince (e) Cost or other basis								
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss Subtract (e) from (			
UBLICLY TRADED								
INVESTMENTS - ST			399,396.	385,544.	13,85			
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1b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 1b . For Paperwork Reduction Act Notice, see the Instructions for Form 1041. JSA 0F12211000 88444S A10P 8/9/2012

Schedule D-1 (Form 1041) 2010

13,852.

Schedule D-1 (Form 1041) 2010

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side Employer identification number Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (d) Sales pnce (see page 4 of the (e) Cost or other basis (see page 4 of the instructions) (c) Date sold (mo , day, yr ) (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (f) Gain or (loss) Subtract (e) from (d) acquired (mo, day, yr) instructions) 6a PUBLICLY TRADED 1,309,042 INVESTMENTS - LT 1,294,546. -14,496. LT CAPITAL GAINS DIVIDENDS 2,032. 2,032. SUSPENSE GAIN 09/30/2011 18,850. -18,850. 6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b . . . . . . . . . . . . -31,314.

JSA 0F1222 1 000 Schedule D-1 (Form 1041) 2010

Page 2

#### THE TRIO FOUNDATION

FORM 990-PF - PART IV

48-1104136

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME Date Date sold Kind of Property Description acquired Depreciation allowed/ FMV Gross sale Cost or Adj basis Excess of Gain pnce less FMV over other as of as of or allowable 12/31/69 adı basıs (loss) expenses of sale basis 12/31/69 PUBLICLY TRADED INVESTMENTS - ST VAR VAR 399,396. 385,544. 13,852. PUBLICLY TRADED INVESTMENTS - LT VAR VAR 1,294,546. 1,309,042. -14,496. LT CAPITAL GAINS DIVIDENDS VAR VAR 2,032. 2,032. SUSPENSE GAIN 09/30/2011 VAR 18,850. -18,850. -17,462.

- INTEREST ON TEMPORARY CASH INVESTMENTS PART I FORM 990PE,

THE TRIO FOUNDATION

825. NET INVESTMENT INCOME 825. REVENUE AND EXPENSES PER BOOKS VARIOUS SOURCES DESCRIPTION

825.

825.

TOTAL

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PAGE 20

ATTACHMENT 1

PAGE 21

ATTACHMENT 2

ATTACHMENT 2

- DIVIDENDS AND INTEREST FROM SECURITIES PART I FORM 990PE,

	REVENUE	
	AND	NET
	EXPENSES	INVESTMENT
DESCRIPTION	PER BOOKS	INCOME
VARIOUS SOURCES	.99,399.	668'66

99,399.

99,399.

99,399.

TOTAL

ATTACHMENT 3 77-46710

FORM 990PF, PART I - LEGAL FEES

CHARITABLE <u>PURPOSES</u>	159.	159.
ADJUSTED NET INCOME		0.
NET INVESTMENT INCOME	159.	159.
REVENUE AND EXPENSES PER BOOKS	318.	318.
		TOTALS
DESCRIPTION	LEGAL FEES	

PAGE 23

FEES
ACCOUNTING
1
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PART
990PF,
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CHARITABLE PURPOSES	. 976.	6,976.
ADJUSTED NET INCOME	,	0
NET INVESTMENT INCOME	6,976.	6,976.
REVENUE AND EXPENSES PER BOOKS	13,952.	13,952.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

THE TRIO FOUNDATION

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CHARITABLE <u>PURPOSES</u>	3,600.	3,600.
NET INVESTMENT INCOME	24,585.	24,585.
REVENUE AND EXPENSES PER BOOKS	3,600. 24,585.	28,185.
DESCRIPTION	CONSULTING FEES INVESTMENT MANAGEMENT FEES	TOTALS

CHARITABLE <u>PURPOSES</u>	3,978.	3,978.
NET INVESTMENT INCOME	729.	729.
REVENUE AND EXPENSES PER BOOKS	3,978. 117. 729.	4,824.
DESCRIPTION	PAYROLL TAXES FEDERAL EXCISE TAXES FOREIGN TAX WITHHOLDING	TOTALS

THE TRIO FOUNDATION

ATTACHMENT 7

FORM 990PF, PART I - OTHER EXPENSES	REVENUE AND	EXPENSES INVES	PER BOOKS INC	775.	. 696	1,119.	1,532.
			DESCRIPTION	POSTAGE / DELIVERY	BANK FEES	UTILITIES / PHONE	INSURANCE

	INVESTMENT			.696				090
AND	EXPENSES	PER BOOKS	775.	.090	1,119.	1,532.		4,395.
							( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	TOTALS
			RY		<b>н</b> )			

CHARITABLE PURPOSES 775.

1,119. 1,532.

3,426.

ATTACHMENT 8	ENDING <u>FMV</u>	76,404. 0. 353,375. 429,779.	
ATTAC	ENDING BOOK VALUE	71,843. 0. 323,036. 394,879.	
FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS	DESCRIPTION	RBC DAIN RAUSCHER OPPENHEIMER JP MORGAN US OBLIGATIONS TOTAL	

ENDING FMV

BOOK VALUE ENDING

- CORPORATE STOCK PART FORM 990PF,

KINDER MORGAN ENERGY PARTNERS NUSTAR ENERGY LP ENERGY TRANSFER PARTNERS LP ENTERPRISE PRODUCTS PARTNERS ONEOK PARTNERS LP RBC DAIN RAUSCHER DESCRIPTION OPPENHEIMER JP MORGAN UBS

403, 490. 7, 833. 8, 913. 8, 137. 1, 307. 5, 082. 957,950 446,006. 9,927. 9,570. 8,532. 1,731. . 1,006,708.

Ö

PLAINS ALL AMERICAN PIPELINE

1,394,303.

1,488,634.

ത

DESCRIPTION	RBC DAIN RAUSCHER OPPENHEIMER JP MORGAN

ENDING	OK VALUE
ENL	BOOK

ENDING FMV

66,567.	72,479.
2	-

551,200. 0. 70,723.

TOTALS

639,046.

621,923.

77-46710

ATTACHMENT 10

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION AMOUNT

2,015. BOOK/TAX INCOME DIFFERENCE

> 2,015. TOTAL

48-1104136

ATTACHMENT 12

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

AMOUNT DESCRIPTION

PTP SALE BASIS ADJUSTMENT 92.

92. TOTAL

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	CERS, DIRECTORS, AND TRUSTEES		ATTACH	ATTACHMENT 13	
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES	
IRWIN BLITT 11111 WEST 95TH STREET, SUITE 204 OVERLAND PARK, KS 66214	TRUSTEE 0.00	.0		· o	
RITA BLITT 11111 WEST 95TH STREET, SUITE 204 OVERLAND PARK, KS 66214	TRUSTEE 0.00	·	.0	0.	
CHLEA BLITT 11111 WEST 95TH STREET, SUITE 204 OVERLAND PARK, KS 66214	TRUSTEE 10.00	.0	.0	.0	
	GRAND TOTALS	0	0	0	

PART VIII

990PF,

- COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

ATTACHMENT 14

EXPENSE ACCT AND OTHER ALLOWANCES	.0	0			
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	0			
COMPENSATION	52,000.	52,000.			
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	GRANTS DIRECTOR 40.00	TOTAL COMPENSATION			
NAME AND ADDRESS	LYDA BEARDSLEY 1069 LAS GALLINAS AVE SAN RAFAEL, CA 94903				

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

IRWIN BLITT RITA BLITT

48-1104136

ATTACHMENT 16

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

SEE STATEMENT 17

The TRIO Foundation 48-1104136



Form 990 - PF Part XV, line 2, Supplementary Information

The Foundation is specifically targeting its contributions to organizations which provide services for economically disadvantaged children in the San Francisco Bay Area. However, the Foundation will consider contributions to other organizations in other areas at its own discretion.

## APPLICATION PROCEDURE

Each year the foundation awards approximately twenty grants of \$5,000 to \$10,000 in two funding cycles.

The postmark deadlines for grant applications are:

February Ist for a June decision August Ist for a December decision

To apply, please send a letter, no longer than one page, outlining the purpose for which you request funding. There is no application form; the letter is your application. Please include a one sentence summary of your proposed project. The letter should address these basic questions:

- What is the significance of the issue you seek to address and how does it affect young children and their families?
- What are the changes you seek to bring about?
- What project are you proposing to Trio and approximately how much funding are you requesting for it?
- How will this project bring about the changes you seek?

Applicants whose projects best match our funding priorities will be asked to submit a longer proposal.

Send application letters to:

TRIO Foundation 1563 Solano Avenue, Box # 174 Berkeley, CA 94707 510.527.4605

NAME OF ORGANIZATION	ADDRESS	TOTAL
ALLIANCE FOR CHILDHOOD	P O BOX 444 COLLEGE PARK, MD 20741	\$ 10,000 00
BANANAS, INC	5232 CLAREMONT AVE OAKLAND, CA 94518	4,000 00
CALIFORNIA CHILD CARE RESOURCE & REFERRAL	111 NEW MONTGOMERY ST 7TH FL SAN FRANCISCO, CA 94105	10,000 00
CANTARE CON VIVO	1611 TELEGRAPH AVE, SUITE 801 OAKLAND, CA 94612	15,000 0
CENTER FOR EARLY INTERVENTION ON DEAFNESS	1035 GRAYSON ST BERKELEY, CA 94710	10,000 0
CENTER FOR ECOLITERACY	2150 ALLSTON WAY, SUITE 270 BERKELEY, CA 94704	5,000 0
CHILDREN'S HOSPITAL & RESEARCH CENTER	747 52ND STREET OAKLAND, CA 94609	10,000 0
COMMUNITY INITIATIVES	354 PINE ST., SUITE 700 SAN FRANCISCO, CA 94104	5,000 0
COMMUNITY WORKS WEST	1649 SAN PABLO AVE BERKELEY, CA 94702	15,000 0
CONTRA COSTA CHILD CARE COUNCIL	1035 DETROIT AVE CONCORD, CA 94518	4,000 0
EARTH ISLAND INSTITUTE	2301 BROADWAY, SUITE B OAKLAND, CA 94612	200 0
ETM-BAY AREA, INC.	299 PRECITA AVE SAN FRANCISCO, CA 94110	5,000 0
FOUNDATION CENTER	79 FIFTH AVE NEW YORK, NEW YORK 10003	1,000 0
HABITOT CHILDREN'S MUSEUM	1563 SOLANO AVE PMB 326 BERKELEY, CA 94707	6,550 0
HOOKED ON NATURE	4848 SAN FELIPE ROAD #150-230 SAN JOSE, CA 95135	10,000 0
LOTUS BLOOM CHILD & FAMILY CENTER	2008 PARK BLVD OAKLAND, CA 94606	8,450 0
OUR FAMILY COALITION	870 MARKET ST , SUITE 872 SAN FRANCISCO, CA 94102	10,000 0
OXFORD SCHOOL PTA	1130 OXFORD STREET BERKELEY, CA 94707	4,000 0
PASSAGEWORKS INSTITUTE	2355 CANYON, SUITE 104 BOULDER, CO 80302	4,700 0
RAISING A READER	470 THIRD STREET, SUITE 102 SAN FRANCISCO, CA 94107	15,000 0
SAFE PASSAGES	250 FRANK H OGAWA PLAZA, STE 6306 OAKLAND, CA 94612	1,500 (
TOTAL GRANTS		\$154,400 (
FUNDING EXCHANGE	666 BROADWAY, 5TH FLOOR NEW YORK, N.Y. 10012	\$100,000
PEACE DEVELOPMENT FUND	P O. BOX 1280 AMHERST, MA 01004-1280	35,000 (
WOMENS RIGHTS INTERNATIONAL/TIDES CENTER	PO BOX 4275	10,000 (
TOTAL DONATIONS	ALBUQUERQUE, NM 87196 -	\$145,000
GRAND TOTAL		\$299,400

48-1104136

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RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

CHARITABLE CONTRIBUTION

PURPOSE OF GRANT OR CONTRIBUTION

299,400.

AMOUNT

ATTACHMENT 17

SEE STATEMENT 18

RECIPIENT NAME AND ADDRESS

NONE 501 (C) (3)

TOTAL CONTRIBUTIONS PAID

299,400

PAGE 36 ATTACHMENT 17

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YEAR ENDING 9/30/11		
NAME OF ORGANIZATION	ADDRESS	TOTAL
ALLIANCE FOR CHILDHOOD	P O BOX 444 COLLEGE PARK, MD 20741	\$ 10,000 00
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CHILDREN'S HOSPITAL & RESEARCH CENTER	747 52ND STREET OAKLAND, CA 94609	10,000 00
COMMUNITY INITIATIVES	354 PINE ST , SUITE 700 SAN FRANCISCO, CA 94104	5,000 00
COMMUNITY WORKS WEST	1649 SAN PABLO AVE BERKELEY, CA 94702	15,000 00
CONTRA COSTA CHILD CARE COUNCIL	1035 DETROIT AVE CONCORD, CA 94518	4,000 00
EARTH ISLAND INSTITUTE	2301 BROADWAY, SUITE B OAKLAND, CA 94612	200 00
ETM-BAY AREA, INC	299 PRECITA AVE SAN FRANCISCO, CA 94110	5,000 00
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WOMENS RIGHTS INTERNATIONAL/TIDES CENTER	PO BOX 4275	10,000 00
TOTAL DONATIONS	ALBUQUERQUE, NM 87196	\$145,000 00
GRAND TOTAL		\$299,400 00

(Rev January 2011)

Department of the Treasury

# Application for Extension of Time To File an **Exempt Organization Return**

OMB No 1545-1709

File a separate application for each return. Internal Revenue Service X | • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Part | Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Employer identification number Name of exempt organization Type or THE TRIO FOUNDATION 48-1104136 print Number, street, and room or suite no. If a P.O. box, see instructions. File by the due date for 11111 WEST 95TH STREET NO. 204 filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions return See instructions OVERLAND PARK, KS 66214 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) Return Application **Application** Return Is For Code is For Code 01 Form 990-T (corporation) 07 Form 990 Form 1041-A 02 Form 990-BL 80 Form 990-EZ 03 Form 4720 09 Form 5227 Form 990-PF 04 10 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 8870 Form 990-T (trust other than above) 06 12 The books are in the care of ► KAREN ROTH WB FAMILY OFFICE Telephone No ▶ 913 307-0910 FAX No. ▶ • If the organization does not have an office or place of business in the United States, check this box If this is If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 05/15, 20 12, to file the exempt organization return for the organization named above. The extension is for the organization's return for calendar year 20 or 10/01 , 2010 , and ending ► X tax year beginning 09/30 , 20 11 If the tax year entered in line 1 is for less than 12 months, check reason Initial return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 700. nonrefundable credits. See instructions 3a \$ b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 0. 3b \$ c Balance Due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS 700. (Electronic Federal Tax Payment System) See instructions. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions For Paperwork Reduction Act Notice, see Instructions. Form 8868 (Rev 1-2011)

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