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Form **990**
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047
2011
Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization TRIGG - CM RUSSELL FOUNDATION INC Doing Business As CM RUSSELL MUSEUM Number and street (or P O box if mail is not delivered to street address) Room/suite 400 13TH STREET NORTH City or town, state or country, and ZIP + 4 GREAT FALLS, MT 59401 F Name and address of principal officer JOE MASTERSON 400 13TH STREET NORTH GREAT FALLS, MT 59401	D Employer identification number 81-6003526 E Telephone number (406) 727-8787 G Gross receipts \$ 3,695,450
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (Insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number
J Website: WWW CMRUSSELL ORG		L Year of formation 1951 M State of legal domicile MT

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE MISSION OF THE TRIGG-C M RUSSELL FOUNDATION, INC (D B A THE C M RUSSELL MUSEUM) IS TO COLLECT, PRESERVE, RESEARCH, INTERPRET AND EDUCATE ON THE ART AND LIFE OF CHARLES M RUSSELL, THE ART AND LIFE OF HIS CONTEMPORARIES, AND THE ART OF PRECEDING AND ENSUING GENERATIONS THAT DEPICTS AND FOCUSES ON THE CULTURE, LIFE AND COUNTRY OF RUSSELL'S WEST		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	46
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	46
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	46
	6 Total number of volunteers (estimate if necessary)	6	184
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	9,750
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0
Revenue		Prior Year	Current Year
	8 Contributions and grants (Part VIII, line 1h)	833,224	1,156,145
	9 Program service revenue (Part VIII, line 2g)	729,560	695,045
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	115,744	228,443
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	49,204	176,153
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,727,732	2,255,786
Expenses			
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	991,106	1,094,852
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) <u>136,975</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,244,604	1,355,400
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	2,235,710	2,450,252
	19 Revenue less expenses Subtract line 18 from line 12	-507,978	-194,466
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	9,910,846	9,597,172
	21 Total liabilities (Part X, line 26)	212,634	270,584
	22 Net assets or fund balances Subtract line 21 from line 20	9,698,212	9,326,588

Part II Signature Block

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

Sign Here	***** Signature of officer	2012-11-13 Date	
	CARRIE JENSEN DIRECTOR Type or print name and title		
Paid Preparer's Use Only	Preparer's signature <u>RICHARD REISIG</u>	Date	Check if self-employed <input type="checkbox"/> Preparer's taxpayer identification number (see instructions) P00185761
	Firm's name (or yours if self-employed), address, and ZIP + 4 ANDERSON ZURMUEHLEN & CO PC 21 10TH STREET SOUTH GREAT FALLS, MT 59401		EIN <u>81-0385940</u> Phone no <u>(406) 727-0888</u>

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III Yes No

1 Briefly describe the organization's mission

THE MISSION OF THE TRIGG-C M RUSSELL FOUNDATION, INC (D B A THE C M RUSSELL MUSEUM) IS TO COLLECT, PRESERVE, RESEARCH, INTERPRET AND EDUCATE ON THE ART AND LIFE OF CHARLES M RUSSELL, THE ART AND LIFE OF HIS CONTEMPORARIES, AND THE ART OF PRECEDING AND ENSUING GENERATIONS THAT DEPICTS AND FOCUSES ON THE CULTURE, LIFE AND COUNTRY OF RUSSELL'S WEST

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

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 1,061,267 including grants of \$) (Revenue \$ 811,270)
 COLLECTIONS & EXHIBITIONS IN 2011, 34,314 PEOPLE VISITED THE C M RUSSELL MUSEUM, AN INCREASE FROM THE PRIOR YEAR THE RUSSELL WORKS CONTINUE TO BE DISPLAYED IN CHRONOLOGICAL ORDER THE MUSEUM DISPLAYED AUCTION ART FOR THE MUSEUM'S MAJOR EVENT, WHICH IS KNOWN AS THE RUSSELL OTHER EXHIBITIONS INCLUDED THE HOOVER FAMILY COLLECTION, GREAT PLAINS AMERICA'S LINGERING WILD THE PHOTOGRAPHY OF MICHAEL FORSBERG, THE RENNER COLLECTION A TRIBUTE TO GINGER K AND FREDERIC G RENNER, AND ANDY WARHOL LEGENDS FROM THE COCHRAN COLLECTION THE MUSEUM CONTINUED THE EXTENSIVE PERMANENT EXHIBITION CALLED THE BISON AMERICAN ICON, HEART OF PLAINS INDIAN CULTURE, WHICH OPENED IN DECEMBER 2008 CONSERVATION EFFORTS CONTINUED IN MANY AREAS, INCLUDING NATIVE AMERICAN ARTIFACTS AND CLOTHING THAT IS INCLUDED IN THE BISON EXHIBITION STAFF ALSO PARTICIPATED IN THE PREPARATION FOR ROMANCE MAKER THE WATERCOLORS OF C M RUSSELL, WHICH WILL OPEN AT THE MUSEUM IN JUNE 2012 THE COLLECTIONS AND EXHIBITIONS AREA DIRECTLY SUPPORTS THE MUSEUM'S MISSION

4b (Code) (Expenses \$ 446,935 including grants of \$) (Revenue \$)
 MUSEUM SERVICES THE PURPOSE OF THE TRIGG-RUSSELL FOUNDATION, INC IS TO OPERATE AND MAINTAIN THE C M RUSSELL MUSEUM, WHILE FOLLOWING THE MISSION OF THE ORGANIZATION THE MUSEUM REQUIRES SECURITY ON-SITE DURING ALL OPEN HOURS MUSEUM STAFF MAINTAINS THE GROUNDS, BUILDING, AND EQUIPMENT, AS WELL AS ENSURES THE SAFETY OF THE MUSEUM COLLECTION AND THE VISITORS MUSEUM SERVICES ALSO INCLUDE ADMISSIONS, THE ADMINISTRATIVE STAFF, MEMBERSHIP AND DEVELOPMENT, EVENT COORDINATION, AND THE MUSEUM STORE ALL OF THESE ARE ESSENTIAL TO CARRYING OUT THE MISSION OF THE MUSEUM AND EACH COMPONENT MUST WORK WITH THE OTHER TO BE SUCCESSFUL IN THE MUSEUM'S ENDEAVORS

4c (Code) (Expenses \$ 118,251 including grants of \$) (Revenue \$ 273)
 PUBLIC RELATIONS THE MUSEUM CONTINUED PUBLIC RELATIONS EFFORTS IN ORDER TO SUSTAIN VISITATION, MEMBERSHIP, VOLUNTEERS, AND FUNDRAISING EFFORTS PUBLIC RELATIONS ALSO INCLUDE OFFERING FREE PROGRAMS TO RESIDENTS AS A WAY OF INVITING THEM TO SEE WHAT THE MUSEUM INCLUDES, AND THE DEPTH AND RANGE OF THE INSTITUTION'S ROLE IN THE COMMUNITY SUCH EXAMPLES INCLUDE THE CHAUTAUQUA, SADDLES & SPURS, AND THE HOLIDAY OPEN HOUSE THE MUSEUM ALSO PROVIDES SOME EVENING EXHIBIT OPENINGS TO THE COMMUNITY FREE OF CHARGE AS A WAY TO ENCOURAGE MUSEUM PARTICIPATION STAFF ENGAGED NEW METHODS OF REACHING POTENTIAL AUDIENCES AND SPONSORED NEW EVENTS SUCH AS COFFEE, CREPES, AND CANVAS, WHICH WAS WELL RECEIVED PUBLIC RELATIONS AND MARKETING ARE AN INTEGRAL PART OF INFORMING THE PUBLIC ABOUT THE MUSEUM AND THE PROGRAMMING THAT IS AVAILABLE

(Code) (Expenses \$ 66,757 including grants of \$) (Revenue \$ 20,320)
 EDUCATION & PUBLIC PROGRAMS THE MUSEUM CONTINUED WITH STANDARD EDUCATIONAL PROGRAMS, INCLUDING THE FIFTH GRADE TOURS FOR CITY AND COUNTY STUDENTS WHOSE ESSAYS ARE FEATURED AT A SPECIAL PROGRAM CALLED SUNDAY SAMPLER (COLLABORATIVE EFFORT WITH THE LOCAL CONSORTIUM), AND RUSSELL ROUNDUP DAY CAMPS FAMILY PROGRAMS INCLUDED SADDLES & SPURS, CHAUTAUQUA, NATIVE AMERICAN SCHOOL PROGRAMS, NATIVE AMERICAN FILM FESTIVAL, AND HOLIDAY OPEN HOUSE TOT'S TALES AND ART EXPLORERS FOR PRESCHOOL AND ELEMENTARY AGE KIDS, RESPECTIVELY, HAVE CONTINUED TO BE WELL-RECEIVED AND ATTENDED MANY EXHIBITIONS ALSO INCLUDED LECTURES AND EDUCATIONAL COMPONENTS, SUCH AS A PHOTOGRAPHY CLASS WITH MICHAEL FORSBERG, PLEIN AIR PAINT OUT CLASS, SILK SCREEN WORKSHOP, AND COFFEE, CREPES, AND CANVAS, WHICH PROVIDED AN OPPORTUNITY TO SEE ARTISTS AT WORK ON THE MUSEUM GROUNDS DAYCARE AND HOME SCHOOL GROUPS ATTEND EDUCATIONAL OFFERINGS AT THE MUSEUM AS WELL AS TAKE FIELD TRIPS TO EXPLORE THE DISCOVERY GALLERY THE EDUCATION AREA IS PART OF THE MUSEUM'S MISSION, WHICH STRIVES TO EDUCATE AND EXPOSE PEOPLE TO RUSSELL'S ART AND LIFE, AS WELL AS THE ART AND LIFE OF HIS CONTEMPORARIES

4d Other program services (Describe in Schedule O)
 (Expenses \$ 66,757 including grants of \$) (Revenue \$ 20,320)

4e Total program service expenses \$ 1,693,210

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i> <input checked="" type="checkbox"/>	Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? <input checked="" type="checkbox"/>	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>		No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i>		No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i> <input checked="" type="checkbox"/>		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II.</i> <input checked="" type="checkbox"/>	Yes	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i> <input checked="" type="checkbox"/>	Yes	
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i> <input checked="" type="checkbox"/>		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i> <input checked="" type="checkbox"/>	Yes	
11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> <input checked="" type="checkbox"/>	Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i> <input checked="" type="checkbox"/>		No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i> <input checked="" type="checkbox"/>		No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i> <input checked="" type="checkbox"/>		No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> <input checked="" type="checkbox"/>		No
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i> <input checked="" type="checkbox"/>		No
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i> <input checked="" type="checkbox"/>	Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i> <input checked="" type="checkbox"/>		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>		No
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Part I.</i>		No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? <i>If "Yes," complete Schedule F, Part II and IV.</i>		No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S? <i>If "Yes," complete Schedule F, Part III and IV.</i>		No
17 Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i>		No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>		No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>		No
20a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>		No
b If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements.		

Part IV Checklist of Required Schedules *(continued)*

<p>21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II . . .</i></p>	<p>21</p>	<p>No</p>
<p>22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III . . .</i></p>	<p>22</p>	<p>No</p>
<p>23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J . . .</i></p>	<p>23</p>	<p>Yes</p>
<p>24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25 . . .</i></p>	<p>24a</p>	<p>No</p>
<p>b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .</p>	<p>24b</p>	
<p>c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . .</p>	<p>24c</p>	
<p>d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .</p>	<p>24d</p>	
<p>25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I . . .</i></p>	<p>25a</p>	<p>No</p>
<p>b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I . . .</i></p>	<p>25b</p>	<p>No</p>
<p>26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II . . .</i></p>	<p>26</p>	<p>No</p>
<p>27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III . . .</i></p>	<p>27</p>	<p>No</p>
<p>28 Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)</p>		
<p>a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . .</i></p>	<p>28a</p>	<p>No</p>
<p>b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . .</i></p>	<p>28b</p>	<p>No</p>
<p>c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV . . .</i></p>	<p>28c</p>	<p>No</p>
<p>29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M . . .</i></p>	<p>29</p>	<p>Yes</p>
<p>30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M . . .</i></p>	<p>30</p>	<p>Yes</p>
<p>31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I . . .</i></p>	<p>31</p>	<p>No</p>
<p>32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II . . .</i></p>	<p>32</p>	<p>No</p>
<p>33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I . . .</i></p>	<p>33</p>	<p>No</p>
<p>34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 . . .</i></p>	<p>34</p>	<p>No</p>
<p>35a Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?</p>	<p>35a</p>	<p>No</p>
<p>b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2 . . .</i></p>	<p>35b</p>	<p>No</p>
<p>36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 . . .</i></p>	<p>36</p>	<p>No</p>
<p>37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI . . .</i></p>	<p>37</p>	<p>No</p>
<p>38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O . . .</p>	<p>38</p>	<p>Yes</p>

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question number, question text, and Yes/No columns. Rows include questions 1a through 14b regarding Form 1096, W-2G forms, employee reporting, foreign accounts, and charitable trusts.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (46), 1b (46), 2 (Yes), 3 (No), 4 (No), 5 (No), 6 (No), 7a (No), 7b (No), 8a (Yes), 8b (Yes), 9 (No).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a (No), 10b, 11a (Yes), 11b, 12a (Yes), 12b (Yes), 12c (Yes), 13 (Yes), 14 (Yes), 15a (Yes), 15b (Yes), 16a (No), 16b.

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

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

(A) Name and Title	(B) Average hours per week per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							294,717	0	20,329	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns 1a					
	b	Membership dues 1b	213,724				
	c	Fundraising events 1c					
	d	Related organizations 1d					
	e	Government grants (contributions) 1e	20,278				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	922,143				
	g	Noncash contributions included in lines 1a-1f \$ <u>31,573</u>					
	h	Total. Add lines 1a-1f ▶	1,156,145				
Program Service Revenue			Business Code				
	2a	THE RUSSELL	900099	573,256	573,256		
	b	ADMISSIONS AND TOURS	900099	114,883	114,883		
	c	EXHIBITIONS-OTHER MUSE	900099	6,906	6,906		
	d						
	e						
	f	All other program service revenue					
g	Total. Add lines 2a-2f ▶		695,045				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) ▶		113,379		113,379	
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties ▶		2,872		2,872	
	6a	(i) Real		(ii) Personal			
		Gross rents	24,627				
		Less rental expenses	494				
		Rental income or (loss)	24,133				
	d	Net rental income or (loss) ▶		24,133		24,133	
	7a	(i) Securities		(ii) Other			
		Gross amount from sales of assets other than inventory	1,256,941	44,145			
		Less cost or other basis and sales expenses	1,186,022	0			
		Gain or (loss)	70,919	44,145			
	d	Net gain or (loss) ▶		115,064		115,064	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18					
		a		2,670			
b		Less direct expenses b		0			
c	Net income or (loss) from fundraising events . . ▶		2,670		2,670		
9a	Gross income from gaming activities See Part IV, line 19						
	a						
	b	Less direct expenses b					
c	Net income or (loss) from gaming activities . . ▶						
10a	Gross sales of inventory, less returns and allowances						
	a		389,966				
	b	Less cost of goods sold b		253,148			
c	Net income or (loss) from sales of inventory . . ▶		136,818	136,818			
Miscellaneous Revenue		Business Code					
11a	ADVERTISING	511190	9,750		9,750		
b	VALUE CHANGE SPLIT-INT	900099	-90		-90		
c							
d	All other revenue						
e	Total. Add lines 11a-11d ▶		9,660				
12	Total revenue. See Instructions ▶		2,255,786	831,863	9,750	258,028	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	240,108		173,600	66,508
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	687,325	609,402	53,395	24,528
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	55,266	38,746	16,306	214
10	Payroll taxes	112,153	83,981	20,650	7,522
11	Fees for services (non-employees)				
a	Management				
b	Legal	4,585	1,139	3,446	
c	Accounting	12,763	3,171	9,592	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	17,273	201	17,037	35
g	Other	45,493	11,090	34,403	
12	Advertising and promotion	186,189	181,713	95	4,381
13	Office expenses	18,636	10,788	6,878	970
14	Information technology				
15	Royalties				
16	Occupancy	107,608	107,608		
17	Travel	27,137	20,738	6,399	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	245,229		245,229	
23	Insurance	53,125	53,125		
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	EXHIBIT RENTAL FEES	160,000	160,000		
b	PRINTING	62,939	47,842	1,773	13,324
c	MAINTENANCE	58,837	58,676	161	
d	MEALS & ENTERTAINMENT	57,142	50,765	371	6,006
e					
f	All other expenses	298,444	254,225	30,732	13,487
25	Total functional expenses. Add lines 1 through 24f	2,450,252	1,693,210	620,067	136,975
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	1,700	1	1,700
	2 Savings and temporary cash investments	499,020	2	679,813
	3 Pledges and grants receivable, net	167,596	3	124,028
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	205,505	8	177,955
	9 Prepaid expenses and deferred charges	104,985	9	88,878
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	8,347,598		
	b Less accumulated depreciation	3,854,164	10c	4,493,434
	11 Investments—publicly traded securities	4,179,318	11	3,980,212
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	53,578	15	51,152
16 Total assets. Add lines 1 through 15 (must equal line 34)	9,910,846	16	9,597,172	
Liabilities	17 Accounts payable and accrued expenses	132,854	17	246,834
	18 Grants payable		18	
	19 Deferred revenue	79,780	19	23,750
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	212,634	26	270,584
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	7,615,555	27	7,228,535
	28 Temporarily restricted net assets	859,221	28	825,449
	29 Permanently restricted net assets	1,223,436	29	1,272,604
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	9,698,212	33	9,326,588	
34 Total liabilities and net assets/fund balances	9,910,846	34	9,597,172	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,255,786
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,450,252
3	Revenue less expenses Subtract line 2 from line 1	3	-194,466
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9,698,212
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-177,158
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	9,326,588

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2011

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization
TRIGG - CM RUSSELL FOUNDATION INC

Employer identification number

81-6003526

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 **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?
 (ii) a family member of a person described in (i) above?
 (iii) a 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

Part II Support Schedule for Organizations Described in IRC 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV.) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						
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 501(c)(3) organization, check this box and **stop here** **Section C. Computation of Public Support Percentage**

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	
15 Public Support Percentage for 2010 Schedule A, Part II, line 14	15	
16a 33 1/3% support test—2011. 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—2010. If the organization did not check the 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—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization <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 IRC 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	1,587,425	2,562,314	938,649	833,224	987,217	6,908,829
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	650,233	553,286	603,276	499,925	504,849	2,811,569
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	2,237,658	3,115,600	1,541,925	1,333,149	1,492,066	9,720,398
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
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						0
c Add lines 7a and 7b						0
8 Public Support (Subtract line 7c from line 6)						9,720,398

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	2,237,658	3,115,600	1,541,925	1,333,149	1,492,066	9,720,398
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	104,408	81,045	62,528	162,459	140,788	551,228
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975				1,490		1,490
c Add lines 10a and 10b	104,408	81,045	62,528	163,949	140,788	552,718
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12)	2,342,066	3,196,645	1,604,453	1,497,098	1,632,854	10,273,116
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	94.620%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	95.600%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	5.380%
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	4.400%

- 19a 33 1/3% support tests—2011.** 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—2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 20 Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE A, PART IV, LIST OF UNUSUAL GRANTS ESTATE BEQUEST DATE 03/01/11 AMOUNT 168928

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOE MASTERSON CHAIR	1 00	X		X				0	0	0
JACK AMUNDSON DIRECTOR	1 00	X						0	0	0
HENRY D BEDFORD DIRECTOR	1 00	X						0	0	0
CHRISTINA HOOVER-BLACKWELL SECOND VICE-CHAIR	1 00	X		X				0	0	0
NORMAN I BOOK JR DIRECTOR	1 00	X						0	0	0
BRUCE CHRISTENSEN DIRECTOR	1 00	X						0	0	0
KELLY CLAY DIRECTOR	1 00	X						0	0	0
W LEE COFFEY DIRECTOR EMERITUS	1 00	X						0	0	0
WILLIAM COWAN DIRECTOR	1 00	X						0	0	0
LISA COWAN-HUESTIS DIRECTOR	1 00	X						0	0	0
J MICHAEL DADY DIRECTOR	1 00	X						0	0	0
IAN DAVIDSON DIRECTOR EMERITUS	1 00	X						0	0	0
TOM DECKER DIRECTOR	1 00	X						0	0	0
PHILIP DRESCHER DIRECTOR	1 00	X						0	0	0
JAMES FISH TREASURER	1 00	X		X				0	0	0
RANDY FOUTCH DIRECTOR	1 00	X						0	0	0
CHANNING HARTELIUS SECRETARY	1 00	X		X				0	0	0
GAIL HAYES-DAVIS DIRECTOR	1 00	X						0	0	0
WILLIAM HEALEY DIRECTOR EMERITUS	1 00	X						0	0	0
CHARLES M HUNTER DIRECTOR	1 00	X						0	0	0
MICHAEL INGRAM DIRECTOR	1 00	X						0	0	0
CARRIE JENSEN DIRECTOR	1 00	X						0	0	0
DAVID J KORDNER DIRECTOR	1 00	X						0	0	0
ROBERT E LEE DIRECTOR EMERITUS	1 00	X						0	0	0
KATIE MEREDITH DIRECTOR	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
BARBARA MOE DIRECTOR	1 00	X						0	0	0
VAN KIRKE NELSON MD DIRECTOR	1 00	X						0	0	0
NANCY PETERS DIRECTOR	1 00	X						0	0	0
TOM PETRIE DIRECTOR	1 00	X						0	0	0
B BYRON PRICE ACADEMIC MEMBER	1 00	X						0	0	0
WERNER QUASEBARTH DIRECTOR	1 00	X						0	0	0
ROBERT RASMUSSEN DIRECTOR	1 00	X						0	0	0
WILL ROEHM DIRECTOR	1 00	X						0	0	0
JOHN D ROGERS JR DIRECTOR	1 00	X						0	0	0
JAMES RYFFEL DIRECTOR	1 00	X						0	0	0
DAVID SOLBERG DIRECTOR	1 00	X						0	0	0
PATRICIA STEELE DIRECTOR EMERITUS	1 00	X						0	0	0
SARAH STEVENSON DIRECTOR	1 00	X						0	0	0
JIM STRAUSS DIRECTOR	1 00	X						0	0	0
WAYNE THARES DIRECTOR	1 00	X						0	0	0
ANNIE THOM DIRECTOR	1 00	X						0	0	0
CAROL THOMAS DIRECTOR	1 00	X						0	0	0
JESSIE VAN NESS DIRECTOR	1 00	X						0	0	0
JIM WALLACE DIRECTOR EMERITUS	1 00	X						0	0	0
SARA WALSH DIRECTOR	1 00	X						0	0	0
J STEVEN WHISLER FIRST VICE-CHAIR	1 00	X		X				0	0	0
DARRELL BEAUCHAMP EXECUTIVE DIRECTOR	40 00			X				140,864	0	13,365
SUSAN JOHNSON CHIEF OPERATIONS OFFICER	40 00			X				80,616	0	5,201
SARAH BURT CHIEF CURATOR	40 00			X				73,237	0	1,763

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2011

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization TRIGG - CM RUSSELL FOUNDATION INC

Employer identification number 81-6003526

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4: Total number at end of year, Aggregate contributions to (during year), Aggregate grants from (during year), Aggregate value at end of year.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply): Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of an historically importantly land area, Preservation of a certified historic structure.

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

Table with 2 columns: Description, Held at the End of the Year. Rows 2a-2d: Total number of conservation easements, Total acreage restricted by conservation easements, Number of conservation easements on a certified historic structure included in (a), Number of conservation easements included in (c) acquired after 8/17/06.

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1
(ii) Assets included in Form 990, Part X

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

a Revenues included in Form 990, Part VIII, line 1
b Assets included in Form 990, Part X

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

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

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

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

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

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

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

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

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

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

b If "Yes," explain the arrangement in Part XIV

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

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	3,324,057	3,263,974	3,152,090	3,410,042	
b Contributions	223,586	10,762	177,728	705,217	
c Investment earnings or losses	-81,689	86,272	517,957	-642,020	
d Grants or scholarships					
e Other expenditures for facilities and programs	157,488	29,169	567,493	292,859	
f Administrative expenses	8,786	7,782	16,308	28,290	
g End of year balance	3,299,680	3,324,057	3,263,974	3,152,090	

2 Provide the estimated percentage of the year end balance held as

- a** Board designated or quasi-endowment ▶ 55 680 %
- b** Permanent endowment ▶ 37 230 %
- c** Term endowment ▶ 7 090 %

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

	Yes	No
(i) unrelated organizations	3a(i)	No
(ii) related organizations	3a(ii)	No

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? **3b**

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		320,929		320,929
b Buildings		7,046,677	3,041,044	4,005,633
c Leasehold improvements				
d Equipment		979,992	813,120	166,872
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				4,493,434

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,255,786
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,450,252
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-194,466
4	Net unrealized gains (losses) on investments	4	-211,120
5	Donated services and use of facilities	5	33,843
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	119
9	Total adjustments (net) Add lines 4 - 8	9	-177,158
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-371,624

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

1	Total revenue, gains, and other support per audited financial statements	1	3,092,191
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-211,120
b	Donated services and use of facilities	2b	33,843
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	1,013,682
e	Add lines 2a through 2d	2e	836,405
3	Subtract line 2e from line 1	3	2,255,786
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12)	5	2,255,786

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

1	Total expenses and losses per audited financial statements	1	3,463,815
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	1,013,682
e	Add lines 2a through 2d	2e	1,013,682
3	Subtract line 2e from line 1	3	2,450,133
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	119
c	Add lines 4a and 4b	4c	119
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	2,450,252

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
DESCRIPTION OF HOW ORGANIZATION REPORTS CONSERVATION EASEMENTS	PART II, LINE 9	THE CONSERVATION EASEMENTS PROTECT CHARLES M RUSSELL'S HOME BUILT IN 1900 AND LOG STUDIO BUILT IN 1903 THESE BUILDINGS ARE LOCATED NEXT TO THE MUSEUM ITSELF, AND ARE OPEN FOR TOURS DURING MUSEUM HOURS THE CONSERVATION EASEMENTS ARE PART OF THE FOUNDATION'S PERMANENT ART COLLECTION, WHICH IS NOT REPORTED IN ITS REVENUE STATEMENT OR BALANCE SHEET PURSUANT TO SFAS 116
	PART III, LINE 1A	NOTE 11 TO THE FINANCIAL STATEMENTS PERMANENT ART COLLECTION THE FOUNDATION'S COLLECTIONS ARE MADE UP OF ART OBJECTS, PERSONAL BELONGINGS, AND HISTORICAL ARTIFACTS OF CHARLES M RUSSELL AND OTHERS WHICH ARE HELD FOR PUBLIC EXHIBITION, EDUCATION, OR RESEARCH IN FURTHERANCE OF PUBLIC SERVICE RATHER THAN FINANCIAL GAIN EACH OF THE ITEMS IS PROTECTED, KEPT UNENCUMBERED, CARED FOR, AND PRESERVED ACTIVITIES VERIFYING THEIR EXISTENCE AND ASSESSING THEIR CONDITION ARE PERFORMED CONTINUOUSLY PROCEEDS FROM SALES OF DE-ACCESSIONED COLLECTION ITEMS ARE USED TO ACQUIRE OTHER ITEMS FOR THE COLLECTION THE FOUNDATION HAS AN ADOPTED COLLECTIONS MANAGEMENT POLICY IN PLACE IN KEEPING WITH STANDARD MUSEUM PRACTICE, THE COLLECTIONS, WHICH WERE ACQUIRED VIA PURCHASES AND CONTRIBUTIONS, ARE NOT RECOGNIZED AS ASSETS ON THE STATEMENT OF FINANCIAL POSITION PURCHASES OF ARTWORK ARE RECORDED AS DECREASES IN UNRESTRICTED NET ASSETS OR TEMPORARILY RESTRICTED NET ASSETS IN THE YEAR OF PURCHASE, DEPENDING ON THE SOURCES OF FUNDS USED THE COLLECTION ITEMS ACQUIRED BY GIFT WERE VALUED BY THE DONORS AT \$1,808,200 AND \$273,500, RESPECTIVELY FOR THE YEARS ENDED DECEMBER 31, 2011, AND 2010, AND ARE NOT REFLECTED IN THE STATEMENT OF ACTIVITIES
	PART III, LINE 4	THE ORGANIZATION'S PERMANENT COLLECTIONS INCLUDE MORE THAN 12,000 OBJECTS SPANNING FROM ABOUT 1750 TO THE PRESENT PAINTINGS, DRAWINGS, ORIGINAL PRINTS, SCULPTURE, NATIVE AMERICAN ARTIFACTS, BOOKS, MANUSCRIPTS, IMPRINTS, MAPS, PHOTOGRAPHS, AND CORRESPONDENCE ALSO INCLUDED ARE TWO HISTORIC STRUCTURES, THE RUSSELL HOME AND STUDIO, BOTH OF WHICH INCLUDE HISTORIC AND PERIOD FURNISHINGS, TOOLS, EQUIPMENT, ART SUPPLIES, CLOTHING, AND OTHER APPROPRIATE COLLECTIONS THE COLLECTIONS RELATE TO THE CULTURE AND HISTORY OF THE AMERICAN WEST SIGNIFICANT PARTS OF THE FINE ART COLLECTION, ARTIFACT COLLECTION, AND RUSSELL STUDIO COLLECTION CONSIST OF OBJECTS CREATED BY, OWNED BY, AND/OR USED BUY CHARLES M RUSSELL THIS COLLECTION FURTHERS THE EXEMPT PURPOSE OF THE ORGANIZATION, WHICH IS TO COLLECT, PRESERVE, RESEACH, INTERPRET AND EDUCATE ON THE ART AND LIFE OF CHARLES M RUSSELL, THE ART AND LIFE OF HIS CONTEMPORARIES, AND THE ART OF PRECEDING AND ENSUING GENERATIONS THAT DEPICTS AND FOCUSES ON THE CULTURE, LIFE AND COUNTRY OF RUSSELL'S WEST
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE TRIGG - C M RUSSELL FOUNDATION, INC ENDOWMENT WAS ESTABLISHED TO SUPPORT THE MUSEUM FINANCES FOR A VARIETY OF PURPOSES THERE ARE THREE CATEGORIES OF ENDOWMENT FUNDS PERMANENT, TEMPORARILY RESTRICTED, AND BOARD DESIGNATED IN THE PERMANENT ENDOWMENT, DONORS HAVE PLACED CERTAIN RESTRICTIONS ON THEIR GIFTS THESE RESTRICTIONS INCLUDE OPERATIONS, EDUCATION AND ART THE FOUNDATION ALSO HAS BEEN THE BENEFICIARY OF CHARITABLE GIFT ANNUITIES THESE GIFTS ARE PERMANENTLY RESTRICTED AND THE FOUNDATION HAS A LIABILITY FOR THE ANNUITY PAYMENTS TO THE DONORS THE ENDOWMENT ALSO INCLUDES A TEMPORARILY RESTRICTED GIFT THAT IS RESTRICTED BASED ON TIME THE RESTRICTION WILL BE MET AUGUST 1, 2021 THE BOARD DESIGNATED ENDOWMENT INCLUDES FUNDS THAT WERE RECEIVED FROM DONORS WITHOUT RESTRICTIONS AND THE BOARD VOTED TO DESIGNATE THESE FUNDS TO BE SET ASIDE FOR SPECIFIC PURPOSES THE PURPOSES INCLUDE FUNDS FOR A CURATORIAL CHAIR, OPERATIONS, EDUCATION, ART, EXHIBITIONS, GENERAL CAPITAL IMPROVEMENTS, AND STUDIO IMPROVEMENTS THE BOARD CAN UNDESIGNATE THESE FUNDS AT ANY TIME VIA BOARD VOTE
PART XI, LINE 8 - OTHER ADJUSTMENTS		CASH OVER/SHORT 119
PART XII, LINE 2D - OTHER ADJUSTMENTS		RENTAL PROPERTY EXPENSES 494 ARTIST PROCEEDS 1,013,188
PART XIII, LINE 2D - OTHER ADJUSTMENTS		RENTAL PROPERTY EXPENSES 494 ARTIST PROCEEDS 1,013,188
PART XIII, LINE 4B - OTHER ADJUSTMENTS		CASH OVER/SHORT 119

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization
TRIGG - CM RUSSELL FOUNDATION INC

Employer identification number

81-6003526

Part I Questions Regarding Compensation

Yes No

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items

- | | |
|---|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax idemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e g , maid, chauffeur, chef) |

b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.

5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

a The organization?

b Any related organization?

If "Yes," to line 5a or 5b, describe in Part III

6 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

a The organization?

b Any related organization?

If "Yes," to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

	Yes	No
1b		
2		
4a	Yes	
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7		No
8		No
9		

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
	PART I, LINE 4A	DARRELL BEAUCHAMP, THE PREVIOUS EXECUTIVE DIRECTOR, TERMINATED EMPLOYMENT IN OCTOBER 2011. HIS SEVERANCE PACKAGE, PAID PER HIS COMPENSATION AGREEMENT, WAS \$38,038. THIS WAS PAID IN OCTOBER 2011 AND INCLUDED IN HIS 2011 W-2.

SCHEDULE M (Form 990)

NonCash Contributions

OMB No 1545-0047

2011

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization TRIGG - CM RUSSELL FOUNDATION INC

Employer identification number

81-6003526

Part I Types of Property

Table with 4 columns: (a) Check if applicable, (b) Number of Contributions or items contributed, (c) Contribution amounts reported on Form 990, Part VIII, line 1g, (d) Method of determining contribution amounts. Rows include Art, Books, Securities, etc.

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

Table with 3 columns: Question, Yes, No. Row 30a: No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

Table with 3 columns: Question, Yes, No. Row 31: Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?

Table with 3 columns: Question, Yes, No. Row 32a: No

b If "Yes," describe in Part II

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

Table with 3 columns: Question, Yes, No. Row 33: No

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
NON REPORTING OF REVENUE	PART I, LINE 33	THE FOUNDATION HAS ELECTED UNDER SFAS 116 NOT TO REPORT IN ITS REVENUE STATEMENT AND BALANCE SHEET WORKS OF ART, HISTORICAL TREASURES, OR OTHER SIMILAR ASSETS HELD FOR PUBLIC EXHIBITION, EDUCATION, OR RESEARCH IN FURTHERANCE OF PUBLIC SERVICE (SEE SCHEDULE D, PART XIV FOR ADDITIONAL INFORMATION) AS SUCH, THERE IS NO REVENUE ASSOCIATED WITH THE DONATED WORKS OF ART REPORTED ABOVE HOWEVER, THE COLLECTION ITEMS ACQUIRED BY GIFT IN 2011 WERE VALUED BY THE DONORS AT \$1,808,200

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

2011

Open to Public Inspection

Name of the organization
TRIGG - CM RUSSELL FOUNDATION INC

Employer identification number

81-6003526

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 2	BOARD MEMBERS WILLIAM COWAN AND LISA COWAN-HUESTIS ARE FATHER AND DAUGHTER
	FORM 990, PART VI, SECTION B, LINE 11	LINE 11A EXPLANATION - THE FORM 990 IS PREPARED BY THE FOUNDATION'S INDEPENDENT ACCOUNTANT AND REVIEWED BY THE FOUNDATION'S CHIEF OPERATIONS OFFICER THE RETURN IS THEN PRESENTED TO THE BOARD OF DIRECTORS AT THE NEXT REGULARLY SCHEDULED FULL BOARD MEETING UPON REVIEW AND DISCUSSION, THE 990 IS SUBJECT TO APPROVAL BY MAJORITY VOTE ONCE APPROVED, IT IS THEN FILED
	FORM 990, PART VI, SECTION B, LINE 12C	ALL MEMBERS OF THE FOUNDATION'S BOARD OF DIRECTORS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST POLICY STATEMENT ANNUALLY AND DISCLOSE ALL MATERIAL CONFLICTS SHOULD A SITUATION ARISE WHERE A BOARD MEMBER HAS A CONFLICT OF INTEREST, THE BOARD MEMBER ABSTAINS FROM VOTING ON THE ISSUE
	FORM 990, PART VI, SECTION B, LINE 15	THE FOUNDATION'S BOARD OF DIRECTORS IS RESPONSIBLE FOR HIRING ALL OFFICERS OF THE ORGANIZATION THE BOARD RESEARCHES COMPARABLE ORGANIZATIONS TO DETERMINE REASONABLE COMPENSATION AND BENEFIT PACKAGES FOR THE ORGANIZATION'S OFFICERS THE FOUNDATION'S OFFICERS ARE RESPONSIBLE FOR HIRING KEY EMPLOYEES COMPARISONS ARE MADE TO SIMILAR ORGANIZATIONS AND LOCAL EMPLOYMENT AGENCIES ARE CONTACTED FOR INPUT AS WELL THERE WERE NO KEY EMPLOYEES EMPLOYED BY THE FOUNDATION IN 2011 (BASED UPON THE 990 DEFINITION OF KEY EMPLOYEE)
	FORM 990, PART VI, SECTION C, LINE 19	ALL REQUIRED PUBLIC DOCUMENTS ARE MADE AVAILABLE AT THE C M RUSSELL MUSEUM ADMINISTRATIVE OFFICES UPON REQUEST
	FORM 990, PART VIII, LINE 1G NONCASH CONTRIBUTIONS	PER THE INSTRUCTIONS TO FORM 990, THE VALUE OF DONATED SERVICES IS DISREGARDED FOR REPORTING PURPOSES HOWEVER, THE FOUNDATION WOULD LIKE TO RECOGNIZE THE DONATED SERVICES IT RECEIVES, AS THEY ARE VITAL TO ITS SUCCESS IT RECEIVED \$33,843 IN DONATED SERVICES IN 2011
ALL OTHER FUNCTIONAL EXPENSES	FORM 990, PART X, LINE 24E	MUSEUM EVENTS PROGRAM SERVICE EXPENSES 40,746 MANAGEMENT AND GENERAL EXPENSES 613 FUNDRAISING EXPENSES 2,322 TOTAL EXPENSES 43,681 PERMANENT COLLECTION PROGRAM SERVICE EXPENSES 42,250 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 42,250 CONSERVATION EXPENSE PROGRAM SERVICE EXPENSES 29,623 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 29,623 POSTAGE PROGRAM SERVICE EXPENSES 17,181 MANAGEMENT AND GENERAL EXPENSES 4,452 FUNDRAISING EXPENSES 7,504 TOTAL EXPENSES 29,137 CONTRACT LABOR PROGRAM SERVICE EXPENSES 26,268 MANAGEMENT AND GENERAL EXPENSES 478 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 26,746 MISCELLANEOUS PROGRAM SERVICE EXPENSES 18,368 MANAGEMENT AND GENERAL EXPENSES 4,837 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 23,205 CREDIT CARD FEES PROGRAM SERVICE EXPENSES 17,247 MANAGEMENT AND GENERAL EXPENSES 837 FUNDRAISING EXPENSES 1,551 TOTAL EXPENSES 19,635 SMALL FF&E PROGRAM SERVICE EXPENSES 17,257 MANAGEMENT AND GENERAL EXPENSES 1,024 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 18,281 COMPUTER EXPENSE PROGRAM SERVICE EXPENSES 7,789 MANAGEMENT AND GENERAL EXPENSES 7,933 FUNDRAISING EXPENSES 288 TOTAL EXPENSES 16,010 MEMBERSHIP FEES PROGRAM SERVICE EXPENSES 6,539 MANAGEMENT AND GENERAL EXPENSES 1,980 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 8,519 OFFICE MACHINES PROGRAM SERVICE EXPENSES 6,243 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 6,243 BOARD OF DIRECTORS PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 6,180 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 6,180 TELEPHONE PROGRAM SERVICE EXPENSES 6,060 MANAGEMENT AND GENERAL EXPENSES 68 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 6,128 TAXES & FEES PROGRAM SERVICE EXPENSES 4,650 MANAGEMENT AND GENERAL EXPENSES 368 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 5,018 SECURITY PROGRAM SERVICE EXPENSES 3,825 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 3,825 EXHIBITION FEES & SUPPLIES PROGRAM SERVICE EXPENSES 2,910 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 2,910 PUBLICATIONS & SUBSCRIPTIONS PROGRAM SERVICE EXPENSES 2,595 MANAGEMENT AND GENERAL EXPENSES 203 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 2,798 DONOR RELATIONS PROGRAM SERVICE EXPENSES 1,034 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 1,607 TOTAL EXPENSES 2,641 PHOTOGRAPHY PROGRAM SERVICE EXPENSES 2,366 MANAGEMENT AND GENERAL EXPENSES 210 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 2,576 PROFESSIONAL DEVELOPMENT PROGRAM SERVICE EXPENSES 967 MANAGEMENT AND GENERAL EXPENSES 308 FUNDRAISING EXPENSES 215 TOTAL EXPENSES 1,490 OTHER STAFF EXPENSE PROGRAM SERVICE EXPENSES 28 MANAGEMENT AND GENERAL EXPENSES 1,241 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,269 AUTO PROGRAM SERVICE EXPENSES 279 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 279
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -211,120 DONATED SERVICES AND USE OF FACILITIES 33,843 CASH OVER/SHORT 119 TOTAL TO FORM 990, PART XI, LINE 5 -177,158

Form **4562**

**Depreciation and Amortization
(Including Information on Listed Property)**

OMB No 1545-0172
2011
Attachment
Sequence No **179**

Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return TRIGG - CM RUSSELL FOUNDATION INC	Business or activity to which this form relates FORM 990 PAGE 10	Identifying number 81-6003526
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Part I Election To Expense Certain Property Under Section 179
Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	500,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property Enter the amount from line 29	7	
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7		8
9 Tentative deduction Enter the smaller of line 5 or line 8		9
10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562		10
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)		11
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11		12
13 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	245,229

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2011	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B—Assets Placed in Service During 2011 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	

Section C—Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System

20a Class life					S/L
b 12-year			12 yrs		S/L
c 40-year			40 yrs	MM	S/L

Part IV Summary (see instructions)

21 Listed property Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	245,229
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No **24b** If "Yes," is the evidence written? Yes No

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation/deduction, (i) Elected section 179 cost.

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) **25**

26 Property used more than 50% in a qualified business use

27 Property used 50% or less in a qualified business use

28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 **28**

29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 **29**

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table for Section B with columns (a) through (f) for Vehicle 1 through Vehicle 6. Rows include 30-33 (miles driven) and 34-36 (availability and use).

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

Table for Section C with 2 columns: Yes, No. Rows include 37-41 (policy statements and requirements).

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles

Part VI Amortization

Table for Part VI with 6 columns: (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year.

42 Amortization of costs that begins during your 2011 tax year (see instructions)

43 Amortization of costs that began before your 2011 tax year **43**

44 Total. Add amounts in column (f) See the instructions for where to report **44**

Additional Data

Software ID:
Software Version:
EIN: 81-6003526
Name: TRIGG - CM RUSSELL FOUNDATION INC

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 66,757 including grants of \$) (Revenue \$ 20,320)

EDUCATION & PUBLIC PROGRAMS THE MUSEUM CONTINUED WITH STANDARD EDUCATIONAL PROGRAMS, INCLUDING THE FIFTH GRADE TOURS FOR CITY AND COUNTY STUDENTS WHOSE ESSAYS ARE FEATURED AT A SPECIAL PROGRAM CALLED SUNDAY SAMPLER (COLLABORATIVE EFFORT WITH THE LOCAL CONSORTIUM), AND RUSSELL ROUNDUP DAY CAMPS FAMILY PROGRAMS INCLUDED SADDLES & SPURS, CHAUTAUQUA, NATIVE AMERICAN SCHOOL PROGRAMS, NATIVE AMERICAN FILM FESTIVAL, AND HOLIDAY OPEN HOUSE TOT'S TALES AND ART EXPLORERS FOR PRESCHOOL AND ELEMENTARY AGE KIDS, RESPECTIVELY, HAVE CONTINUED TO BE WELL-RECEIVED AND ATTENDED MANY EXHIBITIONS ALSO INCLUDED LECTURES AND EDUCATIONAL COMPONENTS, SUCH AS A PHOTOGRAPHY CLASS WITH MICHAEL FORSBERG, PLEIN AIR PAINT OUT CLASS, SILK SCREEN WORKSHOP, AND COFFEE, CREPES, AND CANVAS, WHICH PROVIDED AN OPPORTUNITY TO SEE ARTISTS AT WORK ON THE MUSEUM GROUNDS DAYCARE AND HOME SCHOOL GROUPS ATTEND EDUCATIONAL OFFERINGS AT THE MUSEUM AS WELL AS TAKE FIELD TRIPS TO EXPLORE THE DISCOVERY GALLERY THE EDUCATION AREA IS PART OF THE MUSEUM'S MISSION, WHICH STRIVES TO EDUCATE AND EXPOSE PEOPLE TO RUSSELL'S ART AND LIFE, AS WELL AS THE ART AND LIFE OF HIS CONTEMPORARIES