



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



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 private foundations)

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

OMB No 1545-0047
2014
Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 01-01-2014, and ending 12-31-2014

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization TRIGG - C M RUSSELL FOUNDATION INC <hr/> Doing business as CM RUSSELL MUSEUM <hr/> Number and street (or P O box if mail is not delivered to street address) Room/suite 400 13TH STREET NORTH <hr/> City or town, state or province, country, and ZIP or foreign postal code GREAT FALLS, MT 59401	D Employer identification number 81-6003526 <hr/> E Telephone number (406) 727-8787 <hr/> G Gross receipts \$ 5,384,640
F Name and address of principal officer MICHAEL D DUCHEMIN 400 13TH STREET NORTH GREAT FALLS, MT 59401		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶
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		
J Website: ▶ WWW.CMRUSSELL.ORG		
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1951 M State of legal domicile MT

Part I Summary

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	32
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	32
5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	64
6	Total number of volunteers (estimate if necessary)	6	342
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	17,736
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0
8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9	Program service revenue (Part VIII, line 2g)	858,262	868,015
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,232,078	1,942,914
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	389,296	442,089
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	204,400	234,217
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,684,036	3,487,235
14	Benefits paid to or for members (Part IX, column (A), line 4)	7,121	3,796
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0	0
16a	Professional fundraising fees (Part IX, column (A), line 11e)	1,085,828	1,263,545
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 193,957	0	0
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,440,481	1,727,938
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	2,533,430	2,995,279
19	Revenue less expenses Subtract line 18 from line 12	150,606	491,956
20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21	Total liabilities (Part X, line 26)	10,715,306	10,901,868
22	Net assets or fund balances Subtract line 21 from line 20	468,490	455,837
		10,246,816	10,446,031

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 <hr/> MICHAEL D DUCHEMIN EXECUTIVE DIRECTOR Type or print name and title	2015-03-09 Date
Paid Preparer Use Only	Print/Type preparer's name RICHARD REISIG <hr/> Firm's name ▶ ANDERSON ZURMUEHLEN & CO PC <hr/> Firm's address ▶ 21 10TH STREET SOUTH GREAT FALLS, MT 59401	Preparer's signature RICHARD REISIG <hr/> Date 2015-03-07 <hr/> Check <input type="checkbox"/> if self-employed PTIN P00185761 <hr/> Firm's EIN ▶ 81-0385940 <hr/> Phone no (406) 727-0888

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

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission

THE MISSION OF THE TRIGG-C M RUSSELL FOUNDATION, INC (DBA 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 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 \$ 1,384,405 including grants of \$) (Revenue \$ 1,979,143)

COLLECTIONS AND EXHIBITIONS IN 2014, 37,884 PEOPLE VISITED THE C M RUSSELL MUSEUM. THE RUSSELL WORKS CONTINUE TO BE DISPLAYED IN CHRONOLOGICAL ORDER. THE MUSEUM DISPLAYED SALE ART FOR THE MUSEUM'S MAJOR EVENT, WHICH IS KNOWN AS THE RUSSELL OTHER EXHIBITIONS INCLUDED GEORGE CATLIN'S AMERICAN BUFFALO (FROM THE SMITHSONIAN AMERICAN ART MUSEUM), THE COLLECTOR'S VISION SELECTIONS FROM THE THOMAS A PETRIE COLLECTION, THE YELLOWSTONE NATIONAL PARK AND THE MOUNTAIN REGIONS OF PORTIONS OF IDAHO, NEVADA, COLORADO AND UTAH (PORTFOLIO OF 15 FRAMED CHROMOLITHOGRAPHS AFTER THOMAS MORAN), CONTINUING THE LEGACY THE RUSSELL SKULL SOCIETY OF ARTISTS. 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 SOME OF OUR IMPORTANT CHARLES M RUSSELL OILS. STAFF IN THIS AREA CONTINUALLY MONITORS THE STATUS OF BOTH PERMANENT COLLECTION PIECES AS WELL AS THOSE ON LOAN AND MANAGE AND IMPROVE THE ENVIRONMENT FOR ALL OF THE ART. THE MUSEUM RECEIVED DONATIONS OF ART AND ARTIFACTS DURING THE YEAR VALUED BY THE DONORS AT \$611,290. THE COLLECTIONS AND EXHIBITIONS AREA DIRECTLY SUPPORTS THE MUSEUM'S MISSION.

4b (Code) (Expenses \$ 186,775 including grants of \$ 3,796) (Revenue \$ 11,522)

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, SUNDAY SAMPLER (COLLABORATIVE EFFORT WITH THE LOCAL CONSORTIUM), AND RUSSELL ROUNDUP DAY CAMPS (CLASSES HELP THROUGHOUT THE SUMMER ON VARIOUS ART TOPICS INCLUDING DRAWING, SCULPTING, AND PAINTING). FAMILY PROGRAMS INCLUDED SADDLES AND SPURS, NATIVE AMERICAN SCHOOL PROGRAMS, AND THE HOLIDAY OPEN HOUSE. CREATIVE EXPRESSIONS AND ART EXPLORERS FOR ELEMENTARY AGE KIDS HAVE CONTINUED TO BE WELL RECEIVED AND ATTENDED. THE EDUCATION DEPARTMENT ALSO OFFERED A BLACKFEET BEADING CLASS AND PROVIDED AN OUTREACH PROGRAM FOR THE LOCAL EAGLE MOUNT GROUP, WHICH SERVES PROVIDE THERAPEUTIC AND RECREATIONAL ACTIVITIES FOR CHILDREN AND ADULTS WITH PHYSICAL, DEVELOPMENTAL, BEHAVIORAL AND/OR MENTAL CHALLENGES. MANY EXHIBITIONS ALSO INCLUDED LECTURES AND EDUCATIONAL COMPONENTS, SUCH AS A PHOTOGRAPHY CLASS WITH CRAIG VARJABEDIAN, FREE EDUCATIONAL SEMINARS IN CONJUNCTION WITH THE RUSSELL, PAINTING WORKSHOP WITH R TOM GILLEON, AND LECTURES BY SHARYN UDALL IN CONJUNCTION WITH GHOST RANCH AND MARSHALL MONROE. DURING LET ICONS BE ICONS A CHAUTAUQUA TOOK PLACE THAT FEATURED PORTRAYALS OF CALAMITY JANE AND AMELIA EARHART. DAYCARE AND HOME SCHOOL GROUPS ATTEND EDUCATIONAL OFFERINGS AT THE MUSEUM AS WELL AS TAKE FIELD TRIPS TO EXPLORE THE DISCOVERY GALLERY. ON VARIOUS DATES THROUGHOUT THE YEAR, THE MUSEUM OFFERS FREE ADMISSION TO ENSURE ACCESS TO ALL COMMUNITY MEMBERS, REGARDLESS OF ABILITY TO PAY ADMISSION. THE EDUCATION AREA IS AN ESSENTIAL 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.

4c (Code) (Expenses \$ 149,742 including grants of \$) (Revenue \$ 12)

PUBLIC RELATIONS THE MUSEUM CONTINUED PUBLIC RELATIONS EFFORTS IN ORDER TO SUSTAIN VISITATION, MEMBERSHIP, VOLUNTEERS, AND FUND-RAISING 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 SADDLES AND SPURS, LECTURES, AND THE HOLIDAY OPEN HOUSE. THE MUSEUM ALSO PROVIDES SOME EVENING EXHIBIT OPENINGS TO THE COMMUNITY FREE OF CHARGE AS A WAY TO ENCOURAGE PARTICIPATION IN THE MUSEUM. STAFF CONTINUES TO ENGAGE NEW METHODS OF REACHING POTENTIAL AUDIENCES BY UTILIZING BILLBOARDS AND SOCIAL MEDIA. PUBLIC RELATIONS AND MARKETING ARE AN INTEGRAL PART OF INFORMING THE PUBLIC ABOUT THE MUSEUM AND THE PROGRAMMING THAT IS AVAILABLE, AS WELL AS REACHING NEW POTENTIAL MEMBERS AND DONORS.

See Additional Data

4d Other program services (Describe in Schedule O)

(Expenses \$ 495,655 including grants of \$) (Revenue \$ 125,968)

4e Total program service expenses 2,216,577

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 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <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"/>	Yes	
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 and XII</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 and XII 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, Parts I and IV</i>		No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts 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 other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts 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> (see instructions)		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 hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
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 lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
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>	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
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>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
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>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Main form area containing questions 1a through 14b with input fields and Yes/No columns.

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 or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

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. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records
 JUSTIN CAMPOS

400 13TH STREET NORTH
 GREAT FALLS, MT 59401 (406) 727-8787

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

Check if Schedule O contains a response or note to any line in this Part VII 

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (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			

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (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			

1b	Sub-Total	▶			
c	Total from continuation sheets to Part VII, Section A	▶			
d	Total (add lines 1b and 1c)	▶	272,720	0	17,373

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>	3	No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	No
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>	5	No

Section B. Independent Contractors

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

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

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

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a					
	b	Membership dues 1b	155,140				
	c	Fundraising events 1c					
	d	Related organizations 1d					
	e	Government grants (contributions) 1e	111,506				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	601,369				
	g	Noncash contributions included in lines 1a-1f \$	1,052				
	h	Total. Add lines 1a-1f	868,015				
Program Service Revenue	2a	THE RUSSELL & WESTERN ART SHOW	1,818,031	1,818,031			
	b	ADMISSIONS AND TOURS	103,110	103,110			
	c	EXHIBITIONS - OTHER MUSEUMS	21,773	21,773			
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f	1,942,914				
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	94,339			94,339
4		Income from investment of tax-exempt bond proceeds					
5		Royalties	17,845			17,845	
6a		Gross rents	(i) Real	25,074			
			(ii) Personal				
			b Less rental expenses	169			
			c Rental income or (loss)	24,905			
d		Net rental income or (loss)	24,905			24,905	
7a		Gross amount from sales of assets other than inventory	(i) Securities	1,988,011			
			(ii) Other				
			b Less cost or other basis and sales expenses	1,640,261			
			c Gain or (loss)	347,750			
d		Net gain or (loss)	347,750			347,750	
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18					
a							
b	Less direct expenses b						
c	Net income or (loss) from fundraising events						
9a	Gross income from gaming activities See Part IV, line 19						
a							
b	Less direct expenses b						
c	Net income or (loss) from gaming activities						
10a	Gross sales of inventory, less returns and allowances	a	430,706				
		b Less cost of goods sold b	256,975				
		c Net income or (loss) from sales of inventory	173,731	173,731			
Miscellaneous Revenue		Business Code					
11a	ADVERTISING & CATALOG SALES	511190	17,736		17,736		
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d		17,736				
12	Total revenue. See Instructions		3,487,235	2,116,645	17,736	484,839	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line 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 domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	3,796	3,796		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	272,720	39,736	163,808	69,176
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	836,071	721,197	56,311	58,563
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	10,902	6,921	3,088	893
9	Other employee benefits	41,585	39,793	527	1,265
10	Payroll taxes	102,267	82,108	14,567	5,592
11	Fees for services (non-employees)				
a	Management				
b	Legal	14,402	10,795	3,607	
c	Accounting	12,737	9,547	3,190	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	14,502	25	14,176	301
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	198,999	138,300	58,709	1,990
12	Advertising and promotion	233,070	232,050	1,020	
13	Office expenses	18,600	14,145	4,057	398
14	Information technology				
15	Royalties				
16	Occupancy	111,895	111,895		
17	Travel	44,554	41,801	1,087	1,666
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	245,482		245,482	
23	Insurance	62,909	62,581		328
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	MEALS & ENTERTAINMENT	170,370	163,806	1,451	5,113
b	EVENTS (MUSEUM)	134,889	132,376	394	2,119
c	MAINTENANCE	82,955	82,601	232	122
d	PRINTING	70,715	66,347	862	3,506
e	All other expenses	311,859	256,757	12,177	42,925
25	Total functional expenses. Add lines 1 through 24e	2,995,279	2,216,577	584,745	193,957
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash-non-interest-bearing	1,900	1	1,900
	2 Savings and temporary cash investments	1,114,493	2	1,555,601
	3 Pledges and grants receivable, net	351,509	3	247,489
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	185,152	8	210,783
	9 Prepaid expenses and deferred charges	147,899	9	221,935
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 8,727,661		
	b Less accumulated depreciation	10b 4,586,355	4,276,702	10c 4,141,306
	11 Investments—publicly traded securities		11	
	12 Investments—other securities See Part IV, line 11	4,567,768	12	4,515,018
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	69,883	15	7,836
16 Total assets. Add lines 1 through 15 (must equal line 34)	10,715,306	16	10,901,868	
Liabilities	17 Accounts payable and accrued expenses	358,240	17	221,232
	18 Grants payable		18	
	19 Deferred revenue	110,250	19	234,605
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	468,490	26	455,837
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	7,570,070	27	7,999,152
	28 Temporarily restricted net assets	1,335,380	28	1,164,798
	29 Permanently restricted net assets	1,341,366	29	1,282,081
	Organizations that do not follow SFAS 117 (ASC 958), 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	10,246,816	33	10,446,031	
34 Total liabilities and net assets/fund balances	10,715,306	34	10,901,868	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,487,235
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,995,279
3	Revenue less expenses Subtract line 2 from line 1	3	491,956
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	10,246,816
5	Net unrealized gains (losses) on investments	5	-172,873
6	Donated services and use of facilities	6	47,980
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-167,848
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	10,446,031

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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
3b	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		

Additional Data

Software ID:

Software Version:

EIN: 81-6003526

Name: TRIGG - C M RUSSELL FOUNDATION INC

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

(Code) (Expenses \$ 495,655 including grants of \$) (Revenue \$ 125,968)

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 OPERATIONS STAFF ON SITE DURING ALL OPEN HOURS TO ENSURE SAFETY FOR STAFF, VISITORS, VOLUNTEERS, AND THE COLLECTION MUSEUM STAFF MAINTAINS THE GROUNDS, AND BUILDING MUSEUM SERVICES ALSO INCLUDE GUEST RELATIONS TO SERVE THE MUSEUM VISITORS, THE ADMINISTRATIVE STAFF, EVENT COORDINATION, AND THE MUSEUM STORE, WHICH FURTHERS THE MUSEUM'S IMAGE AND RECOGNITION WITH BRANDED PRODUCTS AS WELL AS MERCHANDISE RELATED TO CHARLES M RUSSELL AND THE MISSION OF THE MUSEUM ALL OF THESE AREAS 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 CURRENT AND FUTURE ENDEAVORS

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 (list any hours for related organizations below dotted line)	(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			
(1) JOE MASTERSON DIRECTOR	1 00	X						0	0	0
(1) JACK AMUNDSON DIRECTOR	1 00	X						0	0	0
(2) HENRY D BEDFORD DIRECTOR	1 00	X						0	0	0
(3) CHRISTINA HOOVER-BLACKWELL VICE CHAIR	1 00	X		X				0	0	0
(4) NORMAN BOOK JR DIRECTOR	1 00	X						0	0	0
(5) LISA COWAN-HUESTIS DIRECTOR	1 00	X						0	0	0
(6) J MICHAEL DADY DIRECTOR	1 00	X						0	0	0
(7) PHILIP DRESCHER DIRECTOR	1 00	X						0	0	0
(8) JAMES FISH TREASURER	1 00	X		X				0	0	0
(9) RANDY FOUTCH DIRECTOR	1 00	X						0	0	0
(10) CHANNING HARTELIUS SECRETARY	1 00	X		X				0	0	0
(11) GAIL HAYES-DAVIS DIRECTOR	1 00	X						0	0	0
(12) CHARLES M HUNTER DIRECTOR	1 00	X						0	0	0
(13) MICHAEL INGRAM DIRECTOR	1 00	X						0	0	0
(14) DAVID J KORNDER DIRECTOR	1 00	X						0	0	0
(15) KATIE MEREDITH DIRECTOR	1 00	X						0	0	0
(16) VAN KIRKE NELSON MD DIRECTOR	1 00	X						0	0	0
(17) DAN FIEHRER DIRECTOR	1 00	X						0	0	0
(18) TOM PETRIE DIRECTOR	1 00	X						0	0	0
(19) WERNER QUASEBARTH DIRECTOR	1 00	X						0	0	0
(20) ROBERT RASMUSSEN DIRECTOR	1 00	X						0	0	0
(21) MARSHALL MONROE DIRECTOR	1 00	X						0	0	0
(22) JOHN D ROGERS JR DIRECTOR	1 00	X						0	0	0
(23) DAVID SOLBERG DIRECTOR	1 00	X						0	0	0
(24) SARAH STEVENSON 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 (list any hours for related organizations below dotted line)	(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			
(26) JIM STRAUSS DIRECTOR	1 00	X						0	0	0
(1) WAYNE THARES DIRECTOR	1 00	X						0	0	0
(2) ANNIE THOM DIRECTOR	1 00	X						0	0	0
(3) JESSIE VAN NESS DIRECTOR	1 00	X						0	0	0
(4) SARA WALSH DIRECTOR	1 00	X						0	0	0
(5) J STEVEN WHISLER CHAIR	1 00	X		X				0	0	0
(6) JAMES RYFFEL DIRECTOR	1 00	X						0	0	0
(7) SUSAN JOHNSON CHIEF OPERATIONS OFFICER	40 00			X				72,706	0	7,271
(8) SARAH BURT CHIEF CURATOR	40 00			X				75,014	0	2,861
(9) MICHAEL DUCHERNIN PHD EXECUTIVE DIRECTOR	40 00			X				125,000	0	7,241

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
TRIGG - C M 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 described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s)

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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 Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
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 section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	
15 Public support percentage for 2013 Schedule A, Part II, line 14	15	
16a 33 1/3% support test—2014. 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—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	833,224	987,217	978,579	858,262	868,015	4,525,297
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	499,925	504,849	518,318	476,978	533,816	2,533,886
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	1,333,149	1,492,066	1,496,897	1,335,240	1,401,831	7,059,183
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)						7,059,183

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6	1,333,149	1,492,066	1,496,897	1,335,240	1,401,831	7,059,183
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	162,459	140,788	150,669	133,402	143,232	730,550
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	163,949	140,788	150,669	133,402	143,232	732,040
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					17,736	17,736
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	1,497,098	1,632,854	1,647,566	1,468,642	1,562,799	7,808,959
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	90.400 %
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	91.700 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	9.370 %
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	8.300 %

19a 33 1/3% support tests—2014. 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—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization.

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)**Section B. Type I Supporting Organizations**

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

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

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

	Yes	No
1		

Section D. All Type III Supporting Organizations

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

	Yes	No
1		
2		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

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

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

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

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

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

	Yes	No
2a		
2b		
3a		
3b		

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

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

Section A - Adjusted Net Income

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

Section B - Minimum Asset Amount

	(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a Average monthly value of securities	1a	
b Average monthly cash balances	1b	
c Fair market value of other non-exempt-use assets	1c	
d Total (add lines 1a, 1b, and 1c)	1d	
e Discount claimed for blockage or other factors (explain in detail in Part VI) _____		
2 Acquisition indebtedness applicable to non-exempt use assets	2	
3 Subtract line 2 from line 1d	3	
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6 Multiply line 5 by .035	6	
7 Recoveries of prior-year distributions	7	
8 Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009. _____			
b From 2010. _____			
c From 2011. _____			
d From 2012. _____			
e From 2013. _____			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$ _____			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010. _____			
b From 2011. _____			
c From 2012. _____			
d From 2013. _____			
e From 2014. _____			

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

Facts And Circumstances Test

Return Reference

Explanation

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2014

Open to Public Inspection

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

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Name of the organization TRIGG - C M 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 include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors...?, 6 Did the organization inform all grantees...?

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

Table with 2 columns: Description, Held at the End of the Year. Rows include: 1 Purpose(s) of conservation easements, 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution..., 3 Number of conservation easements modified..., 4 Number of states where property subject to conservation easement is located..., 5 Does the organization have a written policy..., 6 Staff and volunteer hours..., 7 Amount of expenses incurred..., 8 Does each conservation easement reported on line 2(d) above satisfy the requirements..., 9 In Part XIII, describe how the organization reports 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.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report..., 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report..., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain...

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

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

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

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

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

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

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

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

	Amount
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, for escrow or custodial account liability? Yes No

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	3,386,688	3,304,447	3,299,680	3,324,057	3,263,974
b Contributions			25,959	223,586	10,762
c Net investment earnings, gains, and losses	121,774	425,976	234,716	-81,689	86,272
d Grants or scholarships					
e Other expenditures for facilities and programs	144,160	333,461	246,666	157,488	29,169
f Administrative expenses	11,016	10,274	9,242	8,786	7,782
g End of year balance	3,353,286	3,386,688	3,304,447	3,299,680	3,324,057

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

- a** Board designated or quasi-endowment ▶ 54.790 %
 - b** Permanent endowment ▶ 6.980 %
 - c** Temporarily restricted endowment ▶ 38.230 %
- The percentages in lines 2a, 2b, and 2c should equal 100%

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

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

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

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

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. 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		7,310,252	3,655,897	3,654,355
c Leasehold improvements				
d Equipment		1,096,480	930,458	166,022
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				4,141,306

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) CORPORATE BONDS	533,139	F
(B) GOVERNMENT BONDS	690,017	F
(C) MUTUAL FUNDS	201,532	F
(D) COMMODITIES	19,262	F
(E) EQUITY SECURITIES	3,071,068	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	4,515,018	

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15

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

Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

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

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	3,362,511
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a	-172,873	
b	Donated services and use of facilities	2b	47,980	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d	169	
e	Add lines 2a through 2d	2e	-124,724	
3	Subtract line 2e from line 1	3	3,487,235	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b	4c	0	
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	3,487,235	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	3,100,873
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d	105,594	
e	Add lines 2a through 2d	2e	105,594	
3	Subtract line 2e from line 1	3	2,995,279	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b	4c	0	
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	2,995,279	

Part XIII Supplemental Information

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

Return Reference	Explanation
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 12 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 THAT ARE HELD FOR PUBLIC EXHIBITION, EDUCATION, OR RESEARCH IN FURTHERANCE OF PUBLIC SERVICE RATHER THAN FINANCIAL GAIN EACH ITEM 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 \$717,166 AND \$127,500, RESPECTIVELY, FOR THE YEARS ENDED DECEMBER 31, 2014 AND 2013, AND ARE NOT REFLECTED IN THE STATEMENTS 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 BY 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
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 2D - OTHER ADJUSTMENTS	RENTAL PROPERTY EXPENSES 169
PART XII, LINE 2D - OTHER ADJUSTMENTS	RENTAL PROPERTY EXPENSES 169 PERMANENT COLLECTION PURCHASES 105,425

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2014

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury Internal Revenue Service

Name of the organization TRIGG - C M RUSSELL FOUNDATION INC

Employer identification number

81-6003526

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

Table with 4 columns: (a) Name of disqualified person, (b) Relationship between disqualified person and organization, (c) Description of transaction, (d) Corrected? (Yes/No)

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 \$
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

Table with 9 columns: (a) Name of interested person, (b) Relationship with organization, (c) Purpose of loan, (d) Loan to or from the organization (To/From), (e) Original principal amount, (f) Balance due, (g) In default? (Yes/No), (h) Approved by board or committee? (Yes/No), (i) Written agreement? (Yes/No)

Total \$

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 5 columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of assistance, (d) Type of assistance, (e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) WM P HEALEY & ASSOC PROFIT SHARING PLAN	PAST DIRECTOR	121,500	ART CONSIGNMENT		No
(2) STEVE WHISLER	CURRENT DIRECTOR	12,600	ART CONSIGNMENT		No
(3) MARSHALL MONROE	CURRENT DIRECTOR	25,000	EQUIPMENT INTERACTIVE DISPLAY		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
------------------	-------------

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

2014

Open to Public Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990. Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Name of the organization TRIGG - C M 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) Noncash contribution amounts reported on Form 990, Part VIII, line 1g, (d) Method of determining noncash contribution amounts. Row 25 is highlighted with 'X' in column (a), '5' in column (b), '1,052' in column (c), and 'COMP SALES' in column (d).

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

Table with 2 columns: Yes, No. Row 29 has '29' in the Yes column.

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 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 2 columns: Yes, No. Row 30a has 'No' in the No column.

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 2 columns: Yes, No. Row 31 has 'Yes' in the Yes column.

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

Table with 2 columns: Yes, No. Row 32a has 'No' in the No column.

b If "Yes," describe in Part II

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

Table with 2 columns: Yes, No. Row 33 has empty cells in both columns.

Part III Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
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 2014 WERE VALUED BY THE DONORS AT \$717,166

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 990-EZ or to provide any additional information.
 ▶ **Attach to Form 990 or 990-EZ.**
 ▶ **Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

OMB No 1545-0047

2014
Open to Public Inspection

Name of the organization TRIGG - C M RUSSELL FOUNDATION INC	Employer identification number 81-6003526
--	--

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	
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 2014 (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 \$47,980 IN DONATED SERVICES IN 2014
FORM 990, PART IX, LINE 24E	POSTAGE PROGRAM SERVICE EXPENSES 40,793 MANAGEMENT AND GENERAL EXPENSES 5,057 FUNDRAISING EXPENSES 3,453 TOTAL EXPENSES 49,303 COMPUTER EXPENSE PROGRAM SERVICE EXPENSES 13,037 MANAGEMENT AND GENERAL EXPENSES 1,567 FUNDRAISING EXPENSES 22,510 TOTAL EXPENSES 37,114 EXHIBIT RENTAL FEES PROGRAM SERVICE EXPENSES 36,000 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 36,000 CREDIT CARD FEES PROGRAM SERVICE EXPENSES 37,230 MANAGEMENT AND GENERAL EXPENSES -5,801 FUNDRAISING EXPENSES 1,703 TOTAL EXPENSES 33,132 DONOR RELATIONS PROGRAM SERVICE EXPENSES 22,309 MANAGEMENT AND GENERAL EXPENSES 65 FUNDRAISING EXPENSES 7,491 TOTAL EXPENSES 29,865 ART SALES PROGRAM SERVICE EXPENSES 16,850 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 16,850 SMALL FURNITURE, FIXTURES & EQUIPMENT PROGRAM SERVICE EXPENSES 13,926 MANAGEMENT AND GENERAL EXPENSES 2,135 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 16,061 EXHIBIT MATERIALS & SUPPLIES PROGRAM SERVICE EXPENSES 15,955 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 15,955 SECURITY PROGRAM SERVICE EXPENSES 14,061 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 14,061 STAFF SEARCH PROGRAM SERVICE EXPENSES 791 MANAGEMENT AND GENERAL EXPENSES 4,878 FUNDRAISING EXPENSES 6,974 TOTAL EXPENSES 12,643 PHOTOGRAPHY PROGRAM SERVICE EXPENSES 9,569 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 9,569 TAXES & FEES PROGRAM SERVICE EXPENSES 9,463 MANAGEMENT AND GENERAL EXPENSES 100 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 9,563 CONSERVATION EXPENSE PROGRAM SERVICE EXPENSES 7,269 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 7,269 MEMBERSHIP FEES PROGRAM SERVICE EXPENSES 3,950 MANAGEMENT AND GENERAL EXPENSES 1,359 FUNDRAISING EXPENSES 300 TOTAL EXPENSES 5,609 WRITE-OFFS PROGRAM SERVICE EXPENSES 4,664 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 4,664 TELEPHONE PROGRAM SERVICE EXPENSES 4,242 MANAGEMENT AND GENERAL EXPENSES 142 FUNDRAISING EXPENSES 22 TOTAL EXPENSES 4,406 PUBLICATIONS & SUBSCRIPTIONS PROGRAM SERVICE EXPENSES 1,502 MANAGEMENT AND GENERAL EXPENSES 127 FUNDRAISING EXPENSES 313 TOTAL EXPENSES 1,942 STAFF EXPENSE - OTHER PROGRAM SERVICE EXPENSES 480 MANAGEMENT AND GENERAL EXPENSES 1,212 FUNDRAISING EXPENSES 159 TOTAL EXPENSES 1,851 PROFESSIONAL DEVELOPMENT PROGRAM SERVICE EXPENSES 1,650 MANAGEMENT AND GENERAL EXPENSES 85 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,735 EXHIBIT DESIGN PROGRAM SERVICE EXPENSES 1,487 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,487 AUTO PROGRAM SERVICE EXPENSES 1,325 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,325 BOARD MEETING EXPENSES PROGRAM SERVICE EXPENSES 114 MANAGEMENT AND GENERAL EXPENSES 930 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,044 MISCELLANEOUS PROGRAM SERVICE EXPENSES 90 MANAGEMENT AND GENERAL EXPENSES 321 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 411
FORM 990, PART XI, LINE 9	PERMANENT COLLECTION PURCHASES -105,425 PRIOR PERIOD ADJUST -62,423
FORM 990, PART XII, LINE 2C	NO CHANGE FROM PRIOR YEAR IN THE ORGANIZATION'S FINANCIAL STATEMENT OVERSIGHT OR INDEPENDENT ACCOUNTANT SELECTION PROCESSES