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EXTENDED TO NOVEMBER 15, 2016 Return of Private Foundation

Form **990-PF** or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

OMB No 1545-0052

For	For calendar year 2015 or tax year beginning , and ending						
Na	Name of foundation A Employer identification number						
7	RI	MIX FOUNDATION					
C	:/0	REX CAPITAL ADVISORS,	LLC		05-0494244	<u>l</u>	
		nd street (or P O box number if mail is not delivered to street	Room/suite	B Telephone number			
						370	
Cıt	y or to	own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	pending, check here	
F	RO	VIDENCE, RI 02903					
G	Check	all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organization	s, check here	
		Final return	Amended return				
		Address change	Name change		Foreign organizations me check here and attach co	eeting the 85% test, omputation	
H	Check	type of organization: X Section 501(c)(3) ex	empt private foundation		E If private foundation sta	itus was terminated	
	Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founds	ation	under section 507(b)(1		
I F	air ma	rket value of all assets at end of year J Accounti	ng method: X Cash	Accrual	F If the foundation is in a	60-month termination	
(fi	rom F		her (specify)		under section 507(b)(1	_	
	-\$	28,081,658. (Part I, colu	mn (d) must be on cash i	basis)			
P	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc., received	400,000.	 	N/A		
	2	Check If the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	263,012.	263,012.		STATEMENT 1	
	5a	Gross rents					
	Ь	Net rental income or (loss)					
•	6a	Net gain or (loss) from sale of assets not on line 10	21,795.				
ž	b	Gross sales price for all 3,554,837.					
Revenue	7	Capital gain net income (from Part IV, line 2)		21,795.			
Œ	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	c	Gross profit or (loss)					
	11	Other income	<103,724.		<u> </u>	STATEMENT 2	
	12	Total. Add lines 1 through 11	581,083.	181,083.			
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.	
	14	Other employee satarles and wages (<u> </u>	
Ø	15	Pension Dans, employee benefits					
enses	16a	Legal fees & 2010	1 560		<u></u>	1 560	
	b	Legal fees Accounting fees \ 1 6 2016 SPMT 3 Other	1,560.	0.		1,560.	
Ű	_ C		225,054. 20,241.	225,054.		0.	
Ě	17	Interest OGDEN	15,848.	20,241.	<u> </u>	378.	
stra	18	Taxes STMT 5	13,040.	5,470.		3/0.	
Administrative Exp	19 20	Depreciation and depletion Occupancy		'			
퉏	21	Travel, conferences, and meetings					
Į.	22	Printing and publications					
jan	23	Other expenses STMT 6	201,965.	194,126.		5,987.	
Ē	24	Total operating and administrative	201,505.	174,120.		3,507.	
Operating and		expenses. Add lines 13 through 23	464,668.	444,891.		7,925.	
o	25	Contributions, gifts, grants paid	1,577,500.			1,577,500.	
	I	Total expenses and disbursements.					
		Add lines 24 and 25	2,042,168.	444,891.		1,585,425.	
_		Subtract line 26 from line 12:				1	
		Excess of revenue over expenses and disbursements	<1,461,085.	>			
	1 .	Net investment income (if negative, enter -0-)	, = , = ,	0.	 		
		Adjusted net income (if negative, enter -0-)			N/A		
5235 11-2		LHA For Paperwork Reduction Act Notice, see	instructions.		·	Form 990-PF (2015)	

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C/O REX CAPITAL ADVISORS, LLC

05-0494244

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Part II Balance Sheets Attached schedules and amounts in the description		Beginning of year	End of	End of year			
га	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
\neg	1 Cash - non-interest-bearing	2,124,023.	1,625,377.	1,625,377.			
1	2 Savings and temporary cash investments	10,622.	789.	789			
1	3 Accounts receivable ► 7,600.		-				
	Less: allowance for doubtful accounts	7,415.	7,600.	7,600			
1	4 Pledges receivable ►		-				
	Less; allowance for doubtful accounts						
1	5 Grants receivable						
[6 Receivables due from officers, directors, trustees, and other						
	disqualified persons						
-	7 Other notes and loans receivable						
	Less; allowance for doubtful accounts		i	-			
	B Inventories for sale or use						
	9 Prepaid expenses and deferred charges						
1	Oa Investments - U.S. and state government obligations						
ļ	b Investments - corporate stock STMT 8	12,201,514.	9,714,054.	9,714,054			
1	c Investments - corporate bonds		· · · · · · · · · · · · · · · · · · ·				
1	1 Investments - land, buildings, and equipment basis						
	Less accumulated depreciation						
1	2 Investments - mortgage loans						
1	G TO STATE OF	15,910,644.	16,733,838.	16,733,838			
ì	4 Land, buildings, and equipment basis						
	Less accumulated depreciation						
11	5 Other assets (describe ►						
	B Total assets (to be completed by all filers - see the						
1	instructions. Also, see page 1, item I)	30,254,218.	28,081,658.	28,081,658			
1,	Accounts payable and accrued expenses						
li				-			
1	· ·						
2 2				* = = *			
2							
1,	2 Other liabilities (describe ►			-			
-							
12	3 Total liabilities (add lines 17 through 22)	0.	0.				
✝¯	Foundations that follow SFAS 117, check here			-			
	and complete lines 24 through 26 and lines 30 and 31.						
2	Unrestricted						
2							
2							
[-	Foundations that do not follow SFAS 117, check here						
2 2 2 3	and complete lines 27 through 31.						
2		0.	0.				
2		0.1	0.				
2	• • • • • • • • • • • • • • • • • • • •	30,254,218.	28,081,658.				
3		30,254,218.	28,081,658.				
ľ	70.00 110.00000 07 10110 00.1211000	30/231/2201					
3	Total liabilities and net assets/fund balances	30,254,218.	28,081,658.				
<u>'aı</u>	t III Analysis of Changes in Net Assets or Fund B	aiances					
To	tal net assets or fund balances at beginning of year - Part II, column (a), line	30					
(m	ust agree with end-of-year figure reported on prior year's return)		1	30,254,218			
Го	tor amount from Oart Livro 97o			-1 161 NOE			

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30			
	(must agree with end-of-year figure reported on prior year's return)		1	30,254,218.
2	Enter amount from Part I, line 27a		2	<1,461,085.>
3	Other increases not included in line 2 (itemize)		3	0.
4	Add lines 1, 2, and 3		4	28,793,133.
5	Decreases not included in line 2 (itemize) ► SEE STATEMENT	7	5	711,475
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30		6	28,000
		_		Form \

TRIMIX FOUNDATION Form 990-PF (2015) C/O REX CAPITAL ADVISORS, LLC 05-0494244 Page 3 Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired P - Purchase (c) Date acquired (d) Date sold (a) List and describe the kind(s) of property sold (e.g., real estate, (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) D - Donation 1a b SEE ATTACHED STATEMENT C đ е (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) b C d 3,554,837. 3,533,042 21,795. Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (i) Losses (from col. (h)) (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any b đ 21,795. е If gain, also enter in Part I, line 7 21,795. 2 Capital gain net income or (net capital loss) 2 If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): if gain, also enter in Part I, line 8, column (c). N/A If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. 1 Enter the appropriate amount in each column for each year; see the instructions before making any entries. (a) Base period years Calendar year (or tax year beginning in) Distribution ratio (col. (b) divided by col. (c)) Adjusted qualifying distributions Net value of noncharitable-use assets 3,483,276. 29,941,406. .116336 1,257,423. 25,779,083 .0487772013 .047112669,350. 14,207,746. 2012 10,871,374. 564,545. .051929 2011 2010 454,133 10,082,074. .045044 .309198 2 Total of line 1, column (d) 2 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 .061840 28,575,301. 4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5 1,767,097. 5 Multiply line 4 by line 3 5

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

8 Enter qualifying distributions from Part XII, line 4

6 Enter 1% of net investment income (1% of Part I, line 27b)

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1,767,097.

1,585,425.

0.

7 Add lines 5 and 6

6

7

8

See the Part VI instructions.

TRIMIX FOUNDATION

For			0494244		Page 4
Pi	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940(c)	948 -	see instr	uctio	ns)
1:	a Exempt operating foundations described in section 4940(d)(2), check here ▶ 🔲 and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	. [_
1	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%	1			0.
	of Part I, line 27b	İ			
1	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	.]			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	_ 2			0.
3	Add lines 1 and 2	3			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	_4_			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			0.
6	·				
1	a 2015 estimated tax payments and 2014 overpayment credited to 2015 6a 12,428.	ſ			
1	Exempt foreign organizations - tax withheld at source				
	c Tax paid with application for extension of time to file (Form 8868)	\			
(d Backup withholding erroneously withheld			_	
7	Total credits and payments. Add lines 6a through 6d	7	1	<u>.2,4</u>	28.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	_10	1	2,4	28.
	Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ 12,428 • Refunded ▶	11			0.
-	art.VII-A Statements Regarding Activities			1	
18	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene i	ın	<u> </u>	Yes	No
	any political campaign?		1a	ļ	X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)		1b	<u> </u>	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or	_	1	1, 4724
	distributed by the foundation in connection with the activities]
	Did the foundation file Form 1120-POL for this year?		1c		X
(f Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. \triangleright \$ 0 .				
6	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				- 1
	managers. ► \$0.			_	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2_	<u> </u>	X
	If "Yes," attach a detailed description of the activities			ì	1 :
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				المصيا
_	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	1	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	X	
	If "Yes," has it filed a tax return on Form 990-T for this year?		46	X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	ļ	X
_	If "Yes," attach the statement required by General Instruction T			ł	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				1
	By language in the governing instrument, or			}	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law		-	
_	remain in the governing instrument?		6	X	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	X	<u> </u>
88	Enter the states to which the foundation reports or with which it is registered (see instructions)				,
	RI				
t	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			1	
	of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calen	ıdar			
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV		9	1	Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		X
			Form 99	0-PF	(2015)

Pa	art VII-A Statements Regarding Activities (continued)			
		T	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of]]
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	111		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A		1	<u> </u>
14	The books are in care of ► MATTHEW A. THIBAULT Telephone no. ► (401)	383-	537	0
• •	Located at ▶50 PARK ROW WEST - SUITE 113, PROVIDENCE, RI ZIP+4 ▶0			- -
15	Section 4947(a)(1) nonexempt charitable trusts filling Form 990-PF in lieu of Form 1041 - Check here		_	T
	and enter the amount of tax-exempt interest received or accrued during the year	N.	[/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
,,,	securities, or other financial account in a foreign country?	16	1 63	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	10	L	<u> </u>
	· · · · · · · · · · · · · · · · · · ·			
De	foreign country ► Int VII-B Statements Regarding Activities for Which Form 4720 May Be Required			L
1.6			V	LNIA
4	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	During the year did the foundation (either directly or indirectly):	1	l	ļ
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	ł		ľ
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	ı	l	
	a disqualified person?	1	1	1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	l l		ļ.
	(5) Transfer any income or assets to a disqualified person (or make any of either available			i
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	Ì		ĺ
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)	-	Į –	ĺ
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	İ		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1b	-	<u> </u>
	Organizations relying on a current notice regarding disaster assistance check here	_		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			ļ
	before the first day of the tax year beginning in 2015?	1c		х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			1
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	1		}
	before 2015? Yes X No	1		İ
	If "Yes," list the years ▶ , , , ,	l		l
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			ĺ
_	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1		
	statement - see instructions.) N/A	2b		ŀ
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	-20		
·	in the provisions of section 4342(a)(2) are being applied to any of the years nated in 2a, has the years here.		i .	•
20	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			l
Ja	during the year?		1	
		1	\ '	1
0	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	1	[.	[
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
_	Form 4720, to determine if the foundation had excess business holdings in 2015) N/A	3b		107
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	1		,
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		X
	F	orm 99	D-PF	(2015)

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Total number of other employees paid over \$50,000

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Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
REX CAPITAL ADVISORS, LLC - 50 PARK ROW WEST	MANAGEMENT/ADVISORY	Ĭ.
- SUITE 113, PROVIDENCE, RI 02903	SERVICES	225,000.
	7	
	7	ľ
		
	7	i
		
	7	
Total number of others receiving over \$50,000 for professional services		<u> </u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist	ical information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers prod	uced, etc.	Expenses
1 N/A		
' <u></u>		
		
2		
3		
<u> </u>		
4		
4		
Part IX:B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on l	ines 1 and 2	Amount
1 N/A	intes Tuno 2.	
I N/A		
<u> </u>		
2		
All other program-related investments. See instructions.		
3		

Total. Add lines 1 through 3

_	orm 990-PF (2015) C/O REX CAPITAL ADVISORS, LLC		05-	0494244	Page 8
F	Part X Minimum Investment Return (All domestic foundations must co	mplete this part. Foreign foun	dations, s	ee instructions.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., p	ourposes:	$\neg op op$		
á	Average monthly fair market value of securities		1a	27,139	
ı	Average of monthly cash balances		1b	1,819	
(Fair market value of all other assets		1c	50	799.
(Total (add lines 1a, b, and c)	Γ	1d	29,010	,458.
•	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	0.1			
2	Acquisition indebtedness applicable to line 1 assets		2		0.
3	Subtract line 2 from line 1d	ŗ	3	29,010	,458.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see ins	tructions)	4	435	,157.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V,	line 4	5	28,575	,301.
6	Minimum investment return. Enter 5% of line 5	ľ	6	1,428	
F	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) foreign organizations check here and do not complete this part.)	private operating foundations and	certain		
1	foreign organizations check here and do not complete this part.) Minimum investment return from Part X, line 6	·	1	1,428	765
2a		ŀ	- 	1,420	, 105.
_			1		
b	, , ,		0.		0.
С 3		}	2c	1,428	
4	Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions	-	4	1,420	, 703.
5	Add lines 3 and 4	}	5	1,428	
6	Deduction from distributable amount (see instructions)	ŀ	6	1,420	, <u>/ 03.</u>
_	,	. }	7	1,428	
7 명리	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line			1,420	, 705.
	Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	<u> </u>			
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	1,585	425.
t	Program-related investments - total from Part IX-B		1b		0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	purposes	2		
3	Amounts set aside for specific charitable projects that satisfy the:				
а	Suitability test (prior IRS approval required)	Ī	3a		
b	Cash distribution test (attach the required schedule)		3b		
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part X	(III, line 4	4	1,585	425.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment				
	income. Enter 1% of Part I, line 27b	Ì	5		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	ŀ	6	1,585	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calc 4940(e) reduction of tax in those years.	ulating whether the foundation qu	ualifies for t	he section	

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Part XIII Undistributed Income (s	ee instructions)			
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2014	2014	2015
1 Distributable amount for 2015 from Part XI, line 7				1,428,765.
2 Undistributed income, if any, as of the end of 2015			_	
a Enter amount for 2014 only			0.	
b Total for prior years:]	_]		
3 Excess distributions carryover, if any, to 2015:		0.		
	Ì			
a From 2010				
b From 2011 c From 2012		1		
dFrom 2013 251,932.				
eFrom 2014 2,022,304.				
f Total of lines 3a through e	2,274,236.			
Qualifying distributions for 2015 from	2,271,2301			
Part XII, line 4: ▶\$ 1,585,425.				
a Applied to 2014, but not more than line 2a	ļ		o .	
b Applied to undistributed income of prior	· · · · · · · · · · · · · · · · · · ·			
years (Election required - see instructions)		0.		10 1/2 14 1/2
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			5.4聚 6
d Applied to 2015 distributable amount			- 3	1,428,765.
e Remaining amount distributed out of corpus	156,660.		- 14	
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount	0.		=	0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as		İ	-	
indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,430,896.			
b Prior years' undistributed income. Subtract			-	
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which			-	=
the section 4942(a) tax has been previously	1		-	
assessed		0.		<u></u>
d Subtract line 6c from line 6b. Taxable	1	ا م		1
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line	,		0.	
4a from line 2a. Taxable amount - see instr.			<u> </u>	
f Undistributed income for 2015. Subtract	ļ			
lines 4d and 5 from line 1. This amount must			•	0.
be distributed in 2016 7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	0.		!	
9 Excess distributions carryover to 2016.		· · · · · · · · · · · · · · · · · · ·		
Subtract lines 7 and 8 from line 6a	2,430,896.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013 251,932.				
d Excess from 2014 2,022,304.				
e Excess from 2015 156,660.				5 000 BE (0045)

523581 11-24-15

Form **990-PF** (2015)

c Any submission deadlines:

b The form in which applications should be submitted and information and materials they should include;

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form 990-PF (2015) C/O REX CAPITAL ADVISORS, LLC

05-0494244 Page 11

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
		[
SEE ATTACHMENT	N/A	501(C)(3)		1,577,500.
	 			2,377,300
				ı
	1			
			Į į	
	 	 		-
		<u> </u>	l	
Total		,	▶ 3a	1,577,500.
b Approved for future payment				
NONE				
			-	
	ľ			
]			
		1		
Total	<u> </u>	l	▶ 3b	0.
				000 DE (00 to

TRIMIX FOUNDATION C/O REX CAPITAL ADVISORS, LLC

Inter gross amounts unless otherwise indicated.	Unrelated	business income		ed by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a					
b					
C					
d					
e			\perp		
f					
g Fees and contracts from government agencies			+		<u></u>
2 Membership dues and assessments					· · · · · · · · · · · · · · · · · · ·
Interest on savings and temporary cash			1 1		
investments			14	262 012	
Dividends and interest from securities	 		+ + 4	263,012.	
5 Net rental income or (loss) from real estate:			+ +		
a Debt-financed property	-		+ +		
b Not debt-financed property	<u> </u>		++		
8 Net rental income or (loss) from personal					
property 7 Other investment income	 		14	<103,724.	
B Gain or (loss) from sales of assets other			++-	VIU3, 124.	<u> </u>
than inventory			18	21,795.	
9 Net income or (loss) from special events	 		+ = -		
Gross profit or (loss) from sales of inventory	 		+		
1 Other revenue:			1 1	-	
a					
b					
•					
-					
· · · · · · · · · · · · · · · · · · ·					
·					
d	77-n2 	0	్ క≅. • (ాఎ	181,083.	
d	A 4 2 HET 경기관계획	0	pri pe • Per-autra	181,083.	181,08
e 2 Subtotal. Add columns (b), (d), and (e)		0	# # # # # # # # # # # # # # # # # # #		
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated	0ns.)			13	
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI B Relationship of Activit Line No. Explain below how each activity for which	ons.) ties to the According to the Accor	mplishment of E	xempt	13	181,08
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part*XVI:B3 Relationship of Activit	ons.) ties to the According to the Accor	mplishment of E	xempt	13	181,08
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) 6 See worksheet in line 13 instructions to verify calculation Part XVI_B Relationship of Activit Line No. Explain below how each activity for which	ons.) ties to the According to the Accor	mplishment of E	xempt	13	181,08
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI_B Relationship of Activit Line No. Explain below how each activity for which	ons.) ties to the According to the Accor	mplishment of E	xempt	13	181,08
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI B Relationship of Activit Line No. Explain below how each activity for which	ons.) ties to the According to the Accor	mplishment of E	xempt	13	181,08
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) 6 See worksheet in line 13 instructions to verify calculation Part XVI_B Relationship of Activit Line No. Explain below how each activity for which	ons.) ties to the According to the Accor	mplishment of E	xempt	13	181,08
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) 6 See worksheet in line 13 instructions to verify calculation Part XVI_B Relationship of Activit Line No. Explain below how each activity for which	ons.) ties to the According to the Accor	mplishment of E	xempt	13	181,08
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) He worksheet in line 13 instructions to verify calculation Part XVI B Relationship of Activit Line No. Explain below how each activity for which	ons.) ties to the According to the Accor	mplishment of E	xempt	13	181,08
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) He worksheet in line 13 instructions to verify calculation Part XVI B Relationship of Activit Line No. Explain below how each activity for which	ons.) ties to the According to the Accor	mplishment of E	xempt	13	181,08
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) He worksheet in line 13 instructions to verify calculation Part XVI B Relationship of Activit Line No. Explain below how each activity for which	ons.) ties to the According to the Accor	mplishment of E	xempt	13	181,08
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) 6 See worksheet in line 13 instructions to verify calculation Part XVI_B Relationship of Activit Line No. Explain below how each activity for which	ons.) ties to the According to the Accor	mplishment of E	xempt	13	181,08
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) 6 See worksheet in line 13 instructions to verify calculation Part XVI_B Relationship of Activit Line No. Explain below how each activity for which	ons.) ties to the According to the Accor	mplishment of E	xempt	13	181,08
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI B Relationship of Activit Line No. Explain below how each activity for which	ons.) ties to the According to the Accor	mplishment of E	xempt	13	181,08
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI_B Relationship of Activit Line No. Explain below how each activity for which	ons.) ties to the According to the Accor	mplishment of E	xempt	13	181,08
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) 6 See worksheet in line 13 instructions to verify calculation Part XVI_B Relationship of Activit Line No. Explain below how each activity for which	ons.) ties to the According to the Accor	mplishment of E	xempt	13	181,08
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI_B Relationship of Activit Line No. Explain below how each activity for which	ons.) ties to the According to the Accor	mplishment of E	xempt	13	181,08

		IX FOUND					05.0			
		REX CAPI				15.10		94244		ge 13
Part >			ransfers To a	and Trans	sactions ai	nd Relation	ships With Nonc	haritable	•	
	Exempt Orga					 			Vaal	Na
	the organization directly or inc						ction 501(c) of	}	Yes	NO
	Code (other than section 501(zations?				
a Trai	nsfers from the reporting foun	dation to a noncha	arıtable exempt or	ganization of:				}	ł	
(1)	Cash							1a(1)		<u>X</u>
(2)	Other assets							18(2)		Х
b Oth	er transactions:									
(1)	Sales of assets to a noncharit	table exempt orga	nızatıon					16(1)	i	X
(2)	Purchases of assets from a n	ioncharitable exem	npt organization					1b(2)		X
(3)	Rental of facilities, equipment	t, or other assets						1b(3)	T	X
(4)	Reimbursement arrangement	ts						1b(4)		X
(5)	Loans or loan guarantees							1b(5)		X
• •	Performance of services or m	nembership or fun	draising solicitatio	ons				1b(6)		X
	ring of facilities, equipment, m		=					10		X
	e answer to any of the above				(b) should alw	avs show the fair	market value of the goo	ds. other ass	ets.	
	ervices given by the reporting		-		• •	-	=		,,	
	imn (d) the value of the goods						or or ordering arrangeme	, 0011		
(a)Line no			ne of noncharitable		nization	(d) Descripti	on of transfers, transactions,	and sharing arr	angemer	nts
(2)2	(6)////////////////////////////////////	(0).1.	N/A	- CAGIAIPT O. B.		(0) 3030	011 01 11 11 11 11 11 11 11 11 11 11 11	and Sharing an	arigo inc.	
	 		N/A			 				
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						<u> </u>				
						<u> </u>				
2a is ti	ne foundation directly or indire	ctly affiliated with,	, or related to, one	or more tax-	exempt organiza	ations described				
ın s	ection 501(c) of the Code (oth	ier than section 50)1(c)(3)) or in sec	tion 527?				Yes	X] No
b If "Y	es," complete the following so	:hedule.								
	(a) Name of o	rganization		(b) Type of	organization		(c) Description of relat	onship		
	N/A									
										
	· 			 						
							· · · · · · · · · · · · · · · · · · ·			
	Under penalties of perjury, I declar	re that I have examine	ed this return, including	ng accompanyin	g schedules and s	tatements, and to the	ne best of my knowledge			
Sign	and belief, it is true, forrect, and c	omplete peclaration	of preparer (other tha	n taxpayer) is b	ased on all informa	ition of which prepa	rer has any knowledge	May the IRS d	prepare	er
Here)		lit /	WHI.	PRESI	DENT	shown below	see inst] No
	Signature of officer or trust	%W\		Date	1410	Title		163		1110
	Print/Type prepare/s		Preparer's s			Date	Check If P1	IN		
	7	U				· · · · ·	self- employed			
Paid	HILLARY B	TIRR CDA	1 100	1	.000	11/15/2011	, , ,	00910	379	
Prepa			PANY, P.	A	1CDA 1	111314111	Firm's EIN ► 04			
Hea C		Tr & COM	- ~ ·	\mathcal{C}			CIIIII S EIN P U4	40030	<i>.</i>	

Use Only

Firm's address ▶ 99 HIGH STREET, 21ST FLOOR BOSTON, MA 02110

Phone no 617-439-9700

Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (mo., day, yr.) (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) 1a FIDELITY #9645 - SEE ATTACHED P 01/01/1512/31/15 #9645 - SEE ATTACHED 01/01/1412/31/15 b FIDELITY P 01/01/1512/31/15 c FIDELITY #3309 SEE ATTACHED P d FIDELITY #3309 SEE ATTACHED P 01/01/1412/31/15 e FIDELITY #9645 LT CAP GAIN DISTRIBUTIONS P _ f JPM #8007 P 01/01/1412/31/15 g JPM #5002 CAP GAIN DISTRIBUTIONS P h JPM #8007 -CAP GAIN DISTRIBUTIONS LT P SECTION 1231 GAINS | PARTNERSHIP P PARTNERSHIP SECTION 1256 STRADDLES P k PARTNERSHIP ST CAP GAINS P PARTNERSHIP LT CAP GAINS P m LOSS ON INCA LATIN AMERICA P 12/31/1312/31/15 n LOSS ON BARCLAYS STRATEGIC COMMODITIES 12/31/1308/17/15 P o LOSS ON CLOUGH EMETH FUND 01/01/1412/31/15 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (a) 1,467,750 1,432,780 34,970. 65,875. 87,796. $\overline{<21,921.}>$ b 54,205. 351,365. 51,578. 435,179. $\overline{<2,627.}>$ 83,814. 51,097. 51,097. <1,650.> <1,650.> 17,909. 17,909. 2,138. 2,138. h 13,606. 13,606. <63,686. <63,686.> <29,518.> <29,518.> 392,262. 392,262. 379,178. <379,178.m 174,579 250,000. <75,421.> n 977,718. 977,718. <u>o.</u> Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (I) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any 34,970. <21,921.> b <2,627.>83,814. 51,097. <1,650.>17,909. 2,138. 13,606. <u><63,686.</u>> <29,518._> 392,262. <379,178.m <75,421.>n 0. { If gain, also enter in Part I, line 7 } If (loss), enter "-0-" in Part I, line 7 } 2 Capital gain net income or (net capital loss) 2 21,795. Net short-term capital gain or (loss) as defined in sections 1222(5) and (6); If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 N/A

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.lrs.gov/form990.

2015

OMB No 1545-0047

Name of the organization

TRIMIX FOUNDATION
C/O REX CAPITAL ADVISORS, LLC

Employer identification number

05-0494244

Organization type (check one).					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
• •	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions				
General Rule					
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions				
Special Rules					
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1. Complete Parts I and II.				
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for ruelty to children or animals. Complete Parts I, II, and III.				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.					
but it must answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization
TRIMIX FOUNDATION
C/O REX CAPITAL ADVISORS, LLC

Employer identification number

05-0494244

Part I	Contributors	(see instructions).	Use duplicate	copies of Part	i if additional	space is needed.
--------	--------------	---------------------	---------------	----------------	-----------------	------------------

(b) Name, address, and ZIP + 4 DALTON CHARITABLE LEAD TRUST C/O REX CAPITAL, 50 PARK ROW WEST PROVIDENCE, RI 02903 (b) Name, address, and ZIP + 4	(c) Total contributions \$ 400,000. (c) Total contributions	(d) Type of contribution Person X Payroll
C/O REX CAPITAL, 50 PARK ROW WEST PROVIDENCE, RI 02903 (b) Name, address, and ZIP + 4	(c) Total contributions	Payroll Noncash (Complete Part II for noncash contributions) (d) Type of contribution Person Payroll Noncash (Complete Part II for
Name, address, and ZIP + 4 (b)	Total contributions - \$	Person Payroll Noncash Complete Part II for
	-	Payroll Noncash (Complete Part II for
Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	- - \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	- - \$	Person Payroll Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	- - \$	Person Payroll Noncash (Complete Part II for noncash contributions)
	Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (b)	(b) Name, address, and ZIP + 4 (c) Total contributions (b) Name, address, and ZIP + 4 (c) Total contributions (b) Name, address, and ZIP + 4 (c) Total contributions

Name of organization
TRIMIX FOUNDATION
C/O REX CAPITAL ADVISORS LL.

Employer identification number

/U KEX C	APITAL ADVISORS, LLC		5-0494244
art II Non	ncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ =			
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a)			
No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			
_			

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

523453 10-26-15

523454 10-26-15

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

FORM 990-PF	DIVIDENDS	AND INTE	REST	FROM SECUE	RITIES S	TATEMENT	_1
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDEN		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME		
DIVIDENDS INTEREST TAX-EXEMPT INCOME	214,294. 34,411. 14,307.		0. 0. 0.	214,294. 34,411. 14,307.	34,411.		
TO PART I, LINE 4	263,012.		0.	263,012.	263,012.		
FORM 990-PF		OTHER :	INCO	ME	S	TATEMENT	2
DESCRIPTION			RE		(B) HET INVEST- HENT INCOME	(C) ADJUSTEI NET INCOM	
JPM #5002 CURRENCY PARTNERSHIPS - ORD PARTNERSHIPS - OTHE PARTNERSHIPS - OTHE	BUS INCOME R INCOME/LO			<1,337.> <38,007.> <66,718.>	<1,337.> <38,007.> <66,718.>		
INCOME	R FORTFOLIC	•		2,338.	2,338.		
TOTAL TO FORM 990-P	F, PART I,	LINE 11 =		<103,724.>	<103,724.>		<u> </u>
FORM 990-PF		ACCOUNT	ING 1	FEES	S	TATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) I INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	
TAX PREP		1,560	•	0.		1,56	0.
TO FORM 990-PF, PG	1, LN 16B	1,560	. —	0.		1,56	0.
			= ==				_

FORM 990-PF	OTHER PROFES	SIONAL FEES	S	TATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES - FIDELITY #3309 INVESTMENT MANAGEMENT FEES	26.	26.		0.
- JPM #5002 INVESTMENT MANAGEMENT FEES	8.	8.		0.
- ML #2445 INVESTMENT MANAGEMENT FEES	20.	20.		0.
- RCA	225,000.	225,000.		0.
TO FORM 990-PF, PG 1, LN 16C	225,054.	225,054.		0.
FORM 990-PF	TAX	ES	S'	FATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES FEDERAL TAXES STATE TAXES	5,470. 10,000. 378.			0. 0. 378.
TO FORM 990-PF, PG 1, LN 18	15,848.	5,470.		378.
FORM 990-PF	OTHER E	XPENSES	S	ratement 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PORTFOLIO EXPENSES OTHER PORTFOLIO DEDUCTIONS OTHER DEDUCTIONS NONDEDUCTIBLE EXPENSES MEMBERSHIPS PRINTING & REPRODUCTION SECTION 179 DEDUCTION	186,150. 46. 7,685. 1,852. 5,840. 147. 245.	186,150. 46. 7,685. 0. 0. 0. 245.		0. 0. 0. 5,840. 147.
TO FORM 990-PF, PG 1, LN 23	201,965.	194,126.		5,987.

FORM 990-PF OTHER DECREASES IN	NET ASSETS OR F	UND BALANCES	STATEMENT
DESCRIPTION			AMOUNT
CHANGE IN UNREALIZED GAIN/LOSS REALIZED GAIN/LOSS - BOOK AT FMV			689,680 21,795
TOTAL TO FORM 990-PF, PART III, L	INE 5		711,475
FORM 990-PF C	ORPORATE STOCK		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
COMMON & PREFERRED STOCK	•	9,714,054.	9,714,054
TOTAL TO FORM 990-PF, PART II, LI	NE 10B	9,714,054.	9,714,054
FORM 990-PF OT	HER INVESTMENTS		STATEMENT S
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
ABR REINSURANCE	FMV	750,000.	750,000
ART	FMV	46,000.	46,000.
BAIN CAPITAL FUND XI	FMV	152,275.	152,275
CLOUGH EMETH OFFSHORE FUND CONVEXITY CAPITAL OFFSHORE	FMV	977,718.	977,718.
DAVID INVESTMENT VENTURES III-A	FMV FMV	6,000,000. 35,190.	6,000,000. 35,190.
EDGE PRINCIPAL INVESTMENTS III	FMV	346,575.	346,575
GNDI HOLDINGS I	FMV	37,741.	37,741.
INCA LATIN AMERICAN FUND	FMV	164,645.	164,645.
LASCAUX RESOURCE CAPITAL FUND	FMV	94,660.	94,660.
LOEB ARBITRAGE FUND	F M V	13,255.	13,255.
MIDDLELAND ENDOWMENT I	FMV	6,009,402.	6,009,402.
NORTH RUN OFFSHORE PARTNERS	FMV	762,530.	762,530.
REX ADV K VIII REX ADVISORS CB 2014	FMV FMV	264,513. 195,175.	264,513. 195,175.
REX ADVISORS CD 2014 REX ADVISORS COPLEY X INVESTORS	FMV	457,694.	457,694
TAP COMMODITYBUILDERS	FMV	431,031.	431,031
THL EQUITY FUND VII	FMV	<4,566.>	
TOTAL TO FORM 990-PF, PART II, LI	NE 13	16,733,838.	16,733,838.
	•		

	T OF OFFICERS, DI FOUNDATION MANAG		STATE	MENT 10
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
GAIL S. MIXER 50 PARK ROW WEST, SUITE 113 PROVIDENCE, RI 02903	PRESIDENT 1.00	0.	0.	0.
DAVID P. MIXER 50 PARK ROW WEST, SUITE 113 PROVIDENCE, RI 02903	VICE PRESIDENT	0.	0.	0.
BRIAN MIXER 50 PARK ROW WEST, SUITE 113 PROVIDENCE, RI 02903	DIRECTOR 1.00	0.	0.	0.
MARK MIXER 50 PARK ROW WEST, SUITE 113 PROVIDENCE, RI 02903	DIRECTOR 1.00	0.	0.	0.
MICHAEL MIXER 50 PARK ROW WEST, SUITE 113 PROVIDENCE, RI 02903	DIRECTOR 1.00	0.	0.	0.
MATTHEW A. THIBAULT 50 PARK ROW WEST, SUITE 113 PROVIDENCE, RI 02903	SECRETARY 2.00	0.	0.	0.
ARTHUR X. DUFFY 50 PARK ROW WEST, SUITE 113 PROVIDENCE, RI 02903	TREASURER 2.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII =	0.	0.	0.
	XV - LINE 1A OUNDATION MANAGER	.s	STATE	MENT 11

NAME OF MANAGER

GAIL S. MIXER DAVID P. MIXER FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 12

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

GAIL S. MIXER C/O REX CAPITAL ADVISORS 50 PARK ROW WEST NO.113 PROVIDENCE, RI 02903

TELEPHONE NUMBER

401-383-5370

FORM AND CONTENT OF APPLICATIONS

APPLICATIONS SHOULD BE WRITTEN REQUESTS ON LETTERHEAD AND SHOULD PROVIDE INFORMATION REGARDING QUALIFIED CHARITABLE STATUS AND INTENDED USE OF GRANT.

ANY SUBMISSION DEADLINES

N/A

RESTRICTIONS AND LIMITATIONS ON AWARDS

N/A

Trimix Foundation
Tax Year 2015
Grants and Contributions Paid

				71b or	Foundation		
				Postal	Status of	Relationship of	
Recipient's Name	Street	City	State	Code	Recipient	Recipient	Amount
Adrienne Arsht Center (FL)	1300 Biscayne Blvd	Міаті	FL	33132	501(C)(3)	N/A	\$ 10,000
Americans for Immigrant Justice's (FL)	3000 Biscayne Blvd. Suite 400	Mıamı	FL	33137	501(C)(3)	N/A	
Amos House (RI)	415 Friendship Street, Suite 72873	Providence	RI	02907	501(C)(3)	N/A	
AS220 (RI)	95 Mathewson Street, #204	Providence	R	02903	501(C)(3)	N/A	\$ 30,000
Boys & Girls Club of Providence (RI)	550 Wickenden Street	Providence	RI	02903	501(C)(3)	N/A	\$ 50,000
Boys & Girls Club of Miami Dade (FL)	P O Box 330219	Miami	FL	33233	501(C)(3)	N/A	\$ 30,000
Boys & Girls Club of Miami Dade (FL)	P O Box 330219	Miami	FL	33233	501(C)(3)	N/A	
Boys & Girls Club of Miami Dade (FL)	P O Box 330219	Mıam	FL	33233	501(C)(3)	N/A	\$ 1,000
Breakthrough Providence (RI)	216 Hope Street	Providence	RI	02906	501(C)(3)	N/A	
Breakthrough Miami (FL)	3250 SW Third Avenue, 6th Floor	Miami	FL	33129	501(C)(3)	N/A	\$ 25,000
Breakthrough Miami (FL)	3250 SW Third Avenue, 6th Floor	Miami	FL	33129	501(C)(3)	N/A	\$ 500
Caleb Group/Mohawk Forest (MA)	201 Mohawak Forest Blvd	North Adams	MA	01247	501(C)(3)	N/A	\$ 3,000
Catalyst Miami (FL)	1900 Biscayne Blvd, Suite 200	Mıamı	FL	33132	501(C)(3)	N/A	\$ 30,000
Catalyst Miami (FL)	1900 Biscayne Blvd, Suite 200	Mıamı	FL	33132	501(C)(3)	N/A	\$ 200
Capital Good Fund (RI)	56 Pine Street, 3rd Floor	Providence	RI	02903	501(C)(3)	N/A	\$ 2,000
Capital Good Fund (RI)	56 Pine Street, 3rd Floor	Providence	RI	02903	501(C)(3)	N/A	\$ 5,000
Central Falls Family Self-Sufficiency Foundation (RI)	30 Washington Street	Central Falls	RI	02863	501(C)(3)	N/A	
Children' Friend (RI)	153 Summer Street	Providence	RI _	02903	501(C)(3)	N/A	\$ 10,000
City Year (RI)	77 Eddy Street	Providence	RI	02903	501(C)(3)	N/A	\$ 10,000
City Year (RI)	77 Eddy Street	Providence	RI_	02903	501(C)(3)	N/A	
College Visions (RI)	131 Washington Street, Suite 205	Providence	RI	02903	501(C)(3)	N/A	
Crossroads (RI)	160 Broad Street	Providence	RI	02903	501(C)(3)	N/A	\$ 10,000
Crossroads (RI)	160 Broad Street	Providence	RI	02903	501(C)(3)	N/A	\$ 44,000
Crossroads (RI)	160 Broad Street	Providence	RI	02903	501(C)(3)	N/A	\$ 10,000
Dorcas International Institue of Rhode Island (RI)	220 Elmwood Avenue	Providence	RI	02907	501(C)(3)	N/A	\$ 50,000
Educate Tomorrow (FL)	1717 North Bayshore Drive, Suite 203	Міаті	F.	33132	501(C)(3)	N/A	\$ 25,000
Educate Tomorrow (FL)	1717 North Bayshore Drive, Suite 203	Mıamı	딢	33132	501(C)(3)	N/A	
Educate Tomorrow (FL)	1717 North Bayshore Drive, Suite 203	Mıamı	글	33132	501(C)(3)	N/A	
Educate Tomorrow (FL)	1717 North Bayshore Drive, Suite 203	Mıamı	旦	33132	501(C)(3)	N/A	}
Education Fund (FL)	6713 Main Street, Suite 240	Miami Lakes	三	33014	501(C)(3)	N/A	,
Education Fund (FL)	6713 Main Street, Suite 240	Miami Lakes	딜	33014	501(C)(3)	N/A	}
Education Fund (FL)	6713 Main Street, Suite 240	Miami Lakes	드	33014	501(C)(3)	N/A	
Education Fund (FL)	6713 Main Street, Suite 240	Mıamı Lakes	딜	33014	501(C)(3)	N/A	
GableStage (FL)	1200 Anastasia Avenue, #230	Coral Gables	르	33134	501(C)(3)	N/A	
I'I Women (FL)	3370 NE 190th Street, Suite 3811	Aventura	딜	33180	501(C)(3)	N/A	
Learning One to One (FL)	2555 Collins Avenue, Suite 2010	Mıamı Beach	티	33139	501(C)(3)	N/A	50
Learning One to One (FL)	2555 Collins Avenue, Suite 2010	Mıamı Beach	<u>E</u>	33139	501(C)(3)	V/A	
Miami Lighhouse for the Blind and Visually Impaired, Inc. (FL)	601 SW 8th Avenue	Miami	国	33130	501(C)(3)	N/A	
Mindful Kids Miami (FL)	PO Box 430751	South Miami	르	33243	501(C)(3)	N/A	20
Mindful Kids Miami (FL)	PO Box 430751	South Miami	딜	33243	501(C)(3)	N/A	1
Narragansett Council (RI)	PO Box 14777	East Providence	2	02914	501(C)(3)	N/A	\$ 20,000
PASA (RI)	140 Broadway	Providence	R	02903	501(C)(3)	N/A	
PASA (RI)	140 Broadway	Providence	RI	02903	501(C)(3)	N/A	\$ 30,000
Project New Urban Arts (RI)	705 Westminster Street	Providence	RI	02903	501(C)(3)	N/A	\$ 50,000
Railroad Street Youth Project (MA)	PO Box 698	Great Barrington	MA	01230	501(C)(3)	N/A	Ì
Read to Success (RI)	175 Hillside Road	Cranston	22	02920	501(C)(3)	N/A	\$ 20,000
Rhode Island Nurses Institute Middle College (RI)	150 Washington Street, 4th Floor	Providence	RI	02903	501(C)(3)	, A/N	\$ 500

Sam Mignel (RJ) S45 Branch Avenue Providence RI 02940 501C(3) N/A Som Mignel (RJ) S45 Branch Avenue H 0290 501C(3) N/A Som Mignel (RJ) Scoal Venuer Partners of RI 0290 501C(3) N/A Som Venuer Partners of RI S52 Elmwood Avenue RI 0290 501C(3) N/A Som Venuer Partners of RI GCAGAR Street, Stute 101 Providence RI 0290 501C(3) N/A Teach For America (RJ) GCAGAR Street, Stute 101 Providence RI 0290 501C(3) N/A The SEED School of Mann (FL) 1000 Brickell Avenue, Suite 1020 Mann FL 3313 501C(3) N/A The SEED School of Mann (FL) 1000 Brickell Avenue, Suite 1020 Mann FL 3313 501C(3) N/A The SEED School of Mann (FL) 1000 Brickell Avenue, Suite 1020 Mann FL 3313 501C(3) N/A The SEED School of Mann (FL) 1000 Brickell Avenue, Suite 1020 Mann FL 3313 501C(3) <	RISE (RI)	143 Prairie Avenue, First Floor	Providence	RI	02905	501(C)(3)	N/A	ş	3,500
545 Branch Avenue Providence R1 02940 501 460 Harris Avenue House House, Unit 303 Providence R1 02999 501 582 Elmwood Avenue Providence R1 02909 501 67 Cedar Street, Suite 101 Providence R1 02903 501 FL) 1000 Brickell Avenue, Suite 1020 Miami FL 33131 501 FL) 1000 Brickell Avenue, Suite 1020 Miami FL 33131 501 A) PO Brickell Avenue, Suite 1020 Miami FL 33131 501 MA) PO Brickell Avenue, Suite 1020 Miami FL 33131 501 MA) PO Box 6034055 Cambridge MA 0183 501 MA) 807 Union Street Scheek Ringston R1 02909 501 bundation 100 Box 603300 Suite 264 Coral Gables FL 33434 501 bundation BO Box 603300 Suite 264 Coral Gables FL 334	San Miguel (RI)	545 Branch Avenue	Providence	RI	02940	501(C)(3)	N/A	€5	30,000
ELD Harris Avenue, Unit 303 Providence R1 02907 501 SR2 Elmwood Avenue Providence R1 02907 501 G7 Cedar Street, Suite 101 Providence R1 02907 501 FLJ 1000 Brickell Avenue, Suite 1020 Miamin FL 31313 501 FLJ 1000 Brickell Avenue, Suite 1020 Miamin FL 31313 501 FLJ 1000 Brickell Avenue, Suite 1020 Miamin FL 31313 501 MA) P O Box 391535 Cambridge MA 02138 501 MA) P O Box 391535 Cambridge MA 02138 501 MA) 807 Union Street Schenectady NY 12308 501 CUTEC) MA 301 Valley Street Lowidence RI 02909 501 Storet 301 Valley Street Coral Gables FL 33434 501 3001 Ponce de Leon Blvd , Suite 264 Coral Gables RI 07079 501 PO Box 6030	San Miguel (RI)	545 Branch Avenue	Providence	RI	02940		N/A	s	75,000
582 Elimwood Avenue Providence RI 02907 501 ami (FL) 67 Cedar Street, Suite 101 Providence RI 02903 501 ami (FL) 1000 Barckell Avenue, Suite 1020 Miami FL 33131 501 ami (FL) 1000 Barckell Avenue, Suite 1020 Miami FL 33131 501 ami (FL) 1000 Barckell Avenue, Suite 1020 Miami FL 33131 501 ami (FL) 1000 Barckell Avenue, Suite 1020 Miami FL 33131 501 ami (FL) PO Box 391535 Cambridge MA 02138 501 anter (UTEC) MA 34 Hurd Street Lowell MA 01835 501 netr (UTEC) MA 301 Fone de Leon Blvd , Suite 264 Coral Gables RI 02909 501 Aboundation PO Box 60300 Providence RI 33434 501 About Opine de Leon Blvd , Suite 264 Coral Gables FL 33434 501 About Opine de Leon Blvd , Suite 264 Coral Gables RI	Social Venture Partners of RI	460 Harris Avenue, Unit 303	Providence	RI	05303		N/A	s	25,000
am. (FL) Providence RI 02903 501 am. (FL) 1000 Brickell Avenue, Suite 1010 Mamin FL 33131 501 am. (FL) 1000 Brickell Avenue, Suite 1020 Miamin FL 33131 501 am. (FL) 1000 Brickell Avenue, Suite 1020 Miamin FL 33131 501 lub (MA) PO Box 391535 Cambridge MA 02138 501 lute (UTEC) MA 807 Union Street Schenectady NY 12308 501 so Valley Street 50 Valley Street Ringston RI 02909 501 do Valley Street PO Box 603300 Providence RI 02906 501 do Po Box 603300 PO Box 603300 Providence RI 33434 501 1.) 22 East Flagler Street, 6th Floor Mamin FL 33434 501 PO Box 833 Browdence RI 02905 501 150 Miller Avenue Providence RI 02905 501 11	Sophia Academy (RI)	582 Elmwood Avenue	Providence	RI	02907	501(C)(3)	N/A	s	1,000
am. (FL) for Cedar Street, Suite 101 Providence RI 02903 501 am. (FL) 1000 Brickell Avenue, Suite 1020 Miami FL 33131 501 am. (FL) 1000 Brickell Avenue, Suite 1020 Miami FL 33131 501 lub (MA) PO Box 391535 Cambridge MA 02138 501 lub (MA) 807 Union Street Schenectady NY 12308 501 sof Valley Street Providence RI 02909 501 nd Foundation URI, Tyler Hall, Suite 202 Kingston RI 02906 501 lub Cond de Leon Blvd, Suite 264 Coral Gables FL 33434 501 lub PO Box 60330 South Orne de Leon Blvd, Suite 264 Coral Gables FL 33434 501 lub PO Box 60330 Providence RI 33434 501 lub PO Box 60330 South Orne 60 Po Box 603 South Orne 60 Po Box 603 lub Po Box 833 Po Box 833 Pr	Teach For America (RI)	67 Cedar Street, Suite 101	Providence	RI	02903	501(C)(3)	N/A	ş	30,000
chool of Maam FL 31313 501 chool of Maam FL 31313 501 chool of Maam FL 31313 501 chool of Maam FL 31313 501 chool of Maam FL 31313 501 s Running Club (MA) PO Box 391535 Cambridge MA 02138 501 s Running Club (MA) PO Box 391535 Cambridge MA 02138 501 Equality Center (UTEC) MA 807 Union Street Lowell MA 01820 501 Reliantly Center (UTEC) MA 34 Hurd Street Providence RI 02906 501 Roll Ring Island Foundation DO Box 603300 Providence RI 02906 501 R Ring (FI) BO Box 603300 Providence RI 02906 501 and (FI) 3001 Ponce de Leon Blvd , Suite 264 Coral Gables FL 33434 501 onts (NI) PO Box 833 South Orange RI 02905 501 <	Teach For America (RI)	67 Cedar Street, Suite 101	Providence	RI	02903	501(C)(3)	N/A	\$	30,000
chool of Miami (FL) FL 33131 501 chool of Miami (FL) Hool Brickell Avenue, Suite 1020 Miamin (FL) FL 33131 501 chool of Miami (FL) PO Box 391535 Cambridge MA 02138 501 ge (NY) Boy (MA)	The SEED School of Miami (FL)	1000 Brickell Avenue, Suite 1020	Mıamı	FL	33131	501(C)(3)	N/A	\$	50,000
chool of Miami (FL) (D00 Brickell Avenue, Suite 1020 Miamin (FL) FL 33131 501 s Running Club (MA) PO Box 391535 Cambridge MA 02138 501 ge (NY) So Vulley Street Schenectady NY 12308 501 Equality Center (UTEC) MA 34 Hurd Street Lowell MA 01852 501 (RI) 1000 Street Bo Valley Street Providence RI 02909 501 (RI) 1000 Street Bo Valley Street Browidence RI 02909 501 (RI) 1000 Street Browidence RI 02909 501 501 (RI) 1000 Ponce de Leon Blvd , Suite 264 Coral Gables FL 33434 501 (RI) 1000 Ponce de Leon Blvd , Suite 264 Coral Gables FL 33434 501 (Malicr Al) Pool Box 833 South Orange NI 70709 501 (St RI) 150 Miller Avenue Providence RI 102905 501 <t< td=""><td>The SEED School of Miami (FL)</td><td>1000 Brickell Avenue, Suite 1020</td><td>Mıamı</td><td>П</td><td>33131</td><td>501(C)(3)</td><td>N/A</td><td>\$</td><td>10,000</td></t<>	The SEED School of Miami (FL)	1000 Brickell Avenue, Suite 1020	Mıamı	П	33131	501(C)(3)	N/A	\$	10,000
s Running Club (MA) PO Box 391535 Cambridge MA 02138 501 ge (NY) 807 Union Street Schenectady NY 12308 501 Equality Center (UTEC) MA 34 Hurd Street Lowell MA 01852 501 (RI) 50 Valley Street Providence RI 02909 501 f Rhode Island Foundation URI. Tyler Hall. Suite 202 Kingston RI 02909 501 net (RI) PO Box 603300 Providence RI 02906 501 nd (FI) 3001 Ponce de Leon Blvd , Suite 264 Coral Gables FL 33434 501 omfortow (FL) 22 East Flagler Street, 6th Floor Mann FL 3343 501 orts (NJ) PO Box 833 South Orange NJ 07079 501 sc (RI) 150 Miller Avenue Providence RI 02905 501 sc (RI) 1112 16th Avenue Providence RI 02905 501	The SEED School of Miami (FL)	1000 Brickell Avenue, Suite 1020	Mıamı	FL	33131	501(C)(3)	N/A	ş	000,1
ge (NY) Softenected by Equality Center (UTEC) MA 807 Union Street Schenected by Equality Center (UTEC) MA 12308 Sol 1852 501 (RI) Equality Center (UTEC) MA 34 Hurd Street Lowell MA 01852 501 (RI) Sol Valley Street Providence RI 02909 501 f Rhode Island Foundation URI. Tyler Hall. Suite 202 Kingston RI 02906 501 net (RI) PO Box 603300 Providence RI 02906 501 nd (FI) 3001 Ponce de Leon Blvd , Suite 264 Coral Gables FL 33434 501 omfortow (FL) Ponce de Leon Blvd , Suite 264 Coral Gables FL 33434 501 orts (NJ) Pon Box 833 South Orange RI 33131 501 sc (RI) 150 Miller Avenue Providence RI 02905 501 sc (RI) 1112 16th Avenue Providence RI 02905 501	Title IX Girls Running Club (MA)	P O Box 391535	Cambridge	MA	02138	501(C)(3)	N/A	ş	20,000
Equality Center (UTEC) MA 34 Hurd Street Lowell MA 01852 501 (RI) 50 Valley Street Providence RI 02909 501 f Rhode Island Foundation URI. Tyler Hall. Suite 202 Kingston RI 02909 501 net (RI) PO Box 603300 Providence RI 02906 501 nd (FI) 3001 Ponce de Leon Blvd. Suite 264 Coral Gables FL 33434 501 nd (FI) 301 Ponce de Leon Blvd. Suite 264 Coral Gables FL 33434 501 nd (FI) 22 East Flagler Street, 6th Floor Maani FL 33434 501 ss (RI) 150 Miller Avenue Providence RI 02905 501 ss (RI) 1112 16th Avenue Providence RI 02905 501 ss (RI) 02905 501 501 501 501 501	Union College (NY)		Schenectady	NY	12308	1	N/A	S	50,000
(RI) 50 Valley Street Providence RI 02909 501 f Rhode Island Foundation URI. Tyler Hall. Suite 202 Kingston RI 0.2965 501 niet (RI) PO Box 603300 Providence RI 0.2906 501 nd (FI) 3001 Ponce de Leon Blvd. Suite 264 Coral Gables FL 33434 501 nd (FI) 22 East Flagler Street, 6th Floor Miami FL 33131 501 si (NI) PO Box 833 South Orange NI 07079 501 si (RI) 150 Miller Avenue Providence RI 02905 501 si (RI) 1112 16th Avenue NW, Suite 240 Washington DC 20036 501	United Teen Equality Center (UTEC) MA	34 Hurd Street	Lowell	MA	01852	501(C)(3)	N/A	ş	10,000
f Rhode Island Foundation URI. Tyler Hall. Suite 202 Kingston RI 02981 501 nter (RJ) P O Box 603300 Providence RI 02906 501 nd (FI) 3001 Ponce de Leon Blvd , Suite 264 Coral Gables FL 33434 501 nd (FI) 3001 Ponce de Leon Blvd , Suite 264 Coral Gables FL 33434 501 omorrow (FL) 22 East Flagler Street, 6th Floor Miami FL 33131 501 orts (NJ) P O Box 833 South Orange NJ 07079 501 ss (RI) 150 Miller Avenue Providence RI 02905 501 ss (RI) 150 Miller Avenue Washington DC 20036 501	United Way (RI)		Providence	RI	02909	_	N/A	s	100,000
nter (RJ) PO Box 603300 Providence RI 02906 501 nd (FJ) 3001 Ponce de Leon Blvd , Suite 264 Coral Gables FL 33434 501 nd (FJ) 3001 Ponce de Leon Blvd , Suite 264 Coral Gables FL 33434 501 omorrow (FL) 22 East Flagler Street, 6th Floor Miamin FL 33131 501 orts (NJ) PO Box 833 South Orange NJ 07079 501 ss (RI) 150 Miller Avenue Providence RI 02905 501 ss (RI) 130 Miller Avenue Providence RI 02905 501 ss (RI) 1112 16th Avenue NW, Suite 240 Washington DC 20036 501	University of Rhode Island Foundation	URI, Tyler Hall, Surte 202	Kıngston	RI	02881	501(C)(3)	N/A	69	20,000
nd (FJ) 3001 Ponce de Leon Blvd, Sunte 264 Coral Gables FL 33434 501 nd (FJ) 3001 Ponce de Leon Blvd, Sunte 264 Coral Gables FL 33434 501 omorrow (FL) 22 East Flagler Street, 6th Floor Maann FL 33131 501 orts (NJ) PO Box 833 South Orange NJ 07079 501 ss (RI) 150 Miller Avenue Providence RI 02905 501 ss (RI) 1112 16th Avenue NW, Sunte 240 Washington DC 20036 501	Women's Center (RI)		Providence	RI	02906		N/A	ş	10,000
nd (FI) 3001 Ponce de Leon Blvd , Sunte 264 Coral Gables FL 33434 501 omorrow (FL) 22 East Flagler Street, 6th Floor Muam FL 33131 501 orts (NJ) P O Box 833 South Orange NJ 07079 501 ss (RI) 150 Miller Avenue Providence RI 02905 501 ss (RI) 130 Miller Avenue Providence RI 02905 501 1112 16th Avenue NW, Suite 240 Washington DC 20036 501	Women's Fund (FI)	3001 Ponce de Leon Blvd, Suite 264	Coral Gables	FL	33434	501(C)(3)	N/A	s	30,000
omorrow (FL) 22 East Flagler Street, 6th Floor Miamin FL 33131 501 orts (NJ) PO Box 833 South Orange NJ 07079 501 ss (RJ) 150 Miller Avenue Providence RJ 02905 501 ss (RJ) 150 Miller Avenue Providence RJ 02905 501 1112 16th Avenue NW, Suite 240 Washington DC 20036 501	Women's Fund (FI)	3001 Ponce de Leon Blvd, Suite 264	Coral Gables	FL	33434	501(C)(3)	N/A	s	1,000
orts (NJ) PO Box 833 South Orange NJ 07079 501 ss (RJ) 150 Miller Avenue Providence RJ 02905 501 ss (RJ) 150 Miller Avenue Providence RJ 02905 501 1112 16th Avenue NW, Suite 240 Washington DC 20036 501	Women of Tomorrow (FL)	22 East Flagler Street, 6th Floor	Mıamı	FL	33131	501(C)(3)	N/A	ş	30,000
ss (RI) 150 Miller Avenue Providence RI 02905 501 ss (RI) 150 Miller Avenue Providence RI 02905 501 1112 16th Avenue NW, Suite 240 Washington DC 20036 501	Write On Sports (NJ)	P O Box 833	South Orange	ΝÌ	67070	501(C)(3)	N/A	s	20,000
2s (RJ) 150 Miller Avenue Providence RI 02905 501 1112 16th Avenue NW, Suite 240 Washington DC 20036 501	Young Voices (RI)	150 Miller Avenue	Providence	RI	02905	501(C)(3)	N/A	∽	11,500
1112 16th Avenue NW, Suite 240 Washington DC 20036 501	Young Voices (RI)	150 Miller Avenue	Providence	RI	02905	501(C)(3)	N/A	ss.	30,000
	50CAN (RI)	1112 16th Avenue NW, Suite 240	Washington	DC	20036	501(C)(3)	N/A	\$	20,000
						Total Charita	ble Contributions	6 9	1,577,500