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Form 990-PF

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

2015

Form **990-PF** (2015)

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection For calendar year 2015 or tax year beginning , 2015, and ending Jan 1 Dec 31 Name of foundation A Employer identification number The Trinity Charitable Foundation, Inc. 46-2192792 Number and street (or P.O. box number if mail is not delivered to street address) B Telephone number (see instructions) Room/suite 3126 W Hickory Park Ci 713-940-2817 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ ☐ Sugar Land, TX 77479 Initial return of a former public charity D 1. Foreign organizations, check here . G Check all that apply: ☐ Initial return $\blacktriangleright \Box$ ☐ Amended return ☐ Final return 2. Foreign organizations meeting the 85% test. Address change □ Name change check here and attach computation . . . E If private foundation status was terminated under H Check type of organization: Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here . . ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation Fair market value of all assets at J Accounting method: ✓ Cash ☐ Accrual If the foundation is in a 60-month termination end of year (from Part II, col. (c), ☐ Other (specify) under section 507(b)(1)(B), check here line 16) ▶ \$ 15151.72 (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per books income purposes the amounts in column (a) (see instructions).) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 1 12850 2 Check ▶ ☐ if the foundation is **not** required to attach Sch. B 3 Interest on savings and temporary cash investments 0 O 0 4 Dividends and interest from securities 1152 1152 5a 0 0 Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 -234.54 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . . . Net short-term capital gain 0 Income modifications 0 10a Gross sales less returns and allowances Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) 0 0 Other income (attach schedule) 0 0 12 **Total.** Add lines 1 through 11 . 14002.03 a 0 13 €∂**"** Compensation of officers, directors, trustees, etc. 0 0 0 0 14 Other employee salaries and wages 0 0 0 0 15 Pension plans, employee benefits 0 0 0 0 16a 0 0 0 0 Accounting fees (attach schedule) 1 0 0 0 0 Operating and Administrative Other professional fees (attach schedule) . 0 0 0 0 17 0 0 0 0 18 Taxes (attach schedule) (see instructions) . . . 0 0 0 0 19 Depreciation (attach schedule) and depletion 0 0 0 20 0 0 0 0 Travel, conferences, and meetings . . . 21 0 0 0 0 22 Printing and publications 0 0 0 0 23 Other expenses (attach schedule) 130 0 0 0 24 Total operating and administrative expenses. Add lines 13 through 23 130 0 25 Contributions, gifts, grants paid O 2750 26 Total expenses and disbursements. Add lines 24 and 25 2880 0 0 27 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements 11122.03 Net investment income (if negative, enter -0-) . 917.46 **Adjusted net income** (if negative, enter -0-) 11,122.03

Part II		Ralance Sheets Attached schedules and amounts in the description column	Balance Sheets Attached schedules and amounts in the description column Beginning of year		End o	t year
		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Valu	16	(c) Fair Market Value
	1	Cash—non-interest-bearing	0		0	
	2	Savings and temporary cash investments	0		0	
	3	Accounts receivable ▶0				
		Less: allowance for doubtful accounts ▶0	0		0	
	4	Pledges receivable ▶0				
		Pledges receivable ►0 Less: allowance for doubtful accounts ►0	0		0	
	5	Grants receivable	0		0	
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)			0	
	7	Other notes and loans receivable (attach schedule) ▶0		-		
		Less: allowance for doubtful accounts ▶ 0	0		0	(
ţ	8	Inventories for sale or use	0		0	C
Assets	9	Prepaid expenses and deferred charges	0		0	0
Ä	10a	Investments—U.S. and state government obligations (attach schedule)	0		0	
	b	Investments—corporate stock (attach schedule)	4568.70	151	51.72	
	c	Investments—corporate bonds (attach schedule)	0		0	C
	11	Investments—land, buildings, and equipment: basis ▶				<u> </u>
		Less accumulated depreciation (attach schedule) ▶0	0		0	0
	12	Investments—mortgage loans	0		0	0
	13	Investments—other (attach schedule)	0		0	0
	14	Land, buildings, and equipment: basis ▶0				
		Less. accumulated depreciation (attach schedule) ▶0	0		0	C
	15	Other assets (describe	0		Ŏ	0
	16	Total assets (to be completed by all filers—see the				
		instructions. Also, see page 1, item l)	4568.70	151	51.72	15151.72
	17	Accounts payable and accrued expenses	0	= = = = = = = = = = = = = = = = = = = =	0	
	18	Grants payable	0		0	
<u>ë</u>	19	Deferred revenue	0	·	0	•
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0		0	
<u>ia</u>	21	Mortgages and other notes payable (attach schedule)	0		0	
	22	Other liabilities (describe ▶)	0		0	
	23	Total liabilities (add lines 17 through 22)	0		0	
alances		Foundations that follow SFAS 117, check here ▶ □ and complete lines 24 through 26 and lines 30 and 31.				ېدد.
Ĕ	24	Unrestricted				v -
a	25	Temporarily restricted				•
<u></u>	26	Permanently restricted		_		
Net Assets or Fund B		Foundations that do not follow SFAS 117, check here ► ✓ and complete lines 27 through 31.				
ō	27	Capital stock, trust principal, or current funds	4568.70	161	51.72	
ts	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0	131	0	
šše	29	Retained earnings, accumulated income, endowment, or other funds	0			
AS	30	Total net assets or fund balances (see instructions)	151	51.72		
et	31	Total liabilities and net assets/fund balances (see		,,,,		
Z		instructions)	4568.70	151	51.72	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	4300.70		31.721	
		al net assets or fund balances at beginning of year-Part II, colu	mn (a), line 30 (must a	agree with		
		-of-year figure reported on prior year's return)			1	4568.70
2		er amount from Part I, line 27a			2	11,122.03
3		er increases not included in line 2 (itemize) ▶ 0			3	0
4		lines 1, 2, and 3			4	15690.73
5	Dec	reases not included in line 2 (itemize) . unrealized losses		l	5	539.01
_6	Tota	al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), line	30	6	15151.72

Part	V Capital Gains and	Losses for Tax on Investm	ent Inco	me						
		kınd(s) of property sold (e.g., real estate e; or common stock, 200 shs. MLC Co.)			(b) How acquired P-Purchase D-Donation		ate acquired o., day, yr)	(d) Date sold (mo., day, yr)		
1a	API Efficient Frontier Mutual	Fund			purchased	0	3/03/15	09/23/15		
b	American Funds ICA - Realiz	ed loss			Р	0	3/31/15	09/23/15		
C										
d					_					
е			_							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis nse of sale			n or (loss) f) minus (g)		
а	808.24	o			920					
b_	1500	0			1622.78			-122.78		
c						<u>L</u> _				
<u>d</u>						L				
<u>е</u>								·		
	Complete only for assets show	ving gain in column (h) and owned	by the foun	dation	on 12/31/69			(h) gain minus		
	(i) F.M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69			s of col. (ı) (ı), if any	ļ	col. (k), but not less than -0-) or Losses (from col. (h))			
а										
b										
С										
d										
е										
2	Capital gain net income or		also enter , enter -0-			2				
3		or (loss) as defined in sections, line 8, column (c) (see instru								
	Part I, line 8				5	3		(234.54)		
Parl	V Qualification Unde	er Section 4940(e) for Redu	ced Tax	on N	let Investment	Inco	me			
Was t	s," the foundation does not	section 4942 tax on the distribution and the distribution 4940 (e). I	o not com	nplete	this part.			☐ Yes 🕢 No		
		unt in each column for each ye	ar; see the	instru	uctions before m	aking	any entries.			
Cal	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distribution	s Net	value o	(c) f nonchantable-use a	ssets		(d) inbution ratio divided by col. (c))		
	2014		1000		45	68.70	-	21.89%		
	2013		N/A			N/A		N/A		
	2012		N/A			N/A		N/A		
	2011		N/A			N/A		N/A		
	2010		N/A			N/A		N/A		
	<u> </u>									
2	Total of line 1, column (d)					.	2	21.89%		
3		or the 5-year base period—div	ide the tot	al on l	ine 2 by 5, or by	the				
	number of years the found	ation has been in existence if le	ess than 5	years		.]	3	21.89%		
4	Enter the net value of nonc	charitable-use assets for 2015	rom Part >	ر, line	5		4	12676.05		
5	Multiply line 4 by line 3 .					-	5	2774.78		
6	Enter 1% of net investmen	t income (1% of Part I, line 27t	o)			.	6	9,17		
7	Add lines 5 and 6					.	7	2783.95		
8		ns from Part XII, line 4					8	2880		
	If line 8 is equal to or great Part VI instructions.	ter than line 7, check the box i	n Part VI, I	ine 1b	o, and complete	that p	art using a 1	% tax rate. See the		

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—se	e instructions)
1a	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)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	0.47	
~	here And enter 1% of Part I, line 27b	9.17	
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	, A	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	o	
3	Add lines 1 and 2	9.17	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	0	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	9.17	
6	Credits/Payments:		
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 0		1
b	Exempt foreign organizations—tax withheld at source 6b 0		
C	Tax paid with application for extension of time to file (Form 8868) . 6c 0		
d 7	Backup withholding erroneously withheld 6d 0		
8	Total credits and payments. Add lines 6a through 6d	0	
(e)	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	0	
40	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	9.17	
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ 0 0 Refunded ▶ 11	0	
Part	VII-A Statements Regarding Activities	<u>~_</u> _	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	it Yes N	lo
	participate or intervene in any political campaign?		/
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (se Instructions for the definition)?	e 1b	_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material		
	published or distributed by the foundation in connection with the activities.		
C	Did the foundation file Form 1120-POL for this year?	1c ,	7
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$		eyr.
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$	-	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	/
3	If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	of 3	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a ,	_
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	_
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		
	By language in the governing instrument, or		3
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	at 💮 💮	
	conflict with the state law remain in the governing instrument?	6 🗸	
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 1	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶		
	Texas		Ē.
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation		
^	•	8b ✓	17.
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) of 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes, complete Part XIV	,"	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the		
	names and addresses	″ ₁₀ ✓	

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
••	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		1
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		✓
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		1
14	Website address ►			
17	Control of N. 4400 Doct Oak Borkway, Cuite 1000 Houston Tv 77007	39402 7702		·
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		<u>,</u> 	····
	and enter the amount of tax-exempt interest received or accrued during the year	• •	• '	_
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		1
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	L		L
· · · · · ·	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	-	Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	,		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	*		
	disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" 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.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			,
-	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here	,		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
2	were not corrected before the first day of the tax year beginning in 2015?	1c		✓
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)):			
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 before 2015?			
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 valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement – see instructions.)	2b		\
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	' -		
3a	▶ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1'		
-	at any time during the year?			
b	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 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.)	3b		1
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		1
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			<u> </u>
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		1

Part	VII-B Statements Regarding Activities	for W	<u>/hich</u> Form	4720	May Be R	equire	e d (contir	nued)		
5a	During the year did the foundation pay or incur a	ny amo	ount to:							
	(1) Carry on propaganda, or otherwise attempt t						☐ Yes	✓ No		
	(2) Influence the outcome of any specific public									
	directly or indirectly, any voter registration dr	ive?					☐ Yes	 ✓ No		
	(3) Provide a grant to an individual for travel, stu							✓ No		
	(4) Provide a grant to an organization other than									
	section 4945(d)(4)(A)? (see instructions)							✓ No		
	(5) Provide for any purpose other than religious									
	purposes, or for the prevention of cruelty to o							✓ No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the							ibed in		
	Regulations section 53.4945 or in a current notice	-	-		•				5b	
	Organizations relying on a current notice regardi	-								
С	If the answer is "Yes" to question 5a(4), does t									
	because it maintained expenditure responsibility		-				☐ Yes	∐ No		
٥-	If "Yes," attach the statement required by Regula									
6a	Did the foundation, during the year, receive any on a personal benefit contract?							-		
L.							☐ Yes	☑ No	·	
b	Did the foundation, during the year, pay premiun If "Yes" to 6b, file Form 8870.	ns, aire	ctly or indire	ctly, on	a personal	benerii	contract	?.	6b	
72	•	a partus	to a probibitor	d toy ob	oltar transac	tion?	□vaa			
	At any time during the tax year, was the foundation of "Yes," did the foundation receive any proceeds						☐ Yes		7b	
	VIII Information About Officers, Direct									
	and Contractors	, .	1431003, 1	ounda	cion mane	agers,	inginy i	alu L	проус	,63,
1	List all officers, directors, trustees, foundation	n mana	gers and th	eir con	npensation	(see i	nstructio	ns).		
		(b) Title	e, and average	(c) Co	mpensation	(d) (Contributions	s to	(a) Evnen	se account,
	(a) Name and address		rs per week ed to position		not paid, ter -0-)		yee benefit erred compe			llowances
Crysta	Maxwell			-			·····			
3126 V	/ Hickory Park Cir, Sugar Land TX 77027	Preside	ent		0			0		0
Larry S	Swonke									
3126 V	/ Hickory Park Cir, Sugar Land TX 77027	Vice P	resident		0			0		0
Coral I	Maxwell									
3126 V	/ Hickory Park Cir, Sugar Land TX 77027	Secret	ary		0	-		0		0
				L						
2	Compensation of five highest-paid employed "NONE."	es (otn	er than thos	se inci	uaea on III	ne 1—:	see instri	uctions	s). It no	ne, enter
			(b) Title, and a				(d) Contribu	itions to		se account,
	(a) Name and address of each employee paid more than \$50,00	00	hours per v		(c) Comper	nsation	plans and c	leferred	other al	llowances
							compens	ation		
None										
					····					
			 		 					
										
Total	number of other employees paid over \$50,000.	. .						. ▶		0
							•			-PF (2015)

Par		Employees,
3	(a) Name and address of each person paid more than \$50,000 (b) Type of service One Otal number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
lone		
		
Γota	number of others receiving over \$50,000 for professional services	>
Par	t IX-A Summary of Direct Charitable Activities	
		er of Expenses
org	List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. None	
1	None	
_		
2		
3		
4		
	•••••••••••••••••••••••••••••••••••••••	
_		
		Amount
		Anount
•	Glant to bly brothers bly Sisters	
		100
2	Grant to Stand Up for Literacy	
	Claim to Old to Division of the Line of the Control	
		100
All	other program-related investments. See instructions.	
3	Grant to Dec my Room	
T	I Add Special Abrough O	50
ota	I. Add lines 1 through 3	
		Form 990-PF (2015

Fart		ign tounda	tions,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	12869.0
b	Average of monthly cash balances	1b	12003.0
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	12869.09
е	Reduction claimed for blockage or other factors reported on lines 1a and		72000.0
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	(
3	Subtract line 2 from line 1d	3	12869.09
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		12000.0
	instructions)	4	193.04
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	12676.0
6	Minimum investment return. Enter 5% of line 5	6	633.80
Part		oundation	S
1	Minimum investment return from Part X, line 6	1	633.80
2a	Tax on investment income for 2015 from Part VI, line 5 2a 9.17		
b	Income tax for 2015. (This does not include the tax from Part VI.) 2b 0		
С	Add lines 2a and 2b	2c	9.17
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	624.63
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	624.63
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	624.63
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	2880
b	Program-related investments—total from Part IX-B	1b	(
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)	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 XIII, line 4	4	2880
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	9.17
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2870.83
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether t	

Part	Undistributed income (see instructions	s)			
1	Distributable amount for 2015 from Part XI, line 7	(a) Corpus	(b) Years pnor to 2014	(c) 2014	(d) 2015
_					624.63
2	Undistributed income, if any, as of the end of 2015:				
a	Enter amount for 2014 only	···		0	
b	Total for prior years: 20,20,20		0		
3	Excess distributions carryover, if any, to 2015:			:	
a	From 2010				
þ	From 2011				
C	From 2012				
d	From 2013				
е	From 2014			į	
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2015 from Part XII,				
	line 4: ▶ \$ 2880				
а	Applied to 2014, but not more than line 2a .			0	
b	the second control of prior June 1				
	(Election required—see instructions)		. 0		
С	Treated as distributions out of corpus (Election				
	required—see instructions)	0			
d	Applied to 2015 distributable amount				0
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2015	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 indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income. Subtract			-	
	line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable		0		
	amount—see instructions		0		
е	Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f	Undistributed income for 2015. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2016				624.63
7	Amounts treated as distributions out of corpus				024.00
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be		ļ		
	required—see instructions)	0			
8	Excess distributions carryover from 2010 not				
	applied on line 5 or line 7 (see instructions).	0			
9	Excess distributions carryover to 2016.	<u>-</u>			
	Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9:	<u>_</u>			
а	Excess from 2011				}
b	Excess from 2012				
C	Excess from 2013 0				
d	Excess from 2014	i			
e	Excess from 2015 0				

om 99	0-PF (2015)					Page 10
art	XIV Private Operating Founda	tions (see instr	uctions and Part	VII-A, question 9	<u> </u>	
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective for		•			_
b	Check box to indicate whether the four	ndation is a privat	te operating founda	tion described in se	ection 4942(j)	(3) or 4942(j)(5
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test—enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
þ	"Endowment" alternative test—enter ² / ₃ of mınimum investment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test-enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part		•	•	the foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-		ons.)	· · · · · · · · · · · · · · · · · · ·		
1	Information Regarding Foundation	-				
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only it triey have	contributed more t	nan \$5,000). (See S	ection 507 (d)(z).)	
rysta b	I Maxwell List any managers of the foundation	who own 10%	or more of the sto	ock of a corporation	o (or an equally la	erge portion of the
~	ownership of a partnership or other e					ago pordon or the
lone		<u>.</u>	<u>.</u>			
2	Information Regarding Contribution Check here ▶ ☐ if the foundation	only makes cor	ntributions to pres	elected charitable	•	•
	unsolicited requests for funds. If the		es gifts, grants, etc.	. (see instructions)	to individuals or o	rganızations under
a	other conditions, complete items 2a, The name, address, and telephone no		address of the pers	son to whom applic	ations should be a	addressed:
`rveta	il Maxwell, 3126 W Hickory Park Cir, Suga	arland TX 77479				
	The form in which applications should			d materials they sho	uld include:	
	Any submission deadlines:					
<u>ear e</u>		dael	hu nachanalitari	and the subject of th	alala (deste sé	Alaal
đ	Any restrictions or limitations on av	wards, such as	by geographical a	areas, charitable fi	eias, kinds of ins	titutions, or other

none

Part XV Supplementary Information (con	tinued)			rage II
3 Grants and Contributions Paid During	the Year or Approv	ed for Fu	ture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
Big Brothers Big Sisters	N/A	PC	unrestricted	1000
Dec My Room	n/a	PC	unrestricted	500
Stand Up For Literacy	N/A	PC	unrestricted	1000
St Anne Catholic School	N/A	PC	unrestricted	250
Total				3a 2880
b Approved for future payment None				
Total		L	<u> </u>	

Ente	gross amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by sect	ion 512, 513, or 514	(a)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Program service revenue:					(Coo mondonono)
	a None b				·- <u>-</u>	
	d					
	e •					
	·					
_	g Fees and contracts from government agencies		0			
2	Membership dues and assessments		0			
3	Interest on savings and temporary cash investments		0			
4	Dividends and interest from securities		1152.03	 	,	
5	Net rental income or (loss) from real estate:			**		
	a Debt-financed property		0			
	b Not debt-financed property		. 0			
6	Net rental income or (loss) from personal property		0			
7	Other investment income		-234.54			
8	Gain or (loss) from sales of assets other than inventory		0			
9	Net income or (loss) from special events		0			
10	Gross profit or (loss) from sales of inventory		. 0			
11	Other revenue: a		0			
	b					
	C				_	
	d					
	e					
12	Subtotal. Add columns (b), (d), and (e)	., . (917.49	, 4 d		
13	Total. Add line 12, columns (b), (d), and (e)				13	917.49
(See	worksheet in line 13 instructions to verify calculation	ıs.)				
(See	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	ıs.)				
(See Par Line	worksheet in line 13 instructions to verify calculation	is.) Accomplishm	ent of Exemp	t Purposes		
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	ns.) Accomplishment in representations in the complishment is represented by the complex of the	nent of Exemp orted in column on by providing fun	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation T XVI-B Relationship of Activities to the	ns.) Accomplishm Income is represes (other that	nent of Exemported in column on by providing fun	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is represes (other that	nent of Exemported in column on by providing fun	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is represes (other that	nent of Exemported in column on by providing fun	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is represes (other that	nent of Exemported in column on by providing fun	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is represes (other that	nent of Exemported in column on by providing fun	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is represes (other that	nent of Exemported in column on by providing fun	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is represes (other that	nent of Exemported in column on by providing fun	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is represes (other that	nent of Exemported in column on by providing fun	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is represes (other that	nent of Exemported in column on by providing fun	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is represes (other that	nent of Exemported in column on by providing fun	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is represes (other that	nent of Exemported in column on by providing fun	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is represes (other that	nent of Exemported in column on by providing fun	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is represes (other that	nent of Exemported in column on by providing fun onate more in the	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is reproses (other that	nent of Exemported in column on by providing fun onate more in the	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is reproses (other that	nent of Exemported in column on by providing fun onate more in the	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is reproses (other that	nent of Exemported in column on by providing fun onate more in the	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is reproses (other that	nent of Exemported in column on by providing fun onate more in the	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is reproses (other that	nent of Exemported in column on by providing fun onate more in the	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is reproses (other that	nent of Exemported in column on by providing fun onate more in the	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is reproses (other that	nent of Exemported in column on by providing fun onate more in the	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is reproses (other that	nent of Exemported in column on by providing fun onate more in the	t Purposes (e) of Part XVI		
Par Line	worksheet in line 13 instructions to verify calculation **T XVI-B** Relationship of Activities to the Activities to th	ns.) Accomplishm Income is reproses (other that	nent of Exemported in column on by providing fun onate more in the	t Purposes (e) of Part XVI		

Part	XVII	Information	n Regarding Tran	sfers To and Tra	ansaction	ns and	Relationshi	ps Wi	th Noncha	ritabl		3
			ganizations					•				
1	Did th	ne organization d	directly or indirectly	engage in any of th	e following	with an	y other organ	nization	described	15 5	Yes	No
	in sec	ction 501(c) of the	e Code (other than	section 501(c)(3) or	ganization	s) or in s	ection 527, r	elating	to political	***	1, 1772	
	organ	izations?								10	, Mr	
а	Trans	fers from the rep	porting foundation to	a noncharitable e	xempt orga	anization	of:			1	٠, ، ا	
	(1) C	ash								1a(1)		1
	(2) O	ther assets .								1a(2)		1
b	Other	transactions:								1	The is	
	(1) Sa	ales of assets to	a noncharitable exe	mpt organization						1b(1)		√
	(2) P	urchases of asse	ets from a noncharita	able exempt organi	zation .					1b(2)		√
			, equipment, or othe							1b(3)		-
	(4) R	eimbursement ar	rrangements							1b(4)		1
	(5) Lo	oans or loan gua	rantees							1b(5)		√
	(6) P	erformance of se	ervices or membersh							1b(6)	$\overline{}$	✓
C			quipment, mailing lis	-						1c		√
d	If the	answer to any o	of the above is "Yes	s," complete the fo	ollowing so	hedule.	Column (b)	should	always shov	v the	fair m	arket
	value	of the goods, of	ther assets, or servi	ces given by the re	porting for	undation	. If the found	lation r	eceived less	than	fair m	arket
	value	in any transaction	on or sharing arrang	ement, show in col	umn (d) th	e value d	of the goods,	other a	assets, or se	rvices	receiv	/ed.
(a) Line	no. (b) Amount involved	(c) Name of noncl	naritable exempt organiz	ation	(d) Desc	nption of transfe	rs, transa	actions, and sha	ring arra	angeme	nts
									-			
											-	
									·			
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				•						····		
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				-1.0 -2	•							
							-		•		-	
		-										
			···-						_			
					i							
-				-4-								
2a	is the	foundation dire	ectly or indirectly af	filiated with, or rela	ated to, or	ne or mo	re tax-exem	ot orga	nizations			
	desci	ribed in section 5	501(c) of the Code (d	other than section 5	501(c)(3)) o	r in secti	on 527? .		🗀] Yes	√ 1	No
b	If "Ye	s," complete the	following schedule	•								
		(a) Name of organ	ization	(b) Type of	organization			(c) Desc	ription of relation	ship		
			declare that I have examine						est of my knowled	ge and t	oelief, it i	s true,
Sign	corre	cr. and complete. Decl	aration of preparer (other th	an taxpayer) is based on a /	ii information o	of which pre	parer has any kno	wiedge	May the IF	RS discu	ss this r	etum
Here		aysters	Maxwell	15/13/	16 7 R	es.de	nt		with the p	reparer :	shown t	elow
		ature of officer or trus	stee	Date	Title	.,,,,			— (see instruc	aions)? (Пио
Paid		Print/Type preparer	's name	Preparer's signature			Date	Τ,	hack D if P	TIN		
	arar						1		Check if control is control.			
Prep Use		Firm's name ▶		•				Firm's 8				
	Cilly	Firm's address ▶						Phone				

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

The Trinity Charitable Foundation, Inc.

Schedule of Contributors

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

Employer identification number

OMB No. 1545-0047

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

42-2192792 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 √ 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) 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 any one contributor, 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, or (ii) Form 990-EZ, line 1. Complete Parts I and II. 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, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty 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

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on 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 certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Name of organization **Employer identification number** Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) Name, address, and ZIP + 4 Total contributions No. Type of contribution Crystal Maxwell Person $\overline{\mathbf{V}}$ **Payroll** 11850 Noncash 3126 W Hickory Park Cir (Complete Part II for noncash contributions.) Sugar Land, TX 77479 (c) (a) (d) Name, address, and ZIP + 4 **Total contributions** No. Type of contribution 2 **Microsoft Corporation** Person **Payroll** $\boxed{}$ 1000 Noncash Redmond, WA (Complete Part II for noncash contributions.) (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Pavroll Noncash (Complete Part II for noncash contributions.) (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (b) (a) (c) (d) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (b) (a) (c) (d) Name, address, and ZIP + 4 **Total contributions** No. Type of contribution Person

 Name of organization **Employer identification number** Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given **Date received** (see instructions) Part I (c) (a) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (see instructions) Part I

Part III

Employer identification number

	the following line entry. For organization contributions of \$1,000 or less for the	ons completing Part III, en	iter the total	of exclusively religious, charitable, etc.,	
	Use duplicate copies of Part III if addit	ional space is needed.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
1	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
Tay No.					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
		-			
F	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
<u> </u>					
	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
1					
/a\ Na		. <u> </u>			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
		***************************************		•	
L					
	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
	•••••				

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or