

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

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
Do not enter social security numbers on this form as it may be made public  
Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047  
**2017**  
Open to Public Inspection

### A For the 2017 calendar year, or tax year beginning 10-01-2017, and ending 09-30-2018

- B** Check if applicable
- Address change
  - Name change
  - Initial return
  - Final return/terminated
  - Amended return
  - Application pending

**C** Name of organization  
TRIGG - C M RUSSELL FOUNDATION INC

Doing business as  
CM RUSSELL MUSEUM

Number and street (or P O box if mail is not delivered to street address) Room/suite  
400 13TH STREET NORTH

City or town, state or province, country, and ZIP or foreign postal code  
GREAT FALLS, MT 59401

**F** Name and address of principal officer  
THOMAS FIGARELLE  
400 13TH STREET NORTH  
GREAT FALLS, MT 59401

**D** Employer identification number  
81-6003526

**E** Telephone number  
(406) 727-8787

**G** Gross receipts \$ 5,547,299

**H(a)** Is this a group return for subordinates?  Yes  No

**H(b)** Are all subordinates included?  Yes  No  
If "No," attach a list (see instructions)

**H(c)** Group exemption number ▶

**I** Tax-exempt status  501(c)(3)  501(c) ( ) ◀ (insert no )  4947(a)(1) or  527

**J** Website: ▶ WWW.CMRUSSELL.ORG

**K** Form of organization  Corporation  Trust  Association  Other ▶

**L** Year of formation 1951

**M** State of legal domicile MT

### Part I Summary

**1** Briefly describe the organization's mission or most significant activities  
THE MISSION OF THE TRIGG-C M RUSSELL FOUNDATION, INC (D B A THE C M RUSSELL MUSEUM) IS TO COLLECT, PRESERVE, RESEARCH, INTERPRET AND EDUCATE ON THE ART AND LIFE OF CHARLES M RUSSELL, THE ART AND LIFE OF HIS CONTEMPORARIES, AND THE ART OF PRECEDING AND ENSUING GENERATIONS THAT DEPICTS AND FOCUSES ON THE CULTURE, LIFE AND COUNTRY OF RUSSELL'S WEST

**2** Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets

<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	22
<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	22
<b>5</b> Total number of individuals employed in calendar year 2017 (Part V, line 2a)	46
<b>6</b> Total number of volunteers (estimate if necessary)	183
<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	17,775
<b>7b</b> Net unrelated business taxable income from Form 990-T, line 34	0

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h)	3,577,399	2,375,373
<b>9</b> Program service revenue (Part VIII, line 2g)	3,499,500	1,628,299
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	611,153	574,424
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	570,157	179,356
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,258,209	4,757,452
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	12,725	7,800
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0	0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,400,490	1,471,548
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0	0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 937,449		
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,058,998	2,302,757
<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	6,472,213	3,782,105
<b>19</b> Revenue less expenses Subtract line 18 from line 12	1,785,996	975,347
	Beginning of Current Year	End of Year
<b>20</b> Total assets (Part X, line 16)	12,942,981	13,998,666
<b>21</b> Total liabilities (Part X, line 26)	21,493	89,374
<b>22</b> Net assets or fund balances Subtract line 21 from line 20	12,921,488	13,909,292

### Part II Signature Block

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

**Sign Here**

\*\*\*\*\*  
Signature of officer  
Date 2019-06-18

THOMAS FIGARELLE EXECUTIVE DIRECTOR  
Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name RICHARD REISIG  
Preparer's signature RICHARD REISIG  
Date 2019-06-18  
Check  if self-employed  
PTIN P00185761

Firm's name ▶ ANDERSON ZURMUEHLEN & CO PC  
Firm's EIN ▶ 81-0385940

Firm's address ▶ 21 10TH STREET SOUTH  
GREAT FALLS, MT 59401  
Phone no (406) 727-0888

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III **1** Briefly describe the organization's mission

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

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

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

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

If "Yes," describe these changes on Schedule O

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

<b>4a</b>	(Code )	(Expenses \$	1,474,076	including grants of \$	) (Revenue \$	1,637,112 )
	See Additional Data					

<b>4b</b>	(Code )	(Expenses \$	191,069	including grants of \$	7,800 )	(Revenue \$ )
	See Additional Data					

<b>4c</b>	(Code )	(Expenses \$	598,476	including grants of \$	) (Revenue \$	129,125 )
	See Additional Data					

<b>4d</b>	Other program services (Describe in Schedule O )					
	(Expenses \$		including grants of \$		(Revenue \$	)

<b>4e</b>	<b>Total program service expenses ▶</b>		2,263,621			
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**Part IV Checklist of Required Schedules**

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

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 20a through 38, covering topics like hospital facilities, financial statements, grants, compensation, tax-exempt bonds, and controlled entities.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question ID, question text, and Yes/No response boxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited tax shelter transactions, deductible contributions, and 501(c)(7), (12), and (29) organizations.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (22); 1b Enter the number of voting members included in line 1a, above, who are independent (22); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (No); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Did the organization have members or stockholders? (No); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (No); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (No); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? (Yes); 8b Each committee with authority to act on behalf of the governing body? (Yes); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (No)

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (No); 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? (No); 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (Yes); 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (Yes); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (Yes); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (Yes); 13 Did the organization have a written whistleblower policy? (Yes); 14 Did the organization have a written document retention and destruction policy? (Yes); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official (Yes); 15b Other officers or key employees of the organization (Yes); If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (No); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 3 columns: Question, Yes, No. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply: [ ] Own website, [ ] Another's website, [X] Upon request, [ ] Other (explain in Schedule O); 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year; 20 State the name, address, and telephone number of the person who possesses the organization's books and records: JUSTIN CAMPOS 400 13TH STREET NORTH GREAT FALLS, MT 59401 (406) 727-8787

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CHRISTINA HOOVER-BLACKWELL DIRECTOR	1 00	X					0	0	0	
(2) TOM PETRIE CHAIR	1 00	X		X			0	0	0	
(3) NORMAN BOOK JR TREASURER	1 00	X		X			0	0	0	
(4) HENRY BEDFORD DIRECTOR	1 00	X					0	0	0	
(5) JILL CROSS DIRECTOR	1 00	X					0	0	0	
(6) MICHAEL J DADY DIRECTOR	1 00	X					0	0	0	
(7) DAN FIEHRER DIRECTOR	1 00	X					0	0	0	
(8) RANDY FOUTCH DIRECTOR	1 00	X					0	0	0	
(9) GAIL HAYES-DAVIS DIRECTOR	1 00	X					0	0	0	
(10) DAVID J KORNDER DIRECTOR	1 00	X					0	0	0	
(11) ANNE MARTINEZ SECRETARY	1 00	X		X			0	0	0	
(12) JOE MASTERSON DIRECTOR	1 00	X					0	0	0	
(13) ROBIN RASMUSSEN DIRECTOR	1 00	X					0	0	0	
(14) JOHN D ROGERS JR DIRECTOR	1 00	X					0	0	0	
(15) SARAH STEVENSON DIRECTOR	1 00	X					0	0	0	
(16) ANNIE THOM DIRECTOR	1 00	X					0	0	0	
(17) JESSIE VAN NESS DIRECTOR	1 00	X					0	0	0	

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) STEVEN J WHISLER ..... DIRECTOR	1 00	X						0	0	0
(19) JIM PETERSON ..... VICE CHAIR	1 00	X		X				0	0	0
(20) AMY BEAMES ..... DIRECTOR	1 00	X						0	0	0
(21) LARRY LEN PETERSON ..... DIRECTOR	1 00	X						0	0	0
(22) CRAIG R BARRETT ..... DIRECTOR	1 00	X						0	0	0
(23) MICHAEL DUCHEMIN ..... EXECUTIVE DIRECTOR	50 00	X		X				10,947	0	0
(24) JUSTIN CAMPOS ..... CHIEF FINANCE OFFICER	45 00			X				74,184	0	1,416
(25) THOMAS FARGELLE ..... EXECUTIVE DIRECTOR	50 00			X				50,000	0	0
<b>1b Sub-Total</b> . . . . .										
<b>c Total from continuation sheets to Part VII, Section A</b> . . . . .										
<b>d Total (add lines 1b and 1c)</b> . . . . .								135,131	0	1,416

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

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
ROBINSON CONSTRUCTION  2633 17TH ST NE BLACK EAGLE, MT 59414	RESTORATION OF RUSSELL HOME	413,453

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



**Part VIII Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . .	<b>1a</b>					
	<b>b</b> Membership dues . . .	<b>1b</b>	91,570				
	<b>c</b> Fundraising events . . .	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>	69,875				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	2,213,928				
	<b>g</b> Noncash contributions included in lines 1a-1f \$ _____		26,263				
	<b>h Total.</b> Add lines 1a-1f . . . . .			2,375,373			
<b>Program Service Revenue</b>		Business Code					
	<b>2a</b> THE RUSSELL & WESTERN	900099	1,500,314	1,500,314			
	<b>b</b> ADMISSIONS AND TOURS	900099	98,789	98,789			
	<b>c</b> EXHIBITIONS - OTHER MU	900099	29,196	29,196			
	<b>d</b> _____						
	<b>e</b> _____						
	<b>f</b> All other program service revenue						
<b>g Total.</b> Add lines 2a-2f . . . . .			1,628,299				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .		257,148			257,148	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties . . . . .		9,089			9,089	
	<b>6a</b> Gross rents	(i) Real	(ii) Personal				
			17,967				
		<b>b</b> Less rental expenses	155				
		<b>c</b> Rental income or (loss)	17,812				
	<b>d</b> Net rental income or (loss) . . . . .			17,812		17,812	
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
			875,583				
		<b>b</b> Less cost or other basis and sales expenses	558,307				
		<b>c</b> Gain or (loss)	317,276				
	<b>d</b> Net gain or (loss) . . . . .			317,276		317,276	
	<b>8a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .	<b>a</b>	6,630				
		<b>b</b> Less direct expenses . . . . .	9,888				
<b>c</b> Net income or (loss) from fundraising events . . . . .				-3,258		-3,258	
<b>9a</b> Gross income from gaming activities See Part IV, line 19 . . . . .	<b>a</b>						
	<b>b</b> Less direct expenses . . . . .						
	<b>c</b> Net income or (loss) from gaming activities . . . . .						
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>	358,295					
	<b>b</b> Less cost of goods sold . . . . .	221,497					
	<b>c</b> Net income or (loss) from sales of inventory . . . . .		136,798	136,798			
Miscellaneous Revenue	Business Code						
<b>11a</b> ADVERTISING FEE INCOME	511190	17,775		17,775			
<b>b</b> INSURANCE PROCEEDS	524298	1,140	1,140				
<b>c</b> _____							
<b>d</b> All other revenue . . . . .							
<b>e Total.</b> Add lines 11a-11d . . . . .			18,915				
<b>12 Total revenue.</b> See Instructions . . . . .			4,757,452	1,766,237	17,775	598,067	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22.	7,800	7,800		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
<b>4</b> Benefits paid to or for members.				
<b>5</b> Compensation of current officers, directors, trustees, and key employees.	139,560		107,987	31,573
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	1,138,464	744,098	89,344	305,022
<b>7</b> Other salaries and wages.				
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	14,512	8,682	2,279	3,551
<b>9</b> Other employee benefits.	69,884	54,591	3,005	12,288
<b>10</b> Payroll taxes.	109,128	64,506	16,748	27,874
<b>11</b> Fees for services (non-employees)				
<b>a</b> Management.				
<b>b</b> Legal.	7,655	4,258	1,292	2,105
<b>c</b> Accounting.	14,495	8,063	2,446	3,986
<b>d</b> Lobbying.				
<b>e</b> Professional fundraising services. See Part IV, line 17.				
<b>f</b> Investment management fees.	13,325		9,994	3,331
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	326,349	124,938	47,909	153,502
<b>12</b> Advertising and promotion.	268,833	162,517	10	106,306
<b>13</b> Office expenses.	19,224	11,014	3,813	4,397
<b>14</b> Information technology.				
<b>15</b> Royalties.				
<b>16</b> Occupancy.	154,818	154,818		
<b>17</b> Travel.	57,081	29,018	6,646	21,417
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials.				
<b>19</b> Conferences, conventions, and meetings.				
<b>20</b> Interest.				
<b>21</b> Payments to affiliates.				
<b>22</b> Depreciation, depletion, and amortization.	281,519		211,139	70,380
<b>23</b> Insurance.	75,526	75,526		
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> MEALS AND ENTERTAINMENT	182,693	149,274	1,186	32,233
<b>b</b> MAINTENANCE	174,645	174,645		
<b>c</b> EVENTS (MUSEUM)	155,365	124,767		30,598
<b>d</b> PRINTING	90,223	60,650		29,573
<b>e</b> All other expenses	481,006	304,456	77,237	99,313
<b>25</b> Total functional expenses. Add lines 1 through 24e.	3,782,105	2,263,621	581,035	937,449
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	1,900	<b>1</b>	1,900
	<b>2</b> Savings and temporary cash investments . . . . .	1,650,686	<b>2</b>	1,965,275
	<b>3</b> Pledges and grants receivable, net . . . . .	218,920	<b>3</b>	636,708
	<b>4</b> Accounts receivable, net . . . . .	184,875	<b>4</b>	126,090
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .	151,815	<b>8</b>	176,172
	<b>9</b> Prepaid expenses and deferred charges . . . . .	130,022	<b>9</b>	36,114
	<b>10a</b> Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10,385,702		
	<b>b</b> Less accumulated depreciation	5,551,036		
		4,339,287	<b>10c</b>	4,834,666
	<b>11</b> Investments—publicly traded securities . . . . .		<b>11</b>	
	<b>12</b> Investments—other securities See Part IV, line 11 . . . . .	5,807,851	<b>12</b>	5,960,617
	<b>13</b> Investments—program-related See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
<b>15</b> Other assets See Part IV, line 11 . . . . .	457,625	<b>15</b>	261,124	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	12,942,981	<b>16</b>	13,998,666	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	14,718	<b>17</b>	12,754
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .	750	<b>19</b>	71,750
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability Complete Part IV of Schedule D		<b>21</b>	
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	6,025	<b>25</b>	4,870
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	21,493	<b>26</b>	89,374
<b>Net Assets or Fund Balances</b>	<b>27</b> <b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b> Unrestricted net assets	9,650,856	<b>27</b>	11,181,710
	<b>28</b> Temporarily restricted net assets . . . . .	1,915,086	<b>28</b>	1,370,881
	<b>29</b> Permanently restricted net assets	1,355,546	<b>29</b>	1,356,701
	<b>30</b> <b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
	<b>33</b> Total net assets or fund balances . . . . .	12,921,488	<b>33</b>	13,909,292
	<b>34</b> Total liabilities and net assets/fund balances . . . . .	12,942,981	<b>34</b>	13,998,666

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12) . . . . .	<b>1</b>	4,757,452
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25) . . . . .	<b>2</b>	3,782,105
<b>3</b>	Revenue less expenses Subtract line 2 from line 1 . . . . .	<b>3</b>	975,347
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	<b>4</b>	12,921,488
<b>5</b>	Net unrealized gains (losses) on investments . . . . .	<b>5</b>	-100,665
<b>6</b>	Donated services and use of facilities . . . . .	<b>6</b>	83,321
<b>7</b>	Investment expenses . . . . .	<b>7</b>	
<b>8</b>	Prior period adjustments . . . . .	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	<b>9</b>	29,801
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	13,909,292

**Part XII Financial Statements and Reporting**

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

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

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 81-6003526

**Name:** TRIGG - C M RUSSELL FOUNDATION INC

Form 990 (2017)

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### Form 990, Part III, Line 4a:

COLLECTIONS AND EXHIBITIONS IN 2018, 36,912 PEOPLE VISITED THE C M RUSSELL MUSEUM THE RUSSELL WORKS CONTINUE TO BE DISPLAYED THEMATICALLY AND IN CHRONOLOGICAL ORDER FIVE MAJOR CHANGING EXHIBITIONS WERE ON DISPLAY IN 2018 THE RUSSELL EXHIBITION AND SALE, ARTIFACT INTO ART THE C M RUSSELL STUDIO COLLECTION, SELECTIONS FROM THE NORTH AMERICAN INDIAN BY EDWARD S CURTIS, C M RUSSELL THE WOMEN IN HIS LIFE AND ART, AND THE LEROY STRAND COLLECITON, WHICH IS THE MUSEUM'S FOUNDATIONAL COLLECTION AND IMPETUS BEHIND THE MUSEUM'S MISSION THE MUSEUM CONTINUED THE EXTENSIVE PERMANENT EXHIBITION CALLED THE BISON AMERICAN ICON, HEART OF PLAINS INDIAN CULTURE, WHICH OPENED IN DECEMBER 2008 AND THE JOSPEHINE TRIGG COLLECTION OPENED IN OCTOBER 2017 THE MUSEUM ALSO PROVIDES SOME EVENING EXHIBIT OPENINGS TO THE COMMUNITY FREE OF CHARGE AS A WAY TO ENCOURAGE PARTICIPATION IN THE MUSEUM STAFF CONTINUES TO ENGAGE NEW METHODS OF REACHING POTENTIAL AUDIENCES BY UTILIZING BILLBOARDS AND SOCIAL MEDIA STAFF IN THIS AREA CONTINUALLY MONITORS THE STATUS OF BOTH PERMANENT COLLECTION PIECES AS WELL AS THOSE ON LOAN AND MANAGE AND IMPROVE THE ENVIRONMENT FOR ALL OF THE ART THE MUSEUM RECEIVED DONATIONS OF ART AND ARTIFACTS DURING THE YEAR VALUED BY THE DONORS AT \$613,000 THE COLLECTIONS AND EXHIBITIONS AREA DIRECTLY SUPPORTS THE MUSEUM'S MISSION

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**Form 990, Part III, Line 4b:**

EDUCATION/PUBLIC PROGRAMS IN SUPPORT OF ITS MISSION, THE MUSEUM OFFERS FREE ADMISSION TO THE PUBLIC DURING WESTERN ART WEEK AND TO THE RUSSELL SKULL SOCIETY ARTIST SUITES, OFFERING WORKS BY AN ELITE GROUP OF WESTERN ARTISTS DEDICATED TO THE LEGACY OF CHARLIE RUSSELL. FREE ADMISSION IS ALSO OFFERED TO A SYMPOSIUM FEATURING SCHOLARS IN THE FIELD OF WESTERN ART AND HISTORY AND ON FRIDAY EVENING OF WESTERN ART WEEK HOLDING AN AUCTION FEATURING ARTWORK OF EMERGING WESTERN ARTISTS. THE MUSEUM CONTINUES ITS EDUCATIONAL PROGRAMS INCLUDING THE FIFTH GRADE TOURS FOR CITY AND COUNTY STUDENTS WHO'S ESSAYS ARE FEATURED AT A SPECIAL PROCLAMATION CEREMONY RELATED TO THE RUSSELL, SUNDAY SAMPLER (COLLABORATIVE EFFORT WITH THE LOCAL MUSEUMS CONSORTIUM), AND ART EXPLORERS, TOT'S TALES, AND BISON DAY CAMPS (CLASSES HELD THROUGHOUT THE YEAR ON VARIOUS ART TOPICS INCLUDING DRAWING, SCULPTING, AND PAINTING). FAMILY PROGRAMS INCLUDED SADDLES AND SPURS, HOLIDAY OPEN HOUSE, AND AMERICAN INDIAN HERITAGE DAYS, WHICH CONTINUE TO BE WELL ATTENDED. THE EDUCATION DEPARTMENT ALSO OFFERED A MUSICAL OUTREACH PROGRAM WITH PIANIST LAURA DEAN TO ALL MIDDLE AND HIGH SCHOOLS IN THE COMMUNITY AS WELL AS A COMMUNITY CONCERT BY THE GREAT FALLS COLLEGE FEATURING A POEM BY C M RUSSELL. ADULT CLASSES WERE PROVIDED, SUCH AS A SCULPTURE WORKSHOP WITH ARTIST KEN MAYERNIK AND MONTHLY DRAWING IN THE STUDIO CLASSES WITH LIVE MODELS. EXHIBITIONS WERE SUPPORTED THROUGH PROGRAMMING BY OFFERING LECTURES AND EDUCATIONAL COMPONENTS, SUCH AS GALLERY WALK AND TALKS WITH THE ARTIST OR CURATOR, LECTURES SUCH AS EMBODIED ART: C M RUSSELL AND THE PERFORMANCE OF "AH-WAH-COUS" BY CURATOR EMILY WILSON, AND HOLLYWOOD HOOFBEATS BY AUTHOR PETRINE DAY MITCHUM. THE EDUCATION AREA IS AN ESSENTIAL PART OF THE MUSEUM'S MISSION, WHICH STRIVES TO EDUCATE AND EXPOSE PEOPLE TO RUSSELL'S ART AND LIFE AS WELL AS THE ART AND LIFE OF HIS CONTEMPORARIES.

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**Form 990, Part III, Line 4c:**

MUSEUM SERVICES THE PURPOSE OF THE TRIGG-RUSSELL FOUNDATION, INC IS TO OPERATE AND MAINTAIN THE C M RUSSELL MUSEUM, WHILE FOLLOWING THE MISSION OF THE ORGANIZATION THE MUSEUM REQUIRES OPERATIONS STAFF ON SITE DURING ALL OPEN HOURS TO ENSURE SAFETY FOR STAFF, VISITORS, VOLUNTEERS, AND THE COLLECTIONS MUSEUM STAFF MAINTAINS THE GROUNDS AND BUILDING MUSEUM SERVICES ALSO INCLUDES GUEST RELATIONS TO SERVE THE MUSEUM VISITORS, THE ADMINISTRATIVE STAFF, EVENTS COORDINATION, AND THE MUSEUM STORE, WHICH FURTHERS THE MUSEUM'S IMAGE AND RECOGNITION WITH BRANDED PRODUCTS AS WELL AS MERCHANDISE RELATED TO CHARLES M RUSSELL AND THE MISSION OF THE MUSEUM THE MUSEUM CONTINUED EFFORTS IN ORDER TO SUSTAIN VISITATION, MEMBERSHIP, VOLUNTEERS, AND FUND-RAISING EFFORTS THE MUSEUM OFFERED FREE PROGRAMS TO RESIDENTS AS A WAY OF INVITING THEM TO SEE WHAT THE MUSEUM INCLUDES AND THE DEPTH AND RANGE OF THE INSTITUTION'S ROLE IN THE COMMUNITY SUCH EXAMPLES INCLUDE SADDLES AND SPURS, LECTURES, AND THE EDUCATIONAL SYMPOSIUM DURING THE RUSSELL ALL OF THESE AREAS ARE ESSENTIAL TO CARRYING OUT THE MISSION OF THE MUSEUM AND EACH COMPONENT MUST WORK WITH THE OTHER TO BE SUCCESSFUL IN THE MUSEUM'S CURRENT AND FUTURE ENDEAVORS

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**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.

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

**2017**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
TRIGG - C M RUSSELL FOUNDATION INC

Employer identification number

81-6003526

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ) )
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II )
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II )
- 8  A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university \_\_\_\_\_
- 10  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III )
- 11  An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations \_\_\_\_\_

g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						



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

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►		(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>1</b>	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")						
<b>2</b>	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b>	The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4</b>	<b>Total.</b> Add lines 1 through 3						
<b>5</b>	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
<b>6</b>	<b>Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►		(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>7</b>	Amounts from line 4						
<b>8</b>	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b>	Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b>	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI )						
<b>11</b>	<b>Total support.</b> Add lines 7 through 10						
<b>12</b>	Gross receipts from related activities, etc (see instructions)					<b>12</b>	

**13 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . .

**Section C. Computation of Public Support Percentage**

<b>14</b>	Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	
<b>15</b>	Public support percentage for 2016 Schedule A, Part II, line 14	<b>15</b>	

- 16a 33 1/3% support test—2017.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ►
- b 33 1/3% support test—2016.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ►
- 17a 10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ►
- b 10%-facts-and-circumstances test—2016.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ►
- 18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ►

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	868,015	917,897	788,470	2,788,929	2,375,373	7,738,684
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	2,373,620	4,006,115	332,958	2,092,001	1,993,224	10,797,918
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5	3,241,635	4,924,012	1,121,428	4,880,930	4,368,597	18,536,602
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons	190,000	161,617	76,050	567,663	712,133	1,707,463
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
<b>c</b> Add lines 7a and 7b	190,000	161,617	76,050	567,663	712,133	1,707,463
<b>8 Public support.</b> (Subtract line 7c from line 6.)						16,829,139

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>9</b> Amounts from line 6	3,241,635	4,924,012	1,121,428	4,880,930	4,368,597	18,536,602
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	143,232	161,288	100,325	378,162	318,305	1,101,312
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b	143,232	161,288	100,325	378,162	318,305	1,101,312
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	17,736	14,047	138,011	16,531	18,915	205,240
<b>12</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)	3,402,603	5,099,347	1,359,764	5,275,623	4,705,817	19,843,154
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	84.810 %
<b>16</b> Public support percentage from 2016 Schedule A, Part III, line 15	<b>16</b>	86.470 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2017</b> (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	5.550 %
<b>18</b> Investment income percentage from <b>2016</b> Schedule A, Part III, line 17	<b>18</b>	5.520 %

**19a 33 1/3% support tests—2017.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

**b 33 1/3% support tests—2016.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

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

**Part IV Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

		Yes	No
<b>1</b>	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
	<b>1</b>		
<b>2</b>	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
	<b>2</b>		
<b>3a</b>	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
	<b>3a</b>		
<b>b</b>	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.		
	<b>3b</b>		
<b>c</b>	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		
	<b>3c</b>		
<b>4a</b>	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
	<b>4a</b>		
<b>b</b>	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
	<b>4b</b>		
<b>c</b>	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
	<b>4c</b>		
<b>5a</b>	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
	<b>5a</b>		
<b>b</b>	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	<b>5b</b>		
<b>c</b>	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
	<b>5c</b>		
<b>6</b>	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .		
	<b>6</b>		
<b>7</b>	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	<b>7</b>		
<b>8</b>	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	<b>8</b>		
<b>9a</b>	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .		
	<b>9a</b>		
<b>b</b>	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .		
	<b>9b</b>		
<b>c</b>	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .		
	<b>9c</b>		
<b>10a</b>	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
	<b>10a</b>		
<b>b</b>	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		
	<b>10b</b>		

**Part IV Supporting Organizations** (continued)

		Yes	No
<b>11</b>	Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b>	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
<b>b</b>	A family member of a person described in (a) above?		
<b>c</b>	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

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

**Section D. All Type III Supporting Organizations**

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

**Section E. Type III Functionally-Integrated Supporting Organizations**

<b>1</b>	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year ( <b>see instructions</b> )		
<b>a</b>	<input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
<b>b</b>	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
<b>c</b>	<input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).		
<b>2</b>	Activities Test <b>Answer (a) and (b) below.</b>	Yes	No
<b>a</b>	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
<b>b</b>	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>3</b>	Parent of Supported Organizations <b>Answer (a) and (b) below.</b>		
<b>a</b>	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
<b>b</b>	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Net short-term capital gain	<b>1</b>	
<b>2</b>	Recoveries of prior-year distributions	<b>2</b>	
<b>3</b>	Other gross income (see instructions)	<b>3</b>	
<b>4</b>	Add lines 1 through 3	<b>4</b>	
<b>5</b>	Depreciation and depletion	<b>5</b>	
<b>6</b>	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	<b>6</b>	
<b>7</b>	Other expenses (see instructions)	<b>7</b>	
<b>8</b>	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	<b>8</b>	
<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	<b>1</b>	
<b>a</b>	Average monthly value of securities	<b>1a</b>	
<b>b</b>	Average monthly cash balances	<b>1b</b>	
<b>c</b>	Fair market value of other non-exempt-use assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>	
<b>e</b>	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)		
<b>2</b>	Acquisition indebtedness applicable to non-exempt use assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	
<b>4</b>	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	
<b>5</b>	Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>	
<b>6</b>	Multiply line 5 by .035	<b>6</b>	
<b>7</b>	Recoveries of prior-year distributions	<b>7</b>	
<b>8</b>	<b>Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>	
<b>Section C - Distributable Amount</b>			Current Year
<b>1</b>	Adjusted net income for prior year (from Section A, line 8, Column A)	<b>1</b>	
<b>2</b>	Enter 85% of line 1	<b>2</b>	
<b>3</b>	Minimum asset amount for prior year (from Section B, line 8, Column A)	<b>3</b>	
<b>4</b>	Enter greater of line 2 or line 3	<b>4</b>	
<b>5</b>	Income tax imposed in prior year	<b>5</b>	
<b>6</b>	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	<b>6</b>	
<b>7</b>	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

<b>Section D - Distributions</b>	<b>Current Year</b>
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ) See instructions	
<b>7 Total annual distributions.</b> Add lines 1 through 6	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ) See instructions	
<b>9</b> Distributable amount for 2017 from Section C, line 6	
<b>10</b> Line 8 amount divided by Line 9 amount	

<b>Section E - Distribution Allocations (see instructions)</b>	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2017</b>	<b>(iii) Distributable Amount for 2017</b>
<b>1</b> Distributable amount for 2017 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
<b>3</b> Excess distributions carryover, if any, to 2017			
<b>a</b>			
<b>b</b> From 2013. . . . .			
<b>c</b> From 2014. . . . .			
<b>d</b> From 2015. . . . .			
<b>e</b> From 2016. . . . .			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2017 distributable amount			
<b>i</b> Carryover from 2012 not applied (see instructions)			
<b>j</b> Remainder Subtract lines 3g, 3h, and 3i from 3f			
<b>4</b> Distributions for 2017 from Section D, line 7			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2017 distributable amount			
<b>c</b> Remainder Subtract lines 4a and 4b from 4			
<b>5</b> Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
<b>6</b> Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
<b>7 Excess distributions carryover to 2018.</b> Add lines 3j and 4c			
<b>8</b> Breakdown of line 7			
<b>a</b> Excess from 2013. . . . .			
<b>b</b> Excess from 2014. . . . .			
<b>c</b> Excess from 2015. . . . .			
<b>d</b> Excess from 2016. . . . .			
<b>e</b> Excess from 2017. . . . .			

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 81-6003526

**Name:** TRIGG - C M RUSSELL FOUNDATION INC

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

**Facts And Circumstances Test**

**SCHEDULE D**  
(Form 990)  
  
Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**  
▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.  
▶ Attach to Form 990.  
**Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

OMB No 1545-0047  
**2017**  
**Open to Public Inspection**

**Name of the organization**  
TRIGG - C M RUSSELL FOUNDATION INC

**Employer identification number**  
81-6003526

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

	(a) Donor advised funds	(b) Funds and other accounts
<b>1</b> Total number at end of year		
<b>2</b> Aggregate value of contributions to (during year)		
<b>3</b> Aggregate value of grants from (during year)		
<b>4</b> Aggregate value at end of year		
<b>5</b> Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>6</b> Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

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

**1** Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e g , recreation or education)       Preservation of an historically important land area

Protection of natural habitat       Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Year	
<b>a</b> Total number of conservation easements	<b>2a</b>	2
<b>b</b> Total acreage restricted by conservation easements	<b>2b</b>	2 00
<b>c</b> Number of conservation easements on a certified historic structure included in (a)	<b>2c</b>	2
<b>d</b> Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	<b>2d</b>	

**3** Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

**4** Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_ 1

**5** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?       Yes  No

**6** Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \_\_\_\_\_ 2 00

**7** Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

**8** Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?       Yes  No

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

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

**1a** If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

**b** If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

**(i)** Revenue included on Form 990, Part VIII, line 1      ▶ \$ \_\_\_\_\_

**(ii)** Assets included in Form 990, Part X      ▶ \$ \_\_\_\_\_

**2** If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

**a** Revenue included on Form 990, Part VIII, line 1      ▶ \$ \_\_\_\_\_

**b** Assets included in Form 990, Part X      ▶ \$ \_\_\_\_\_



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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange programs
  - e**  Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.**

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- |  | Amount |
|--|--------|
| <b>c</b> Beginning balance             |        |
| <b>d</b> Additions during the year     |        |
| <b>e</b> Distributions during the year |        |
| <b>f</b> Ending balance                |        |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance . . . . .	5,039,350	3,536,404	3,364,662	3,386,690	3,304,447
<b>b</b> Contributions . . . . .	150,000	1,350,000	316,992	16,661	
<b>c</b> Net investment earnings, gains, and losses	279,760	418,809	-40,036	116,487	425,978
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .	143,558	232,596	93,962	144,160	333,461
<b>f</b> Administrative expenses . . . . .	23,029	33,267	11,252	11,016	10,274
<b>g</b> End of year balance . . . . .	5,302,523	5,039,350	3,536,404	3,364,662	3,386,690

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶ 70 000 %
  - b** Permanent endowment ▶ 25 590 %
  - c** Temporarily restricted endowment ▶ 4 410 %
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- |  | Yes | No |
|--|-----|----|
| <b>(i)</b> unrelated organizations . . . . .   | Yes |    |
| <b>(ii)</b> related organizations . . . . .  |     | No |
| <b>b</b> If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . . |     |    |
- 3b**
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .		320,929		320,929
<b>b</b> Buildings . . . . .		8,116,795	4,365,883	3,750,912
<b>c</b> Leasehold improvements				
<b>d</b> Equipment . . . . .		1,185,553	1,185,153	400
<b>e</b> Other . . . . .		762,425		762,425
<b>Total.</b> Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) ) . . . ▶				4,834,666

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____		
(A) CORPORATE BONDS	1,032,328	F
(B) GOVERNMENT BONDS	574,882	F
(C) MUTUAL FUNDS	707,892	F
(D) EQUITY SECURITIES	2,642,223	F
(E) REIT	3,633	F
(F) EXCHANGE TRADED	897,276	F
(G) MUNICIPAL BONDS	102,383	F
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 12.)	5,960,617	

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

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 13.)		

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15.)	

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
CHARITABLE GIFT ANNUITY LIABILITY	4,870
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.)	4,870

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

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	4,784,252
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	-100,665
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	83,321
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	44,144
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	26,800
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	4,757,452
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	0
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	4,757,452

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	3,796,448
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	14,343
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	14,343
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	3,782,105
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	0
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	3,782,105

**Part XIII Supplemental Information**

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

Return Reference	Explanation
See Additional Data Table	

**Part XIII** Supplemental Information *(continued)*

Return Reference	Explanation

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 81-6003526

**Name:** TRIGG - C M RUSSELL FOUNDATION INC

## Supplemental Information

Return Reference	Explanation
PART II, LINE 9	THE CONSERVATION EASEMENTS PROTECT CHARLES M RUSSELL'S HOME BUILT IN 1900 AND LOG STUDIO BUILT IN 1903 THESE BUILDINGS ARE LOCATED NEXT TO THE MUSEUM ITSELF, AND ARE OPEN FOR TOURS DURING MUSEUM HOURS THE CONSERVATION EASEMENTS ARE PART OF THE FOUNDATION'S PERMANENT ART COLLECTION, WHICH IS NOT REPORTED IN ITS REVENUE STATEMENT OR BALANCE SHEET PURSUANT TO SFAS 116

**Supplemental Information**

Return Reference	Explanation
PART III, LINE 1A	NOTE 12 TO THE FINANCIAL STATEMENTS PERMANENT ART COLLECTION THE FOUNDATION'S COLLECTIONS ARE MADE UP OF ART OBJECTS, PERSONAL BELONGINGS, AND HISTORICAL ARTIFACTS OF CHARLES M RUSSELL AND OTHERS THAT ARE HELD FOR PUBLIC EXHIBITION, EDUCATION, OR RESEARCH IN FURTHERANCE OF PUBLIC SERVICE RATHER THAN FINANCIAL GAIN EACH ITEM IS PROTECTED, KEPT UNENCUMBERED, CARED FOR, AND PRESERVED ACTIVITIES VERIFYING THEIR EXISTENCE AND ASSESSING THEIR CONDITION ARE PERFORMED CONTINUOUSLY PROCEEDS FROM SALES OF DE-ACCESSIONED COLLECTION ITEMS ARE USED TO ACQUIRE OTHER ITEMS FOR THE COLLECTION THE FOUNDATION HAS AN ADOPTED COLLECTIONS MANAGEMENT POLICY IN PLACE IN KEEPING WITH STANDARD MUSEUM PRACTICE, THE COLLECTIONS, WHICH WERE ACQUIRED VIA PURCHASES AND CONTRIBUTIONS, ARE NOT RECOGNIZED AS ASSETS ON THE STATEMENT OF FINANCIAL POSITION PURCHASES OF ARTWORK ARE RECORDED AS DECREASES IN UNRESTRICTED NET ASSETS OR TEMPORARILY RESTRICTED NET ASSETS IN THE YEAR OF PURCHASE, DEPENDING ON THE SOURCES OF FUNDS USED THE COLLECTION ITEMS ACQUIRED BY GIFT WERE VALUED BY THE DONORS AT \$776,160 AND \$214,640, RESPECTIVELY, FOR THE YEARS ENDED SEPTEMBER 30, 2017 AND SEPTEMBER 30, 2018, AND ARE NOT REFLECTED IN THE STATEMENTS OF ACTIVITIES

**Supplemental Information**

Return Reference	Explanation
PART III, LINE 4	THE ORGANIZATION'S PERMANENT COLLECTIONS INCLUDE MORE THAN 12,000 OBJECTS SPANNING FROM ABOUT 1750 TO THE PRESENT PAINTINGS, DRAWINGS, ORIGINAL PRINTS, SCULPTURE, NATIVE AMERICAN ARTIFACTS, BOOKS, MANUSCRIPTS, IMPRINTS, MAPS, PHOTOGRAPHS, AND CORRESPONDENCE ALSO INCLUDED ARE TWO HISTORIC STRUCTURES, THE RUSSELL HOME AND STUDIO, BOTH OF WHICH INCLUDE HISTORIC AND PERIOD FURNISHINGS, TOOLS, EQUIPMENT, ART SUPPLIES, CLOTHING, AND OTHER APPROPRIATE COLLECTIONS THE COLLECTIONS RELATE TO THE CULTURE AND HISTORY OF THE AMERICAN WEST SIGNIFICANT PARTS OF THE FINE ART COLLECTION, ARTIFACT COLLECTION, AND RUSSELL STUDIO COLLECTION CONSIST OF OBJECTS CREATED BY, OWNED BY, AND/OR USED BY CHARLES M RUSSELL THIS COLLECTION FURTHERS THE EXEMPT PURPOSE OF THE ORGANIZATION, WHICH IS TO COLLECT, PRESERVE, RESEARCH, INTERPRET AND EDUCATE ON THE ART AND LIFE OF CHARLES M RUSSELL, THE ART AND LIFE OF HIS CONTEMPORARIES, AND THE ART OF PRECEDING AND ENSUING GENERATIONS THAT DEPICTS AND FOCUSES ON THE CULTURE, LIFE AND COUNTRY OF RUSSELL'S WEST

**Supplemental Information**

Return Reference	Explanation
PART V, LINE 4	<p>THE TRIGG - C M RUSSELL FOUNDATION, INC ENDOWMENT WAS ESTABLISHED TO SUPPORT THE MUSEUM FINANCES FOR A VARIETY OF PURPOSES THERE ARE THREE CATEGORIES OF ENDOWMENT FUNDS PERMANENT, TEMPORARILY RESTRICTED, AND BOARD DESIGNATED IN THE PERMANENT ENDOWMENT, DONORS HAVE PLACED CERTAIN RESTRICTIONS ON THEIR GIFTS THESE RESTRICTIONS INCLUDE OPERATIONS, EDUCATION AND ART THE FOUNDATION ALSO HAS BEEN THE BENEFICIARY OF CHARITABLE GIFT ANNUITIES THESE GIFTS ARE PERMANENTLY RESTRICTED AND THE FOUNDATION HAS A LIABILITY FOR THE ANNUITY PAYMENTS TO THE DONORS THE ENDOWMENT ALSO INCLUDES A TEMPORARILY RESTRICTED GIFT THAT IS RESTRICTED BASED ON TIME THE RESTRICTION WILL BE MET AUGUST 1, 2021 THE BOARD DESIGNATED ENDOWMENT INCLUDES FUNDS THAT WERE RECEIVED FROM DONORS WITHOUT RESTRICTIONS AND THE BOARD VOTED TO DESIGNATE THESE FUNDS TO BE SET ASIDE FOR SPECIFIC PURPOSES THE PURPOSES INCLUDE FUNDS FOR A CURATORIAL CHAIR, OPERATIONS, EDUCATION, ART, EXHIBITIONS, GENERAL CAPITAL IMPROVEMENTS, AND STUDIO IMPROVEMENTS THE BOARD CAN UNDESIGNATE THESE FUNDS AT ANY TIME VIA BOARD VOTE</p>



# Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	CHANGE IN VALUE OF SPLIT INTEREST A 34,101 RENTAL PROPERTY EXPENSE 155 SPECIAL EVENT EXPENSE 9,888

# Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	RENTAL PROPERTY EXPENSE 155 PERMANENT COLLECTION PURCHASES 4,300 SPECIAL EVENT EXPENSE 9,888

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Attach to Form 990. Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization TRIGG - C M RUSSELL FOUNDATION INC

Employer identification number 81-6003526

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of non-cash assistance, (h) Purpose of grant or assistance. Rows 1-12.

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3 Enter total number of other organizations listed in the line 1 table.

**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) SCHOLARSHIPS	8	7,800			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

**Part IV Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	THE APPLICATION PROCESS AND BUDGET WILL BE ADMINISTERED THROUGH THE EDUCATION DEPARTMENT AT THE C M RUSSELL MUSEUM THE AWARDED SCHOLARSHIP WILL BE PAID DIRECTLY TO THE ACCREDITED UNIVERSITY OR COLLEGE TO COVER TUITION WITH PROOF OF ENROLLMENT IN CLASSES RELATED TO THE DISCIPLINES OF ART HISTORY, AMERICAN HISTORY, ART EDUCATION, LIBRARY SCIENCE, MUSEUM STUDIES, OR VISUAL FINE ARTS (NOT MUSIC OR PERFORMING ARTS) STUDENTS MUST DEMONSTRATE ACADEMIC ACHIEVEMENT WITH A CUMULATIVE 3.0 OR HIGHER GRADE-POINT AVERAGE EACH YEAR DURING THE FOUR YEARS OF THE AWARD AND CONTINUATION OF ENROLLMENT IN THE CLASSES OUTLINED ABOVE SCHOLARSHIPS WILL NOT BE AWARDED TO A STUDENT WHO HAS RECEIVED ANY OTHER SIGNIFICANT SCHOLARSHIP AS DETERMINED BY THE C M RUSSELL MUSEUM AND HIGH SCHOOL GUIDANCE COUNSELORS IF A STUDENT FAILS TO MEET THESE CRITERIA IN HIS/HER COLLEGE CAREER, THE SCHOLARSHIP WILL BE FORFEITED AND THE FUNDS WILL REMAIN WITH THE ANNE MORAND MEMORIAL SCHOLARSHIP FUND

**Schedule L**  
(Form 990 or 990-EZ)

**Transactions with Interested Persons**

OMB No 1545-0047

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**  
 ▶ **Attach to Form 990 or Form 990-EZ.**  
 ▶ **Information about Schedule L (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

**2017**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
TRIGG - C M RUSSELL FOUNDATION INC

Employer identification number  
81-6003526

**Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 ▶ \$ \_\_\_\_\_

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ \_\_\_\_\_

**Part II Loans to and/or From Interested Persons.**  
 Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

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

**Part III Grants or Assistance Benefiting Interested Persons.**  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

**Part IV Business Transactions Involving Interested Persons.**

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) WAYNE THARES	PREVIOUS DIRECTOR	62,181	CATERING FOR THE RUSSELL		No

**Part V Supplemental Information**

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

Return Reference	Explanation
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**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No 1545-0047

**2017**

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**

▶ **Attach to Form 990.**

▶ **Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
TRIGG - C M RUSSELL FOUNDATION INC

Employer identification number  
81-6003526

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	4	15,243	
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ ( SECRET SPIRIT SUPPLIES )	X	4	5,145	
26 Other ▶ ( 50TH PINS )	X	1	4,830	
27 Other ▶ ( RUSSELL DECORATIONS )	X	1	1,045	
28 Other ▶ ( _____ )				

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

	Yes	No
<b>30a</b> During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		No
<b>b</b> If "Yes," describe the arrangement in Part II		
<b>31</b> Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	Yes	
<b>32a</b> Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		No
<b>b</b> If "Yes," describe in Part II		
<b>33</b> If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

**Part II Supplemental Information.**

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

Return Reference	Explanation
PART I, LINE 33	THE FOUNDATION HAS ELECTED UNDER SFAS 116 NOT TO REPORT IN ITS REVENUE STATEMENT AND BALANCE SHEET WORKS OF ART, HISTORICAL TREASURES, OR OTHER SIMILAR ASSETS HELD FOR PUBLIC EXHIBITION, EDUCATION, OR RESEARCH IN FURTHERANCE OF PUBLIC SERVICE (SEE SCHEDULE D, PART XIV FOR ADDITIONAL INFORMATION) AS SUCH, THERE IS NO REVENUE ASSOCIATED WITH THE DONATED WORKS OF ART REPORTED ABOVE HOWEVER, THE COLLECTION ITEMS ACQUIRED BY GIFT IN FISCAL YEAR 2018 WERE VALUED BY THE DONORS AT \$214,640



**SCHEDULE O**  
(Form 990 or 990-EZ)Department of the Treasury  
Internal Revenue Service

Name of the organization

TRIGG - C M RUSSELL FOUNDATION INC

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2017****Open to Public Inspection**

Employer identification number

81-6003526

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	LINE 11A EXPLANATION - THE FORM 990 IS PREPARED BY THE FOUNDATION'S INDEPENDENT ACCOUNTANT AND REVIEWED BY THE FOUNDATION'S EXECUTIVE DIRECTOR AND CHIEF OPERATIONS OFFICER THE RETURN IS THEN PRESENTED TO THE BOARD OF DIRECTORS AT THE NEXT REGULARLY SCHEDULED FULL BOARD MEETING UPON REVIEW AND DISCUSSION, THE 990 IS SUBJECT TO APPROVAL BY MAJORITY VOTE ONCE APPROVED, IT IS THEN FILED

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ALL MEMBERS OF THE FOUNDATION'S BOARD OF DIRECTORS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST POLICY STATEMENT ANNUALLY AND DISCLOSE ALL MATERIAL CONFLICTS SHOULD A SITUATION ARISE WHERE A BOARD MEMBER HAS A CONFLICT OF INTEREST, THE BOARD MEMBER ABSTAINS FROM VOTING ON THE ISSUE

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, SECTION B, LINE 15	THE FOUNDATION'S BOARD OF DIRECTORS IS RESPONSIBLE FOR HIRING ALL OFFICERS OF THE ORGANIZATION THE BOARD RESEARCHES COMPARABLE ORGANIZATIONS TO DETERMINE REASONABLE COMPENSATION AND BENEFIT PACKAGES FOR THE ORGANIZATION'S OFFICERS THE FOUNDATION'S OFFICERS ARE RESPONSIBLE FOR HIRING KEY EMPLOYEES COMPARISONS ARE MADE TO SIMILAR ORGANIZATIONS AND LOCAL EMPLOYMENT AGENCIES ARE CONTACTED FOR INPUT AS WELL THERE WERE NO KEY EMPLOYEES EMPLOYED BY THE FOUNDATION IN FISCAL YEAR 2018 (BASED UPON THE 990 DEFINITION OF KEY EMPLOYEE)

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	ALL REQUIRED PUBLIC DOCUMENTS ARE MADE AVAILABLE AT THE C M RUSSELL MUSEUM ADMINISTRATIVE OFFICES UPON REQUEST

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VIII, LINE 1G NONCASH CONTRIBUTIONS	PER THE INSTRUCTIONS TO FORM 990, THE VALUE OF DONATED SERVICES IS DISREGARDED FOR REPORTING PURPOSES. HOWEVER, THE FOUNDATION WOULD LIKE TO RECOGNIZE THE DONATED SERVICES IT RECEIVES, AS THEY ARE VITAL TO ITS SUCCESS. IT RECEIVED \$83,322 IN DONATED SERVICES IN FISCAL YEAR 2018.

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 24E	<p>POSTAGE/SHIPPING &amp; HANDLING PROGRAM SERVICE EXPENSES 72,353 MANAGEMENT AND GENERAL EXPENSES 1,355 FUNDRAISING EXPENSES 14,347 TOTAL EXPENSES 88,055 COMPUTER EXPENSES PROGRAM SERVICE EXPENSES 20,116 MANAGEMENT AND GENERAL EXPENSES 8,680 FUNDRAISING EXPENSES 35,626 TOTAL EXPENSES 64,422 CREDIT CARD FEES PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 46,007 FUNDRAISING EXPENSES 16,574 TOTAL EXPENSES 62,581 SECURITY PROGRAM SERVICE EXPENSES 57,302 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 57,302 EXHIBIT MATERIALS AND SUPPLIES PROGRAM SERVICE EXPENSES 55,168 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 55,168 EXHIBIT RENTAL FEES PROGRAM SERVICE EXPENSES 27,336 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 27,336 WRITEOFFS PROGRAM SERVICE EXPENSES 22,754 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 22,754 PHOTOGRAPHY PROGRAM SERVICE EXPENSES 13,888 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 7,877 TOTAL EXPENSES 21,765 SMALL FURNITURE, FIXTURES &amp; EQUIPMENT PROGRAM SERVICE EXPENSES 8,781 MANAGEMENT AND GENERAL EXPENSES 4,828 FUNDRAISING EXPENSES 2,050 TOTAL EXPENSES 15,659 DONOR RELATIONS PROGRAM SERVICE EXPENSES 3,478 MANAGEMENT AND GENERAL EXPENSES 191 FUNDRAISING EXPENSES 11,142 TOTAL EXPENSES 14,811 TAXES AND FEES PROGRAM SERVICE EXPENSES 35 MANAGEMENT AND GENERAL EXPENSES 8,540 FUNDRAISING EXPENSES 2,847 TOTAL EXPENSES 11,422 EXHIBIT DESIGN PROGRAM SERVICE EXPENSES 9,031 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 54 TOTAL EXPENSES 9,085 MEMBERSHIP FEES PROGRAM SERVICE EXPENSES 3,720 MANAGEMENT AND GENERAL EXPENSES 810 FUNDRAISING EXPENSES 2,341 TOTAL EXPENSES 6,871 STAFF EXPENSE - OTHER PROGRAM SERVICE EXPENSES 88 MANAGEMENT AND GENERAL EXPENSES 3,787 FUNDRAISING EXPENSES 1,490 TOTAL EXPENSES 5,365 PUBLICATION AND SUBSCRIPTION PROGRAM SERVICE EXPENSES 3,619 MANAGEMENT AND GENERAL EXPENSES 449 FUNDRAISING EXPENSES 567 TOTAL EXPENSES 4,635 CONSERVATION EXPENSE PROGRAM SERVICE EXPENSES 4,158 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 4,158 PROFESSIONAL DEVELOPMENT - STAFF PROGRAM SERVICE EXPENSES 968 MANAGEMENT AND GENERAL EXPENSES 803 FUNDRAISING EXPENSES 2,145 TOTAL EXPENSES 3,916 TELEPHONE PROGRAM SERVICE EXPENSES 666 MANAGEMENT AND GENERAL EXPENSES 1,040 FUNDRAISING EXPENSES 1,276 TOTAL EXPENSES 2,982 STAFF SEARCH PROGRAM SERVICE EXPENSES 71 MANAGEMENT AND GENERAL EXPENSES 523 FUNDRAISING EXPENSES 821 TOTAL EXPENSES 1,415 AUTO PROGRAM SERVICE EXPENSES 903 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 903 BOARD MEETING EXPENSES PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 201 FUNDRAISING EXPENSES 67 TOTAL EXPENSES 268 MISCELLANEOUS EXPENSE PROGRAM SERVICE EXPENSES 21 MANAGEMENT AND GENERAL EXPENSES 23 FUNDRAISING EXPENSES 89 TOTAL</p>

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART IX, LINE 24E	EXPENSES 133

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART XI, LINE 9	PERMANENT COLLECTIONS PURCHASES -4,300 CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT 34,101



**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART XII, LINE 2C	NO CHANGE FROM PRIOR YEAR IN THE ORGANIZATION'S FINANCIAL STATEMENT OVERSIGHT OR INDEPENDENT ACCOUNTANT SELECTION PROCESSES