Form **990-PF**

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2017 or tax year beginning , 2017, and ending . 20 Name of foundation A Employer identification number 47-0943697 **Tri-M Foundation** Number and street (or P.O. box number if mail is not delivered to street address) B Telephone number (see instructions) Room/suite **1130 Spruce Street** 718-789-1522 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ► Lockhart, TX 78644 **G** Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here . . . ► Final return Amended return 2. Foreign organizations meeting the 85% test. Address change Name change check here and attach computation · • E If private foundation status was terminated under H Check type of organization: 🔽 Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here ► Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation J Accounting method: 🗹 Cash 🗌 Accrual Fair market value of all assets at F If the foundation is in a 60-month termination Other (specify) end of year (from Part II, col. (c), under section 507(b)(1)(B), check here . ► . line 16) ► \$ 25141 (Part I, column (d) must be on cash basis.) Part Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per books income income purposes (cash basis only) the amounts in column (a) (see instructions).) 1 Contributions, gifts, grants, etc., received (attach schedule) 20900 2 Check
Ch 3 Interest on savings and temporary cash investments 0 0 4 0 0 Dividends and interest from securities Gross rents 0 0 5a b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 0 Revenue Gross sales price for all assets on line 6a b Capital gain net income (from Part IV, line 2) . . 7 0 8 Net short-term capital gain 0 Income modifications 0 9 10a Gross sales less returns and allowances Less: Cost of goods sold . . . h Gross profit or (loss) (attach schedule) 0 0 С 11 0 0 0 Other income (attach schedule) 20900 0 12 Total. Add lines 1 through 11 . . 0 0 13 Compensation of officers, directors, trustees, etc. **Operating and Administrative Expenses** 14 Other employee salaries and wages 0 15 0 Pension plans, employee benefits . . . 0 16a Legal fees (attach schedule) . . . 0 Accounting fees (attach schedule) b 0 С Other professional fees (attach schedule) . . . 0 17 Interest Taxes (attach schedule) (see instructions) 0 18 0 19 Depreciation (attach schedule) and depletion . . 0 20 Occupancy 0 21 Travel, conferences, and meetings . . . 22 Printing and publications 0 23 Other expenses (attach schedule) 5 24 Total operating and administrative expenses. Add lines 13 through 23 5 0 12500 25 Contributions, gifts, grants paid 12500 26 Total expenses and disbursements. Add lines 24 and 25 12505 12500 27 Subtract line 26 from line 12: 8395 Excess of revenue over expenses and disbursements а **Net investment income** (if negative, enter -0-) . 0 b Adjusted net income (if negative, enter -0-) . С

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2017)

OMB No. 1545-0052

2017

Open to Public Inspection

art II	Balance Sheets should be for and of user amounts in the description column	Beginning of year	End o	f year
art II	Balance Sneets should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash-non-interest-bearing	16746	25141	2514
2	Savings and temporary cash investments	0	0	
3	Accounts receivable			
	Less: allowance for doubtful accounts	0	0	
4	Pledges receivable ►			
	Less: allowance for doubtful accounts	0	0	
5	Grants receivable	0	0	
6	Receivables due from officers, directors, trustees, and other			
-	disqualified persons (attach schedule) (see instructions)	0	0	
7	Other notes and loans receivable (attach schedule)	· · · · · · · · · · · · · · · · · · ·		
1		0	0	
	Less: allowance for doubtful accounts	0		
8 9 10a	Inventories for sale or use		0	
9	Prepaid expenses and deferred charges	0	0	
10a	Investments-U.S. and state government obligations (attach schedule)	0	0	
b	Investments-corporate stock (attach schedule)	0	0	
C	Investments-corporate bonds (attach schedule)	0	0	
11	Investmentsland, buildings, and equipment: basis ▶			
	Less: accumulated depreciation (attach schedule)	0	0	
12	Investments-mortgage loans	0	Ő	
13	Investments-other (attach schedule)	0	0	
14	Land, buildings, and equipment: basis ►		-	
	Less: accumulated depreciation (attach schedule)	0	0	
15	Other assets (describe ►)		0	
16	Total assets (to be completed by all filers—see the		······	
10	instructions. Also, see page 1, item I)			
+		16746	25141	251
17	Accounts payable and accrued expenses	0	0	
18	Grants payable	10000	10000	
19 20 21	Deferred revenue	0	0	
20	Loans from officers, directors, trustees, and other disqualified persons	0	0	
21	Mortgages and other notes payable (attach schedule)	0	0	
22	Other liabilities (describe ►)	0	0	
23	Total liabilities (add lines 17 through 22)	10000	10000	
1	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26, and lines 30 and 31.			
24		6746	15141	
24 25 26 27 28 29 30 31	Temporarily restricted	0/40		
26			0	
20	Permanently restricted	0	0	
	Foundations that do not follow SFAS 117, check here ►			
	and complete lines 27 through 31.			
27	Capital stock, trust principal, or current funds			
28	Paid-in or capital surplus, or land, bldg., and equipment fund			
29	Retained earnings, accumulated income, endowment, or other funds			
30	Total net assets or fund balances (see instructions)	6746	15141	
31	Total liabilities and net assets/fund balances (see			
	instructions)	16746	25141	
art III			20141	
	al net assets or fund balances at beginning of year-Part II, colur	nn (a), line 30 (must	agree with	
end-	-of-year figure reported on prior year's return)	(4),	-	
	er amount from Part I, line 27a		2	83
2 044	er increases not included in line 2 (itemize)		3	
3 Othe			4	151
3 Othe 4 Add			•••	151
3 Othe 4 Add	reases not included in line 2 (itemize) ► I net assets or fund balances at end of year (line 4 minus line 5)—F			151

	90-PF (2017)						Page
Part		Losses for Tax on Investme		(b) How acquired	.		
		nd(s) of property sold (for example, real estat se; or common stock, 200 shs. MLC Co.)	te,	P—Purchase D—Donation		te acquired ., day, yr.)	(d) Date sold (mo., day, yr.)
1a							
b							
С							
d							
е							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale			n or (loss) f) minus (g))
а							
b							
С							
d							
е	Complete only for eccets abo	wing goin in column (b) and owned by	the foundation	on 10/01/60			
	Complete only for assets sho	wing gain in column (h) and owned by			-		. (h) gain minus less than -0-) or
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col. (i) . (j), if any			rom col. (h))
а							
b							
<u> </u>							
d							
е			D.				
2	Capital gain net income or		so enter in Pa nter -0- in Pa		2		(
3	If gain, also enter in Part	n or (loss) as defined in sections 12 I, line 8, column (c). See instructi					
				J	3		
Part	V Qualification Und	er Section 4940(e) for Reduce	ed Tax on N	let Investment	t Incor	ne	
Was tl	s," the foundation doesn't q	section 4942 tax on the distributat jualify under section 4940(e). Do no	ot complete t	his part.	•		🗌 Yes 🖌 No
1	Enter the appropriate amo	ount in each column for each year;	see the instru	uctions before m	aking a	ny entries.	
Cale	(a) Base period years ndar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) f noncharitable-use a	issets		(d) ribution ratio livided by col. (c))
	2016		0		8807		0
	2015	Ν	I/A		N/A		N/A
	2014	N	I/A		N/A		N/A
	2013	N	I/A		N/A		N/A
	2012	N	I/A		N/A		N/A
2	Total of line 1, column (d)				•	2	(
3		for the 5-year base period—divide oundation has been in existence if			-	3	(
4	Enter the net value of non	charitable-use assets for 2017 fror	n Part X, line	5		4	8354
5	5 Multiply line 4 by line 3				5	(
6	Enter 1% of net investmer	nt income (1% of Part I, line 27b)				6	(
7	Add lines 5 and 6					7	(
8		ns from Part XII, line 4				8	1250
5		tter than line 7, check the box in P					

_

Form 99	0-PF (2017)		F	Page 4		
Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948-see in	nstru	ctior	าร)		
1a	Exempt operating foundations described in section 4940(d)(2), check here ► □ and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		0			
	here ► 🗹 and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of J					
-	Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0			
3	Add lines 1 and 2		0			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 4 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 5		0			
5 6	Credits/Payments:		U			
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a					
b	Exempt foreign organizations—tax withheld at source					
c	Tax paid with application for extension of time to file (Form 8868) . 6c					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d		0			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		0			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10		0			
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax ► Refunded ► 11					
Part			1			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No		
Ь	participate or intervene in any political campaign?	1a		~		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	41.		~		
		1b		~		
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.					
С	Did the foundation file Form 1120-POL for this year?					
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		~		
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		~		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		~		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		~		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		~		
6	If "Yes," attach the statement required by <i>General Instruction T.</i> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
0	• By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that					
	conflict with the state law remain in the governing instrument?	6	~			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	~			
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.					
	TEXAS					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
	(or designate) of each state as required by General Instruction G? If "No," attach explanation					
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes,"					
		9		~		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	4.0				
	names and addresses	10	~			

Form **990-PF** (2017)

_	0-PF (2017)			Page 5
Par	VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions			
10	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	11		~
12	person had advisory privileges? If "Yes," attach statement. See instructions	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	~	
	Website address www.Tri-M.foundation			
14	The books are in care of ▶ Matthew J Collins Telephone no. ▶ 7	18 789	1522	
		0022-6		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here	• •	·	
40	and enter the amount of tax-exempt interest received or accrued during the year		Yes	Na
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	10	res	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	16		~
	the foreign country >			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
i ai	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
···	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? \Box Yes \checkmark No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		V
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2017?	1c		~
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2017?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
•	▶ 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year? \ldots			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had average business holdings in 2017).			
	foundation had excess business holdings in 2017.)	3b		~
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		~
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	41-		
		4b		/
	Fo	orm 99	0-PF	(2017)

Form 99	30-PF (2017)		F	Page 6
Part	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)			
5a	During the year, did the foundation pay or incur any amount to:		Yes	No
	 (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? 			
	 (3) Provide a grant to an individual for travel, study, or other similar purposes?			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?			
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in			
	Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	5b		~
с	Organizations relying on a current notice regarding disaster assistance, check here			
6a	If "Yes," attach the statement required by Regulations section 53.4945–5(d). Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		~
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes Vo			
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		~

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.

(a) Name and address		d average r week position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Zachary Christman c/o Tri-M Foundation, 1130 Spruce St, Lockhart TX	President:	5	0	0	0
Matthew Collins c/o Tri-M Foundation, 1130 Spruce St, Lockhart TX	Secretary / Treasurer:	10	0	0	0
Eric Mund c/o Tri-M Foundation, 1130 Spruce St, Lockhart TX	Director:	5	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1-see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000				0
				Form 990-PF (2017)

Total. Add lines 1 through 3

.

.

.

3	and Contractors (continued) Five highest-paid independent contractors for professional services. See instructions. If none, enter "NON	E."
-	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None		
ota	number of others receiving over \$50,000 for professional services	0
Par	IX-A Summary of Direct Charitable Activities	
	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	N/A	
2		
3		
Ū		
4		
_		
	IX-B Summary of Program-Related Investments (see instructions)	Amount
1 1	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
2		
Al	other program-related investments. See instructions.	
3	None	1

. . .

Form **990-PF** (2017)

0

.

Form 99	90-PF (2017)		Page 8
Part	X Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn foundati	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	8481
с	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	8481
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	8481
4	Cash deemed held for charitable activities. Enter $1\frac{1}{2}\%$ of line 3 (for greater amount, see instructions)	4	127
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	8354
6	Minimum investment return. Enter 5% of line 5	6	418
Part		oundations	
1	Minimum investment return from Part X, line 6	1	418
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.) 2b 0		
С	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	418
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	418
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	418
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etctotal from Part I, column (d), line 26	1a	12500
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required).............................	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	12500
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
~	Enter 1% of Part I, line 27b. See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	12500
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether th	e toundation

Form **990-PF** (2017)

Form	990-PF	(2017)
------	--------	--------

Part XIII Undistributed Income (see instructions)							
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017		
	line 7				418		
2	Undistributed income, if any, as of the end of 2017:						
а	Enter amount for 2016 only			440			
b	Total for prior years: 20,20,20		0				
3	Excess distributions carryover, if any, to 2017:						
a	From 2012 0						
b	From 2013 0						
С	From 2014 0						
d	From 2015 0						
e	From 2016 0						
f	Total of lines 3a through e	0					
4	Qualifying distributions for 2017 from Part XII, line 4: ► \$ 12500						
-				440			
a h	Applied to 2016, but not more than line 2a . Applied to undistributed income of prior years			440			
b	(Election required—see instructions)		0				
с	Treated as distributions out of corpus (Election		0				
C	required—see instructions)	0					
А		0			418		
d	Applied to 2017 distributable amount Remaining amount distributed out of corpus	11642			418		
е 5	Excess distributions carryover applied to 2017	0			0		
5	(If an amount appears in column (d), the same	V			0		
	amount must be shown in column (a).)						
6	Enter the net total of each column as						
•	indicated below:						
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	11642					
b	Prior years' undistributed income. Subtract						
	line 4b from line 2b		0				
с	Enter the amount of prior years' undistributed						
	income for which a notice of deficiency has						
	been issued, or on which the section 4942(a)						
	tax has been previously assessed		0				
d	Subtract line 6c from line 6b. Taxable						
	amount-see instructions		0				
е	Undistributed income for 2016. Subtract line						
	4a from line 2a. Taxable amount-see						
	instructions			0			
f	Undistributed income for 2017. Subtract lines						
	4d and 5 from line 1. This amount must be						
_	distributed in 2018				0		
7	Amounts treated as distributions out of corpus						
	to satisfy requirements imposed by section $170(h)(1)(5)$ or $4040(h)(2)$ (5) attack to be						
	170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)						
0	Excess distributions carryover from 2012 not	0					
8	applied on line 5 or line 7 (see instructions).	0					
9	Excess distributions carryover to 2018.	0					
3	Subtract lines 7 and 8 from line 6a	11642					
10	Analysis of line 9:	11042					
a	Excess from 2013 0						
a b	Excess from 2014 0						
c	Excess from 2015 0						
d	Excess from 2016 0						
e	Excess from 2017						
					Earm 000-DE (0017)		

Form **990-PF** (2017)

Form 99	0-PF (2017)					Page 10
Part	XIV Private Operating Founda	tions (see instru	ictions and Part	VII-A, question §	9)	
1a	If the foundation has received a ruling	•				
	foundation, and the ruling is effective for		-			
b	Check box to indicate whether the four		e operating foundat		ection 🗌 4942(j)(3) or 📋 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
ام	line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
	•					
е	Qualifying distributions made directly					
	for active conduct of exempt activities. Subtract line 2d from line 2c					
2						
3	Complete 3a, b, or c for the alternative test relied upon:					
_	•					
а	"Assets" alternative test—enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in					
~	Part X, line 6 for each year listed					
С	"Support" alternative test—enter:					
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
Part		n (Complete th	his part only if t	L he foundation h	ad \$5.000 or mo	ore in assets at
	any time during the year-	· ·				
1	Information Regarding Foundation		,			
a	List any managers of the foundation		uted more than 29	% of the total cont	ributions received	by the foundation
	before the close of any tax year (but o					,
NONE						
b	List any managers of the foundation	who own 10% o	r more of the stoo	ck of a corporatio	n (or an equally la	rge portion of the
	ownership of a partnership or other er	ntity) of which the	foundation has a	10% or greater int	erest.	•
NONE						
2	Information Regarding Contribution	n, Grant, Gift, Loa	n, Scholarship, e	etc., Programs:		
	Check here ► □ if the foundation			-	organizations and	does not accept
	unsolicited requests for funds. If the f	-	-			
	complete items 2a, b, c, and d. See in	structions.				
а	The name, address, and telephone nu	mber or email ad	dress of the perso	n to whom applica	ations should be ac	dressed:
NA						
b	The form in which applications should	l be submitted and	d information and	materials they sho	ould include:	
NA						
C NA	Any submission deadlines:					
d	Any restrictions or limitations on aw	vards, such as b	y geographical a	reas, charitable fi	elds, kinds of inst	titutions, or other
	factors:			,		,

NA

B Grants and Contributions Paid Durin				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
as State University				
iversity Drive, San Marcos, TX 78666		PC	In support of mission critical	1000
			projects in the Honors College.	
nklin Stage Company		РС	Underwriting of "Magdalen"	250
Institute St, Franklin, NY 13775		rc		230
			performances as part of summer	
			theatre season.	
Total			► 3a	125
b Approved for future payment				
as State University iversity Drive, San Marcos, TX 78666		РС	In support of mission critical	100
• • •			projects in the Honors College	

Ра	rt XV	I-A Analysis of Income-Producing Ac	ctivities				
Ente	er gros	ss amounts unless otherwise indicated.		isiness income	Excluded by secti	on 512, 513, or 514	
	-		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
1	a a	ram service revenue:					
	b –						
	č –						
	d –						
	e –						
	f						
	g F	ees and contracts from government agencies					
2	-	bership dues and assessments					
3		est on savings and temporary cash investments					
4		lends and interest from securities					
5		rental income or (loss) from real estate:					
		Debt-financed property					
	bΝ	Not debt-financed property					
6	Net r	rental income or (loss) from personal property					
7	Othe	er investment income					
8	Gain	or (loss) from sales of assets other than inventory					
9	Net i	income or (loss) from special events					
10	Gros	ss profit or (loss) from sales of inventory					
11	Othe	er revenue: a					
	b						
	c _						
	d _						
	е						
12	Subt	total. Add columns (b), (d), and (e)					
13	Tota	II. Add line 12, columns (b), (d), and (e)				13	0
13 (See	Tota work	II. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	is.)			13	0
13 (See Pa	Tota work rt XV	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota work rt XV e No.	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put 	ns.) A ccomplishm	ent of Exemp	t Purposes		

Form 990	-PF (20	17)									age 13
Part)	KVII	Information Organization	ons		and Transac						
i	in se organ	e organization c ction 501(c) (o izations?	ther than sect	tion 501(c)(3)	organizations)	or in section	n 527, rela	ization des ating to p	cribed olitical	Yes	No
a	Trans	fers from the rep	porting foundation	on to a nonch	aritable exempt	organization o	f:			- (4)	
	(1) Ca	ash				:				a(1)	
	(2) 01	her assets .						• • •	· · 1	a(2)	1
		transactions:									
	(1) Sa	ales of assets to	a noncharitable	e exempt orga	anization					b(1)	
		rchases of asse						• • • •		b(2)	~
		ental of facilities								b(3)	~
		eimbursement a								b(4)	~
		ans or loan gua						• • • •		b(5)	~
	(6) Pe	erformance of se	ervices or memb	bership or fun	draising solicita	tions				b(6)	~
С	Sharir	ng of facilities, e	quipment, maili	ing lists, other	assets, or paid	employees .		 	•• • []	1c	
d	If the	answer to any	of the above is	"Yes," comp	lete the followin	ng schedule. C	olumn (b) s	snould alwa	ays snow 1	ine tair r	narket
	value	of the goods, o	ther assets, or	services giver	h by the reporting	ng toundation.	t the tound	ation recei	ved less tr	ices rece	narket
		in any transaction									
(a) Line	no. (1	b) Amount involved	(c) Name of	noncharitable ex	empt organization	(a) Descrip	tion of transfer	rs, transaction	is, and sharing	y anangen	
		······································							·,		
										 	
										···· /····	
					······································						***
		· · · · · · · · · · · · · · · · ·						· · · · · · · · · · ·			
		······································	· · · · · · · · · · · · · · · · · · ·					·····			
		,							<u></u>		
									 		
					······································						
			· · · · · · · · · · · · · · · · · · ·	······							
		······			· · · · · ·					. <u></u>	
	desci	o foundation dire ribed in section s," complete the	501(c) (other tha	an section 50	vith, or related t 1(c)(3)) or in sect	o, one or more tion 527?	tax-exem	pt organiza	Ations	Yes 🗹	No
		(a) Name of organ	nization		(b) Type of organiz	ation	<u> </u>	(c) Descriptio	on of relations	nip	
<u> </u>											
										11.0.0	
0:	Unde	r penalties of perjury, ct, and complete. Dec	I declare that I have e laration of preparer (o	examined this return other than taxpayer	n, including accompar) is based on all inform	iving schedules and ation of which prepa	statements, and rer has any know	to the best of wiedge.	my knowledge) and Dellet,	, It is true
Sign	1 -	710	······································		14 14 2018			-	May the IRS with the prep		
Here	· · · · · · · · · · · · · · · · · · ·	T		,		Secretary / Treas	urer		See instructio		
<u> </u>	Sign	ature of officer or tru		0	Date	Title	Date			N	÷
Paid		Print/Type prepare	r s naume	Prepare	r's signature		Date		* [] # [
Prepa	arer						I	<u></u>	employed		
Use (Only	Firm's name 🕨						Firm's EIN			
<u> </u>		Firm's address 🕨						Phone no.	For	m 990-P	F (2017
									101		- 1-011

Eo

Page 13

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Name of the organization

Tri-M	Founda	tion

Employer identification	number
47-0943697	

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	501(c)() (enter number) organization
	\Box 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	✓ 501(c)(3) exempt private foundation
	\Box 4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

✓ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- □ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33^{1/3}% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- □ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- □ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Cat. No. 30613X Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

(b)

Name of organization

Page 2

Tri-M Foundation

Part I

(a)

Employer identification number

47-0943697 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (c) (d)

No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
	John Robert Hood Trust c/o 13000 Vista del Norte #1515 San Antonio, TX 78216	\$\$	PersonPayrollNoncashI(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	PersonPayrollDoncashNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	PersonPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	PersonPayrollDoncashNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	PersonPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	PersonPayrollNoncash(Complete Part II for noncash contributions.)

Name of organization

Tri-M Foundation

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	(none received in 2017)		
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
		Ψ	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Part II Nor

ganization dation		Employer identification number 47-0943697			
Exclusively religious, charitable, etc (10) that total more than \$1,000 for the following line entry. For organizati	the year from any one co ons completing Part III, er	nizations described in section 501(c)(7), (8), or contributor. Complete columns (a) through (e) and and the total of <i>exclusively</i> religious, charitable, etc			
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of a				
Transferee's name, address, an		Relationship of transferor to transferee			
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(a) Transfer of a				
(e) Trans Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
(e) Transfer of gift					
Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee			
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of g				
(e) Transfer of Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
	dation Exclusively religious, charitable, etc (10) that total more than \$1,000 for the following line entry. For organizati contributions of \$1,000 or less for the Use duplicate copies of Part III if addi (b) Purpose of gift (b) Purpose of gift	dation Exclusively religious, charitable, etc., contributions to organizations completing Part III, er contributions of \$1,000 or less for the year. (Enter this informat Use duplicate copies of Part III if additional space is needed. (b) Purpose of gift (c) Use of gift (c) Transferee's name, address, and ZIP + 4 (c) Use of gift (b) Purpose of gift (c) Use of gift (c) Transferee's name, address, and ZIP + 4 (c) Use of gift (b) Purpose of gift (c) Use of gift (c) Dupupose of gift (c) Use of gif			

STATEMENTS, 2017 990-PF

990-PF, Part I, Line 23

Schedule of Other Expenses

	Payee / Description	Amount
1	State of Texas / Filing Fee	5
	Total	5

990-PF, Part VII-A, Line 10

Schedule of Substantial Contributors

The following were substantial contributors in 2017:

#	Name, Address		
1	John Robert Hood Trust		
	c/o 13000 Vista del Norte #1515		
	San Antonio, TX 78216		