Y) DESCRIPTION:

PMT #  ILLINOIS CHARITABLE ORGANIZATION ANNUAL Attorney General LISA MADIGAN State of III Charitable Trust Bureau, 100 West Randol	nois oh		Form AG990-IL Revised 3/05
11th Floor, Chicago, Illinois 60601	CO # 01-01		
AMT Report for the Fiscal Period:	X	copy of IRS	tems attached: 3 Retum ancial Statements
INIT Beginning <u>07/01/2015</u>	Payable to	Copy of Fo	
& Ending 06/30/2016			te Report Filing Fee
Federal ID # 36-3089812 MO DAY YR			MO DAY YR 01/26/1980
Are contributions to the organization tax deductible? X Yes No D	ate Organization was Year-end	created.	01/20/1900
LEGAL	amounts		
NAME TRITON COLLEGE FOUNDATION	A) ASSETS	A) \$	970,270
MAIL ADDRESS 2000 FIFTH AVENUE	· 1		3,185
ADDRESS 2000 FIFTH AVENUE CITY, STATE RIVER GROVE  L	B) LIABILITIES	B) \$	
ZIP CODE 60171	C) NET ASSETS	C) \$	967,085
I. SUMMARY OF ALL REVENUE ITEMS DURING THE YEAR:	PERCENTAGE		AMOUNT
		D) \$	396,193
D) PUBLIC SUPPORT, CONTRIBUTIONS & PROGRAM SERVICE REV. (GROSS AMTS.)	0%	E) \$	0
E) GOVERNMENT GRANTS & MEMBERSHIP DUES	12%	F) \$	53,962
F) OTHER REVENUES			450,155
G) TOTAL REVENUE, INCOME AND CONTRIBUTIONS RECEIVED (ADD D, E, & F)	100%	G) \$	430,133
II. SUMMARY OF ALL EXPENDITURES DURING THE YEAR:	%	H) \$	
H) OPERATING CHARITABLE PROGRAM EXPENSE	83%	1)\$	344,708
I) EDUCATION PROGRAM SERVICE EXPENSE	83%	J) \$	344,708
J) TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H & I)  11) JOINT COSTS ALLOCATED TO PROGRAM SERVICES (INCLUDED IN J): \$	33 /4	5/6	
3) 00111 00010 11220 112	%	K) \$	
K) GRANTS TO OTHER CHARITABLE ORGANIZATIONS  L) TOTAL CHARITABLE PROGRAM SERVICE EXPENDITURE (ADD J & K)	83%	L)\$	344,708
	17%	M) \$	71,322
M) MANAGEMENT AND GENERAL EXPENSE	%	N) \$	
N) FUNDRAISING EXPENSE  O) TOTAL EXPENDITURES THIS PERIOD (ADD L, M, & N)	100%	0)\$	416,030
III. SUMMARY OF ALL PAID FUNDRAISER AND CONSULTANT ACTIVITIES:  (Attach Attorney General Report of Individual Fundralsing Campaign- Form IFC. One for each PFR.)			
PROFESSIONAL FUNDRAISERS;			
P) TOTAL AMOUNT RAISED BY PAID PROFESSIONAL FUNDRAISERS	100%	P) \$	
Q) TOTAL FUNDRAISERS FEES AND EXPENSES	%	Q) \$	
R) NET RECEIVED BY THE CHARITY (P MINUS Q=R)	%	R) \$	
PROFESSIONAL FUNDRAISING CONSULTANTS:		0) 6	
S) TOTAL AMOUNT PAID TO PROFESSIONAL FUNDRAISING CONSULTANTS	VEAD.	S) \$	
IV. COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE	OORDINATOR	T) \$	45,254
1) White, title not a random	001001111111111111111111111111111111111	U) \$	,
U) NAME, TITLE:		V) \$	
V) NAME, TITLE:  V. CHARITABLE PROGRAM DESCRIPTION: CHARITABLE PROGRAM (3 HIGHEST BY \$ EXPEND	ED) CODE CATEGORIES		n back side of instructions CODE
W) DESCRIPTION: SCHOLARSHIPS AND GRANTS TO STUDENTS	•	W) #	200
X) DESCRIPTION: SCHOLARSHIPS AND GRANTS TO STORESTEE  X) DESCRIPTION: PROVIDE SUPPORT TO TRITON COLLEGE		X)#	150
y) DESCRIPTION:		Y)#	

UBU	TON COLLEGE	FOUNDATION		1110000	IIL, Pa	-
TH	E ANSWER TO AN	OF THE FOLLOWING IS	YES, ATTACH A DETAILED EXPLANATION:		YES	N
	TUE OBOANIZATI	ON THE SUBJECT OF ANY C	COURT ACTION, FINE, PENALTY OR JUDGMENT?	1.		3
٧	AS THE ORGANIZATION	ON THE SUBJECT OF ANT C	SOURT ACTION, TINE, TERRIETT ON SOCIONE.	•)		
Н	IAS THE ORGANIZATIO	ON OR A CURRENT DIRECTO	OR, TRUSTEE, OFFICER OR EMPLOYEE THEREOF,		ne i	
E	VER BEEN CONVICTE	D BY ANY COURT OF ANY M	MISDEMEANOR INVOLVING THE MISUSE OR	_		
N	MISAPPROPRIATION O	F FUNDS OR ANY FELONY?		2,		-
			OR CONTRIBUTION TO ANY ORGANIZATION IN WHICH		VI.S	
	DID THE ORGANIZATION	N MAKE A GRANT AWARD (	OR CONTRIBUTION TO ANY ORGANIZATION IN WHICH S OWNS AN INTEREST; OR WAS IT A PARTY TO ANY TRANSACTIO	N		
- /	N WHICH ANY OF ITS	OFFICERS DIRECTORS OR	TRUSTEES HAS A MATERIAL FINANCIAL INTEREST; OR DID			
,	ANY OFFICER, DIRECT	OR OR TRUSTEE RECEIVE	ANYTHING OF VALUE NOT REPORTED AS COMPENSATION?	3.		
	AS THE OPCANIZATION	ON INVESTED IN ANY CORP	PORATE STOCK IN WHICH ANY OFFICER, DIRECTOR OR			
	RUSTEE OWNS MOR	E THAN 10% OF THE OUTST	TANDING SHARES?	4.		
			WAR OF OR OR OCHANICIED WITH THE		Walk P	
	S ANY PROPERTY OF	THE ORGANIZATION HELD	IN THE NAME OF OR COMMINGLED WITH THE	5.		T
!	PROPERTY OF ANY O	THER PERSON OR ORGANIZ	ZATION?	-11		
i.	DID THE ORGANIZATION	ON USE THE SERVICES OF	A PROFESSIONAL FUNDRAISER? (ATTACH FORM IFC)	6.	E-V	
70	DID THE ORGANIZATION	ON ALLOCATE THE COST OF	F ANY SOLICITATION, MAILING, ADVERTISEMENT OR			
a.	LITERATURE COSTS E	BETWEEN PROGRAM SERVI	CE AND FUNDRAISING EXPENSES?	7,		I
				,	1-17	
7b.	IF "YES", ENTER (I) TH	IE AGGREGATE AMOUNT OF	F THESE JOINT COSTS \$ ;(ii) THE AMOUNT : (iii) THE AMOUNT ALLOCATED TO MANAGEMENT			
	ALLOCATED TO PROC	AND (iv)	) THE AMOUNT ALLOCATED TO FUNDRAISING \$		135	
					100	
3.	DID THE ORGANIZATI	ON EXPEND ITS RESTRICTE	ED FUNDS FOR PURPOSES OTHER THAN RESTRICTED	_		_
	PURPOSES?			8.		1
		PAN EVED DEEN DECLICED !	REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION			
9.		OKED BY ANY GOVERNMEN		9.		T
	SUSPENDED OR REV	OKED BY ANY GOVERNIVIEN	ALVE VOCINOTA	4.1 a m 1.5		
0.	WAS THERE OR DO	OU HAVE ANY KNOWLEDGE	E OF ANY KICKBACK, BRIBE, OR ANY THEFT, DEFALCATION			_
	MISAPPROPRIATION,	COMMINGLING OR MISUSE	OF ORGANIZATIONAL FUNDS?	10,	L	_
1	LIST THE NAME AND	ADDRESS OF THE FINANCIA	AL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS			
	THREE LARGEST AC	COUNTS:				
	FIRSTMERIT	BANK, 501 NORTH	A AVENUE, MELROSE PARK, IL 60160			
						_
12	NAME AND TELEPHO	ONE NUMBER OF CONTACT I	PERSON: SUSAN ZEFELDT			
	, , , , , , , , , , , , , , , , , , , ,		70	8-45	6-0	3
		ST ACCOMPANY THIS REPO	DT - SEE INSTRUCTIONS			

STATE OF ILLINOIS RELY THEREUPON. I HEREBY FURTHER AUTHORIZE AND AGREE TO SUBMIT MYSELF AND THE REGISTRANT HEREBY TO THE JURISDICTION OF THE STATE OF ILLINOIS.

#### BE SURE TO INCLUDE ALL FEES DUE:

- 1.) REPORTS ARE DUE WITHIN SIX MONTHS OF YOUR FISCAL YEAR END. SEAN SULLIVAN
- 2.) FOR FEES DUE SEE INSTRUCTIONS
- 3.) REPORTS THAT ARE LATE OR INCOMPLETE ARE SUBJECT TO A \$100,00 PENALTY.

TOM OLSON

PRESIDENT or TRUSTEE (PRINT NAME)

DATE

TREASURER or TRUSTEE (PRINT NAME)

CHAD PORTER

PREPARER (PRINT NAME)

SIGNATURE

SIGNATURE

DATE

DATE

Form

Return of Organization Exempt From Income Tax

OMB No. 1545-0047 2015 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.
ar beginning 07/01/15 , and ending 06/30/16

1	For the 2015 c	alendar year, or tax year beginning 07/01/13 , and ending 00/30/20	7 D Emp	loyer Id	entification number	
3 C	heck if applicable:	C Name of organization	1			
_] ^	ddress change	TRITON COLLEGE FOUNDATION	36	-308	39812	
٦	lame change	Doing business as  Number and street (or P.D. box if mail is not delivered to street address)  Room/suite		phone n		
╡.	nitial return	2000 FIFTH AVENUE				
_	inal return/	City or town, state or province, country, and ZIP or foreign postal code				
	eminated	RIVER GROVE IL 60171	G Gros	s receipt	s\$ 450,	155
$\neg$	Amended return	ALL VIII GROVE				K No
Ħ,	Application pending	THOMAS OLSON	group return	1 for subc	ordinates? Yes 2	<b>K</b> №
′	application pending	2000 FIFTH AVENUE	subordinate	s Include	ed? Yes L	No
		II 15 to 15	No," attach	a list (se	ee instructions)	
E	Tax-exempt status	30 (6/0) 30 (6)	management of	numbae l		
_	# # # # # # # # # # # # # # # # # # #				State of legal domicile:	IL
K	Form of organization	X Corporation Trust Association Other ► L Year of formation:	1900		State of spins domicals	
P		ummary				
	1 Briefly d	escribe the organization's mission or most significant activities:		4 4 9 1 1 1		4.6 (1.0)
ø	SEE	SCHEDULE O			((0.0) 0.00 (0.00 (0.00) 0.00)	(F) (C) (F) (C) (F)
anc	120 00000000000000000000000000000000000		245000000	4 ( - 4 ( )	000000000000000000000000000000000000000	10000
Governance	********		0.000			
Š	2 Check t	his box > if the organization discontinued its operations or disposed of more than 25% of its net	assets.	0.0	2121	
	3 Number	of voting members of the governing body (Part VI, line 1a)		3	18	
oğ v	4 Number	of independent voting members of the governing body (Part VI, line 1b)		4	18	
Ę.	5 Total nu	mber of individuals employed in calendar year 2015 (Part V, line 2a)		5	1	
Activities		imber of volunteers (estimate if necessary)		6	18	
Ă	6 Total III	related business revenue from Part VIII, column (C), line 12		7a		0
	/a lotal ur	elated business taxable income from Form 990-T, line 34	(4 = 5.5)	7b		0
_	b Net unr	plated business taxable income from Form 990-1, line 34	r Year		Current Year	
	9 Contribu	utions and grants (Part VIII, line 1h)	103,3	35	356,	525
ie E	6 Contribu	n service revenue (Part VIII, line 2g)				0
Revenue	9 Program	ent income (Part VIII, column (A), lines 3, 4, and 7d)	50,2	44	53,	962
Ş	10 Investm	ent income (Part VIII, column (A), lines 5, 4, and 70)	-6,5		-9,	231
	1 11 Otner r	evenue (Part VIII, column (A), lines 5, 6d, 6d, 9d, 9d, and 710)	447,0		401,	256
_	12 Total re	Venue – add lines a throught in thidst equal that this contains the first	178,7		339,	
		and similar amounts paid (i are ix, column (x), image i s)				0
	14 Benefit	s paid to or for members (Part IX, column (A), line 4)	43,7	189	49	210
y.	15 Salarie	s, other compensation, employee benefits (Part IX, column (A), lines 5-10)	40,	-		0
Exnenses	16a Profess	ional fundraising fees (Part IX, column (A), line 11e)				
ê	b Total fi	indraising expenses (Part IX, column (D), line 25) ▶	015 5	700	27	112
ú	-   17 Other t	expenses (Part IX, Column (A), lines transfer 110, 111 210)	215,7			
	18 Total e	xpenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	438,2		416,	
	19 Reven	ue less expenses. Subtract line 18 from line 12		807		,774
Ъ	80	Beginning 1			End of Year	,270
#	20 Total a	ssets (Part X, line 16)	044,6			
ASS	21 Total li	abilities (Part X, line 26)		439		,185
3	22 Net as	sets or fund balances. Subtract line 21 from line 20	042,2	237	967	,085
7	Part II	Signature Block				
-	Linder penaltica	of portuni. Lidectare that I have examined this return, including accompanying schedules and statements, and to	the best o	f my kr	nowledge and bellef,	it is
	true, correct, and	I complete. Declaration of preparer (other than officer) is based on all information of which preparer has any kno	wledge.	,		
-						
9	ign 📗	Signature of officer		Date		
	lere	SEAN SULLIVAN TAXPAYER'S COPY TREASURER				
П	IGIO	Type or print name and title				
-	Delot		ate	Check	If PTIN	
p		Glad XX 1 K 1	1/29/16	self-er	nployed P010581	19
	roporor	PORTER PORTING PORRING & DIAMOND LTD		EIN >	36-3856	
	reparer Firm	none	1.11119			
u	se Only	CCHAIMPING II. 60173	Phone	0.00	847-240-	1040
, -	Firm	adultess	1 1:000	p;-110)	Yes	
1	May the IRS dis	cuss this return with the preparer shown above? (see instructions)			163	100

58320

Form

(Rev. January 2014) Department of the Treasury

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

nternal Revenue S	ervice Information about 1 cm					▶ X
<ul> <li>If you are f</li> </ul>	iling for an Automatic 3-Month Extension, complete	only Part I	and check this box	of this form)	**************	
<ul> <li>If you are f</li> </ul>	iling for an Additional (Not Automatic) 3-Month Ext	ension, con	iplete only Part II (on page 2	OI this lorni).	ł	
	ete Part II unless you have already been granted an					
Electronic fili	ng (e-file). You can electronically file Form 8868 if you	u need a 3-r	month automatic extension of	time to file (6 month	is for	
a corporation r	equired to file Form 990-T), or an additional (not auto	matic) 3-mo	nth extension of time. You car	n electronically file F	Form	
8868 to reques	st an extension of time to file any of the forms listed in	Part I or Pa	art II with the exception of For	n 8870, Information	i.	
Return for Trai	nsfers Associated With Certain Personal Benefit Contra	acts, which	must be sent to the IRS in pa	per format (see	C.	
instructions). F	or more details on the electronic filing of this form, vis	sit www.irs.g	ov/efile and click on e-file for	Charities & Nonprot	nts.	
Part I	Automatic 3-Month Extension of Time.	Only sub	mit original (no copies n	deaea).		
	required to file Form 990-T and requesting an automa			a complete		
Part I only	orations (including 1120-C filers), partnerships, REMIC	a and tructo	must use Form 7004 to requ	est an extension of	f time	12/22/
		s, and trusts	indat dae i omi root to rode	iogi an oxionori		
to file income	tax returns.		En	ter filer's identifyir	ng number, se	ae instructions
Tunn of	Name of exempt organization or other filer, see ins	tructions.		Employer identifica		
Type or	Name of exempt organization of other mer, see the	4 4000		1		
print	TRITON COLLEGE FOUNDATION			36-3089812		
File by the	Number, street, and room or suite no. If a P.O. box 2000 FIFTH AVENUE	k, see instruc	otions.	Social security nur	nber (SSN)	
File by the due date for	City, town or post office, state, and ZIP code. For a	a foreign add	iress, see instructions.			
filing your	Guy, com or post smooth	_				
instructions.	RIVER GROVE IL	60171				
	um code for the retum that this application is for (file	a senarate a	inplication for each return)			01
Enter the Ret	uni code for the retain that this application is for this				E DOLOGO SELONO	Return
Application	1	Return	Application			Code
Is For	0.0000000000000000000000000000000000000	Code	Is For			07
	or Form 990-EZ	01	Form 990-T (corporation) Form 1041-A			08
Form 990-E	POPUNED STREET, SALES	03	Form 4720 (other than indi	vidual)		09
	(Individual)	04	Form 5227	, and an		10
Form 990-1	Γ (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	T (trust other than above)	06	Form 8870			12
101111 330	SUSAN ZEFELDT					
	2000 FIFTH AVENUE					
<ul> <li>The books</li> </ul>	are in the care of ▶ RIVER GROVE		************************		IL 6	60171
			- The second sec			
Telephor	ne No. ▶ 708-456-0300	FAX N				ΝП
<ul><li>If the org</li></ul>	panization does not have an office or place of business	s in the Unit	ed States, check this box	A - 12 - 12 000 000 000 000 000		0000000
<ul> <li>If this is</li> </ul>	for a Group Return, enter the organization's four digit	Group Exen	nption Number (GEN)	, if this is		
for the whole	group, check this box	if the group,	check this box	and attach		
a list with the	names and EiNs of all members the extension is for		Sie Ferm 000 T) outonoion of	limo		
1 1 reque	est an automatic 3-month (6 months for a corporation	required to	rappization named above. The	avtension is		
	02/15/17 , to file the exempt organization retu		igatiization hamed above. The	CALONISION		
for the	organization's return for:					
	calendar year or					
► X	tax year beginning 07/01/15, and ending	06/30/	16 .			
2 If the	tax year entered in line 1 is for less than 12 months, o	heck reasor	n: Initial return F	inal return		
	Change in accounting period					
3a If this	application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069, e	nter the tentative tax, less any	,		
	fundable credits. See instructions.			3a	\$	
b If this	application is for Forms 990-PF, 990-T, 4720, or 606	9, enter any	refundable credits and			
estima	ated tax payments made. Include any prior year overp	ayment allo	wed as a credit,	3b	\$	
c Balan	ce due. Subtract line 3b from line 3a. Include your pa	syment with	this form, if required, by using			,
EFTP	S (Electronic Federal Tax Payment System). See ins	tructions.	0000	3c		
Caution. If y	ou are going to make an electronic funds withdrawal (direct de	bit) with this F	orm 8868, see Form 8453-EO and	rom 8879-EO for pa	yment instruction	15. 

990 (2015) TRITON COLLEGE FO	UNDATION	36-3089812	Page
Statement of Program Service	ce Accomplishments	Des te this Dest III	X
Check if Schedule O contains a	a response or note to any	line in this Part III	Ula la constante de la constan
Briefly describe the organization's mission:			
EE SCHEDULE O	00000000000000000000000000000000000000		
() and a discount of the first		same and the same of the same	
Did the organization undertake any significant p	rogram services during the year	which were not listed on the	
prior Form 990 or 990-EZ?	507.058550555		Yes X N
If "Yes." describe these new services on Sched	ule O.		
Did the organization cease conducting, or make	e significant changes in how it co	onducts, any program	Yes X N
services?	e organization cease conducting, or make significant changes in how it conducts, any program es?  s." describe these changes on Schedule O. libe the organization's program service accomplishments for each of its three largest program services, as measured by libe the organization's program service accomplishments for each of its three largest program services, as measured by libe the organization's program service accomplishments for each of its three largest program services, as measured by libe the organization's program service accomplishments for each of its three largest program services, as measured by libe the organization's program service accomplishments for each of its three largest program services, as measured by libe the organization's program service accomplishments for each of its three largest program services, as measured by libe the organization's program service accomplishments for each of its three largest program services, as measured by libe the organization's program service accomplishments for each of its three largest program services, as measured by libe the organization's program service accomplishments for each of its three largest program services, as measured by libe the organization's program service accomplishments for each of its three largest program services, as measured by libe the organization's program service accomplishments for each of its three largest program services, as measured by libe the organization's program service accomplishments for each of its three largest program services, as measured by libe the organization's program service accomplishments for each of its three largest program services, as measured by libe the organization's program service reported to report the amount of grants and allocations to others, libe the organization's program service reported to report the amount of grants and allocations to others, libe the organization's program service reported to report the amount of grants and allocations to others, libe the organization's program servic		105 🕰 N
If "Yes," describe these changes on Schedule (	O	and largest program conject as Mi	ageurad by
Describe the organization's program service acc	complishments for each of its th	the amount of grants and allocations	s to others.
expenses. Section 501(c)(3) and 501(c)(4) orga	inizations are required to report	the amount of grants and anocation	,
the total expenses, and revenue, ir any, for each	in program service reported.		
(Code: ) (Expenses \$ 34	44 708 including grants o	f \$ 339,708 ) (Re	evenue \$
ENHANCEMENT, EQUIPMENT A APPROPRIATE PURPOSES REL TRITON COMMUNITY COLLEGE	ND TEACHING RESC ATED TO THE EDUC THE FOUNDATION	CATIONAL PURPOSES N PROVIDED FUNDING	AND GOALS OF
SCHOLARSHIPS AND PROGRAM	Control of the Contro		
			C4440000000000000000000000000000000000
Alexandra de la compansión de la comp		THE REST OF STREET STREET, STR	
A - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
		\/	la rapula C
b (Code: ) (Expenses \$	including grants	of \$) (F	levenue \$
b (Code: ) (Expenses \$	including grants	of \$) (F	evenue \$
o (Code: ) (Expenses \$	including grants	of \$ ) (F	evenue \$
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		of \$ ) (F	
c (Code: ) (Expenses \$	Including grants	of \$	Revenue \$
c (Code: ) (Expenses \$	Including grants		Revenue \$
c (Code: ) (Expenses \$	Including grants	of \$	Revenue \$
c (Code: ) (Expenses \$	Including grants	of \$	Revenue \$
c (Code: ) (Expenses \$	Including grants	of \$	Revenue \$
Ic (Code: ) (Expenses \$	Including grants	of \$	Revenue \$
kc (Code: ) (Expenses \$	Including grants	of \$	Revenue \$
c (Code: ) (Expenses \$	Including grants	of \$	Revenue \$
kc (Code: ) (Expenses \$  4d Other program services (Describe in Schedu	Including grants	of \$	Revenue \$

orm §	90 (2015) TRITON COLLEGE FOUNDATION 36-3089812		Pa	ge 3
Par			V T	M-
			Yes	No
	s the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	1	x	
(	complete Schedule A	2	X	
ı	s the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		^	
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	3	- 1	X
	candidates for public office? If "Yes," complete Schedule C, Part I			
1	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	4		X
	election in effect during the tax year? If "Yes," complete Schedule C, Part II			
	s the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	- 1 - 1	- 1	
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	5		X
	Part III		_	
	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? If	6		x
	"Yes," complete Schedule D, Part I	0.0		
	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		х
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8		x
	complete Schedule D, Part III	. 0		
)	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			1
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	9		x
	debt negotiation services? If "Yes," complete Schedule D, Part IV	3	-	1
)	Did the organization, directly or through a related organization, hold assets in temporarily restricted	10	x	
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	-	Tue-
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		. 10	
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	440		x
	complete Schedule D, Part VI	11a	-	-
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	146	1	x
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	110	V.	x
	of its total assets reported in Part X, Ilne 16? If "Yes," complete Schedule D, Part VIII	116	+	1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11d		x
	reported In Part X, line 16? If "Yes," complete Schedule D, Part IX	11e	-	
8	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		1	+-
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	444		x
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	+-	+-
<b>2</b> a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12a	x	
	Schedule D, Parts XI and XII	120	1	+
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	121		×
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional			2
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	148	1	1-
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,		1	
	fundraising, business, investment, and program service activities outside the United States, or aggregate	144		1 2
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14	-	+-
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	15	. 1	2
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		+	+-
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	16		3
	assistance to or for foreign Individuals? If "Yes," complete Schedule F, Parts III and IV	1	-	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	13	,	2
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	.crev.	-	-
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	11	3 2	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	(3074)(1)	+	-
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		ا ۵	12
	If "Yes," complete Schedule G, Part III			90 (20

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Checklist of Required Schedules (continued) Yes No X 20a 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 X 21 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on X Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated X 23 employees? If "Yes," complete Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b X 24a through 24d and complete Schedule K. If "No," go to line 25a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit X transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? X 25b If "Yes," complete Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or X 26 disqualified persons? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled X 27 entity or family member of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions): X 28a a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A-family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X 28b Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) X 28c was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Dld the organization receive contributions of art, historical treasures, or other similar assets, or qualified X conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 X complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X 33 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, X or IV, and Part V, line 1 x 35a 35a Dld the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a 35b controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Ilne 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable X 36 related organization? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, 37 X Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and X 19? Note. All Form 990 filers are required to complete Schedule O.

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Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance				П					
	Check if Schedule O contains a response or note to any line in this Part V			Yes	No					
	The state of the s	a 0	10.00							
1a	Elifel file fightibel reported in Dox 5 of Louis 1000; Elifel 6 in 100 approach	ьО	186							
Ь	Did the organization comply with backup withholding rules for reportable payments to vendors and									
С										
2-	reportable gaming (gambling) winnings to prize winners?  Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		2014-12-12							
2a	Statements, filed for the calendar year ending with or within the year covered by this return	2a 1								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	?	2b	X						
Б	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)									
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other au	thority								
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	ncial	1							
	account)?		4a	-	X					
b	If "Yes" enter the name of the foreign country:			1	HO!					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	counts								
	(FBAR).		-500		v					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	-	X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	on?	5b	$\vdash$	1					
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		MUNICATA STORY	$\vdash$	_					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		6a		x					
	organization solicit any contributions that were not tax deductible as charitable contributions?	0.05		1	+					
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	5 01	6b	1	1					
_	gifts were not tax deductible?									
7	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for go	oods		1						
а	and services provided to the payor?		7a	X						
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	. 1.45	7b	X						
b	The state of the second property for which it was	10.000.000.000.000.000.000.000.000.000.								
C	required to file Form 8282?		7c		Х					
d	to the little to the same of Ferral 2002 filed during the year	7d								
8	The second personal benefit or	ntract?	7e	_	X					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	ct?	7f	_	X					
g	If the organization received a contribution of qualified intellectual property, did the organization file For	m 8899 as require	d? 7g		-					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ion file a Form 10	98-C? 7h	+	_					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the								
	sponsoring organization have excess business holdings at any time during the year?		B	+						
9	Sponsoring organizations maintaining donor advised funds.		0.0							
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		+-					
b	Did the sponsoring organization make a constraint		1254 - 125222	1						
10	Section 501(c)(7) organizations. Enter:	10a								
а		10b								
l:		100								
11	Section 501(c)(12) organizations. Enter:	11a								
_	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources									
K	against amounts due or received from them.)	11b								
12:	and the second s		12	a						
	b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	Z.corrunnini.							
13	and the state of t		LIL.							
			13	a						
•	Note. See the instructions for additional information the organization must report on Schedule O.									
1	b Enter the amount of reserves the organization is required to maintain by the states in which	r mair								
	the organization is licensed to issue qualified health plans	13b								
	c Enter the amount of reserves on hand	13c		-	37					
14	a Did the organization receive any payments for indoor tanning services during the tax year?			4a 4b	X					
	b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e U	14		000					

Form 990 (2015)	TRITON	COLLEGE	FOUNDATION

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

Par	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See	Instru	ction	s.
	Check if Schedule O contains a response or note to any line in this Part VI			X
	ion A. Governing Body and Management			
secu	ion A. Governing Body and Management		Yes	No
1	Enter the number of voting members of the governing body at the end of the tax year			
ıa	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar	- 17		
	committee, explain in Schedule O.			
_	Enter the number of voting members included in line 1a, above, who are independent			
р	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
2	any other officer, director, trustee, or key employee?	2		X
	Did the organization delegate control over management duties customarily performed by or under the direct			
3	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
4	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
5	Did the organization have members or stockholders?	6		X
6	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
7a	one or more members of the governing body?	7a		X
	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
b		7b		X
•	stockholders, or persons other than the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
8		8a	X	
a	The governing body?  Each committee with authority to act on behalf of the governing body?	8b	X	
þ	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
9	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Car	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Co	ode.)		
260	CHOIL B. POlicies (1118 Section & requests information about policies (1118 Section & requests information about policies)		Yes	No
40-	Did the organization have local chapters, branches, or affiliates?	10a		X
10a	the second secon			
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
440	the standard and standard and standard control of this Form 990 to all members of its governing body before filing the form?	11a	X	
11a	The state of the survey of the state of the			
b	The state of the s	12a	X	
12a	the state of the state of the state of the sample of the state of the	12b	X	
b	Dut the application and conclutently monitor and enforce compliance with the policy? If "Yes."			
C	describe in Schedule O how this was done	12c	X	
42	Did the organization have a written whistleblower policy?	13		X
13	Did the organization have a written document retention and destruction policy?	14		X
14	Did the process for determining compensation of the following persons Include a review and approval by			
15	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_	The organization's CEO, Executive Director, or top management official	15a	X	
	Other officers or key employees of the organization			X
K	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
464	The state of all a second by contribute accepts to or portiginate in a joint venture or similar arrangement		1	1
16a	with a taxable entity during the year?	16a		X
	the state of the section of the property of property of 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?	16t		
80	ection C. Disclosure			
-	TT.		-contra	Sell in
17	(c) (3)s only)	with the li	557557	01117
18	available for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain in Schedule O)			
40	and the second state of th			
19	financial statements available to the public during the tax year.			
20	the said Astrobago symbol of the person who possesses the organization's books and records:			
20	SUSAN ZEFELDT 2000 FIFTH AVENUE			
		)8 <b>-4</b>	<u> 56-</u>	0300
	<del></del>			100

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- nm 000 (2015)	THE LITERAL		FOUNDATION

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FORTH 990 (2010	11/11/01/	-						A 1.1	Faratarras	
- 4 5 201	Composition	m of Officers	Directors	Truetone	Kev	Employees.	Highest	Compensated	Employees,	and
Part VII	Compensatio	n of Officers,	Directors,	11001000,	,	minipity of the		Compensated		
	Independent	Contractors								
	01 11001	dule O contain		o or noto t	o ani	line in this	Part VII			
	Check if Sche	dule O contain	s a respons	e or note	to arry	mie in una i	CIL VII			

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Section A. 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, and 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.

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

(A) Name and Tille	(B) Average hours per week (list any	box,	unle	ss per	tion nore son is	than one s both a r/trustee	n	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensaled employee	Former	(W-2/1099-MISC)		organization and related organizations	
(1) THOMAS OLSON	1 00										
PRESIDENT	1.00	x		x							0
	EGRINO										
01 - 7/ 	1.00	_				1 1	- 1	,		0	0
VICE PRESIDENT	0.00	X	_	X	-	$\vdash$	-	(		9	_
(3) BART SMITH	1.00					1	1				
SECRETARY	0.00	x		x						0	0
(4) SEAN SULLIVAN		T									
TREASURER	1.00	×		x					0	0	0
(5) FABIOLA AMEZCUA											
* ************************************	1.00	x							0	o	0
DIRECTOR  (6) AL BIANCALANA	0.00	1	+-	+-	+	+					
(6) AL BIANCALANA	1.00			1	1						
DIRECTOR	0.00	X							0	0	0
(7) JOHN CADERO	1.00									1	
DIRECTOR	0.00	×							0	0	0
(8) MICHAEL CASTELL		1	1	1	Т						
(=, ===	1.00			1							•
DIRECTOR	0.00	X	1	_	-				0	0	0
(9) ARCHAWEE DHAMAY				1		ì					
	1.00	- L			1				0	0	0
SECRETARY	0.00	X	+	+	+	+-	-		<u> </u>	•	
(10) JOHN HARRIS	1.00									0	0
DIRECTOR	0.00	X	+	+	+		-		0	4	
(11) DAVID J. KING	1.00										^
DIRECTOR	0.00	X	4						0	O Form 990	0

Part VII Section A. Officers (A)	(B)	tees	, Ke	y E		yee	s, all	d Highest Compensate (D)	(E)		(F)		_
Name and title	Average	(do	not d	Post	tion	lhan oi		Reportable compensation	Reportabl compensation		Estimated amount of		
9	hours per week	box	, unle:	ss per	son la	bolh	an I	from	related organization		other compensati	on	
	(list any hours for					r/truste		the organization	(W-2/1099-M		from the		
	related organizations	Individual or director	Institutional	Officer	Key e	Section	Former	(W-2/1099-MISC)			organization	ed	
	below dotted	tual 1	tional	-	етрюуее	88 03	٦				organizatio	ns	
	line)	mustae	trustee		yee	Highest compensated employee							
12) DR. QUINCY MA	APTIN TI		- 88		_	Be							_
12) DR. QUINCI M	1.00												0
IRECTOR	0.00	X	_		_	_			0	0			_
13) MICHAEL MAZZ	1				1								
TORKEON	0.00	x							ol	O			0
IRECTOR 14) MARY RITA MO		A		-	-								
14/ Maria Intalia Inc.	1.00				1								_
IRECTOR	0.00	x							0	0			0
(15) COLLEEN ROCK					Ī								
OF A DUDENO ROMO OF DOCUMENT OF A SHARE STATE OF A SHARE	1.00					1				0			0
IRECTOR	0.00	X	-	-	-	-	-		0	- 0			
(16) DENISE SMITH	-GABORIT 1.00	1				1							
IRECTOR	0.00	x							o	0			0
(17) MARK R. STEP		1		+	1	T	t						
(11)	1.00	1											
DIRECTOR	0.00	X			_				0	0			0
(18) RONALD M. SE	RPICO												
	1.00	٠,							0	o			0
CHARTER DIRECTOR	0.00	X	+	+	+	+	+						
MARINE THE STATE OF THE STATE O													
1b Sub-total													
c Total from continuation sh d Total (add lines 1b and 1c)							•						
2 Total number of Individuals (	including but not	limit	ed to	o the	se l	isted	abov	ve) who received more the	nan \$100,000 of				
reportable compensation from	rn the organization	on P	. 0				_					Yes	No
3 Did the organization list any	former officer, d	Irect	or, o	r tru	stee	, key	emp	oloyee, or highest compe	ensated		2		x
employee on line 1a? If "Yes 4 For any individual listed on I	s," complete Sch	edul	e J f	or su	uch I	ndivl	dual Incati	on and other compensal	ion from the		3		
organization and related org	anizations greate	er tha	ลก \$1	150,0	วดดว	' If "Y	es,"	complete Schedule J to	such				v
individual  5 Did any person listed on line			11112						e es ledividual		4		X
5 Did any person listed on line for services rendered to the	e 1a receive or a organization? If	ccru "Yes	e co	mpe	nsat ate S	ion ii Sched	om a	Iny unrelated organization. I for such person	II Of Illuividual		5		X
Section B. Independent Contract	ctors												
4. Complete this table for your	five highest con	npen	sate	d inc	lepe	nden	t cor	tractors that received me	ore than \$100,000	) of			
compensation from the orga	(A)	com	pens	ation	1 tor	the	caler	noar year ending with or	(B) escription of services	auona tax yea		(C) compensa	WILLIAM TO A STATE OF THE STATE
Name	and business address	_		_			+	O	escription of services			angensa	001
							$\neg$						
						_	+				_		
							+						
					- 6 11	. 10 4	4 - 41	mark to the contract of the co					
2 Total number of independe received more than \$100,0	nt contractors (In	clud	ng c	out n	ot III	nitea	to u	nose listed above) who		0	100		

Par	VIII Sta	tement of Rev	enue O contains a	response or	note to any line in	this Part VIII		🗖
		sex ii dericadie	O dontaino a	Maria di Paranta di Pa	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b Membersh c Fundraisir d Related c e Government f All other cont and similar ai g Noncash con	campaigns  nlp dues ng events organizations grants (contributions) ributions, gifts, grants, nounts not included above ributions included in lines to	1c   1d   1e   1f   a-1f: \$	83,167 273,358	356,525			
Program Service Revenue	b c d e f All other	program service re	venue					
	3 Investme and othe 4 Income f	nt income (includin r similar amounts) rom investment of t	g dividends, inte	proceeds	53,962			53,962
	6a Gross re b Less: rental c Rental Inc. o	nts exps. or (loss) al income or (loss) nt from (l) Securi	()	i) Personal				
evenue	8a Gross ind (not inclu		events 3,167					
Other R	b Less: di c Net Inco 9a Gross inc See Part	rect expenses ome or (loss) from 1 come from garning act IV, line 19 rect expenses	b undraising even vities.	39,668 48,899	-9,231			
	c Net inco 10a Gross s returns b Less: c	ome or (loss) from a lates of inventory, lost and allowances lost of goods sold ome or (loss) from	gaming activities ess a b sales of Inventor	у	A Del	husid		
	c d All other	Miscellaneous Reve	**************************************	Busn. Code				
		Add lines 11a-11d evenue. See instru	ctions.	<b>&gt;</b>	401,256		0	0 53,96

Form **990** (2015)

Form 990 (2015) Statement of Functional Expenses Part IX 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 (D) (C) Management and general expenses (A) Total expenses (B) Program service Do not include amounts reported on lines 6b, Fundraising expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 260,785 260,785 and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 78,923 78,923 individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disquallfled persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 45,254 45,254 7 Other salarles and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 3,956 3,956 10 Payroll taxes 11 Fees for services (non-employees): a Management ..... 4,750 4,750 b Legal c Accounting **d** Lobbying e Professional fundraising services. See Part IV, line 17 8,233 8,233 f Investment management fees g Other, (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 12 Advertising and promotion 1,718 1,718 13 Office expenses 14 Information technology Royalties 15 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 1,500 1,500 23 Insurance 24 Other expenses, Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 5,000 5,000 50TH ANNIVERSARY 2,565 2,565 MISCELLANEOUS 1,583 1,583 PAYROLL FEES 898 898 OUTSIDE SERVICES 865 865 e All other expenses 0 71,322 344,708 416,030 25 Total functional expenses. Add lines 1 through 24e 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 ▶ following SOP 98-2 (ASC 958-720)

**Balance Sheet** Part X Check if Schedule O contains a response or note to any line in this Part X (B) (A) End of year Beginning of year 155,368 188,606 1 Cash—non-interest bearing 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 2,395 7,837 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 organizations (see instructions). Complete Part II of Schedule L 7 7 Notes and loans receivable, net 8 8 Inventories for sale or use 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment; cost or other basis. Complete Part VI of Schedule D 10a 10c b Less: accumulated depreciation 812,507 848,233 11 Investments—publicly traded securities 11 12 Investments-other securities. See Part IV, line 11 12 13 Investments—program-related. See Part IV, line 11 13 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 970,270 1,044,676 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 1,142 1,322 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and 22 disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 1,863 1,297 25 of Schedule D 2,439 3,185 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ complete lines 27 through 29, and lines 33 and 34. Balances 660,736 686,931 Unrestricted net assets 27 286,230 335,187 28 Temporarily restricted net assets 20,119 20,119 29 Fund Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ | and ö complete lines 30 through 34. 30 Assets 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 967,085 1,042,237 33 Total net assets or fund balances 970,270 1,044,676 Total liabilities and net assets/fund balances Form 990 (2015)

Page 1980 (2015) TRITON COLLEGE FOUNDATION 36-3089812  Page 1981 Reconcilitation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI  Total revenue (must equal Part XI, column (A), line 12) Total expenses (must equal Part XI, column (A), line 25) Total expenses (must equal Part XI, column (A), line 25) Total expenses (must equal Part XI, column (A), line 25) Total expenses (must equal Part XI, column (A), line 25) Total expenses (must equal Part XI, column (A), line 25) Total expenses (must equal Part XI, ine 33, column (A)) The tassets or fund balances at beginning of year (must equal Part X, line 33, column (A)) The tassets or fund balances of facilities Total expenses Total ex	36-3089812	P	age 1	2
Check if Schedule O contains a response or note to any line in this Part XI  1 401, 25  1 Total evenue (must equal Part XIII, column (A), line 12)  2 416, 03  3 744, 77  4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  4 1, 042, 25  5 Net unrealized gains (losses) on investments  5 -60, 3  6 Donated services and use of facilities  7 Investment expenses  8 Prior period adjustments  9 Other changes in net assets or fund balances (explain in Schedule O)  9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting  Check if Schedule O contains a response or note to any line in this Part XII  1 Accounting method used to prepare the Form 990:	A1 724 A1			1
Total revenue (must equal Part VIII, column (A), line 12)  1 Total expenses (must equal Part IX, column (A), line 12)  2 Total expenses (must equal Part IX, column (A), line 25)  3 Revenue less expenses. Subtract line 2 from line 1  4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  5 Net unrealized gains (losses) on investments  6 Donated services and use of facilities  7 Investment expenses  8 Prior period adjustments  9 Other changes in net assets or fund balances (explain in Schedule O)  9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting  Check if Schedule O contains a response or note to any line in this Part XII  1 Accounting method used to prepare the Form 990:	in this Part XI	401	25/	Ť
2. Total expenses (must equal Part X, column (A), line 29) 3. Revenue less expenses. Subtract line 2 from line 1 4. Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4. 1,042,23 5. Net unrealized gains (losses) on investments 6. 5. Onotated services and use of facilities 7. Investment expenses 8. Prior period adjustments 9. Other changes in net assets or fund balances (explain in Schedule O) 9. Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII  1. Accounting method used to prepare the Form 990:	The second state of the se			
Revenue less expenses. Subtract line 2 from line 1  Net unrealized gains (losses) on investments  Donated services and use of facilities  Investment expenses  Prior period adjustments  Other changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting  Check if Schedule O contains a response or note to any line in this Part XII  Accounting method used to prepare the Form 990:	- OUT O MY - MINDEND CHO LONG LARGE SERVER			
Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  Net unrealized gains (losses) on investments  Net unrealized gains (losses) on investments  Investment expenses  Prior period adjustments  Net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting  Check if Schedule O contains a response or note to any line in this Part XII  Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  Were the organization's financial statements complied 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 of both: Separate basis Consolidated basis Both consolidated and separate basis  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: Separate basis Consolidated basis Both consolidated and separate basis  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: Separate basis Consolidated basis, or both: Separate basis Consolidated basis, or both: Separate basis Consolidated basis or both: Separate basis Consolidated basis, or both: Separate basis Consolidated basis or bot	3			
5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Tonated adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII  1 Accounting method used to prepare the Form 990:	Column (A))			
8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII  1 Accounting method used to prepare the Form 990:	5	-60	,310	0
7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9				_
8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 0 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII  1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule C. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis Both consolidated and separate basis 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 Both consolidated and separate basis c 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: X Separate basis Consolidated basis Both consolidated and separate basis c If "Yes," the consolidated basis Both consolidated and separate basis c If "Yes," the consolidated basis Both consolidated and separate basis c If "Yes," the consolidated basis Both consolidated and separate basis c If "Yes," the consolidated basis Both consolidated and separate basis c If "Yes," the consolidated basis Both consolidated and separate basis c If "Yes," the consolidated basis Both consolidated and separate basis c If "Yes," the consolidated basis Both consolidated and separate basis c If "Yes," the consolidated basis Both consolidated and separate basis b Were the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organizatio				_
9 Other changes in net assets or fund balances (explain in Schedule O). 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)).  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.  1 Accounting method used to prepare the Form 990:	0			_
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII  1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule C. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis 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 Both consolidated and separate basis c If "Yes," check a box below to Indicate whether the financial statements for the year were audited on a separate basis, consolidated basis Both consolidated and separate basis c 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.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  In If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	3			_
Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII  1 Accounting method used to prepare the Form 990:	t equal Part X, line	0.05	. 00	) E
Check if Schedule O contains a response or note to any line in this Part XII    Accounting method used to prepare the Form 990:	10	967	,08	15
1 Accounting method used to prepare the Form 990:			Г	
1 Accounting method used to prepare the Form 990:	ne in this Part XII			_
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule C.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  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:  Separate basis, consolidated basis Both consolidated and separate basis  c 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.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  In If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		_ Y	es N	10
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:    X   Separate basis	dependent accountant? the year were compiled or and separate basis		x	2
c 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.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	the year were audited on a			
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.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b. If "Yes." did the organization undergo the required audit or audits? If the organization did not undergo the	mes responsibility for oversight			
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes." did the organization undergo the required audit or audits? If the organization did not undergo the	of an independent accountant?	2c	X	_
the Single Audit Act and OMB Circular A-133?  In If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	s during the tax year, explain in			
the Single Audit Act and OMB Circular A-133?  In If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	audit or audits as set forth in			
b if "Yes," and the organization undergo the required addition in addition in the organization to undergo such audition.		3a	-	2
	taken to undamo such audite	3b		

# 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.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

		TRITON	COLLEGE	<b>E</b> ]	FOUNDATION			36-3089	
Part I	Reason	for Public	Charity St	atu	s (All organizations	must con	nplete thi	s part.) See instructions	S
he organizati	ion is not a pr	ivate founda	tion because It	is: (	For lines 1 through 11, o	heck only o	one box.)		
1 TAct	hurch, conver	itlon of churc	ches, or associa	atlon	of churches described	n section	170(b)(1)(A	\)(i).	
2   A so	chool describe	ed in section	n 170(b)(1)(A)(	ii). (	Attach Schedule E (Forn	n 990 or 99	0-EZ).)		
3 Ah	ospital or a c	poperative he	ospital service	orga	nization described in se	ction 170(l	o)(1)(A)(iii).		
4 H Am	nedical resear	ch organizati	ion operated in	con	junction with a hospital	described in	section '	1 <b>70(b)(1)(A)(iii).</b> Enter the ho	spital's name,
	and state:	·	,						
5 An	organization o	perated for	the benefit of a	coll	ege or university owned	or operated	by a gove	emmental unit described in	
			mplete Part II.)						
6 A fe	ederal state.	or local gove	ernment or gov	emn	ental unit described in :	section 170	(b)(1)(A)(v	).	
7 X An	organization	hat normally	receives a sul	bstar	ntial part of its support fr	om a gover	nmental un	it or from the general public	
			(1)(A)(vi). (Com						
					1)(A)(vi). (Complete Par	t II.)			
9   An	organization	that normally	receives: (1) r	more	than 33 1/3% of its sur	port from o	contributions	s, membership fees, and gro	SS
rec	eints from ac	ivities related	d to its exempt	fund	ctions-subject to certain	exceptions	, and (2) n	o more than 33 1/3% of its	
SUE	onort from ara	ss investme	nt income and	unre	elated business taxable i	ncome (les	s section 5	11 tax) from businesses	
acc	nuired by the	organization	after June 30.	197	5. See section 509(a)(2	. (Complet	e Part III.)		
10 An	organization	organized ar	nd operated ex	clusi	vely to test for public sa	fety. See s	ection 509	(a)(4).	
11 An	organization	organized ar	nd operated exc	clusi	vely for the benefit of, to	perform the	e functions	of, or to carry out the purpos	ses of
one	e or more pul	olicly support	ted organization	ns de	escribed in section 509	a)(1) or sec	ction 509(a	i)(2). See section 509(a)(3).	Check
the	box in lines	11a through	11d that descri	ibes	the type of supporting of	rganization	and comple	ete lines 11e, 11f, and 11g.	
а П Ту	me I. A suppo	rting organiz	ation operated	sur	pervised, or controlled by	its suppor	ted organiz	ation(s), typically by glvlng	
the	supported o	rganization(s	) the power to	regu	larly appoint or elect a r	najority of the	he directors	or trustees of the supportin	g
					tions A and B.				
ь П ту	pe II. A supp	orting organia	zation supervis	ed o	r controlled in connection	n with its s	upported o	rganization(s), by having	
, L	ntrol or mana	gement of th	e supporting o	rgan	ization vested in the sar	ne persons	that contro	or manage the supported	
					ections A and C.				
c ∏ Tv	ne III functio	nally integr	ated. A suppor	rting	organization operated in	connection	n with, and	functionally integrated with,	
its	supported of	canization(s	) (see instruction	ons).	You must complete P	art IV, Sect	ions A, D,	and E.	
d ∏ Ty	voe III non-fu	nctionally i	ntegrated. A s	uppo	orting organization opera	ted in conn	ection with	its supported organization(s	)
th:	at is not funct	ionally integr	rated. The orga	aniza	tion generally must satis	fy a distrib	utlon requir	ement and an attentiveness	
rei	guirement (se	e instruction	is). You must	com	plete Part IV, Sections	A and D, a	ind Part V.		
• □ c	heck this box	if the organiz	zation received	a w	ritten determination from	the IRS tha	at it is a Ty	pe I, Type II, Type III	
					ally integrated supporting				
	the number of							V4.0000.0000.0000.0000.0000.0000.0000.0	
a Provid	e the following	g information	n about the su	ppor	ted organization(s).			MPONTE STRUCTURE SOURCE STRUCTURE ST	
(I) Name of		(ii)			(III) Type of organization		organization	(v) Amount of monetary	(vI) Amount of
organiz					(described on lines 1-9		ur governing	support (see instructions)	other support (see instructions)
	1				above (see instructions))	doca	ment?	matidotionsy	, , , , , , , , , , , , , , , , , , , ,
						Yes	No		
(A)									
V 1									
(B)									
(-/	10								
(C)									
(0)									
(D)									
\- <i>'</i>									
(E)									
,-,									
		at Note	Yes to any			100	100		
500000000									T.

39812 Page 2

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

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

Secti	on A. Public Support			4 ) 0040	(-1) 2011	(a) 2015	(f) Total
Calend	ar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(i) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	465,789	416,838	186,593	403,335	356,525	1,829,080
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities fumished by a governmental unit to the organization without charge					07.6 70.6	1 000 000
4	Total. Add lines 1 through 3	465,789	416,838	186,593	403,335	356,525	1,829,080
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						9,721
6	Public support. Subtract line 5 from line 4.						1,819,359
	tion B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	465,789	416,838	186,593	403,335	356,525	1,829,080
8	Gross income from Interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	18,409	34,018	28,216	50,244	53,962	184,849
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other Income. Do not Include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10		Arrest Charles			140	2,013,929
12	Gross receipts from related activities, etc	. (see instructions)	. 227			12	39,668
13	First five years. If the Form 990 is for the		t, second, third, fou	irth, or fifth tax ye	ar as a section 50°	1(c)(3)	. □
	organization, check this box and stop he	re					********
Sec	ction C. Computation of Public S			(0)		14	90.34 %
14	Public support percentage for 2015 (line						91.87 %
15	Public support percentage from 2014 Sch	nedule A, Part II, III	e 14	12 and line 14 is	33 1/3% or more	No. of Concession in Concessio	32.07 10
16a	33 1/3% support test—2015. If the orga	nization did not che	ck the box on line	ion	33 1/3/8 OF HIGHE,	CHOCK THO	<b>▶</b> [X
	box and stop here. The organization qua 33 1/3% support test—2014. If the orga	ailnes as a publicly	supported organiza	or 16a and line	15 is 33 1/3% or m	nore.	611101100001
b	check this box and stop here. The organ	mization did not che	a nullilu volta a	ed organization	10 10 00 170 70 01 11	,	▶ [
47.		ME If the omenizat	ion did not check a	hox on line 13. 1	6a. or 16b. and line	e 14 is	
17a	10% or more, and if the organization meets the	ets the "facts-and-o	circumstances" test	, check this box a	nd stop here. Exp	ilain in	_
	organization						
b		014. If the organiza	tion did not check a	a box on line 13, 1	16a, 16b, or 17a, a	nd line	
	15 is 10% or more, and if the organization Explain in Part VI how the organization	on meets the "facts on	-and-circumstances" to	st The organizat	ion qualifies as a	publicly	
							<b>&gt;</b> [
40	supported organization  Private foundation. If the organization	did not check a box	on line 13, 16a, 16	Sb. 17a, or 17b. cl	neck this box and s	se <b>e</b>	
18							▶ [
	instructions			-1.420.000.000	AUG - AP - 100 ( 1)		

Schedule A (Form 990 or 990-EZ) 2015 TRITON COLLEGE FOUNDATION

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sect	ion A. Public Support				1 N 2011	(-) 004E	(6 Total
Calend	dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						-
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support	4 ) 0044	T #5 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(0) 2013	(d) 2014	(0) 2010	
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b			-			
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
14	and 12.)  First five years. If the Form 990 is for th	e organization's	first, second, third,	fourth, or fifth tax	year as a section (	501(c)(3)	
	organization, check this box and stop he	re	*********				<b>&gt;</b> L
Se	ection C. Computation of Public S	upport Perce	entage				. N
15	Public support percentage for 2015 (line			ımn (f))		FINANCIA DE 100 MINUS (100 MINUS	5 % 6 %
16	Public support percentage from 2014 Sch	nedule A, Part III	, line 15				6 70
Se	ection D. Computation of Investm	ent Income I	ercentage	40		14	17 %
17						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	18 %
18	Investment income percentage from 201	4 Schedule A, Pa	art III, II/10 1/	ine 14 and line 15	is more than 33	and the second of the second	10
19	a 33 1/3% support tests—2015. If the org	anization did not	re. The organization	n mualifies as a ni	ubliciv supported o	rganization	▶ □
		ook and <b>stop ne</b> anization did not	check a box on lin	e 14 or line 19a. a	and line 16 is more	than 33 1/3%, an	d
	line 18 is not more than 33 1/3%, check	this box and sto	p here. The organi	zation qualifies as	a publicly support	ed organization	▶□
20		lid not check a b	ox on line 14, 19a,	or 19b, check this	box and see instr	uctions	<b>▶</b>
						shadula A (Form	990 or 990-FZ\ 2015

Page 4

## Part IV Supporting Organizations

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

# Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (Iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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 Part VI.
- 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).
- 8 Dld 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).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 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 Part VI.
- 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 10b below.
- b Dld 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.)

- 1	Yes	No
1		
2		
3a_		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
6		
7		
8		
9	a	
9	b	
9	С	
10	0a	

1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
16	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		. 22	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		100	
	controlled the organization's activities. If the organization had more than one supported organization,		11.	1
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported		- 114	L.
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	135		- 5
-	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	Line		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	1		
	supervised, or controlled the supporting organization.	2		L
Sect	tion C. Type II Supporting Organizations			-

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

	Yes	No
	110	
- 5		
4		

Voc

Page 5

No

No

Yes

Yes

11b

11c

# Section D. All Type III Supporting Organizations

- 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?
  - Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).
- By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

	103	
1		
2		
3		

# Section E. Type III Functionally-Integrated Supporting Organizations

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

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

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

	Yes	N
2a		
2b		
3a		
3b		

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

	V Type III Non-Functionally Integrated 509(a)(3	Supporting Organizati	ons (continued)	
Part '		of Supporting Organizati	John Joshundon	Current Year
	n D - Distributions  Amounts paid to supported organizations to accomplish exempt put	rnoses		
1 /	Amounts paid to supported organizations to accomplish exempt purpo	oses of supported		
	organizations, in excess of income from activity	,000 of papertor		
	Administrative expenses paid to accomplish exempt purposes of su	upported organizations		
		apported organizations		
4 /	Amounts paid to acquire exempt-use assets			
5 (	Qualified set-aside amounts (prior IRS approval required)			
	Other distributions (describe in Part VI), See instructions.			
7	Total annual distributions. Add lines 1 through 6.	naizotion le responsive		
	Distributions to attentive supported organizations to which the orga	IIIZATOTI IS TESPOTISIVO		
	(provide details in Part VI), See instructions.			
	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	(i)	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2015	Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
	Underdistributions, if any, for years prior to 2015			S all the beat of
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
а				
b				
c	AND SECURE OF THE PARTY OF THE			
	From 2013			
	From 2014			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
	- Contact to the last college			
1	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			ALCOHOLD BY
4	Distributions for 2015 from Section		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
**	D, line 7:			
	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
	Remaining underdistributions for years prior to 2015, if			
5	any. Subtract lines 3g and 4a from line 2 (if amount			
6	greater than zero, see instructions).  Remaining underdistributions for 2015. Subtract lines 3h	100,000		
	and 4b from line 1 (if amount greater than zero, see instructions).	4-50		
7	Excess distributions carryover to 2016. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
				1 1 1 1
	Excess from 2013			
	Excess from 2014			1 7 7 7
	Excess from 2015		VIII THE IN	

12.75	orm 990 or 990-EZ) 201	r mormon	COLLEGE	FOUNDAT	TON	36-3089812	Page 8
Schedule A (Fo	Supplemental In III, line 12; Part IV	formation. Pro ', Section A, lin Part IV, Section	es 1, 2, 3b, 3 C, line 1; Pa Section B, li	lanations requ 3c, 4b, 4c, 5a, art IV, Section ne 1e: Part V	6, 9a, 9b, 9c, 11a D, lines 2 and 3; Section D. lines 5	e 10; Part II, line 17a I, 11b, and 11c; Part Part IV, Section E, li 5, 6, and 8; and Part	or 17b; Part IV, Section nes 1c, 2a, 2b,
	*		***************************************	****			TOTAL SECUNDARIAN SECURITION
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# 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.

OMB No. 1545-0047 Open to Public Inspection

Employer Identification number

TRIT	ON COLLEGE FOUNDATION		36-3089812
art I	Organizations Maintaining Donor Advised Fun	ds or Other Similar Funds of	or Accounts.
	Complete if the organization answered "Yes" on F	orm 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
Tota	al number at end of year		
Agg	regate value of contributions to (during year)		
Agg	regate value of grants from (during year)		
Ann	regate value at end of year		
Did	the organization inform all donors and donor advisors in writing that	the assets held in donor advised	
fund	ds are the organization's property, subject to the organization's excl	usive legal control?	Yes
Did	the organization inform all grantees, donors, and donor advisors in	writing that grant funds can be used	
only	y for charitable purposes and not for the benefit of the donor or donor	or advisor, or for any other purpose	☐ Yes ☐ N
con	nferring impermissible private benefit?		Yes
art II	Conservation Easements.	Town 000 Bort IV line 7	
	Complete if the organization answered "Yes" on I	-orm 990, Part IV, line 7.	
Pur	rpose(s) of conservation easements held by the organization (check	all that apply).	in and the level of the
	Preservation of land for public use (e.g., recreation or education)	Preservation of a historically	
	Protection of natural habitat	Preservation of a certifled hi	ISTORIC STRUCTURE
	Preservation of open space		
Cor	mplete lines 2a through 2d if the organization held a qualified conse	rvation contribution in the form of a c	Held at the End of the Tax
	sement on the last day of the tax year.		
a Tot	tal number of conservation easements		2a
b Tot	tal acreage restricted by conservation easements		2b
c Nu	imber of conservation easements on a certified historic structure inc	luded in (a)	2G
	mber of conservation easements included in (c) acquired after 8/17		
his	storic structure listed in the National Register		2d
	umber of conservation easements modified, transferred, released, ex	ktinguished, or terminated by the orga	anization during the
tax	x year >		
1 Nu	umber of states where property subject to conservation easement is	located >	
5 Do	oes the organization have a written policy regarding the periodic mo	nitoring, inspection, handling of	☐ Yes ☐
vic	plations, and enforcement of the conservation easements it holds?		
6 Sta	aff and volunteer hours devoted to monitoring, inspecting, handling	of violations, and enforcing conservat	tion easements during the year
			du du de la comp
	mount of expenses incurred in monitoring, inspecting, handling of vi	olations, and enforcing conservation e	easements during the year
	\$		AVENO.
8 Do	pes each conservation easement reported on line 2(d) above satisfy	y the requirements of section 170(n)(4	4)(B)(I) Yes
ar	nd section 170(h)(4)(B)(ii)?		
9 In	Part XIII, describe how the organization reports conservation easer	nents in its revenue and expense sta	that describes the
	alance sheet, and include, if applicable, the text of the footnote to the	ne organization's financial statements	that describes the
	rganization's accounting for conservation easements.  III Organizations Maintaining Collections of Art	Historical Treasures or Of	ther Similar Assets.
Part	Complete if the organization answered "Yes" on	Form 990. Part IV. line 8.	
4	the organization elected, as permitted under SFAS 116 (ASC 958),		it and balance sheet
1a If	the organization elected, as permitted under SFAS 116 (ASC 956), works of art, historical treasures, or other similar assets held for public	ic exhibition, education, or research in	n furtherance of
W	vorks of art, historical treasures, or other similar assets held for public service, provide, in Part XIII, the text of the footnote to its final	ncial statements that describes these	Items.
ומ	the organization elected, as permitted under SFAS 116 (ASC 958),	to report in its revenue statement ar	nd balance sheet
16 16	rthe organization elected, as permitted under SFAS 116 (ASC 930), works of art, historical treasures, or other similar assets held for public	lic exhibition, education, or research i	n furtherance of
b If	vorks of art, historical treasures, of other sittinal assets field for publi		•
b If	while service provide the following amounts relating to these items:		
b If	public service, provide the following amounts relating to these items:		\$
b If w pi	i) Revenue included on Form 990, Part VIII, line 1		• \$
b If w p (i	i) Revenue included on Form 990, Part VIII, line 1		300000000000000000000000000000000000000
b If w pi (i (i 2 If	i) Revenue included on Form 990, Part VIII, line 1 ii) Assets included in Form 990, Part X f the organization received or held works of art, historical treasures,	or other similar assets for financial ga	300000000000000000000000000000000000000
b If w p (i (i 2 If	i) Revenue included on Form 990, Part VIII, line 1	or other similar assets for financial gass) relating to these items:	ain, provide the

edule D (Form 990) 2015 TRITON CO	TEGE FOUNDA	TION		-30898			Page 2
	Collections of Art.	Historical Trea	sures, or C	ther Simi	lar Assets (co	ontinued	
Using the organization's acquisition, accession	and other records, che	ck any of the followi	ing that are a s	significant use	e of its		
collection items (check all that apply):	,	•					
Public exhibition	d 🔲 Loan	or exchange progra	ms				
Scholarly research	e Othe	or exchange progra		242000000000000000000000000000000000000			
Preservation for future generations							
Provide a description of the organization's col	lections and explain how	they further the org	janization's exe	empt purpose	n Part		
XIII.							
During the year, did the organization solicit or	receive donations of an	t, historical treasures	s, or other simil	lar	Ĩ	Yes	□ No
assets to be sold to raise funds rather than to	be maintained as part	of the organization's	collection?	0.0000000	**********	168	1110
art IV Escrow and Custodial Arr	angements.	= 000 D /	N / E O -	- reported	on amount on	Form	
Complete if the organization	answered "Yes" on	Form 990, Part	1V, line 9, 0	r reported	an amount on	1 OIIII	
990, Part X, line 21.							
a is the organization an agent, trustee, custodia	an or other intermediary	for contributions or o	other assets no	DT.		Yes	П No
included on Form 990, Part X?		4-14-					
b If "Yes," explain the arrangement in Part XIII	and complete the follow	ing table:				Amount	
					1c		
c Beginning balance					4.1		
d Additions during the year	*			******	10		
e Distributions during the year	****		(1) - (-) +(+,+,+,+,+,+,+,+,+,+,+,+,+,+,+,+,+,+,+		1f		
f Ending balance	arm 000 Part V line 21	for escrow or custo	dial account li	ability?	The Company of	Yes	$\square$ N
b If "Yes," explain the arrangement in Part XIII	Chack here if the evolu	nation has been pro	vided on Part	XIII	ACTOR	-	
Part V Endowment Funds.	Official field in the capital						
Complete if the organization	answered "Yes" or	Form 990, Part	IV, line 10.				
	(a) Current year	(b) Prior year	(c) Two years t	oack (d)	Three years back	(e) Four ye	
1a Beginning of year balance	20,119	20,119	20	,119	20,119	2	0,11
b Contributions							
c Net investment earnings, gains, and					1		
losses							
d Grants or scholarships							
e Other expenditures for facilities and		l l					
programs							
f Administrative expenses			0.0	110	20,119		20,11
g End of year balance	20,119	20,119		,119	20,119		20,11
2 Provide the estimated percentage of the cu	τent year end balance (l	ine 1g, column (a))	held as:				
a Board designated or quasi-endowment	%						
b Permanent endowment ▶ 100.00 %							
	%						
The percentages on lines 2a, 2b, and 2c sh	ould equal 100%.		- distribute and 4	far tha			
3a Are there endowment funds not in the poss	ession of the organization	on that are held and	administered i	or the		[·	Yes N
organization by:						200	1 3
(i) unrelated organizations						2-/11	
(ii) related organizations		0.1-44- 00					
b If "Yes" on line 3a(ii), are the related organ	Izations listed as require	d on Schedule R?			***************	[ 00 ]	
4 Describe in Part XIII the intended uses of	he organization's endow	ment funds.					
Part VI Land, Buildings, and Eq Complete if the organization	uipment.	- Farm 000 Da	rt IV/ line 11	la See Fo	m 990 Part	C line 10	0
Complete if the organization	n answered Yes C	лі гонн ээо, Ра	ILIV IIIC I	10. 000 10	in ood, ruit		- J
Description of property	(a) Cost or other bas		other basis	(c) Accun	nulated	(d) Book \	/aiue

depreciation (other) (Investment) 1a Land ..... b Buildings c Leasehold improvements

e Other

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

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DAA

Schedule D (Form 990) 2015

	Complete if the organization answered "Yes" or	FUITH 990, FAILTY, MILE TIL	. 000 ( 01111 000)
	(a) Description of security or category	(b) Book value	(c) Method of valuation:
	(including name of security)		Cost or end-of-year market value
Financial de	erivatives		
	d equity interests		
	***************************************	1	
(G)			
(H)		24	
otal. (Column	(b) must equal Form 990, Part X, col. (B) line 12.) ▶		
Part VIII	Investments—Program Related.	- 1500 - 400 - 44	Ora Farm 000 Bort V line 12
	Complete if the organization answered "Yes" o	n Form 990, Part IV, line 11	(c) Method of valuation:
	(a) Description of Investment	(b) Book value	Cost or end-of-year market value
			Cost of one of your memor income
(1)			
(2)			
(3)			
(4)			
(5)	i		
(6)			
(7)			
(8)			
(8)	o /h) must equal Form 990 Part X col. (B) line 13.)		
(8) (9) Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Other Assets.		
(8)	Other Assets	on Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.
(8) (9) Total. (Colum	on (b) must equal Form 990, Part X, col. (B) line 13.) ▶  Other Assets.  Complete if the organization answered "Yes" (a) Description	on Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.
(8) (9) Total. (Colum Part IX	Other Assets.  Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.
(8) (9) Total. (Colum Part IX	Other Assets.  Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.
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PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS	_	OTHER
SPECIAL EVENT EXPENSES		40.000
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	100000	**********************

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# SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

36-3089812 TRITON COLLEGE FOUNDATION **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Part I Indicate whether the organization raised funds through any of the following activities. Check all that apply. Solicitation of non-government grants Mail solicitations Solicitation of government grants Internet and email solicitations Special fundraising events Phone solicitations In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (III) Did fund-(vi) Amount pald to (v) Amount paid to ralser have (Iv) Gross receipts (or retained by) (or retained by) (I) Name and address of individual custody or (II) Activity organization fundralser listed in from activity control of or entity (fundraiser) col. (I) contributions? Yes No 1 2 3 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Schedule G (Form 990 or 990-EZ) 2015 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (c) Other events (a) Event #1 (b) Event #2 (d) Total events (add col. (a) through NONE PRESIDENTIAL RE GOLF OUTING col. (c)) (total number) (event type) (event type) Revenue 122,835 56,361 66,474 1 Gross receipts 83,167 36,635 46,532 2 Less: Contributions 3 Gross income (line 1 minus 39,668 19,726 19,942 line 2) 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs Expenses 7 Food and beverages 8 Entertainment 48,899 26,980 21,919 9 Other direct expenses 48,899 10 Direct expense summary. Add lines 4 through 9 in column (d) -9,23111 Net income summary. Subtract line 10 from line 3, column (d) ... Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (d) Total gaming (add (b) Pull tabs/instant (c) Other gaming (a) Bingo col. (a) through col. (c)) Revenue bingo/progressive bingo 1 Gross revenue 2 Cash prizes Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes No 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities:
 a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain:

andula (= /Fo	m 990 or 990-FZ) 20	015 TORTON	COLLEGE	FOUNDATION	36-3089812	2	
	m 990 or 990-EZ) 20					Yes	No
Is the ora	anization a grantor, b	eneficiary or trustee of	f a trust or a memi	ber of a partnership or other enti-	ty	_	
formed to	administer charitable	gaming?				Yes	□ N
Indicate th	he percentage of dan	ning activity conducted	i in:		24	_	
The orga	nization's facility	mig double, contended			13a		%
An outsid	le facility	(1)2(()+++++++()(-)(-)(-)(-)(-)	Arrest de la factorità del		13b		%
Enter the	name and address of	of the person who prer	pares the organiza	tion's gaming/special events boo	ks and		
records:	TIGITIC AND BUGICSS O	i ale percent who prop					
Name >	***************	******				****	
Address		.,,	********	45-1-4-1-4-1-4-1-4-1-4-1-4-1-4-1-4-1-4-1	***************************************		
Does the	organization have a	contract with a third p	arty from whom th	ne organization receives gaming		□ v <sub>a</sub> ,	
revenue?	·			ation ▶ \$		Ye	1 <u></u> 8
If "Yes,"	enter the amount of g	gaming revenue receiv	red by the organiza	ation > \$	and the		
amount o	of gaming revenue ret	tained by the third par	ty ▶ \$	Hasal Caree Street Street			
: If "Yes,"	enter name and addr	ess of the third party:					
Name >							
Address	<b>&gt;</b>						
Gaming	manager information	:					
Name ▶							
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SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

2015 Open to Public Inspection

OMB No. 1545-0047

Attach to Form 990.
 Information about Schedule I (Form 990) and its instructions is at www.irs.goviform990.

Inspection Employer identification number

2 (h) Purpose of grant Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form or assistance × Ses EDUCATIONAL 36-3089812 non-cash assistance (g) Description of 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance 260,785 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable ന 36-2537114 General Information on Grants and Assistance (p) EIN TRITON COLLEGE FOUNDATION the selection criteria used to award the grants or assistance? IL 60171 (a) Name and address of organization or government 2000 FIFTH AVENUE (1) TRITON COLLEGE RIVER GROVE Name of the organization Part II Part 8 6 ন 4 9 9 E <u>@</u>

Schedule I (Form 990) (2015)

36-3089812

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

Schedule I (Form 990) (2015)

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Part III

Part III can be duplicated if additional space is lifected.	nonal space is incoucin			1	A Description of non-coch accidance
(a) Type of grant or assistance	(b) Number of	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(e) Method of valuation (book, (f) Description of norways assistance FMV, appraisal, other)
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Supplemental Information. Provide the information required in F Part IV

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# SCHEDULE O (Form 990 or 990-EZ)

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.

2015

Department of the Treasury Internal Revenue Service

► 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.

Open to Public Inspection

Name of the organization

TRITON COLLEGE FOUNDATION

Employer identification number 36-3089812

FORM 990 - ORGANIZATION'S MISSION  PRITON COLLEGE FOUNDATION (THE "FOUNDATION") IS A NONPROFIT ORGANIZATION  PHOSE PURPOSE IS TO ASSIST IN THE FURTHERANCE OF EDUCATION ACTIVITIES AND  OBJECTIVES AT TRITON COLLEGE, COMMUNITY COLLEGE DISTRICT NO. 504 (THE  "COLLEGE"). THE FOUNDATION RECEIVES, ADMINISTERS, AND DISTRIBUTES FUNDS TO
FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
AN INDEPENDENT CERTIFIED PUBLIC ACCOUNTING FIRM (CPA) PREPARES THE
FOUNDATION'S FORM 990 AND SUBMITS THE FORM TO THE FOUNDATION'S MANAGEMENT
STAFF FOR REVIEW. AN ELECTRONIC COPY OF THE FORM IS ALSO PROVIDED TO ALL
MEMBERS OF THE BOARD FOR REVIEW. QUESTIONS AND COMMENTS ON THE FORM BY TH
EXECUTIVE DIRECTOR AND BOARD MEMBERS ARE DIRECTED BACK TO THE CPA FOR
RESOLUTION. AFTER ALL DISCUSSION POINTS ARE RESOLVED, THE FORMS ARE
FINALIZED AND PROVIDED TO THE TREASURER FOR FINAL REVIEW AND SIGNATURE.
THE FORM 990 IS ALSO ATTACHED TO THE ILLINOIS FORM AG-990-IL WHICH REQUIRE
SIGNATURES OF TWO OFFICERS. THIS PROVIDES THE OPPORTUNITY FOR A FINAL
REVIEW BY A SECOND OFFICER.
FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
THE DISCLOSURES ARE MANAGED AND REINFORCED BY MANAGEMENT.
FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL COMPENSATION IS APPROVED BY THE BOARD OF DIRECTORS

hedule O (Form 990 or 990-E		NAT.					Identification number 3089812	
TRITON COLLEGE								•
FORM 990, PART	VI, LINE	19 - GOVER	NING	DOCUMENTS	DISCLOS	URE	EXPLANATIO	ON
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SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

2015 OMB No. 1545-0047

Open to Public Inspection

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. ► Attach to Form 990.

TRITON COLLEGE FOUNDATION

Employer identification number

36-3089812

(9) Section 512(b)(13) (f) Direct controlling entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (e) End-of-year assets € (e) Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (d) Total income Ð (c) Legal domicile (state or foreign country) ٤ (b) Primary activity Ξ (a) Name, address, and EIN (if applicable) of disregarded entity Part II Part I € 2 ල ₹ 2

(a) Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (ff section 501(c)(3))	Direct controlling entity	Ves No	
(1) TRITON COLLEGE 2000 FIFTH AVENUE 36-2537114 RIVER GROVE IL 60171	SUPPORT	11	м	2	N/A	×	×
(2)							
(3)							
(4)							
(5)							

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2015

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(a)	danizations trea	ited as a partner	rship during the	tax year.	definition of related organizations treated as a partnership during the tax year.			6	3
Name, addeess, and ElN of related organization	Primary activity L6 dor dor (str. for	(c) (d) Legal Direct controlling domicile entity (state or foreign country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	(9) Share of end-of- year assets	(h) Disproportionate arr alloc:? of		General or P managing or partner?	(K) Percentage ownership
Company of the control of the contro			-						1
		- interest	or Truet Com	mo eff the one	anization answere	d *Yes" on Fe	om 990, Pa	≥ ≥	
line 34 because it had one or more related organizations treated as a line 34 because it had one or more related organizations treated as a line 34 because it had one or more related organizations treated as a line 34 because it had one or more related organizations.	lated organizat (b) Primary activity	ions treated as a (c)	(d) Direct controlling	rust during th	ations treated as a corporation or trust during the tax year.  (b) (c) (d) (e) (h) (h) (e) (h) (h) (h) (h) (h) (h) (h) (h) (h) (h	(g) Share of	(h) Percentage	-	(i) Section 512(b)(13)
		(state or foreign country)	entity	(C corp, S corp, or frust)	пооте	elico-year assess			entity/
									-
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Yes No

Schedule R (Form 990) 2015 TRITON COLLEGE FOUNDATION

Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V

all the property of the state o			ON SEL	a l
Note. Complete line 1 if any entity is listed in Parts II, III, or 10 of ulis scripture.	lated organizations fisted in	Parts II-IV?		
1 During the tax year, did the organization engage in any or une rollowing realisacions with one or more considerable to the constant of the c			X X	
a Receipt of (i) interest, (ii) annutries, (iii) royafres, or (iv) rent from a controlled enuty			Th X	ì
b Gift, grant, or capital contribution to related organization(s)	CONTRACTOR STATES		1c X	Ĵ
c Gift, grant, or capital contribution from related organization(s)			X 1d X	
d Loans or loan quarantees to or for related organization(s)	With the state of the second	OH	×	ĺ.
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e Loans or loan guarantees by retained organization (s)				
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6 Dividends from related omanization(s)	A CONTRACT OF STREET	The second second second	ļ	Ì.
			1g v	Ĵ
g Sale of assets to related organization(s)	CARLLES PRINCIPLE OF MACHINERY		1h X	أ.
h Purchase of assets from related organization(s)	White all Brillowsky	SECTION OF SECTION AND ADDRESS OF	1 X	١.,
i Exchange of assets with related organization(s)		THE RESIDENCE OF THE PARTY OF T		Ĺ
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Lease of facilities, equipment, or order assess to force of security.				
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k Lease of facilities, equipment, or other assets from related organization(s)	TATEL AND ALL OF	The second secon	4 X	
t Performance of services or membership or fundraising solicitations for related organization(s)	The second second second	THE RESERVE	ļ	١.
Defermance of services or membership or fundraising solicitations by			İ	l,
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<ul> <li>Sharing of paid employees with related organization(s)</li> </ul>	the state of the s	00 00 00 00 00		
			X   qt	м
p Reimbursement paid to related organization(s) for expenses	0.001-91 0 9 91	- 21 171 2211111	10 X	L
princement and hy related organization(s) for expenses				
d Kembursement para by related organizations, to expense			3	Ι,
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r Other transfer of cash or property to related organization(s)	TARREST STATE STATE OF THE STATE OF		1s	м
s Other transfer of cash or property from related organization(s)		the state of the s	on three-holde	
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Namo of melado manization	Transaction	Amount involved	Method of determining amount involved	
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	Д	260,785	CASH	1
(1) TRITON COLLEGE				
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(2)				
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(9)			Schedule R (Form 990) 2015	015

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Schedule R (Form 990) 2015 TRITON COLLEGE FOUNDATION

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

of gross teverines trial was four a relative digital (a) (b) (c) (d) (e)	(9)	9	(p)	(a)		€	(6)	(h) Disnanoriionate	Code V-UBI	General or	(k) Percentage
Name, address, and EIN of entity	Primary activity	Legal domicile (state or	72	Are all parm section 501(c)(3)		share of total income	end-of-year assets	allocations?	# C	managing partner?	ownership
		roreign country)	nom tax under sections 512-514)	Yes No	No No			Yes		Yes No	
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Schedule R (F	Form 990) 2015	TRITON	COLLEGE	FOUNDATION	36-3089812	Page 5
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Financial Statements
June 30, 2016 and 2015

FINANCIAL STATEMENTS
JUNE 30, 2016 AND 2015

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Statements of Financial Position	4
Statements of Activities and Changes in Net Assets	5
Statements of Cash Flows	6
Notes to Financial Statements	7 - 12

#### CERTIFIED PUBLIC ACCOUNTANTS

KUTCHINS ROBBINS & DIAMOND, LTD.

1101 PERIMETER DRIVE, SUITE 760 SCHAUMBURG, IL 60173 TEL 847.240.1040 FAX 847.240.1055 www.krdcpas.com

#### INDEPENDENT AUDITORS' REPORT

To the Board of Directors Triton College Foundation River Grove, Illinois

#### Report on Financial Statements

We have audited the accompanying financial statements of Triton College Foundation (an Illinois nonprofit corporation) (the "Foundation"), which comprise the statements of financial position as of June 30, 2016 and 2015, and the related statements of activities and changes in net assets, and cash flows for the years then ended, and the related notes to financial statements.

#### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

#### Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### **Opinion**

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Triton College Foundation as of June 30, 2016 and 2015, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Kutchins, Robbins & Diamond, Ital.

August 29, 2016

"Helping Our Clients Achieve Financial Success Through Sound Advice"



STATEMENTS OF FINANCIAL POSITION JUNE 30, 2016 AND 2015

See notes to financial statements.

		2016		2015
	ASSETS			
ASSETS  Cash and cash equivalents Investments Accounts receivable		\$ 155,368 812,507 2,395	\$	188,606 848,233 7,837
		\$ 970,270	\$	1,044,676
LIABI	LITIES AND NET ASSETS			
LIABILITIES  Accounts payable  Accrued payroll		\$ 1,329 1,863	\$	1,143 1,297
Total liabilities		 3,192		2,440
NET ASSETS Unrestricted				
Undesignated Board designated		660,729 - 286,230		666,037 20,893 335,187
Temporarily restricted Permanently restricted		20,119	o	20,119
Total net assets		967,078	_	1,042,236
		\$ 970,270	\$	1,044,676

TRITON COLLEGE FOUNDATION

# (A NONPROFIT FOUNDATION)

STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS

YEARS ENDED JUNE 30, 2016 AND 2015

See notes to financial statements.

STATEMENTS OF CASH FLOWS YEARS ENDED JUNE 30, 2016 AND 2015

See notes to financial statements.

		2016		2015
CASH FLOWS FROM OPERATING ACTIVITIES				
Cash received from contributions	\$	273,358	\$	301,333
Cash received from special events		128,277		152,000
Cash received from investment income		153		154
Cash pald for investment expenses		(8,233)		(8,511)
Cash paid for scholarships		(229,541)		(103,966)
Cash pald for other grants and transfers		(115,173)		(264,592)
Cash paid for fundralsing expenses		(48,899)		(56,305)
Cash paid for general administrative	_	(62,337)		(60,573)
Net cash used in operating activities		(62,395)		(40,460)
CASH FLOWS FROM INVESTING ACTIVITIES				
Proceeds from sale of investments	-	29,157		====
NET DECREASE IN CASH AND CASH EQUIVALENTS		(33,238)		(40,460)
CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR		188,606		229,066
CASH AND CASH EQUIVALENTS AT END OF YEAR	\$	155,368	\$	188,606
RECONCILIATION OF CHANGES IN NET ASSETS TO NET CASH USED IN OPERATING ACTIVITIES				
	\$	(75,158)	\$	(43,540)
Change in net assets  Adjustments to reconcile change in net assets to net cash	*	<b>(/</b> /	,	
used in operating activities				
Unrealized and realized loss on investments		60,378		52,347
Investment income reinvested		(53,809)		(50,090)
Changes in assets and llabilities				
Accounts receivable		5,442		196
Accounts payable		186		434
Accrued payroll		566		193
Net cash used in operating activities	\$	(62,395)	\$	(40,460)

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2016 AND 2015

#### **NATURE OF ACTIVITIES**

Triton College Foundation (the "Foundation") is an Illinois nonprofit corporation whose purpose is to assist in the furtherance of education activities and objectives at Triton College, Community College District No. 504 (the "College"). The Foundation receives, administers, and distributes funds to the College for various grants and scholarships.

#### SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

**Basis of Accounting:** The accounting records and accompanying financial statements have been maintained on the accrual method of accounting in accordance with accounting principles generally accepted in the United States of America.

Basis of Presentation: Financial statement presentation follows the recommendations of the Financial Statements of Not for Profit Organizations Topic of the Financial Accounting Standards Board ("FASB") Accounting Standards Codification. Under the standard, the Foundation is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Unrestricted net assets include resources that are not subject to donor-imposed restrictions plus those resources for which donor-imposed restrictions have been satisfied. Contributions are reported as increases in the appropriate category of net assets. Expenses are reported as decreases in unrestricted net assets. Gains and losses on investments are reported as increases or decreases in unrestricted net assets unless their use is restricted by explicit donor stipulations or by law.

Temporarily restricted net assets are subject to donor-imposed restrictions related to specific purposes. Satisfaction of temporarily restricted net assets (i.e., when the donor-stipulated purpose has been fulfilled or the stipulated time period has elapsed) is reported as a reclassification from temporarily restricted net assets to unrestricted net assets.

Permanently restricted net assets are subject to donor-imposed restrictions that will never lapse, thus requiring that the funds be retained permanently.

Cash and Cash Equivalents: The Foundation considers highly liquid debt instruments purchased with a maturity of three months or less and used to support daily operations to be cash equivalents.

**Concentrations of Credit Risk:** From time to time, the Foundation's cash balances at financial institutions exceed Federal Deposit Insurance Corporation ("FDIC") insurance limits. Management does not believe this presents a significant risk to the Foundation.

Accounts Receivable: Accounts receivable represent amounts due for special events and contributions and are stated at the amount management expects to collect from outstanding balances. Receivables are periodically reviewed for collectability by management and an estimated allowance for doubtful accounts is recorded if necessary. The Foundation believes all receivables to be collectible and no allowance has been recorded at June 30, 2016 and 2015.

*Investments:* Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

**Contributions:** Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted net assets depending on the absence or existence and nature of any donor restrictions.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2016 AND 2015

#### SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

**Donated Services:** A significant amount of donated services are contributed to the Foundation by various members to support the Foundation's programs and supporting services. These volunteer activities include participation on the Board of Directors and numerous other committees. The value of these services has not been included in the financial statements.

Tax Exempt Status: The Foundation is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code. However, any income from certain activities not related to the Foundation's tax exempt purpose would be subject to taxation as unrelated business income. The Foundation files information returns in the U.S. federal jurisdiction and Illinois state jurisdiction.

Use of Estimates: The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Subsequent Events: The Foundation has evaluated subsequent events through August 29, 2016, the date the financial statements were available to be issued.

#### **ENDOWMENT**

The Foundation's endowment consists of two funds established for educational purposes, all of which are donor-restricted funds.

Interpretation of Relevant Law: The Foundation follows the Uniform Prudent Management of Institutional Funds Act ("UPMIFA") and Its own governing documents. UPMIFA, which replaces the Uniform Management of Institutional Funds Act ("UMIFA") of 1972, eliminates the requirement of preservation of historical dollar amount of the donor-restricted endowment fund, in favor of considering the factors for prudent appropriation of spending of the endowment and would apply in the absence of donor restrictions on the donor endowment (not Board designated endowments). The Foundation's donors have placed restrictions on the use of the investment income or net appreciation resulting from the donor-restricted endowment funds and, accordingly, investment income, If any, and net appreciation is classified as temporarily restricted until the assets are appropriated for expenditure.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2016 AND 2015

#### **ENDOWMENT (CONTINUED)**

Endowment Net Asset Composition by Type of Fund as of June 30,	2016:	Permanently Restricted	· <u> </u>	Total
Donor-restricted endowment funds	\$_	20,119	\$_	20,119
Changes in Endowment Net Assets for the Year Ended June 30, 20	16:			
	_	Permanently Restricted	_	Total
Endowment net assets, beginning of year	\$	20,119	\$_	20,119
Endowment net assets, end of year	\$	20,119	\$_	20,119
Endowment Net Asset Composition by Type of Fund as of June 30	, 2015:	Permanently Restricted		Total
Donor-restricted endowment funds	\$	20,119	\$_	20,119
Changes in Endowment Net Assets for the Year Ended June 30, 20	)15:			
	_	Permanently Restricted		Total
Endowment net assets, beginning of year	\$	20,119	\$_	20,119
Endowment net assets, end of year	\$_	20,119	\$_	20,119

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2016 AND 2015

#### FAIR VALUE MEASUREMENTS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy are described as follows:

**Level 1** – Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Foundation has the ability to access.

**Level 2** – Inputs to the valuation methodology include:

- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical or similar assets or liabilities in inactive markets;
- inputs other than quoted prices that are observable for the asset or liability;
- inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 – Inputs to the valuation methodology are unobservable and significant to the fair market value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Below is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at June 30, 2016 and 2015.

- Mutual funds are valued at the net asset value ("NAV") of shares held by the Foundation at year end.
- Bonds are valued at the closing price reported on the active market on which identical or similar securities are traded. When quoted prices are not available for identical or similar bonds, the bond is valued under a discounted cash flows approach that maximizes observable inputs such as current yields of similar instruments but includes adjustments for certain risks that may not be observable such as credit and liquidity risks.

The preceding method described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Foundation believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2016 AND 2015

#### FAIR VALUE MEASUREMENTS (CONTINUED)

Fair value of assets measured on a recurring basis at June 30, 2016 and 2015 are as follows:

		Fair Value		Level 1
June 30, 2016				
Mutual funds				
Growth and income	\$	336,747	\$	336,747
International		113,803		113,803
Bonds				22.000
Government		22,600		22,600
World		95,913		95,913
Intermediate term		190,007		190,007
Corporate	-	53,437	-	53,437
Total investments	\$_	812,507	\$_	812,507
		Fair Value		Level 1
June 30, 2015				
Mutual funds				
Growth and income	\$	364,218	\$	364,218
International		115,625		115,625
Bonds				
Government		22,339		22,339
World		97,961		97,961
Intermediate term		188,434		188,434
Corporate	-	59,656		59,656
Total investments	\$	848,233	\$	848,233
The following tabulation summarizes the net yields of investment as:	ets:			
		2016		2015
	-	2016		2013
Dividends and interest, net	\$	45,729	\$	41,733
Unrealized losses	-	(60,378)	0 3	(52,347)
Total investment loss for the year	\$	(14,649)	\$	(10,614)

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2016 AND 2015

#### SEGREGATION OF NET ASSETS

**Unrestricted – Board Designated:** The Board of Directors designated net assets to support the expansion of the Hospitality Industry Administration ("HIA") program, including the construction of a new culinary education kitchen and mixology lab, which was completed during the year. Board designated net assets for the years ended June 30, 2016 and 2015 were \$0 and \$20,893, respectively.

**Temporarily Restricted:** Temporarily restricted net assets represent contributions that have been designated by donors to fund specific scholarships and grant activities.

The Foundation has temporarily restricted net assets to support the following programs:

	5 <del></del>	2016	2015
Scholarships and grants	\$	286,230	\$ 335,187

During the years ended June 30, 2016 and 2015, temporarily restricted net assets were released from restrictions as the Foundation incurred expenses, satisfying the restricted purpose designated by the donor. Temporarily restricted net assets were released from restrictions to support the following programs:

	 2016	2015	
Scholarships and grants	\$ 318,815	\$ 178,781	

**Permanently Restricted:** Permanently restricted net assets consist of donor-restricted endowments. Investment income earned on these net assets may be used for the Foundation's operating activities.

The following is a summary of programs to be supported with earnings on permanently restricted net assets as designated by the donors:

		2016	· ·	2015
20 <sup>th</sup> Century Women's Club Scholarship William Barr Memorial	\$	10,869 9,250	\$	10,869 9,250
	\$,	20,119	\$	20,119