Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

2017

DLN: 93493120014049 OMB No 1545-0047

Open to Public

Department of the Treasury

▶ 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

mema	i Keve	enue Service						Inspection
A F	or th	e 2017 ca		ing 07-01-2017 , and ending 06-	30-2018			
B Che	ck ıf a	pplicable	C Name of organization TRINITY RIVER MISSION INC			D Employe	er identif	ication number
		change	TRIVER HISSION INC			75-6055	203	
□ Na		-	Doing business as					
_		n/terminated						
☐ Am	ende	d return		I is not delivered to street address) Room/s	uite	E Telephon	e number	
☐ Ap	plicati	on pending	2060 SINGLETON BLVD			(214) 74	14-6774	
			City or town, state or province, count DALLAS, TX 75212	ry, and ZIP or foreign postal code				
			<u> </u>			G Gross red	ceipts \$ 1,	155,557
			F Name and address of principal GLORIA A LOPEZ	officer	H(a) Is	this a group ret	urn for	
			2060 SINGLETON BLVD			bordinates? e all subordinat		□Yes 🗹 No
			DALLAS, TX 75212			e an suborumad :luded?	e 5	☐ Yes ☐No
ı ıax	k-exer	mpt status	☑ 501(c)(3) □ 501(c)() ◄ (II	nsert no)	If	"No," attach a l	st (see	instructions)
J W	ebsit	te:▶ WW	W TRINITYRIVERMISSION ORG		T H(c) Gr	oup exemption	number	>
					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1062	M Chala	- Clarat dans da TV
K Forn	n of o	rganızatıon	Corporation Trust Associ	ation ☐ Other ►	L Year of to	ormation 1962	M State	of legal domicile TX
Pa	rt T	Sumi	marv					
			scribe the organization's mission or	most significant activities				
	-	TRINİTY R	IVER MISSIÓN PROVIDES EDUCAT:	IONAL AND SOCIAL OPPORTUNITIES T	HAT INSPIR	E STUDENTS A	ND THEI	R FAMILIES TO
ဥ	!	DREAM, BI	ELIEVE, AND ACHIEVE					
<u> </u>	-							
Aei Kei	-							
Governance				ontinued its operations or disposed of				1
> 5	l			body (Part VI, line 1a)			3	17
<u> </u>	l		· -	he governing body (Part VI, line 1b)			4	17
Activities &	l		• •	endar year 2017 (Part V, line 2a)			5	19
ACI	l		·	ssary)			6	625
	l			/III, column (C), line 12		•	7a	U
	D	Net unrei	ated business taxable income from	Form 990-T, line 34	· · ·	D.:	7b	C
		Contribut	nons and grants (Part VIII, line 1h)			Prior Year 1,449,0	101	Current Year
₫	l		service revenue (Part VIII, line 2g)			1,449,0	101	1,146,251
Ravenue	l	-	ent income (Part VIII, inie 29)	.74	9,306			
æ	l		venue (Part VIII, column (A), lines 5	, ,		112,5	_	9,300
	l		, , , , , , , , , , , , , , , , , , , ,	t equal Part VIII, column (A), line 12)		1,561,8		1,155,557
	_		nd similar amounts paid (Part IX, co			_,,-		0
	l		paid to or for members (Part IX, col				+	0
٠,	l		•	efits (Part IX, column (A), lines 5–10)	880,8	118	1,029,378	
Se	l	•	inal fundraising fees (Part IX, colum	, , , , , , , , , , , , , , , , , , , ,			-	0
Expenses	١		raising expenses (Part IX, column (D), lin					
ă	l		penses (Part IX, column (A), lines 1	· · · · · · · · · · · · · · · · · · ·		669,5	i21	598,834
	l		enses Add lines 13-17 (must equa	,		1,550,3		1,628,212
	l	·	less expenses Subtract line 18 from			11,4	_	-472,655
× 00		Revenue	Tess expenses Subtract line 10 from		Beginn	ing of Current Yo		End of Year
ži Ži						<u>-</u>		
Net Assets or Fund Balances	20	Total asse	ets (Part X, line 16)			999,6	559	646,627
₹ 2	21	Total liab	ılıtıes (Part X, lıne 26)			72,4	70	192,093
zζ	22	Net asset	s or fund balances Subtract line 2:	I from line 20		927,1	.89	454,534
Par			ature Block					
Jnder knowl	pen.	alties of pe and belie	erjury, I declare that I have examır f .it is true, correct, and complete	ed this return, including accompanyin Declaration of preparer (other than off	g schedules icer) is hase	and statements d on all informa	, and to	the best of my
any k								
		 	*			2019-02-26		
Sian		Signati	ure of officer			Date		
Sign Here	:	GLOPT	A A LOPEZ CEO					
			r print name and title					
		Pi	rınt/Type preparer's name	Preparer's signature	Date		TIN	
Paid	ł		IRK EVANS CPA	KIRK EVANS CPA	2019-03-06	Check L If p self-employed	0146947	L
Pre		er 📴	ırm's name			Firm's EIN > 82-	3141950	
Use		1 =	ırm's address ► 4433 PUNJAB WAY STE :	.02		Phone no (972) 3	35-9754	
		,	FRISCO, TX 750336745					
May t	he IR	S discuss	this return with the preparer showi	n above? (see instructions)			□ Y	es 🗆 No
			duction Act Notice, see the sepa	,	Cat N	o 11282Y		Form 990 (2017)

Form	990 (20	017)					Page 2
Par	t IIII	Statement o	f Program Service	Accomplis	hments		
		Check If Schedu	ule O contains a respoi	nse or note to	any line in this Part III .		🗹
1	Briefly	describe the org	ganızatıon's mıssıon				
		ER MISSION PRO D ACHIEVE	OVIDES EDUCATIONAL	. AND SOCIAL	OPPORTUNITIES THAT INS	PIRE STUDENTS AND THEIR FAM	ILIES TO DREAM,
2	Did the	e organization ui	ndertake any significar	nt program ser	vices during the year which	n were not listed on	
	the pri	or Form 990 or 9	990-EZ?				🗌 Yes 🗹 No
	If "Yes	," describe these	e new services on Sch	edule O			
3	Did the	e organization ce	ease conducting, or ma	ake significant	changes in how it conducts	s, any program	
		es?					🗌 Yes 🗹 No
	If "Yes	," describe these	e changes on Schedule	e O			
4	Section	n 501(c)(3) and		ns are required	to report the amount of gi	gest program services, as measui rants and allocations to others, th	
4a	(Code) (Expenses \$	1,349,341	including grants of \$) (Revenue \$)
	See Add	ditional Data					
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
	See Add	ditional Data					
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
	See Add	ditional Data					
	(Code) (Expenses \$		including grants of \$) (Revenue \$	<u> </u>
	PROVID SUCCES AS ADD CENTER LOSS, I PROGRA YOGA A PICNICS SO THE MINIMU ASSIST. PARTIC	DE SKILLS AND OPF SSFULLY NAVIGATE VITINAL SUPPORT TO COUNSELING SE DOMESTIC VIOLEN APPOVIDES SUP ND MINDFULNESS S PARENT UNIVER Y TOO CAN BE STF UM OF 60 VOLUNTE ING AT TRM FAMIL	PORTUNITIES FOR PARENTE AND ENGAGE WITH EDU TO TRM FAMILIES, FREE II SSIONS ASSIST FAMILIES CE, SUICIDAL IDEATIONS PORT TO CONTINUING EE SITY INTENTIONALLY MIN RONG MEANS OF SUPPORTE EER HOURS WHICH ARE CYSTUDENT EVENTS, ASS ON A MISSION MOMS OI	IS TO BE EFFECT CATIONAL SYSTI NOIVIDUAL AND TO NAVIGATE I , SEXUALITY, DE UCATION THROU SOUNDS THROU TICS TRM'S STUE TO THEIR CHIL UMPLEMENTED T JISTING IN DAIL	IVE ADVOCATÉS FOR THEIR CHEM AND PROVIDE TOOLS AND CAMILIAL COUNSELING IS OFFI SIFFICULT AND UNFAMILIAR ME PRESSION, ETC TO FURTHER A GOOD TOOLS OF THE PROPERSION OF THE PROPERSION OF THE PROGRAM TO ASSIST PAR DREN AND THEMSELVES TRM FHROUGH PARENTAL ENGAGEME OF TRM FACILITY, AT	HOUR, AND BELIEVE & ACHIEVE PRIMITEDREN AND FAMILIES, TO EMPOWER DYPORTUNITIES TO STRENGTHEN PAR ERED THROUGH OUT WEEK THROUGH OF THE ENTAL AND EMOTIONAL EXPERIENCES ASSIST PARENTS, PARENT UNIVERSITY FOR PARENTS, PROMOTES PRO-SOCIA ROMOTING COMMUNITY THROUGH PARENTS IN UNDERSTANDING WHAT THE FAMILIES SUPPORT TRM, AND THEMSE ENT AT THEIR CHILD'S SCHOOL, CONTITENDING PERSONAL DEVELOPMENT WITHENTIC MEXICAN CUISINE PROVIDE	R TRM PARENTS TO ENT-CHILD RELATIONSHIP PASTORAL COUNSELING AS DIVORCE, GRIEF AND Y SIX-WEEK SUMMER AL BEHAVIOR THROUGH RIENT SOCIAL HOUR AND EIR CHILDREN EXPERIENCE ELVES BY CONTRIBUTING A TINUING EDUCATION, FORKSHOPS AND
4d	Other	program service	es (Describe in Schedu	le O)			
			unally	•	#	\ (Bayanua f	\

Checklist of Required Schedules

Page 3

No

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right 6

7

8

11b

11c

11d

11e

11f

12a

12b

13

14a

14b

15

16

17

18

19

Yes

Yes

Yes

Nο Nο Nο No

Nο

Nο

Nο

Nο

No

Nο

Nο

Nο

Nο

Νo

Nο

No

Nο

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for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? Yes 11a

to provide advice on the distribution or investment of amounts in such funds or accounts?

Did the organization receive or hold a conservation easement, including easements to preserve open space,

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?

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Was the organization included in consolidated, independent audited financial statements for the tax year?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

29

Part IV	Checklist of Required Schedules (continued)		
		Yes	No

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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 disqualified persons?

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 entity or family member

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

No

Page 4

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

20b 21

20a

Nο

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 domestic

Νo Nο

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX. 22 column (A), line 2? If "Yes," complete Schedule I, Parts I and III 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 employees? If "Yes," 23 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 through 24d and 24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

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30

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33

34

35a

35h

36

37

Yes

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Νo

No
No
No
No

Nο

Νo

Nο

orm	990 (2017)			Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 7			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		No
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			110
За	Did the organization have unrelated business gross income of $$1,000$ or more during the year?	3a		No
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 authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
Ь	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		""
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
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?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
LO	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
L1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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Par	TVI Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "Na 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	o" respo	nse to li	nes
	Check if Schedule O contains a response or note to any line in this Part VI			~
Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1	,		
	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 committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b	,		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, 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 The governing body? Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O ection B. Policies (This Section B requests information about policies not required by the Internal Revenues and Did the organization have local chapters, branches, or affiliates? DI If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervisio of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
		7a		No
b		7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9		9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	⊋.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	126	V	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in	12b	Yes	
13	Schedule O how this was done Did the organization have a written whistleblower policy?	12c	Yes Yes	
		H		
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	4.5		NI -
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	\vdash		No
b	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?			No
b Se	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?			No
ь S е 17	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16b		No
ь S е 17	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16b		No
b	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16b		No

Part VII

(16) ABE BENANIDES

(17) TAMMY WOOD

DIRECTOR

DIRECTOR

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII . Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

 List all of the organization's former director organization, more than \$10,000 of reportable co 	rs or trustees	that re	ceive	d, in	the	capa	city	as a former directo	or or trustee of the	
List persons in the following order individual trus compensated employees, and former such person	stees or directo		_					-		
Check this box if neither the organization no	r any related or	ganızat	ion c	omp	ens	ated a	any d	current officer, dire	ctor, or trustee	
(A) Name and Title	(B) Average hours per week (list any hours for related	pers and	an on on Is	e bo both	t che ox, u n an or/tr	nless office ustee	er)	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
(1) KEN MCDONALD	1 00							_	_	
CHAIR/DIRECT	••••••	×						0	0	0
(2) DAVID SHEAHAN VICE CHAIR/D	1 00	×						0	0	0
(3) MARGARET SPELLINGS SECRETARY/DI	1 00	х						0	0	0
(4) DAN KILLIAN TREASURER/DI	1 00	×						0	0	0
(5) JESSE TREVINO DIRECTOR	1 00	x						0	0	0
(6) JENNIFER TRULOCK DIRECTOR	1 00	х						0	0	0
(7) ANN SCHOOLER DIRECTOR	1 00	х						0	0	0
(8) MATT SCHOOLER DIRECTOR	1 00	×						0	0	0
(9) MURRAY COVENS DIRECTOR	1 00	×						0	0	0
(10) PATRICIA BLASQUEZ DIRECTOR	1 00	X						0	0	0
(11) BRANDON Q JONES DIRECTOR	1 00	x						0	0	0
(12) GRANT LAUGHLIN DIRECTOR	1 00	x						0	0	0
(13) JAMES MAULDIN DIRECTOR	1 00	×						0	0	0
(14) JOURDAN SULLIVAN DIRECTOR	1 00	×						0	0	0
(15) PAIGE WARE DIRECTOR	1 00	×						0	0	0

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Part VII

(F) Estimated

Page 8

	(A) Name and Title	(B) Average hours per week (list any hours	than c	ne b	ox, ι in of	t cho unle: ficer	and a	son	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from relate organization	on d ns	Estim amount of compen from organizat	ated of other sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated emptoxies	Former	2/1099-MISC)	(W- 2/1099 MISC)	J -	related organizations	
(18)	GLORIA A LOPEZ	40 00			x				80,000		0		
CEO			••••						00,000		9		
c ·	Total from continuation sheets to Part	VII, Section A		•		,			80,000				
2	Total number of individuals (including bu of reportable compensation from the org		those li	sted a	abov	/e) v	vho re	ceiv	ed more than \$100	,000			
3	Did the organization list any former offic line 1a? <i>If "Yes," complete Schedule J for</i>			key (emp •	loye •	e, or h	nighe	est compensated er	mployee on	3	Yes	No No
4	For any individual listed on line 1a, is the organization and related organizations grandividual									he • • •	4		No
5	Did any person listed on line 1a receive of services rendered to the organization $^{2}\mathit{If}$								-		5		No
	ection B. Independent Contractors												
1	Complete this table for your five highest from the organization Report compensat										npen	sation	
	· · · · · · · · · · · · · · · · · · ·	(A) ousiness address	iddi ye	ui cii	41119					(B) tion of services		(C Comper	
_													

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

compensation from the organization \blacktriangleright

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

Part		Statement of	Revenue							Page 9
		Check if Schedul	e O contains	a respo	onse or note to any		hıs Part VIII	 (B)	(c)	<u> </u>
							revenue	Related or exempt function	Unrelated business revenue	Revenue excluded from tax under sections
	1a	Federated campaign	ns	1a				revenue		512-514
nts nts		• Membership dues		1b						
irai 10 u		: Fundraising events		1c						
S. G A∏		d Related organization		1d	<u> </u>					
er Sift		Government grants (co		1e	1,129,539					
ī, s		All other contributions,		_ ie	1,129,339					
oution her S		and similar amounts no above	ot included	1f	16,712					
Contributions, Giffs, Grants and Other Similar Amounts		Noncash contribution in lines 1a-1f \$ Total.Add lines 1a-1								
	تــــــــــــــــــــــــــــــــــــــ	Total: Add lines 1a 1		• •	Business		L,146,251			
Program Service Revenue	2a				Business	Code				
٠٨٠				_						
ıν. α	b			_						
rис	С.	-		_						
32	d e									
ıran	_	All other program ser	rvice revenue	<u> </u>						
3 0/6		Total.Add lines 2a-2f			>					
_					<u> </u>	1				
		investment income (ir imilar amounts) .			interest, and other		9,306			9,306
	4 I	income from investme	ent of tax-exe	empt bo	ond proceeds	•				
	5 F	Royalties				<u> </u>				
	_		(ı) Rea	ıl	(II) Personal					
	6a	Gross rents								
	b	Less rental expenses								
	С	Rental income or (loss)				1				
	d	Net rental income oi	r (loss)			7				
			(ı) Securi	ties	(II) Other					
		Gross amount from sales of								
		assets other than inventory								
	b	Less cost or other basis and								
	c	sales expenses Gain or (loss)				_				
		Net gain or (loss)			•					
a		Gross income from fu (not including \$	undraising ev	ents of						
Other Revenue		contributions reporte	d on line 1c)							
eve		See Part IV, line 18								
r R		Less direct expenses Net income or (loss)		b sına ev	ents .					
the		Gross income from g		_	ents					
0		See Part IV, line 19								
	L			a						
		Less direct expenses Net income or (loss)		b activit	IES .					
		Gross sales of invent		, 400,710	les •					
		returns and allowanc								
				a						
		Less cost of goods s		b						
	С	Net income or (loss) Miscellaneous		f invent	Business Code				+	+
	11:		TCVCTGC		business code	-				
	b									
	С					+				
	J.	All other revenue .				+				
		Total. Add lines 11a			<u> </u>	1			+	
		Total revenue. See		•	•					
	12	rotarrevenue. See	THE UCTIONS	• •	• • • •		1,155,557			9,306

Form 990 (2017)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	ınızatıons must comp	lete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX	<u></u>		<u> </u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	80,000	80,000		
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	949,378	808,428	18,559	122,391
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	46,681		46,681	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
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)	15,434		15,434	
12 Advertising and promotion				
13 Office expenses	45,738	39,491	6,247	
14 Information technology				
15 Royalties				
16 Occupancy	173,119	160,423	12,696	
17 Travel	5,825	5,739	86	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials •				
19 Conferences, conventions, and meetings	6,146	6,022	124	
20 Interest	3,190		3,190	
21 Payments to affiliates			·	
22 Depreciation, depletion, and amortization	94,418	94,418		
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)				
a OTHER MISC	128,457	92,518	35,813	126
b SCHOLARSHIPS	57,033	57,033		
c IN-KIND	16,712		16,712	
d EVENTS	6,081	5,269	812	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	1,628,212	1,349,341	156,354	122,517
26 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 ▶ ☐ if following SOP 98-2 (ASC 958-720)				

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23

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26

27

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31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

End of year

12

13

14

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17

18

19

20

21

22 23

24

25

26

27

28

29

30

31

32

33

34

6.000

999.659

19,670

45 000

7.800

72,470

576.416

350.773

927,189

999.659

Page **11**

646,627

116,493

75.000

192,093

150.516

304.018

454,534

646.627

Form **990** (2017)

600

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

Investments—other securities See Part IV, line 11 .

Total assets.Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

key employees, highest compensated employees, and disqualified

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Investments—program-related See Part IV, line 11

Tax-exempt bond liabilities

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Intangible assets

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

1	Cash-non-interest-bearing	231,582	1	260,022
2	Savings and temporary cash investments	316,067	2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable net	275 907	4	275 907

Beginning of year

275.907 Accounts receivable, net . Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part 5 II of Schedule L 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) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Assets Notes and loans receivable, net . Inventories for sale or use . 8 22.810 9 11.371 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 10a 1,743,094 basis Complete Part VI of Schedule D 99,327 1,643,767 147.293 Less accumulated depreciation 10b 10c 11 Investments—publicly traded securities . 11

2b

3b

Yes

Yes

Nο

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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,

b Were the organization's financial statements audited by an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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?

2c

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 required

Additional Data

Software ID:

Software Version:

EIN: 75-6055203

Name: TRINITY RIVER MISSION INC

Form 990 (2017)

Form 990, Part III, Line 4a:

PROGRAMS FOR STUDENTS GRADES 6-12. GOAL OF B&A IS INCREASE STUDENTS WHO PURSUE AND ARE PREPARED TO SUCCEED IN POST SECONDARY EDUCATION STUDENTS COME TO B&A EAGER TO GAIN REAL-WORLD KNOWLEDGE THROUGH EXCEPTIONAL EXPERIENCES THAT PREPARE THEM TO SUCCEED IN COLLEGE, OBTAIN A FUTURE CAREER AND EARN 4.000 SCHOLARSHIP YOUTH SIGN CONTRACT TO FULFILL PROGRAM REQUIREMENTS. INCLUDING PARTICIPATION IN AGE-APPROPRIATE COLLEGE AND CAREER WORKSHOPS (E.G., FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA) TRAINING, SAT PRACTICE, FINANCIAL LITERACY, NETWORKING SKILLS, CAREER/SCHOOL FAIRS), 20 HOURS COMMUNITY SERVICE, 10 HOURS HEALTH RELATIONSHIP CLASSES, SUBMISSION OF REPORT CARDS, SAT/ACT TEST SCORE CONTACT IS COMPLETED IN SUMMER DURING ACHIEVERS ACADEMY PROGRAM THAT FOCUSES ON SCIENCE, LITERACY, MATH AND HEALTHY RELATIONSHIP CONCEPTS THROUGH HANDS-ON ACTIVITIES AND EXCITING FIELD TRIPS THROUGHOUT DALLAS/FORT WORTH DURING SCHOOL YEAR. STUDENTS HAVE ACCESS TO HOMEWORK ASSISTANCE THROUGH STUDY HALL AND TRM'S TUTOR POWER HOUR TO FULFILL COMMUNITY SERVICE HOUR REQUIREMENTS STUDENTS HAVE OPTION TO VOLUNTEER AS READING BUDDY TO TRM'S K-3RD GRADE STUDENTS, OPPORTUNITY THAT TEACHES THEM LEADERSHIP SKILLS THROUGH UNIQUE VOLUNTEER EXPERIENCES OFFERED MONTHLY (E.G., PEROT MUSEUM, NORTH TEXAS FOOD BANK, URBAN FARMS, ECT.) B&A IMPLEMENT SKILLS-BASED TRAINING TO HELP STUDENTS SUCCEED IN SCHOOL. CAREER, AND LIFE, SUCH AS LEMONADE DAY, EXPERIENTIAL ENTREPRENEURIAL PROGRAM ENGAGES YOUTH IN DESIGNING AND RUNNING THEIR OWN SMALL BUSINESS STUDENTS SET FINANCIAL GOALS, CREATE MARKETING PLAN, CRAFT THEIR BRAND OR LEMONADE, PITCH THEIR BUSINESS PLAN TO INVESTORS TO GAIN SEED FUNDS AND ULTIMATELY SELL LEMONADE AT A PROFIT PROGRAMS TO BUILD LEADERSHIP SKILLS GIRLS ON MISSION AND PALS (PREPARING ADOLESCENT BOYS TO LEAD AND SUCCEED) THESE PROVIDE ADOLESCENT BOYS AND GIRLS WITH STRONG NETWORK OF SUPPORT WHILE BRIDGING OPPORTUNITY GAP AND EMPOWERING THEM TO STAY IN SCHOOL, BECOME PRODUCTIVE MEMBERS OF SOCIETY BY PROMOTING LEADSHIP, COMMUNITY, ACADEMIC EXCELLENCE AND BROTHER/SISTERHOOD SESSIONS FOCUS ON SOCIAL JUSTICE, DECORUM, HEALTHY RELATIONSHIPS, SOCIAL RESPONSIBILITY, AND CHARACTER DEVELOPMENT, STUDENTS HAVE OPPORTUNITY TO BE PAIRED WITH A MENTOR THROUGH MAPS (MENTORING AS PATHWAY TO SUCCESS) BASED ON COMMON INTERESTS, CARRER PATHS, AND EXTRACURRICULAR ACTIVITIES STUDENTS AND MENTORS MEET IN-PERSON AT LEAST TWICE PER MONTH AND COMMUNICATE VIA PHONE, SOCIAL MEDIA OR EMAIL MENTORS ARE KEY ROLE MODELS FOR STUDENTS WHO ASSIST WITH PROBLEM-SOLVING, CRITICAL THINKING, AND ARE A SOURCE OF CONSISTENT SUPPORT MENTORS ALLOW STUDENTS TO HAVE DIVERSE EXPERIENCES THAT EXPOSE THEM TO ART, MUSIC, SPORTS, RECREATION, AND OTHER EDUCATIONAL AND CULTURAL ACTIVITIES STUDENTS INTERESTED IN STEM (SCIENCE, ENGINEERING, ARTS, AND MATH) GET FIELD EXPLORATION, PARTICIPATE IN INFINITY2 PROGRAMMING STUDENTS PARTICIPATE IN HANDS-ON LESSONS THAT DEEP DIVE INTO FIELDS AS CODING, ROBOTICS, PHOTOGRAPHY, 3D PRINTING, AUGMENTED REALITY AND SO MUCH MORE. THROUGH HEALTHY RELATIONSHIPS, STUDENTS DEVELOP SOCIAL/LIFE SKILLS THROUGH DISCUSSIONS ON FINANCIAL LITERACY, SELF-ESTEEM THROUGH ART OF SPOKEN WORD, SEX EDUCATION, HEALTHY LIVING THROUGH COOKING CLASSES, PEER PRESSURE, AND TEEN DATING VIOLENCE LEARNING ABOUT WHAT A HEALTHY RELATIONSHIP IS, AND HOW TO CULTIVATE THAT RELATIONSHIP, AT A YOUNG AGE IS JUST ONE OF THE NUMEROUS WAYS STUDENTS ARE SUPPORTED AND PREPARED FOR A LIFE AFTER HIGH SCHOOL TO CONTINUE PREPARATION FOR LIFE AFTER HIGH SCHOOL, TRM WORKS TO ENSURE STUDENTS ARE COLLEGE-READY BY PROVIDING COLLEGE FAIR OPPORTUNITIES. COLLABORATION WITH PARENTS ON THE COLLEGE PROCESS, COLLEGE ESSAY WRITING, ASSISTANCE APPLYING FOR SCHOLARSHIPS TO SUPPLEMENT FINANCIAL COSTS STUDENTS ATTEND EXPLORATORY IN-AND OUT-OF-STATE COLLEGE CAMPUS VISITS THAT PARALLEL WHAT THEY WOULD ENCOUNTER AS PROSPECTIVE STUDENTS INCLUDING EXPLORATION OF DORMITORY LIVING, FINANCIAL AID OPTIONS, LECTURE HALLS, STUDENT LIFE, AND CAMPUS TRADITIONS UPON SUCESSFUL COMPLETION OF ALL PROGRAMS COMPONENTS AND HIGH SCHOOL GRADUSTION. STUDENT IS ELIGIBLE TO RECEIVE 4.000 SCHOLARSHIP WHEN A STUDENT GRADUATES FROM B&A. HE/SHE HAS ACADEMIC KNOWLEDGE. SKILLS. AND ATTITUDE TO THRIVE IN COLLEGE. CAREER. AND LIFE TO BE POSITIVE AND CONTRIBUTING MEMBER OF THEIR COMMUNITY OUTCOMES 248 STUDENTS, 38 MENTORS, 100% SENIORS GRADUATED, 98% PROMOTED TO NEXT GRADE LEVEL, 53% IMPROVED LITERACY AND/OR MATH 15%. 73% INCREASED POSTIVE ATTITUDE/BELIEFS/PERCEPTIONS OF SELF AND FUTURE. 81% PREVIOUS GRADUATING CLASS ENROLLED IN TWO OR FOUR YEAR COLLEGE AND COMPLETED FIRST SEMESTER

TO PROVIDE EDUCATIONAL AND SOCIAL OPPORTUNITIES THAT INSPIRE STUDENTS AND THEIR FAMILIES TO DREAM. BELIEVE, AND ACHIEVE YOUTH AND SCHOLARSHIP

Form 990, Part III, Line 4b:

STUDENT, AND STUDENT/PARENT REQUESTING TUTORING, STUDENTS ENROLLED IN 1 OR 2 LITERACY PROGRAMS AND/OR 1 OF 3 MATH PROGRAMS READING BUDDIES LITERACY-FOCUSED TUTORING FOR KINDERGARTEN - 3RD GRADE STUDENTS ARE ASSIGNED TO ONE HOUR, GRADE-SPECIFIC CLASS, CONSISTING OF BIG BUDDY FOR EACH STUDENT AND STAFF FACILITATOR CONDUCTS CLASS USING TEKS LESSON PLANS THAT FOCUS ON FUNDAMENTALS OF LITERACY COMREHENSION, LETTER RECOGNITION, VOCABULARY, FLUENCY, PHONEMIC AWARENESS IT IS ENHANCED BY USING HANDS-ON ACTIVITIES AND FIELD TRIPS TO PROMOTE LITERACY THROUGH

REAL WORLD KNOWLEDGE AND WEEKLY HIGHLIGHTED BOOK TO TRACK STUDENT SUCCESS AND DEVIATION. ALL STUDENTS ASSESSED MONTHLY BY USING ISTATION

TUTOR POWER HOUR IF A K-12 GRADE STUDENT REQUIRES ADDITIONAL ASSISTANCE IN READING OR MATH DETERMINED BY REPORT CARD, STAFF INTERACTS WITH

ONLINE LITERACY ASSESSMENTS MONTHLY, STUDENTS GIVEN OPPORTUNITY TO CHOOSE A BOOK FROM TRM'S TAKE READING HOME LIBRARY STUDENT ARE ABLE TO TAKE THESE BOOKS HOME TO BUILD THEIR OWN PERSONAL LIBARY AND SHARE JOY OF READING WITH THEIR FAMILY INDIVIDUAL LITERACY TUTORING FOR 3RD -12TH GRADE STUDENTS. TRM STAFF MATCHES EACH STUDENT WITH TRAINED VOLUNTEER TUTOR THEY MEET FOR ONE HOUR PER WEEK. STUDENTS ARE ASSESSED. USING ISTATION ONLINE LITERACY ASSESSMENT STUDENTS ARE PLACED IN SPECIFIC CURRICULUM THAT CORRELATES TO THEIR ASSESSMENT DURING ONE-HOUR SESSIONS, STUDENTS AND TUTOR COMPLETE STUDENT 'READ ALOUD' FICTION OR NON-FICTION STORY, A COMPREHENSIVE OUIZ, A WORKSHEET, VOCABULARY WORDS.

AND JOURNALING ACTIVITY ASSIST WITH MATH FUNDAMENTALS FOR KINDERGARTEN - 1ST GRADE STUDENTS ASSIGNED TO WEEKLY 45-MINUTE GRADE SPECIFIC CLASS FACILITATED BY STAFF USING HANDS-ON TEKS LESSON PLANS FOCUSED ON NUMBER RECOGNITION, SORTING AND GROUPING NUMBERS, TIME, MEASURING OBJECTS AND RECOGNITION OF BASIC PATTERNS STUDENTS ARE ASSESSED THREE TIMES DURING SCHOOL YEAR (PRE, MID, AND POST-ASSESSMENTS) USING IMAGINE LEARNING INTERACTIVE ONLINE BLUEPRINT PROGRAM, REASONING MIND ONLINE PROGRAM, IMAGINE LEARNING FOR STUDENTS IN 2ND - 5TH, STUDENTS ASSIGNED GRAD-SPECIFIC CLASS THAT MEETS 45 MINUTES TWICE PER WEEK IT TEACHES STUDENTS IMPORTANCE OF NOTE-TAKING, STARR (STATE OF TEXAS ASSESSMENTS OF

ACADEMIC READINESS), INTERACTIVE COMPONENT ALLOWS DIFFICULTY OF EACH MATH PROBLEM TO INCREASE WITH EVERY CORRECT ANSWER AND DECREASE WITH EVERY INCORRECT ANSWER AT END OF EACH SESSION. STUDENTS REWARDED WITH "MATH BUCKS" FOR EVERY CORRECT MATH PROBLEM THAT CAN BE USED TO

PURCHASE FUN TOYS AND PRIZES AS AN INCENTIVE STUDENTS ARE ASSESSED THREE TIMES DURING THE SCHOOL YEAR (PRE-MID, AND POST-ASSESSMENTS) ONLINE MATCH TUTORING BY ED2NET FOR GRADES 2 - 12 FOR ONE-ONE-ONE SUPPORT IN MATH. TRM STAFF MATCHES EACH STUDENT WITH TRAINED VOLUNTEER TUTOR WHO MEET WITH STUDENTS FOR ONE HOUR PER WEEK TUTORS HAVE ABILITY TO COMPLETE TUTORING SESSION IN-PERSON OR REMOTELY STUDENTS ARE ASSESSED THREE

TIMES DURING THE YEAR (PRE, MID, AND POST-ASSESSMENT) ONCE STUDENTS ARE ASSESSED, TUTOR IS GIVEN CURRICULUM FOR ENTIRE YEAR BASED UPON

ASSESSMENT TUTORS ARE ALWAYS PROVIDED TECHNICAL AND MORAL SUPPORT VIA TRM AND ED2NET STAFF PROGRAM PHILOSOPHY IS STUDENTS LEARN BY DOING, BEING TOTALLY IMMERSED IN NEW LEARNING AND KNOWLEDGE THEY ARE SUPPORTED BY A VOLUNTEER, OR STAFF MEMBER WHO ENCOURAGE AND CARE ABOUT THEM

THIS CRITICAL THINKING, CONFIDENCE-BOOSTING PROCESS IS STRENGTH OF TUTOR POWER HOUR PROGRAM OUTCOMES 57% RECEIVING LITERACY TUTORING THAT

COMPLETE PRE-AND POST- ASSESSMENTS IMPROVE GRADE EQUIVALENT READING LEVEL BY AT LEAST 9 MONTHS AND/ORLITERACY GRADES BY 15% 66% RECEIVING

MATH TUTORING THAT COMPLETE PRE AND POST ASSESSMENTS IMPROVE ASSESSMENT SCORES AND/OR MATH GRADES BY 15%

Form 990, Part III, Line 4c: CHILDREN'S PROGRAM ENTRY INTO TRM FOR MOST STUDENTS OBJECTIVE IS PROVIDE STUDENTS KINDERGARTEN - 5TH GRADE WITH FOUNDATION SKILLS OF GOOD

HOMEWORK HELP ASSIST WITH SOUND STUDY HABITS MONDAY - THURSDAY FROM 3PM - 6PM WITH ADDITIONAL PROJECT HOUR SUPPORT FROM 6PM - 8PM AS NEEDED AMERICORPS MEMBERS, STAFF, AND VOLUNTEERS PROVIDE ACADEMIC SUPPORT TO STUDENTS BY ASSISTING WITH HOMEWORK AND RESOURCES FOR SCHOOL PROJECTS STUDENTS ARE REWARDED FOR HOMEWORK COMPLETION, AND GOOD BEHAVIOR BY EARNING "TRM BUCKS" WITH BI-ANNUAL EVENTS TO SPEND THEIR "BUCKS" ON SCHOOL SUPPLIES, TOYS, AND PRIZES THIS SYSTEM NOT ONLY SERVES AS A MEASUREMENT FOR PROGRESS FOR STUDENTS BUT ALSO BEGINS TO TEACH

STUDY HABITS, EXPOSURE TO COLLEGE READINESS AT EARLY AGES AND PROMOTE PRO-SOCIAL BEHAVIOR THROUGH VARIED SOCIAL-EMOTIONAL TECHNIQUES

IMPORTANCE OF ACCOUNTABILITY AT A YOUNG AGE UPON COMPLETION OF HOMEWORK, STUDENTS CAN PARTICIPATE IN STEAM (SCIENCE, TECHNOLOGY,

ENGINEERING, ARTS, AND MATH) ZONE PROGRAM THAT ALLOWS STUDENTS TO LEARN SCIENCE AND ARTS BASED CONCEPTS THROUGH DAILY HANDS-ON EXPERIMENTS, ACTIVITIES, AND EVENTS TO PROMOTE PRO-SOCIAL BEHAVIOR AND SUPPORT STUDENTS IN GRADES 3RD - 5TH FOR ANXIETY EXPERIENCED DURING TEST TAKING, STUDENTS PARTICIPATE IN BE A STAAR BE A STAAR ASSISTS IN DEVELOPING POSITIVE STUDY HABITS. HEALTHY EATING HABITS THAT STIMULATE HIGH BRAIN FUNCTION AND SOCIAL-EMOTIONAL/MINDFULNESS TECHNIQUES THAT DECREASE ANXIETY AND PROMOTE SELF-REGULATION DURING TESTING AS STAAR STUDENTS ATTEND GRADE-SPECIFIC SESSIONS FOR THREE MONTHS PRIOR TO STAAR TESTING TO ASSIST IN ACHIEVING OPTIMAL RESULTS DURING DAY TEST IS ADMINISTERED

DURING SUMMER, CHILDREN'S PROGRAMS PROMOTES CONTINUED ACADEMIC SUPPORT AND WORLD EXPOSURE THROUGH HANDS-ON ACTIVITIES AND FIELD TRIPS VIA SIX-WEEK DREAMER'S ACADEMY IT AIMS TO KEEP STUDENTS ON TRACK IN SCHOOL BY PROVIDING GRADE-SPECIFIC LESSON PLANS FOCUSED ON LITERACY, MATH, AND SCIENCE STUDENTS AS YOUNG AS KINDERGARTEN PARTICIPATE IN ON-CAMPUS COLLEGE TOURS TO PROMOTE COLLEGE READINESS AND EXPERIENCE ONCE IN LIFETIME FIELD TRIPS LIKE VISITING FOSSIL RIM WILDLIFE/SAFARI IN GLEN ROSE, TX BY ENSURING STUDENTS REMAIN ON TRACK ACADEMICALLY AND EXPOSING

THEM TO DIVERSE EXPERIENCES TRM IS SETTING FOUNDATION FOR PERSISTENCE NEEDED TO ACHIEVE ACADEMIC SUCCESS THROUGH ELEMENTARY, MIDDLE, HIGH SCHOOL AND POST-SECONDARY EDUCATION OUTCOMES 237 STUDENTS, 95% STUDENTS PROMOTED TO NEXT GRADE, 84% ELEMENTARY STUDENTS WHO PARTICIPATE

IN SUMMER PROGRAM AND COMPLETED PRE AND POST ASSESSMENTS DEMONSTRATED INCREASED KNOWLEDGE IN CAREER EXPLORATION AND POST SECONDARY EDUCATION 90% 5TH GRADE STUDENTS TRANSITIONED INTO BELIEVE & ACHIEVE PROGRAM

efil	e GR/	APHIC prii	nt - DO NO	T PROCESS	As Filed Data -			DLN: 93493120014049				
SCI		ULE A		Public (Charity Statu			ort	2017			
990I		• ••	Con	ipiete ii tile oi	4947(a)(1) nonexe	empt charitable	trust.	a section	ZUI /			
•		f the Treasury	▶ Infe	ormation abou	► Attach to Form ut Schedule A (Form <u>www.irs.g</u>			ictions is at	Open to Public Inspection			
Nam	e of th	he organiza ER MISSION IN						Employer identific	ation number			
								75-6055203				
	rt I				us (All organization : it is (For lines 1 thro			See instructions.				
1 1	organiz		•		•	5 ,	,	/A\/:\				
_		·		•	sociation of churches							
2	Ш				1)(A)(ii). (Attach Sch	•	• •					
3		·	•	·	vice organization desc			•				
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state										
5		(b)(1)(A)	(iv). (Comple	ete Part II)	t of a college or unive				ped in section 170			
6	Ш	•	·	_	governmental unit de							
7	✓	section 17	0(b)(1)(A)	(vi). (Complete				init or from the genera	al public described in			
8	Ш	A communi	ty trust desc	ribed in section	170(b)(1)(A)(vi)	(Complete Part I	Ι)					
9					escribed in 170(b)(1) ee instructions Enter				ege or university or a			
10		from activit	ies related to income and	its exempt fun unrelated busin	(1) more than 331/39 ctions—subject to cer ess taxable income (le implete Part III)	taın exceptions, a	and (2) no more	than 331/3% of its su				
11		An organiza	ition organize	ed and operated	exclusively to test fo	r public safety S	ee section 509	(a)(4).				
12		more public	ly supported:	organizations of	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se d	ction 509(a)(2). See section 509(a	e purposes of one or)(3). Check the box			
a		Type I. A so	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or componit or elect a major	ontrolled by its s	upported organi	zation(s), typically by				
b		Type II. A manageme	supporting on t of the sup	rganızatıon sup portıng organıza	ervised or controlled i							
С		Type III f	unctionally		and C. supporting organizatio ons) You must com				ted with, its			
d		Type III n functionally	on-function integrated	ally integrated The organization	d. A supporting organi n generally must satis	ization operated fy a distribution i	ın connection wi requirement and	th its supported orgar				
e		Check this	box if the org	anızatıon receiv	t IV, Sections A and ved a written determin	nation from the II		pe I, Type II, Type II	I functionally			
f	Enter			ion-functionally I organizations	integrated supporting	organization						
g				_	ipported organization(5)						
		Name of supp organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organic in your govern		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
						Yes	No					
Tota	l			ice, see the Ir		Cat No 11285		 Schedule A (Form 9				

Schedule A (Form 990 or 990-EZ) 2017

Page 2

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part

	III. If the organization fa	ails to qualify und	ler the tests liste	ed below, please	complete Part	III.)	
	ection A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	1,160,783	1,130,024	1,394,931	1,449,081	1,146,2	6,281,070
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 furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	1,160,783	1,130,024	1,394,931	1,449,081	1,146,2	51 6,281,070
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)						
6	Public support. Subtract line 5 from line 4						6,281,070
S	ection B. Total Support	•	'	'	•		
	Calendar year	(a)2013	(b) 2014	(c)2015	(d)2016	(e)2017	(f)Total
	(or fiscal year beginning in) ▶	` '			` '		
7	Amounts from line 4	1,160,783	1,130,024	1,394,931	1,449,081	1,146,2	251 6,281,070
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	179	525	145	174	9,3	10,329
9	Net income from unrelated business activities, whether or not the business is regularly carried on			11,154	3,929		15,083
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						6,306,482
12	Gross receipts from related activities,	etc (see instruction	ns)			12	
13	First five years. If the Form 990 is for check this box and stop here	-			•	. , . ,	<u>-</u>
	ection C. Computation of Public						
14	Public support percentage for 2017 (lii	ne 6, column (f) div	ided by line 11, co	olumn (f))		14	99 600 %
	Public support percentage for 2016 Sc			(//		15	99 730 %
	33 1/3% support test—2017. If the			n line 13 and line	14 is 33 1/3% or		
	and stop here. The organization qual 33 1/3% support test—2016. If the	fies as a publicly su	ipported organizat	ion			▶ ☑
	box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organizatio in Part VI how the organization meets	qualifies as a publit— 2017. If the organ meets the "facts-	cly supported orga anization did not c and-circumstances	anization heck a box on line s" test, check this	13, 16a, or 16b, box and stop her	and line 14 e. Explain	▶ □

h 10%-facts-and-circumstances test-2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,)	
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
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						
4	under section 513 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						
	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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
ь	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						
12	regularly carried on Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization
	check this box and stop here			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	016 Schedule A, I	Part III, line 17			18	
	331/3% support tests—2017. If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	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	1	İ	
2	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)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
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	3b		

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	3b	
c	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	3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b in Part I, answer (b) and (c) below	4a	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported		

				3.
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	-		
		3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below			
b	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		$\overline{}$	
	supervised by or in connection with its supported organizations	4b		
С	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		$\overline{}$	
		4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and			

			, ,	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below			
		4a		
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	4b		
С	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	4c		
5a	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)			

6	Oid 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.	6	
7	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)		

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"		
	complete Part I of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

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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.
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Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

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9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
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Pa	rt IV Supporting Organizations (continued)			-9
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year			
_		1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization			
5	ection C. Type II Supporting Organizations			
	cetion c. Type 11 Supporting Organizations		Yes	No
1	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)	1		
S	ection D. All Type III Supporting Organizations			
1	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?		Yes	No
		1		
2	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)			
		2		
3	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	3		
s	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct The organization satisfied the Activities Test. Complete line 2 below 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		ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	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	2a		
	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	2b		
3	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? <i>Provide details in Part VI</i> .	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

(B) Current Year

(optional)

Current Year

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5

7

8

1 2

3

4 5

6

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year Section B - Minimum Asset Amount 1 1a

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 **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors 2

(explain in detail in Part VI) 2 Acquisition indebtedness applicable to non-exempt use assets Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6

6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 8

3

7

Schedule A (Form 990 or 990-EZ) 2017

Section C - Distributable Amount

Minimum Asset Amount (add line 7 to line 6) Adjusted net income for prior year (from Section A, line 8, Column A)

Enter 85% of line 1

2

Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3

temporary reduction (see instructions)

instructions)

4 5 Income tax imposed in prior year

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

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

8	Distributions to attentive supported organizations to wh details in Part VI) See instructions			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			

details in Part VI) See instructions				
(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017		
	(i)	(i) (ii) Underdistributions		

9 Distributable amount for 2017 from Section C, line 6		
10 Line 8 amount divided by Line 9 amount		
Section E - Distribution Allocations (see instructions)	(iii) Distributable Amount for 2017	
Distributable amount for 2017 from Section C, line 6		
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions		
3 Excess distributions carryover, if any, to 2017		
a		
b From 2013		
c From 2014		_
d From 2015		

e From 2016. f Total of lines 3a through e

d Excess from 2016. . . . e Excess from 2017.

instructions)

g Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years **b** Applied to 2017 distributable amount

c Remainder Subtract lines 4a and 4b from 4		
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions		
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions		
7 Excess distributions carryover to 2018. Add lines 3 ₁ and 4c		

lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions		
7 Excess distributions carryover to 2018. Add lines 3 ₁ and 4c		
8 Breakdown of line 7		
a Excess from 2013		
b Excess from 2014		
c Excess from 2015		

Schedule A (Form 990 or 990-EZ) (2017)

Schedule A	hedule A (Form 990 or 990-EZ) 2017 Page 8						
Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)							
		Facts And Circumstances Test					
000 Schoo	dula A. Supplam	nental Information					
990 Sche	uule A, Suppleil	iental Information	1				
Ret	turn Reference	Explanation					
PART II. LI	NE 10	OTHER INCOME 0					

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

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

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.

DLN: 93493120014049 OMB No 1545-0047

> Open to Public Inspection

(Form 990)

▶ Attach to Form 990.

Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** TRINITY RIVER MISSION INC 75-6055203 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2017

Par	t III	Organizations Maintaining Col	lections of Art, Hi	istori	ical T	reas	ures, or	Other :	Similar Assets	(continued)
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)									
а		Public exhibition		d		Loa	n or excha	ange prog	rams	
b		Scholarly research		е		Oth	er			
С		Preservation for future generations								
4	Provi Part	ide a description of the organization's col XIII	lections and explain h	ow the	ey furtl	ner tl	ne organiz	ation's ex	empt purpose in	
5		ng the year, did the organization solicit o ts to be sold to raise funds rather than to							ılar	es 🗆 No
Pa	rt IV	Escrow and Custodial Arrange Complete if the organization answ X, line 21.		n 990	, Part	IV,	line 9, or	reporte	d an amount on	Form 990, Part
1a		e organization an agent, trustee, custodi ded on Form 990, Part X?	an or other intermedia	ary for	contri	butio	ns or othe	er assets r	not 🗌 Y	es 🗆 No
b	If "Y	es," explain the arrangement in Part XIII	and complete the foll	owing	table				Amount	
c	Begir	nning balance						1c		
d	Addıt	tions during the year						1d		
е	Dıstr	ibutions during the year						1e		
f	Endır	ng balance						1f		
2a	Did t	he organization include an amount on Fo	rm 990, Part X, line 2	1, for	escrow	orc	ustodial a	ccount lia	bility?	es 🗆 No
b	TE "∨.	es," explain the arrangement in Part XIII	Charle hara if the ave	nlanati	on had	. h.a	n nroudo	d in Dart V		
	irt V	Endowment Funds. Complete if								<u>·· </u>
FG	II L V	Endownient Funds. Complete in	(a)Current year		rior yea			ears back	(d)Three years back	(e)Four years back
1a	Beainr	ning of year balance	305,773	(0)		,631	(C) I WO Y	462,402	495,152	
	-	butions	5,004					325,907	467,330	
		vestment earnings, gains, and losses	,					,	,	,
		s or scholarships								
		expenditures for facilities								
٠		ograms	51,159		38	3,858		398,678	500,080	472,644
f	Admın	nistrative expenses								
g	End of	f year balance	304,018		350),773		389,631	462,402	495,152
2		ide the estimated percentage of the curred designated or quasi-endowment	ent year end balance (line 1	g, colu	mn (a)) held a	s		
a b		nanent endowment ►								
c	Tem	porarily restricted endowment > 100	000 %							
·		percentages on lines 2a, 2b, and 2c shou								
За		there endowment funds not in the posses	·	on that	t are h	eld a	nd admını	stered for	the	
	_	nization by							_	Yes No
	(i) u	nrelated organizations			•	•			<u> </u>	Sa(i) Yes
Ь		related organizations es" on 3a(ii), are the related organization		n Sche	 dule R	? .			3	a(ii) No 3b
4	Desc	ribe in Part XIII the intended uses of the	organization's endow	ment f	funds				_	
Pa	rt VI	Land, Buildings, and Equipme	nt.							
		Complete if the organization answ								
	Descr	ription of property (a) Cost or oth (investme		r other	basıs (other)	(c) Acci	umulated d	epreciation	(d) Book value
1 a	Land									
b	Buildir	ngs								
С	Leasel	hold improvements								
		ment					1			
	Other				1,7	43,09	4		1,643,767	99,327
Tota	al. Add	lines 1a through 1e (Column (d) must e	qual Form 990, Part X	, colur	mn (B)	, line	10(c))	1	>	99,327

Part VII	Investments—Other Securities. Complete if the o	rganıza	tion ansv	vered "Yes" on Form	990, Part IV, line 11b.
	See Form 990, Part X, line 12. (a) Description of security or category (including name of security)		(b) Book value		ethod of valuation d-of-year market value
	ıl derivatives	: :			
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(F)					
(H)					
	- (b) work and Son Rock V and (D) (as 42.)				
Part VIII	In (b) must equal Form 990, Part X, col (B) line 12) Investments—Program Related. Complete if the organization answered 'Yes' on Form				
	(a) Description of investment	(b) B	ook value		ethod of valuation d-of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col (B) line 13)	•			
Part IX	Other Assets. Complete if the organization answered 'Ye (a) Description	s on For	m 990, Pa	rt IV, line IId See For	(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Part X	omn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answ See Form 990, Part X, line 25.			rm 990, Part IV, line	
1. (1) Federal :	(a) Description of liability		(b) B	ook value	
DEFERRED F				600	
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	- (h)				
	on (b) must equal Form 990, Part X, col (B) line 25) or uncertain tax positions In Part XIII, provide the text of the	• footnote	e to the or	600 ganızatıon's financial st	tatements that reports the
	's liability for uncertain tax positions under FIN 48 (ASC 740)				

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2b b 2c c d 2d

2a

2a 2b

2c

2d

4a

4b

Explanation

Page 4

1,155,557

1,155,557

1,155,557

1,628,212

1,628,212

1.628.212

Schedule D (Form 990) 2017

2e

3

4c

5

2e e 3

3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b . 4a

4b

Add lines **4a** and **4b** 4c 5

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

b

c 5 Part XII

Net unrealized gains (losses) on investments

Schedule D (Form 990) 2017

Part XI

b

c

1 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities . . .

Other (Describe in Part XIII) d Add lines 2a through 2d

3

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . .

4 b

Add lines **4a** and **4b**

5

Return Reference

See Additional Data Table

Part XIII **Supplemental Information**

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

Page 5		Schedule D (Form 990) 2017				
	ormation (continued)	Part XIII Supplemental Info				
	Explanation	Return Reference				

Schedule D (Form 990) 2017

Additional Data

SCHEDULE D, PAGE 2, PART V.

LINE 4

Software ID:

Software Version: **EIN:** 75-6055203

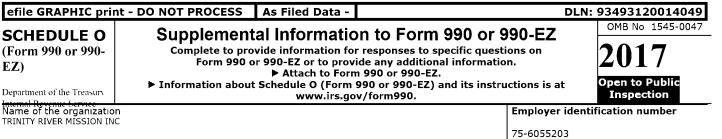
Name: TRINITY RIVER MISSION INC

AS OF JUNE 2018, TEMPORARILY RESTRICTED NET ASSETS WERE RESTRICTED FOR USE IN THE FOLLOWIN

G PROGRAMS CAPITAL 25,000 COMPUTER LAB 3,111 TIME RESTRICTED 275,907 TOTAL - 304,018

Supplemental Information	

Return Reference Explanation



990	Schedule	Ο,	Supplemental	Information

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4A	SUBMISSION OF REPORT CARDS, SAT/ACT TEST SCORE CONTACT IS COMPLETED IN SUMMER DURING ACHI EVERS ACADEMY PROGRAM THAT FOCUSES ON SCIENCE. LITERACY, MATH AND HEALTHY RELATIONSHIP CON CEPTS THROUGH HANDS-ON ACTIVITIES AND EXCITING FIELD TRIPS THROUGHOUT DALLAS/FORT WORTH D URING SCHOOL YEAR, STUDENTS HAVE ACCESS TO HOMEWORK ASSISTANCE THROUGH STUDY HALL AND TRM'S TUTOR POWER HOUR TO FULFILL COMMUNITY SERVICE HOUR REQUIREMENTS STUDENTS HAVE OPTION TO VOLUNTEER AS READING BUDDY TO TRM'S **.3RD GRADE STUDENTS, OPPORTUNITY THAT EACHES THEM L EADERSHIP SKILLS THROUGH UNIQUE VOLUNTEER EXPERIENCES OFFERED MONTHLY (E.G., PEROT MUSEUM, NORTH TEXAS FOOD BANK, URBAN FARMS, ECT.) BBA IMPLEMENT SKILLS-BASED TRAINING TO HELP STU DENTS SUCCEED IN SCHOOL, CAREER, AND LIFE, SUCH AS LEMONADE DAY, EXPERIENTIAL ENTREPRENEUR IAL PROGRAM ENGAGES YOUTH IN DESIGNING AND RUNNING THEIR OWN SMALL BUSINESS STUDENTS SET FINANCIAL GOALS, CREATE MARKETING PLAN, CRAFT THEIR BROWN AND AT A PROFIT PROGRAMS TO BUILD LEADERSHIP SKILLS GOALS, CREATE MARKETING PLAN, CRAFT THEIR BROWN AD AT A PROFIT PROGRAMS TO BUILD LEADERSHIP SKILLS GIVENS ON MISSION AND PALS (PREPARING ADOLESCENT BOYS TO LEAD A ND SUCCEED) THESE PROVIDE ADOLESCENT BOYS AND GIRLS WITH STRONG NETWORK OF SUPPORT WHILE B RIDGING OPPORTUNITY GAP AND EMPOWERING THEM TO STAY IN SCHOOL, BECOME PRODUCTIVE MEMBERS O F SOCIETY BY PROMOTING LEADSHIP, COMMUNITY, ACADEMIC EXCELLENCE AND BROTHER/SISTERHOOD SE SSIONS FOCUS ON SOCIAL JUSTICE, DECORUM, HEALTHY TO BE PAIRED WITH A MENTOR THROUGH MAPS (MENTORING AS PATHWAY TO SUCCESS) BASED ON COMMON INTERESTS, CARRER PATHS, AND EXTRACURRIC ULAR ACTIVITIES STUDENTS AND MENTORS ARE KEY ROLE MODELS FOR STUDENTS WHO ASSIST WITH PROBLEM-SOLVING, CRITICAL THINKING, AND ARE A SOURCE OF CONSISTENT SUPPORT MENTORS A LLOW STUDENTS TO HAVE DIVERSE EXPERIENCES THAT EXPOSE THEM TO ART, MUSIC, SPORTS, RECREATION, AND THE PEDUCATION, HEALTHY RELATIONSHIPS, STUDENTS IN HANDS-ON LESSONS THAT DEEP DIVE INTO TIELDS AS CODING, ROBOTICS, PHOTOGRAPHY, 3D PRINTING, AUGMENTE

Return

Reference	
FORM 990,	WITH PARENTS ON THE COLLEGE PROCESS, COLLEGE ESSAY WRITING, ASSISTANCE APPLYING FOR SCHOL
PAGE 2,	ARSHIPS TO SUPPLEMENT FINANCIAL COSTS STUDENTS ATTEND EXPLORATORY IN-AND OUT-OF-STATE COL LEGE
PART III,	CAMPUS VISITS THAT PARALLEL WHAT THEY WOULD ENCOUNTER AS PROSPECTIVE STUDENTS INCLUDI NG
LINE 4A	EXPLORATION OF DORMITORY LIVING, FINANCIAL AID OPTIONS, LECTURE HALLS, STUDENT LIFE, AN D CAMPUS
	TRADITIONS UPON SUCESSFUL COMPLETION OF ALL PROGRAMS COMPONENTS AND HIGH SCHOOL GRADUSTION,
	STUDENT IS ELIGIBLE TO RECEIVE 4,000 SCHOLARSHIP WHEN A STUDENT GRADUATES FRO M B&A , HE/SHE HAS
	ACADEMIC KNOWLEDGE, SKILLS, AND ATTITUDE TO THRIVE IN COLLEGE, CAREER, AND LIFE TO BE POSITIVE AND
	CONTRIBUTING MEMBER OF THEIR COMMUNITY OUTCOMES 248 STUDENTS, 38 MENTORS, 100% SENIORS
	GRADUATED, 98% PROMOTED TO NEXT GRADE LEVEL, 53% IMPROVED LITER ACY AND/OR MATH 15%, 73%
	NCREASED POSTIVE ATTITUDE/BELIEFS/PERCEPTIONS OF SELF AND FUTURE , 81% PREVIOUS GRADUATING CLASS

ENROLLED IN TWO OR FOUR YEAR COLLEGE AND COMPLETED FIRST S EMESTER

Explanation

990	Schedule	Ο,	Supplemental	Information

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4B	DEVIATION, ALL STUDENTS ASSESSED MONTHLY BY USING ISTATION ONLINE LITERACY ASSESSMENTS MONTHLY, STUDENTS GIVEN OPPORTUNITY TO CHOOSE A BOOK FROM TRM'S TAKE READING HOME LIBRARY STUDENT ARE ABLE TO TAKE THESE BOOKS HOME TO BUILD THEIR OWN PERSONAL LIBRARY AND SHARE JOY OF READING WITH THEIR FAMILY INDIVIDUAL LITERACY TUTORING FOR 3RD - 12TH GRADE STUDENTS TRM STAFF MATCHES EACH STUDENT WITH TRAINED VOLUNTEER TUTOR THEY MEET FOR ONE HOUR PER WEEK STUDENTS ARE ASSESSED USING ISTATION ONLINE LITERACY ASSESSMENT STUDENTS ARE PLACED IN SPECIFIC CURRICULUM THAT CORRELATES TO THEIR ASSESSMENT DURING ONE-HOUR SESSIONS, STUDENTS AND TUTOR COMPLETE STUDENT READ ALOUD! PICTION OR NON-FICTION STORY, A COMPREHENSIVE QUIZ, A WORKSHEET, VOCABULARY WORDS, AND JOURNALING ACTIVITY. ASSIST WITH MATH FUNDAMENTALS FOR KINDERGARTEN - 1ST GRADE STUDENTS ASSIGNED TO WEEKLY 45-MINUTE GRADE SPECIFIC CLASS FACILITATED BY STAFF USING HANDS-ON TEKS LESSON PLANS FOCUSED ON NUMBER RECOGNITION, SORTING AND GROUPING NUMBERS, TIME, MEASURING OBJECTS AND RECOGNITION OF BASIC PATTERNS STUDENTS ASSESSED THREE TIMES DURING SCHOOL YEAR (PRE. MID, AND POST-ASSESSMENTS) USING IMAGINE LEARNING INTERACTIVE ONLINE BLUEPRINT PROGRAM REASONING MIND ONLINE PROGRAM IMAGINE LEARNING FOR STUDENTS IN 2ND - 5TH STUDENTS ASSIGNED GRAD-SPECIFIC CLASS THAT MEETS 45 MINUTES TWICE PER WEEK IT TEACHES STUDENTS IMPORTANCE OF NOTE-TAKING, STARR (STATE OF TEXAS ASSESSMENTS OF ACADEMIC READINESS), INTERACTIVE COMPONENT ALLOWS DIFFICULTY OF EACH MATH PROBLEM TO INCREASE WITH EVERY CORRECT ANSWER AND DECREASE WITH EVERY CORRECT ANSWER AT END OF EACH SESSION, STUDENTS REWARDED WITH "MATH BUCKS" FOR EVERY CORRECT MATH PROBLEM TOA INCREASE WITH EVERY CORRECT ANSWER AND INCREASE WITH EVERY CORRECT MATH THAT THE DECKS" FOR EVERY CORRECT MATH PROBLEM THAT CAN BE USED TO PURCHASE FUN TOYS AND PRIZES AS AN INCENTIVE STUDENTS ARE ASSESSED THREE TIMES DURING THE YEAR BASED UPON ASSESSMENT ONCE SUPPORT IN MATH THAT HEADEN'S ONLINE MATCH TUTORING BY EDADE TO PURCHASE FUN TOYS AND PRIZES

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4C	FOR PROGRESS FOR STUDENTS BUT ALSO BEGINS TO TEACH IMPORTANCE OF ACCOUNTABILITY AT A YOUNG AGE UPON COMPLETION OF HOMEWORK, STUDENTS CAN PARTICIPATE IN STEAM (SCIENCE, TECHNOLOGY, ENGINEERING, ARTS, AND MATH) ZONE PROGRAM THAT ALLOWS STUDENTS TO LEARN SCIENCE AND ARTS BASED CONCEPTS THROUGH DAILY HANDS-ON EXPERIMENTS, ACTIVITIES, AND EVENTS TO PROMOTE PRO-SOCIAL BEHAVIOR AND SUPPORT STUDENTS IN GRADES 3RD - 5TH FOR ANXIETY EXPERIENCED DURING TEST TAKING, STUDENTS PARTICIPATE IN BE A STAAR BE A STAAR ASSISTS IN DEVELOPING POSITIVE STUDY HABITS, HEALTHY EATING HABITS THAT STIMULATE HIGH BRAIN FUNCTION AND SOCIAL-EMOTIONAL/MINDFULNESS TECHNIQUES THAT DECREASE ANXIETY AND PROMOTE SELF-REGULATION DURING TESTING AS STAAR STUDENTS ATTEND GRADE-SPECIFIC SESSIONS FOR THREE MONTHS PRIOR TO STAAR TESTING TO ASSIST IN ACHIEVING OPTIMAL RESULTS DURING DAY TEST IS ADMINISTERED DURING SUMMER, CHILDREN'S PROGRAMS PROMOTES CONTINUED ACADEMIC SUPPORT AND WORLD EXPOSURE THROUGH HANDS-ON ACTIVITIES AND FIELD TRIPS VIA SIX-WEEK DREAMER'S ACADEMY IT AIMS TO KEEP STUDENTS ON TRACK IN SCHOOL BY PROVIDING GRADE-SPECIFIC LESSON PLANS FOCUSED ON LITERACY, MATH, AND SCIENCE STUDENTS AS YOUNG AS KINDERGARTEN PARTICIPATE IN ON-CAMPUS COLLEGE TOURS TO PROMOTE COLLEGE READINESS AND EXPERIENCE ONCE IN LIFETIME FIELD TRIPS LIKE VISITING FOSSIL RIM WILDLIFE/SAFARI IN GLEN ROSE, TX BY ENSURING STUDENTS REMAIN ON TRACK ACADEMICALLY AND EXPOSING THEM TO DIVERSE EXPERIENCES TRM IS SETTING FOUNDATION FOR PERSISTENCE NEEDED TO ACHIEVE ACADEMIC SUCCESS THROUGH ELEMENTARY, MIDDLE, HIGH SCHOOL AND POST-SECONDARY EDUCATION OUTCOMES 237 STUDENTS, 95% STUDENTS PROMOTED TO NEXT GRADE, 84% ELEMENTARY DEMONSTRATED INCREASED KNOWLEDGE IN CAREER EXPLORATION AND POST SECONDARY EDUCATION 90% 5TH GRADE STUDENTS TRANSITIONED INTO BELIEVE & ACHIEVE PROGRAM

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4D	FAMILY CONNECTION PARENT PROGRAM THAT SUPPORTS CHILDREN'S PROGRAM, TUTOR POWER HOUR, AND BELIEVE & ACHIEVE PRIMARY GOALS ARE TO PROVIDE SKILLS AND OPPORTUNITIES FOR PARENTS TO BE EFFECTIVE ADVOCATES FOR THEIR CHILDREN AND FAMILIES, TO EMPOWER TRM PARENTS TO SUCCESSFULLY NAVIGATE AND ENGAGE WITH EDUCATIONAL SYSTEM AND PROVIDE TOOLS AND OPPORTUNITIES TO STRENGTHEN PARENT-CHILD RELATIONSHIP AS ADDITINAL SUPPORT TO TRM FAMILIES, FREE INDIVIDUAL AND FAMILIAL COUNSELING IS OFFERED THROUGHOUT WEEK THROUGH PASTORAL COUNSELING CENTER COUNSELING SESSIONS ASSIST FAMILIES TO NAVIGATE DIFFICULT AND UNFAMILIAR MENTAL AND EMOTIONAL EXPERIENCES AS DIVORCE, GRIEF AND LOSS, DOMESTIC VIOLENCE, SUICIDAL IDEATIONS, SEXUALITY, DEPRESSION, ETC TO FURTHER ASSIST PARENTS, PARENT UNIVERSITY SIX-WEEK SUMMER PROGRAM PROVIDES SUPPORT TO CONTINUING EDUCATION THROUGH COLLEGE CAMPUS TOURS FOR PARENTS, PROMOTES PRO-SOCIAL BEHAVIOR THROUGH YOGA AND MINDFULNESS, STRENGTHENS FAMILY BOUNDS THROUGH PARENTING CLASSES AND PROMOTING COMMUNITY THROUGH PARENT SOCIAL HOUR AND PICNICS PARENT UNIVERSITY INTENTIONALLY MIMICS TRM'S STUDENT PROGRAM TO ASSIST PARENTS IN UNDERSTANDING WHAT THEIR CHILDREN EXPERIENCE SO THEY TOO CAN BE STRONG MEANS OF SUPPORT TO THEIR CHILDREN AND THEMSELVES TRM FAMILIES SUPPORT TRM, AND THEMSELVES BY CONTRIBUTING A MINIMUM OF 60 VOLUNTEER HOURS WHICH ARE COMPLEMENTED THROUGH PARENTAL ENGAGEMENT AT THEIR CHILDREN AND THEM FAMILY, ATTENDING PERSONAL DEVELOPMENT WORKSHOPS AND PARTICIPATING IN MOMS ON A MISSION MOMS ON A MISSION SUPPORTS TRM BY PROVIDING AUTHENTIC MEXICAN CUISINE PROVIDED VIA CATERING SERVICE ALL PROCEEDS BENEFIT TRM PROGRAM

Return Explanation
Reference

LINE 11B

FORM 990,	THE FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTANT. THE COMPLETED FORM 990 IS REVIEWED BY THE
PAGE 6,	EXECUTIVE DIRECTOR, THE TREASURER AND/OR THE FINANCE COMMITTEE ONCE THE RETURN IS FILED A COPY IS
PART VI.	ELECTRONICALLY MAILED TO EACH MEMBER OF THE BOARD OF DIRECTORS

990 Schedule O, Supplemental Information

Return

Reference	
FORM 990,	THE ORGANIZATION HAS A CONFLICT OF INTEREST POLICY WHICH EMPLOYEES ARE REQUIRED TO COMPLY WITH
PAGE 6,	THE POLICY IS INCLUDED IN THE EMPLOYEE HANDBOOK ADDITIONALLY, IF THE ORGANIZATION BECOMES AWARE
PART VI,	THAT A BOARD MEMBER'S ACTIONS MAY GO AGAINST THE POLICY THEN IT IS FIRST ADDRESSED WITH THE
LINE 12C	EXECUTIVE COMMITTEE AND THEN TAKEN TO THE FULL BOARD FOR DISCUSSION AND FOR DECISIONS TO BE MADE

Explanation

Return Explanation
Reference

LINE 15A

FORM 990, COMPENSATION OF THE EXECUTIVE DIRECTOR IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS THE PAGE 6, ORGANIZATION USES A COMPENSATION SURVEY OF LOCAL NOT-FOR-PROFIT ORGANIZATIONS TO ESTABLISH THE PART VI. EXECUTIVE DIRECTOR'S COMPENSATION

Return Explanation Reference

FORM 990,	COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES IS REVIEWED AND APPROVED BY THE BOARD OF
PAGE 6,	DIRECTORS THE ORGANIZATION USES A COMPENSATION SURVEY OF LOCAL NOT-FOR-PROFIT ORGANIZATIONS TO
PART VI.	ESTABLISH THE OTHER OFFICERS- OR KEY EMPLOYEES' COMPENSATION

LINE 15B

Return Explanation
Reference

FORM 990, THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE PAGE 6, AVAILABLE TO THE PUBLIC UPON REQUEST PART VI, LINE 19

990 Schedule O, Supplemental Information