PUBLIC INSPECTION COPY

Return of Organization Exempt From Income Tax

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

Form 990 (2013)

Department of the Treasury Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public. <u>Information about Form 990 and its instructions is at www.irs.cov/form990</u> A For the 2013 calendar year, or tay us

Open to Public

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В	Chad appli	k # C Name of organization	ending L	UN 30,		ication number
г	- 14	THE TAOS COMMENTATY ROUNDARION THE		1 - Liighty	e idelia	ication number
 -	- Na	TOURDAY TOUR THE]		
Ē	ln:	enge Doling Business As		1	85-0	425147
<u> </u>	=-	Number and street (or P.O. ocx if mail is not delivered to street address)	Repm/suita	E Telepho		
Ē						737-9300
È		City or town, state or province, country, and ZIP or foreign postal code TAOS, NM 87571~1925		G Gross rece		4,057,729.
_	Del 			H(a) Is this	a group r	eturn
		F Name and address of principal officer ELIZABETH CRITTENDER 114 DES GEORGES LANE, TAOS, NM 87571	N PAL			9? Yes X No
T	Tax-	events to true V Follower Paris Paris				nduded? Yeş No
J	Web	exempt status: \blacktriangle 1501(c)(3) \blacksquare 1501(c) () \blacktriangleleft (inserting) \blacksquare 1947(a)(1) or site: \blacktriangleright WWW - TAOSCF . ORG	<u>L 」527</u>	₩"No,	'attach a	fist, (see instructions)
ĸ	Form	of people imple of V Corporation 11 T III		H(c) Group	exemptio	n number 🕨
Р	art i	Summary Other	L Year c	of formations	1994	o State of legal conficile; NM
٠	1	Briefly describe the organization's mission or most significant activities: THE FO	יבתותווס	PTANT' C	MTCC	TON TO MO
Activities & Governance		THE PURCHER PROPERTY OF LIFE FOR THE PROPER	TNT	ጀመ ፖለኒክ	LET TO T TO	TD0
Ë	2	in the organization discontinued its operations or disposed	d no soore f	tran 2504 of	TOMET	TES ME
Š	3	The country in the control of the content and the content of the c			- 1 1	
ಲ ಇ	4	Number of independent voting members of the governing body (Pod M. line 44)			1 "	13
88	5	The many of this distribution for all Calendar Abar Allus (beh. Allus de)				13
3	6	A A SECURE OF A SUBJECT OF A SU				
4ct	74	" TO THE TOWARD ROOM OF ALL ALL CANDILLE IN THE TOWARD			1_ 1	87
_	<u> </u>	n Net unrelated business taxable income from Form 990-T, line 34			7a	
			'	Prior Yea		0.
9	8	Contributions and grants (Part VIII, line 1h)	-		581.	Current Year
E	9	Program service revenue (Part VIII. line 2g)			682.	900,226.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			428.	113,188.
ш	11	Other revenue (Part VIII, column (A), lines 5, \$d, 8c, 9c, 10c, and 11e)	·-··-		547.	718,173.
	12	Total revenue - and lines a through 11 (must equal Part VIII, column (A), line 12)		1,189,		$\frac{-17.157.}{1.714.430}$
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		382,		1,714,430
	14	benients paid to or for members (Part IX, column (A), line 4)		J Q Z ,	0.	695,287.
ş	15	Salaries, other compensation, employee benefits (Part IX, column /a), lines 6 and		249,		270 200
Expenses	16a	r Professional fondraising fees (Part IX, column (A), line 11e)		277;	0.	270,280
×	b	' Total forfoldalsing expenses (Part IX, column (D), line 25) 🛌 1.2. R. 2.	l .	+ +	 -	
tri.	7.7	Other expenses (Part IX, column (A), lines 11s-11d, 11f-24a)		295,	754	406,690.
	18	rotal expenses. Applines 13-17 (must equal Part IX, column (A), line 25)		927,		1,372,257.
		Revenue less expenses, Subtrect line 18 from line 12	····	261,	218	
Net Assets or			Benin	nning of Curre	nt Van	342,173.
252 252 253	20	Total assets (Part X, line 16)	34911	7, <u>1</u> 42,	696	Find of Year 7,903,845.
걟	21	Total liabilities (Part X, line 26)	··-	2,725,		3,090,427.
	<u>22</u>	Net assets or fund balances, Subtract line 21 from line 20	-	4,417,		4,813,418.
		Signature Block	• :			
tr a	c pena	altiss of perigry, I geologie stat I have examined this return, including accompanying schedules and	d statement:	s, and so the b	est of my k	mowledge and Selfot it is
11.6,	COSTRI	at, and complete. Declaration of preparer (other than officer) is based on all information of which of	ргарагал фа	s any knowled	oe.	manada ana bonsi, it is
		Signature of otticer		·; T		
Sign Harr				Cate		
Here	•	ELIZABETH CRITTENDEN PALACIOS, EXECUTIVE Type or print name and citle	DIRE	CTOR	15	111/27
		Print Tune		1-		1 1
Paid		to a reserve a large and the second of the s	Date Ja		Cresk	PTIN
Prepa		Firm's name MOSS ADAMS LLP	<u>// [1</u>	1414	ur sett-employ <u>e</u> d	P01218925
Use C		CCC STORY		Firm's	EIN	91-0189318
	1	ALBUQUERQUE, NM 87110				
—— Ma∨⊹	the IF	3S discuss this return with the preserve in S.		P <u>ho</u> ne	na.5 <u>0</u> 5	-87 <u>8</u> -7200
832001	13-23	RS discuss this return with the preparer shown above? (see instructions)				X Yes No
		EF SCHEDILLE O. BOD ORGANIZER, see the separate instructions.				Form 990 (2013)

1	Is the organization described to continue 504 (A)(2) == 40.47(A)(4) (1)		Yes	No.
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
2	If "Yes." complete Schedule A	1	X	<u> </u>
3	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X,	 _
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for]		
4	public office? // "Yes," complete Schedule C, Part / Section 501(c)(3) propriettings. Did the organization and	3	ļ <u>.</u>	X
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		[
5	during the tax year? If "Yes," complete Schedule C, Part II	4	Ļ.,	X
·	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
6	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	ــــــــ	<u> </u>
٠	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to		1	1
7	provide advice on the distribution or investment of amounts in such runds or accounts? If "Yes," complete Schedule D. Part I	6	X	
,	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
8	the environment, historic land areas, or historic structures? # "Yes," complete Schedule D, Part II	7		X
•	The tile digalitzation maintain collections of works of art, historical treasures, or other similar assets? If tives it complete	1]]
9	Schedule D, Part III	_8		X
3	ella the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not fisted in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
10	If "Yes," complete Schedule D, Pert IV	9		*
10	bid the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	ļ		
11	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	.
• •	if the digalification is answer to any of the following questions is "Yes," then complete Schedule D. Parts VI, VII, VIII, IX, or X			
_	as applicable.	<u>.:</u>	33.	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? if "Yes," complete Schedule D,			
h	Part VI	11a	X	<u> </u>
ט	the digastization report an amount for investments - other securities in Part X, line 12 that is 55% or more of its total	Į		
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
¢	bid the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 187 If "Yes," complete Schedule D, Part VIII	<u>[1c</u>		X
a	the the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, fine 16? If "Yes," complete Schedule D, Part IX	11d		X
ŧ	bit the digardzation report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X	11e	X	
t	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule O, Part X	11f	X	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	[
	Schedule D, Parts XI and XII	12a		X
D	Was the organization included in consolidated, independent audited financial statements for the tax year?			
12	If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	1 2b	_X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u> X</u>
148	or agents of the United States?	14a		X
D	Did the organization have aggregate revenues or expenses of more than S10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		i	
15	or more? If "Yes," complete Schedule F, Parts I and IV	14b		_X_
10	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign protection? (V. V. V			
16	foreign organization? If 'Yes," complete Schedule F, Parts II and IV	15		_X_
10	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
17	or for foreign individuals? If "Yes," complete Schedule F. Parts III and IV	<u>16</u>		<u>X</u>
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX.			
18	column (A), fines 6 and 11e? # "Yes," complete Schedule G, Part I	17		<u> </u>
	bid the digarrization report more than \$15,000 total of fundreising event gross income and contributions on Part VIII. lines			
19	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
	bits the digenization report more than \$15,000 or gross income from garning activities on Part VIII, line 9e? If "Yes."	[
20s	complete Schedule G, Part III	19		<u> </u>
b	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H If 'Yes' to line 2Da, did the organization ettach a copy of its stuffed force in the control of the control	20a		X
	f 'Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	
		Form	aa∩ (2013)

Page 4 Part IV Checklist of Required Schedules (continued) Yes. Nο Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 government on Part IX, column (A), line 1? If "Yas," complete Schedule I, Parts I and II Х 21 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, 22 columл (A), line 27 jf "Yes," complete Schedule I, Parts Land III Х 22 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," complete Х 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 complete Schedule K. If "No", go to line 25a 24a X b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as aл "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I X 25ab Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Fart I X 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or 26 former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II X 26 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 of any of these persons? If "Yes," complete Schedule L, Part III 27 Х Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? # "Yes," complete Schedule L, Part IV X b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV X 28b An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV X 28c Did the organization receive more than \$25,000 in non-cash contributions? if "Yes," complete Schedule M 29 Х 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 contributions? If "Yes," complete Schedule M 30 Х 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Х 31 Did the organization self, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Schedule N, Part II Х 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Х 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 Х 34 35a Did the organization have a controlled entity within the meaning of section \$12(b)(13)? Х 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? ff "Yes," complete Schedule R, Part V, line 2 Х 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

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Х

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Note. All Form 990 filers are required to complete Schedule O

Statements Regarding Other IRS Filings and Tax Compliance Part V

	Check if Schedule O contains a response or note to any line in this Part V			\neg
		······	T.V	T 4.
1a	Enter the number reported in Box 3 of Form 1096. Enter 0- if not applicable		Yes	No
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	H : .	ļ	
¢		100	,	
	(gambling) winnings to prize winners?	4	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1c	 -^- -	
	filed for the calendar year ending with as within the way and built		50	
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		X	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<u>2</u> b		
За	UIQ IDB Officialization have unrelated business gross income as \$1,000 presses at the expension of	_	· ·	X
ь	"Yes." has it filed a Form 990-T for this year? WANA A - 12- 25	3a	ļ. 	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	3b		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	100		x
þ	If "Yes," enter the name of the foreign country:	<u>4a</u>		Λ
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	Page!	: : ; * *	
5a	Was the progration a party to a prohibited tay shelter transaction at any time during the tay was 0	5a	-	X
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	58b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8686-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	- 30		_
	any contributions that were not tax deductible as charitable contributions?	6 a		x
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	.00	-	
	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 .	Х	
þ	ਿੱ Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
c	Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required		- -	
	to file Form 8282?	70		X
	If "Yes," indicate the numb≑r of Forms 8282 filed during the year 7d			
ė	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, girplanes, or other vehicles, did the organization file a Form 1098-07	7h	1	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	\Box	. "	
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		X
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<u>X</u>
10	Section 501(c)(7) organizations. Enter:	[;]	;; ˈ]	
- L	Initiation fees and capital contributions included on Part VIII, line 12			
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter:			[::: ²]
			1	
b	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against			. :: ::
_	Structure due on recominant from those 1			
I2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in fieu of Form 1041?	1.171	44	
ь	If "Voc " onto the amount of the amount of the amount of the same	12a		$\overline{}$
(3	Section 501(c)(29) qualified nonprofit health insurance issuers.	. :4	ंा	4 . [
a	Is the organization licensed to issue qualified health plans in more than one state?	40=		
	Note. See the instructions for additional information the organization must report on Schedule O.	13a		
þ	Sinter the amount of reserves the organization is required to maintain by the states in which the			.:::[
	organization is licensed to issue qualified health plans		्र	
c	Enter the amount of reserves on hand 13c		3×1	
14 a	Did the organization receive any payments for indoor tanking services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		
			990 (2013)

832005 13-25-13

Form 990 (2013) THE TAOS COMMUNITY FOUNDATION, INC. 85-0425147 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management			X
	Albert At Governing Body and Management			
ſ.	Enter the prime of union manch and the		Yes	No
· (A	Enter the number of voting members of the governing body at the end of the tax year 13		· :	
	If there are material differences in voting rights among members of the governing body, or if the governing	· · · · ·		
ь	body delegated broad authority to an executive committee or similar committee, explain in Schedule C.		::::	100
2	Enter the number of voting members included in line 1a, above, who are independent 1b 13			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		34,34	
3	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
,	of officers, directors, or trustees, or key employees to a management company or other person?	3		<u>X</u>
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
_	Did the organization become aware during the year of a significent diversion of the organization's assets?	5		X
6 7a	Did the organization have members or stockholders?	6		X
72	The state of the s			
L	rnore members of the governing body?	7a		X
п	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
^	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		<u>:</u>	
2	The governing body?	8a	X	
Δ.	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
300	organization's mailing address? K 'Yes " provide the names and addresses in Schedule O	9		Х
366	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code I			
10-	Did the energiantian beautiful about a second		Yeş	No
ioa L	Did the organization have local chapters, branches, or affiliates?	10a		X
-	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
110	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
i iai	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<u>11a </u>	X	
D 400	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		<u> </u>	:
122	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
-	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	.12b	X	
Ŀ	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
13	in Schedule O how this was done	12ç	X	
14	Oid the organization have a written whistleblower policy?	13	X	
15	Did the organization have a written document retention and destruction policy?	14	X	
1.0	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?			<i>-111</i>
h	The organization's CEO, Executive Director, or top management official Other officers or key applicance of the organization	15a	X	
-	Other officers or key employees of the organization If 'Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b	X	
16s	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		.,	2.7
	Annuality 191 1 1 1 1			
b	taxable entity during the year? If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a		Х
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	4.		. :
	exempt status with respect to such arrangements?			<u> </u>
ect	ion C. Disclosure	1 65		
17	List the states with which a copy of this Form 990 is required to be filled ►NM			
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) ave	.111-1		
-	for public inspection, Indicate how you made these available. Check all that apply,	aldella		
	1V 5			
19	La Own website La Another's website La Upon request La Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	inace:	iol.	
	statements available to the public during the fax year.	mazne:	레	
80	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	n- 🌬		
	THOMAS BUCKLEY - (575)737-9300	1.		
	PO BOX 1925, TAOS, NM 87571-1925			

Form 990 (2013)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- ◆ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, Effect 0 in columns (D), (€), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

L. Check this box if neither the organizat (A)	(B)			- (0	C)			(D)	(E)	(F)
Name and Title	Average	_ر ا		Pos	ition	1		Reportable	Reportable	Estimated
	hours per	DOM:	. uile	88 pe	רםפז	than (spect	an:	compensation	compensation	amount of
	week	-	091ar	izad I	iressa	oc/tm.gr	tee;	from	from related	other
	(list any	hidrydual Inister or deschar						the	organizations	compensation
	hours for related	Ē	影			TE SE		organization	(W-2/1099-MISC)	from the
	organizations	a a	rstilutional Ir,etee	ŀ	22			(W-2/1099-MISC)		organization
	below	쿌	ilizine.	.	Ę	138	<u>_</u>			and related organizations
	Jine)	撞	1	Ollica	аборі ста йед	Holicel cumponescan employee	:01.7AF			Organizations
LAURIE MUTCHBLL-DUNN	0.50									
CHAIR		X		х				0.	0.	0.
BILLY KNEGRT	0.50									
VICE CHAIR		x		Х				0.	0.	0.
ANDREA SZEKERES	0.50							· ··		
SECRETARY	_	Х		х				0.	0.	0.
ROBERT SHAW	0.50		i				_			
CRÉASURER		X		Х			:	0.	0.	0.
COHN HAMILTON	0.50					Ī				
BOARD MEMBER		Х						0.	0.	0.
GEORGE JARAMILLO	0.50									
BOARD MEMBER	_	X						0.	0.	0.
SCOTT MCADAMS	0.50									
SOARD MEMBER		Х				L.		0.	0.	0.
ELEANOR ROWERO	0.50								· <u>·</u> ·	
BCARD MEMBER		Х						0.	0.	0.
WANCA LICERO	0.50									
BOARD MEMBER		Х						0.	0.	0.
BAN MADDOX	0.50							,		
BOARD Y3MBER		X						0.	0.	0.
BETTY BACKER	0.50									
BOARD MEYBER		Х						0.	0.	0.
DAVE LAMBERT	0.50									
BOARD MEMBER		X			i			0.,	0.	0.
BT COLEMAN	0.50		1		Į			i		
BCATO MEMBER	[X	_[_				0.	0.	0.
ELIZABETH CRITTENDEN-PALACIOS	40.00		ŀ							
EXECUTIVE DIRECTOR		_	_	X	_		_	78,112.	0.,	16,404.
	<u> </u>								ĺ	
	- -			\dashv	\dashv					
	<u> </u>									
<u> </u>		_			_	_	_			·

Form 990 (2013)

			Check if Schedule O cont	t <u>ains a</u> resp	oonse	or note to any iir	ie in th is Part VIII			
. :	· ·						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenus	(D) Revenue excluded from tax under sections 5:2 - 5:4
at s	t			L	1a			La Arrivo Alba		Land.
			Membership dues		16					
2,5		c	Fundraising events		1¢	53,077.				
# 2		d	Related organizations	· ·	idi	"				
% 5			Government grants (contribut)		le					
800			All other contributions, gifts, gran		. _					40000000000000000000000000000000000000
			similar amounts not included abor		ff	847,149.				
Ξö	!	_	Noncash contributions included in lines		<u> </u>	81,384.		Land Property		
Contributions, Glfts, Grants and Other Similar Amounts							DOD 205			
C) III		<u>'''</u>	Total, Add lines 1a-1f				900,226.	::	· · · ·	:
	_		ADMINISTRATION FRES			Business Code				7 77
ice	2	_				541990	113,188.	113,188,		
Program Service Rovonue		Ь				<u> </u>				
n S		C	 -					· · · · · · · · · · · · · · · · · · ·	l	
7.87 70V		d								
9		8								
ď		f	All other program service reve	nue						
		٩.	Total. Add lines 2e-2f				113,188.		·	
	3		lavestment income (including							
			other similar amounts)			>	145,203.			145,203.
į	4		Income from investment of tax	c-exempt b	ond p	roceeds 🕨				
	5		Royalties						·	
			•	(i) Re		(ii) Personal				
	6	a	Gress rents			757 1 G1 3 G1 4 G1				
			Less: rental expenses	 -						
			Rental income or (loss)							
			Net watel income as ileas?	<u> </u>		1		· · · · · · · · · · · ·		** :** *
	,	3	Gross amount from sales of	(i) Secur		(ii) Other				
			assets other than inventory	2,873,	510.	4,972.				
		Ь	Less: cost or other basis							
			and sales expenses	2,293,		12,000.				
			Gain or (loss)		998.	-7,028,				
			Net gain or (loss)			<u>▶_</u>	572,970.			572,970_
익	8	а	Gross income from fundraising	g events (n	ot			The second		. •
				,077. of						
2			contributions reported on line							
Other Reven			Part IV, line 18		a	20,330.				
ξi	- 1	Ь	Less: direct expenses		Ь	37,4B7.				
٦		c	Net income or (loss) from fund	raising eve	ents.	>	17,157.			-17,157.
ļ	9 :	æ	Gross income from gaming ac	tivities, Se	е			7 St. 28 St		
			Para IV, Sine 19		а					
	- 1	ь	Less: direct expenses		ь					
			Net income or (loss) from gami			b				
			Gross sales of inventory, less t							· · · .
			and allowances		⇒					
		ь	Less: cost of goods sold							
			Net income or floss) from sales						<u> </u>	
Ì		_	Miscellangous Revenue			Business Code				
}	11 :	<u>-</u>				egeanness Gode	<u> </u>	· · · · · · · · · · · · · · · · · · ·		<u> </u>
1		ь				 -				
		~	· 							
		~	All other revenue			 	<u></u>	<u> </u>		
			All other revenue							·········
						······ 🟲	9 8/4 450	220.20	************	
232005 10-29-	12		Total revenue. See instructions.	· · · · · · · · · · · · · · · · · · ·		>]	1,714,430.	113,138.	0,	701,016,
10-29-	13									Form 990 (2013)

Part IX Statement of Functional Expenses

	ion 501/c)(3) and 501/c)(4) organizations must com	plete all columns. All oth	e <u>r organizations must co</u>	mplete columa (A)	
	Check if Schedule O contains a respon	nse or <u>note</u> to any fine in	কাঁs Part IX		
Dо 75,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(Č) Management and general expenses	(D) Fundraising expenses
٦	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	629,015.	629,015.		
2	Grants and other assistance to individuals in				replievoluse Deco
_	the United States, See Part IV, line 22	66,272.	66,272.		
3	Grants and other assistance to governments,		ļ		
	organizations, and individuals outside the				
	United States, See Part IV, lines 15 and 16	·			
4	Benefits paid to or for members	- <u>-</u>		W 1800 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
5	Compensation of current officers, directors,	3 -			
	trustees, and key employees	9 <u>5,</u> 522.	88,011.	4,776.	2,735
6	Compensation not included above, to disqualified				1
	persons (as defined under section 4958(f)(1)) and				
-	persons described in section 4958(c)(3)(B)	104 000			<u>,_</u>
7	Other salaries and wages	124,086.	115,278.	6,204.	2,604.
8	Pension plan accruais and contributions (include	2			
	section 401(k) and 403(b) employer contributions)	2,552.	2,367.	128.	5 7.
9	Other employee benefits	31,991.	29,672.	<u>1,599.</u>	720.
10	Payroll taxes	16,129.	14,960.	806.	363.
11	Fees for services (non-employees):				
a	Management	. <u>-</u> .	<u></u> .		
b	Legal		<u></u>	··	
¢	Accounting	21,540.	. <u></u>	21,540.	
d	Lobbying	<u> </u>			"
	Professional fundraising services, See Part IV, line 17		<u> </u>		
f	Investment management fees	21,389.	21,389.		
9	Officer. (If line 11g amount exceeds 19% of line 25,				
	column (A) amount, iisaline 11g expenses on Sch O.)	63 <u>,27</u> 9.	61,558.	1,207.	514.
12	Advertising and promotion	28,788.	26,633.	1,437.	718.
13	Office expenses	27,694.	24,206.	1,448.	2,040.
14	Information technology				
15	Royalties				
16	Occupancy	42,674.	41,162.	1,512.	" -
17	Travel	31,963.	29,980.		1,983.
18	Payments of travel or entertainment expenses				· · · ·
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings			_	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,966.	4,966.		
23	lnsurance	701.	650.	51.	
24	Other expenses, itemize expenses not enverged 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 3.)				
а	OTHER FEES	155,193.		155,193.	<u> </u>
b	DUES AND SUBSCRIPTIONS	4,284.	3,253.		1,031.
¢	BAD DEBT EXEPENSE	2,915.	+,2001	2,915.	1,031+
d	EDUCATION AND TRAINING	915.	694.	133.	88.
ė	All offier expenses	389.	85.	304.	90+
25	Total functional expenses. Add lines 1 through 24e	1,372,257.	1,160,151.	199,253.	12,853.
26	Joint costs. Complete this line only if the organization				
	reported in octurnin (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Cheb4 here ▶ if following 50P 20-2 (ASC 958-725)				
832010	01654 here				Enrm 990 (2

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Check Schedule Contains a response or note to any line in this Part X Cities			Charles Silver					<u> </u>
1 Cash - non-interest-bearing Find of year Find of year			Check if Schedule O contains a response or no	te to any line in th	is Part X,			
1 Cash - non-interest-bearing 71, 233, 1 85, 361, 2 397, 748, 2 397, 748, 2 397, 748, 3 2 397, 748, 3 3 20, 000. 4 4 100, 1 4 100, 1 4 100, 1 5 5 5 5 5 5 5 5 5	_					(A)		
2 Savings and temporary cash investments 529, 334. 2 397, 748.		1					1 ,	
Accounts receivable, net		2	Savings and temporary cash investments			529 334	 -	
5 Content and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4388(N)), persona described in section 4588(N)S, and contributing employees and seprencing organizations of Section 507(6)\$ voluntary employees beneficiary organizations (see Instr). Complete Part II of Sch L 7 Notes and loans received deserved charges 46,775, 8 34,775. 8 Prepaid expenses and deserved charges 46,775, 8 34,775. 9 Prepaid expenses and deserved charges 46,775, 8 34,775. 10a Land, buildings, and equipment cost or other basis. Complete Part IV of Schadule D 10a 61,998. 10b Land, buildings, and equipment cost or other basis. Complete Part IV of Schadule D 10a 61,998. 10 Lands, buildings, and equipment cost or other basis. Complete Part IV of Schadule D 10a 61,998. 10 Lands, buildings, and equipment cost or other basis. Complete Part IV of Schadule D 10a 61,998. 11 Investments - publicly traded securities 10a 10a		3	medges and grants receivable, het			9.335.		
tustess, key employee, and highest componented employees. Complete Part II of Schedule L 6. Lears and other receivables from other disqualified persons (as defined under section 4958(N)1), persons described in section 4958(S)(S)KB, and contributing employers and approaching organizations of section SOI (x)§5 youtharay employers and approaching organizations of section SOI (x)§5 youtharay employers and approaching organizations of section SOI (x)§5 youtharay employers and approaching organizations of section SOI (x)§5 youtharay employees' ceneficiary urganizations (see instr). Complete Part II of Sch L Notes and loans receivable, net 8. Inventories for sale or use 9 33,715. 10a Land, buildings, and equipment; cost or other basis. Complete Part V of Schedule D 10a 61,998. 1 Less accumulated depreciation 1 to less accumulated accumulated in the second		4	Accounts receivable, net				<u> </u>	
trustiess, key employees, and highest compensated employees. Complete Part I of Schedule 1 6 Loans and other receivables from other disqualified persons (as defined under section 4358(N)N), persons described in section 4958(s)(S)N), and contributing employees and sponsoring organizations of section 501 (S)N voluntary employees thereficiary urganizations (see instr). Complete Part II of Sch L 6 Note and loans meanizable, net 17 Notes and loans meanizable, net 18 Inventories for sale or use 19 Prepaid expenses and deferred charges 190 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule 0 10a Loft, buildings, and depreciation 10a 61, 998. 10b Less: accumulated depreciation 10b 47, 354. 19,610. 10c 14,644. 11 Investments - publicly traded securities 10b Less: accumulated depreciation 10b 47,354. 19,610. 10c 14,644. 11 Investments - propriate Part IV, line 11 12. 12 Investments - coher securities. See Part IV, line 11 12. 13 Investments - propriate Part IV, line 11 13. Interngible assets 15 Other assets. See Part IV, line 11 141,709. 15 165,271. 14 Interngible assets 15 Part IV, line 11 141,709. 15 165,271. 15 Total assets. See Part IV, line 11 141,709. 15 165,271. 16 Total assets. See Part IV, line 11 141,709. 15 165,271. 17 Accounts payable and accrued expenses 2,5,502. 17 12,237. 18 Grants payable 2 2,502. 17 12,337. 19 Deferred revenus 2 73,320. 18 67,651. 19 Deferred revenus 2 21. 20 Tax-exempt bond liabilities 21 Escrow or custodial accourt liability. Complete Part IV of Schedule D 21. 22 Loans and other psysble to ourrent and former officers, directors, sustees, key employees, highest compensated employees, and disqualified persons. Complete Ties 27 through 28 and lines 33 and 34. 27 Organizations that follow SFAS 117 (ASC 958), check here 12 20 21. 28 Econd mortgages and notes psysble to unrelated third parties 21. 29 Total flabilities and cinculated on lines 17.24). Complete Part X of Schedule 1 21. 20 Total flabilities and cinculated on lines 17.24. Compl		5	Loans and other receivables from current and fo	omner officers, dire	ectors.		 	100.
Part II of Schedule L 6 Lears and other receivables from other disqualified persons (as defined under section 438(0)(1)), persona described in section 4988(0)(3)(8), and contributing employers and sponsoring organizations of section 501(e)(8) voluntary employers beneficiary organizations of section 501(e)(8) voluntary employers and sponsoring organizations of section 501(e)(8) voluntary employers and sponsoring organizations of section 501(e)(8) voluntary employers tenderically organizations of section 501(e)(8) voluntary employers and sponsoring organizations of section 501(e)(8) voluntary employers (personal sponsoring organization or use of section 501(e)(8) voluntary employers (piloty traded securities 102 to 102			trustees, key employees, and highest compensi	ated employees, C	Complete			
Section and other receivables from other disqualified persons is defined under seatch ASSB(R)(R) persons described in section ASSB(R)(R) persons described in the persons des		ŀ	Part II of Schedule L				 	<u> </u>
section 455(g)(11), persons described in section 495(c)(5/kg), and contributing employees and approximations of section 501 (s)(g) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L.		6	Loans and other receivables from other disquali	fied persons (as d	efined under	Art are discounted	-	
## Propagation of the part of			section 4958(f)(1)), persons described in section	t 4958(c)(3)(B), and	d contributing			
employees' beneficiary urganizations (see instr). Complete Part II of Sch L 6 8 Inventories for asle or use 8 Investments republicly traded securities 10 10 10 10 10 10 10 10 10 1			employers and sponsoring organizations of sect	tion 501(c)(9) volur	ntary		::::	
8 Prepaid expenses and deterred charges 9 Prepaid expenses and deterred charges 10 Land, buildings, and equipment; cost or other basis. Complete Part V of Schedule D 10 Land, buildings, and equipment; cost or other basis. Complete Part V of Schedule D 10 Land, buildings, and equipment; cost or other basis. Complete Part V of Schedule D 10 Land, buildings, and equipment; cost or other basis. Complete Part V of Schedule D 10 Land, buildings, and equipment; cost or other basis. Complete Part V of Schedule D 10 Land, buildings, and equipment; cost or other basis. Complete Part V of Schedule D 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intrangible assets 15 Other assets. See Part IV, line 11 15 Other assets. See Part IV, line 11 16 Total assets. See Part IV, line 11 17 Accounts payable and accrued expenses 17 Accounts payable and accrued expenses 17 Accounts payable and accrued expenses 18 Grants payable and accrued expenses 19 Deferred revenus 19 Deferred revenus 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Losans and other psyables to current and former officers, directors, nustees, law amplyoes, injense compensated employees, and disqualified persons. 20 Complete Part IV of Schedule D 21 Complete Part IV of Schedule D 22 Secured mortgages and notes payable to unrelated third parties 23 Complete Part IV of Schedule D 24 Unsecured notes and losans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here 26 Total liabilities (including federal income tax, payables to related third parties 26 Permanently restricted net assets 27 (27 (27 (27 (27 (27 (27 (27 (27 (27 (节		employees' beneficiary organizations (see instr).	Complete Part III	of Sch L		6	
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100	4	8	inventories for sale or use			46,775.		34.775.
Description		I -	rrepaid expenses and deferred charges				9	
b Less: accumulated depreciation 10b 47,354 19,610 10c 14,644 11 Investments - publicly traded securities 6,324,600 11 7,182,231 12 12 13 15 15 15 15 15 15 15		10a]				
11		١.			61,998.			
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13 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 94) 17 Accounts payable and accrued expenses 18 Carants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, custees, key amployees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 20 Capital stock or first principal, or current funds 30 Capital stock or first principal, or current funds 31 Capital stock or first principal, or current funds 32 Retained sarrings, endowment, accumulated income, or other funds 34 Total lies assets or fund belances 44 4.417, 180. 33 4,813,418.		l	Investments - publicly traded securities			6,324,600.	11	
14 Intangible assets Other assets. See Part IV, line 11 15 Other assets. Add lines 1 through 15 fmust equal line 34) 17 Accounts payable and accrued expenses 2,502, 17, 12,237. 18 Grants payable Orants payable and accrued expenses 2,502, 17, 12,237. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total (liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here 27 Unrestricted net assets 2,924,720, 28 962,779. 28 Temporarily restricted net assets 2,924,720, 28 962,779. 29 Permanently restricted net assets 2,924,720, 28 962,779. 20 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 27 through 24. 30 Capital stock or first principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 4,417,180, 33 4,813,418.			investments - other securities. See Part IV, line 1	11			12	
16 Total assets. See Part IV, sine 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 7. 142,696. 16 7. 7,903,845. 7. 142,696. 16 7. 7,903,845. 7. 12,237. 18 Grants payable and accrued expenses 2. 502. 17 1. 12,237. 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total flasbilities. Add lines 17 through 25 27 Organizations that follow SFAS 117 (ASC 958), check here ■			Investments - program-related. See Part IV, line	11			13	
16 Total assets. See Part IV, sine 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 2			artiangible assets				14	
10 Otal assets Add lines Through 15 fmust equal line 34 7,142,696 16 7,903,845 17 Accounts payable and accrued expenses 2,502 17 12,337 18 Grants payable 320 18 67,651 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability, Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key amployees, highest compensated employees, aird disqualified persons. Complete Part IV of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 2,649,694 25 3,010,539 26 Total liabilities. Add lines 17 through 25 2,725,516 26 3,090,427 27 Organizations that follow SFAS 117 (ASC 958), check here]	Other assets. See Part IV, line 11					165,271.
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20 1 1 1 1 2 2 2 2 2 2			Deferred			73,320.	18	67,651.
21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here			Tax axomet hood to be the				. 19	
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33 Total fier assets of fund balances 4,417,180. 38 4,813,418.	eg	30	Capital stock or trust principal, or current funds				$\overline{}$	
33 Total fier assets of fund balances 4,417,180. 38 4,813,418.	498	31	Paid-in or capital surplus, or land, building, or equ	uipment fund	1			
33 Total fier assets of fund balances 4,417,180. 38 4,813,418.	늅	32	Retained earnings, endowment, accumulated inc	ome, or other fund	ds :			
	-	33	Total net assets or fund balances		ſ	4,417,180.		4,813,418.
7,142,696.[34] 7,903,845.		34	rousi itaprimes and net assets/fund balances	<u> </u>	<u></u>	7,142,696.	34	7,903,845.

Both consolidated and separate basis

Farm **990** (2013)

3а

2c X

X

consolidated basis, or both:

Separate basis

[X] Consolidated basis

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.

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

b. If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

review, or compilation of its financial statements and selection of an independent accountant?

Act and OMB Circular A-133?

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Traseury

Internal Royacue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

2013

Open to Public Inspection

Name of the organization

TAOS COMMENTES ROTINDATION THE

Part I	Reason	for Public Char	rity Status (All organi	<u>r QUNU.</u> zations cau	ATTON et comple	, INC	4 \ Coo inn	to sette on o	<u>. 8</u>	5-0425147
Part I he orga 1	nization is not A church, or A school de A hospitat of A medical recity, and sta An organizat section 170 A federal, st An organizat section 170 A communit An organizat activities relations and See section An organizat fincome and See section An organizat fincome public describes th a	a private foundation or vention of churche scribed in section 1 r a cooperative hospesearch organization te: tion operated for the Nb)(1)(A)(iv). (Completed in that normally received that normally received the tion that normally received to its exempt furnition that normally received to its exempt furnition organized and organized and organized and organized type of supporting this box, I certify the this box, I certify the	nent or governmental uniceives a substantial part sete Part II.) section 170(b)(1)(A)(vi). ceives: (1) more than 33 tractions - subject to certal axable income (less section Part III.) perated exclusively to teaperated exclusively for tractions described in sections described in sections described in completive II c III Tat the organization is not	zations mu through 1 ches described i described i with a hos niversity ov t described of its suppi (Complete 1/3% of its ion 511 tax at for publi be benefit o on 509(a)(1 ots lines 11 type III - Fur controlled	ist completed in section in section pital description and or operation in section at from a support from supp	te this par only one be ection 17(b)(1) ibed in some or 170(b)(government) on contrib on contrib on contrib on contrib on contrib on contrib on contrib on some sinesses a fee section of 509(a)(2) 11h. integrated	t.) See instruct.) (A)(iii). (A)(iii	Month (Anti) Inertial unit Inertial unit Infrom the embership 394 of its Introduction 509(Introducti	ii). Enter describe general p fees, and support fi iization a out the p a)(3). Choose IR - Nor puelified p	ed in public described in Id grass receipts from from grass investment after June 30, 1975. purposes of one or eck the box that n-functionally integrated persons other than
e f g	foundation of If the organia supporting of Since Augus (i) A perso	hanagers and other to zation received a writh riganization, check to at 17, 2006, has the o on who directly or inc	at the organization is not than one or more publicly tten determination from t his box organization accepted an directly controls, either al	controlled visupported file IRS that multiple in gift or co one or toge	directly or d organization it is a Type entribution wither with	rindirectly tions desc be I, Type from any persons d	by one or ribed in se II, or Type of the folio escribed in	more disq ection 509(III ewing pers n (i) and (ii	uelified p (a)(1) or s ons? û befow,	persons other than section 509(a)(2).
	(ii) A family (iii) A 35% of Provide the f	/ member of a perso controlled entity of a	upported organization? n described in (i) above? person described in (i) o about the supported organization	r (ii) above ganization(; (iv) is the c	? s). organization	(v) Big yo	u notify the		the	11g(ii)
org	parization 		(described on lines 1-9 above or IRG section (see instructions))	in cci. (i) li: governing (Yes			tion in col. r support?	(i) organiz U.S Yes	ed in the	support
otal										

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

332021 09-25-13

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

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

Se	ction A. Public Support					- -	_
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(e) 2011	(40.004.0	1.1.00=0	
	Gifts, grants, contributions, and		10,2010	(6) 2011	(d) 2012	(e) 2013	(f) Total
	membership fees received. (Do not	i				ŀ	
	include any "unusual grants.")	1648588.	1464661.	807 804	874,581.	900,226.	5695860.
2	Tax revenues levied for the organ-			007,0042	014,301.	300,220.	3093000.
	ization'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 of arge	[
4	Total. Add lines 1 through 3	1648588.	1464661.	807,804.	874,581.	900,226.	5695860.
5	The portion of total contributions	·			0,4,301.	300,226.	2032000.
	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)						970 176
6	Public support. Sustact line 5 from line 4.				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		879,176. 4816684.
Sec	tion B. Total Support						4010004.
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	60 Total
	Amounts from line 4	1648588.	1464661.	807,804.	874,581.	900,226.	(n Total 5695860.
8	Gross income from interest,			,		300,2201	2033000.
	αϊvidends, payments received oπ						
	securities loans, rents, royalties						
	and income from similar sources	63,503.	83,880.	97,618.	98,354.	145,203.	488,558.
9	Net income from unrelated business	, , , , , , , , , , , , , , , , , , , ,			30,334	##3,203.	400,000.
	activities, whether or not the		-	l			
	business is regularly carried on						
10	Other income. Do not include gain		<u>-</u> n		· -	· ·-·	.
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10		· . · ·				6184418.
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	565,601.
	First five years. If the Form 990 is for			, fourth, or fifth tax	· · · · · · · · · · · · · · · · · · ·	501(c)(3)	200,001.
	organization, check this box and stop	here					▶□
	tion C. Computation of Public	Support Fer	centage				
14	Public support percentage for 2013 (li	ne 6, column (f) div	rided by fine 11, co	luma (f)		14	77.88 %
15	Public support percentage from 2012	Schedule A, Part I	l. line 14			15	77.37 %
16a	33 1/3% support test - 2013. If the o	rganization did not	t check the box on	line 13, and line 1-	4 is 33 1/3% or mo	ore, check this box	and
	stop here. The organization qualifies a	as a publicly suppo	rted organization				▶ X :
þ	oo now support test - 2012, a the p	rganization did not	check a box on lir	ne 13 or 16a, and I	line 15 is 33 1/3% (or more, check this	shox
	and stop here. The organization quality	fies as a publicly s	upported organizat	ion			
17a	10% -racts-and-circumstances test	- 2013. If the orga	anization did not ch	neck a box on line.	13, 16a, or 16b, au	nd line 14 is 10% o	r more.
	and if the organization meets the 'fact	s-and-circumstanc	es" test, check this	s box and stop he	ere. Explain in Pari	t IV frow the organi	zation
	meets the 'facts-and-circumstances' t	est. The organizati	on qualifies as a pr	ublicly supported (organization		▶ □
þ	10% -facts-and-circumstances test	- 2012. If the orga	anization did not al	neck a box on line	13, 16a, 16b, or 17	7a. and line 15 is 1	0% or
	more, and if the organization meets the	e "facts-and-dircun	nstances" test, che	eck this box and is	stop here. Explain	in Part IV bow the	
40	organization meets the "facts-and-circu	umstances" test. T	he organization qu	alifies as a publici	y supported organi	ization	🕨 🗔
18	Private foundation. If the organization	i did not chack a b	ox on line 13, 16a	<u>, 165, 17a. or 175,</u>	check this box an	d see instructions	<u>.</u>

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

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

Se	ction A. Public Support	alow, prease com	pæle Hart II.)				•••
Cale	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(-) 0040	10 T. b. l
1		1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(12) # 3 5	107 2011	10/2012	(e) 2013	(f) Total
	membership fees received. (Do not		!	i	1		
	include any "unusual grants.")				}	1	
2	Gross receipts from admissions.	 :		·· -	 -	·	· -
	merchandise sold or services per-	l					
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose		1				
3	Gross receipts from activities that	· · · · · · · · · · · · · · · · · · ·		<u>.</u>	·· 		
•	are not an unrelated trade or bus-				1		
	iness under section 513					i	
						<u></u>	
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf	. <u> </u>					
5	The value of services or facilities						
	furnished by a governmental unit to		1	!			
	the organization without charge						
6	Total. Add lines 1 through 5					į <u> </u>	
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on Ipse 2 and 8 reserved				 	 -	
	from other than disqualifice persons that						
	examed the greater of \$5.000 or 1% of the emount on line 13 for the year						
	Add lines 7a and 7b	·			+	 	
	Public support Schramitre Vertrom (geld)	"::			 		
Sec	tion B. Total Support	· · · · · ·	<u>. </u>	···	·	* . * .*	
	ndar year (or fiscal year beginning in)	(-) 0000	(1-1-00-1-0		4 4 4	1	
		(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6 Gross income from interest.						
iva	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	·					
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975].	
	Add lines 10a and 10b		<u> </u>				
11	Net income from unrelated business		į		i	1	
	ectivities not included in fine 10b, whether or not the business is						
	regularly carried on				1	.	
12	Other income, Do not include gain				Ī		
	or loss from the sale of capital assets (Explain in Part IV.)					 	
13	Total support. (vad lines 9, 120, 11, and 12.)					"-"	
	First five years. If the Form 990 is for	the organization's	first second third	fourth or fifth #	 Sv. vegr ac a sentini	501(0)(2) comprises	tiaa
	check this box and stop here						uon, ▶ □
Sec	tion C. Computation of Public	Support Per	centage	<u></u>			
	Public support percentage for 2013 (lin			Number (4)		·	
16	Public support percentage from 2012	Schadula A. Dart i	III. Em - de			15	
Sec	tion D. Computation of Invest	ment Income	Percentane	· · · · · · · · · · · · · · · · · · ·			<u> </u>
				- 10			
18	Investment income percentage for 20 lityestment income percentage from 2	na jime nuc, colun maa Sabadala a	un (I) aivided by lin Dae III, lica 37	e 13, column (f))		17	<u>" </u>
19-a	Investment income percentage from 2	w iz ochedule A, I omanizatioa #12	ratu, MMe 17	_ 11 # # ***		18	<u> %</u>
: ंव	23 1/3% support tests - 2013. If the coorse than 33 1/3% schools thin box are	al area area and un	οτ check the box σ	ก แก อ 14. and line -	3 15 is more than 3	3 1/3%, and line 17	is not
L	more than 33 1/3%, check this box and	a stop nere. The	organization quali	lies as a publicly s	supported organiza	tion	, ▶∟.]
D	33 1/3% support tests - 2012. If the (organization did ni	ot check a box on	line 14 or fine 19a	a, and line 16 is mo	re than 33 1/3%, an	rd
200	line 18 is not more than 33 1/35%, chec	Kinis box and st	top here. The orga	nization qualifies	ás a publicly suppr	orted organization .	▶⊑
	Private foundation. If the organization	<u>i di</u> d not check a b	<u>box on line 14, 19a</u>	<u>or 195, check th</u>			
53202	3 09-25-13				Sch	edule A /Earm 990	ar 000 EZ 0013

art IV I	Supplement	EZI 2013 THE	THUS CO	DEMONTAL	FOUNDA'	FION, 1	NC.	85-0425147 _F
		his part for any add	· LIONGE HE	explanatrons re	ROUITED DV PART	II, line 10; Pa	art II, iine 17a oi	775; and Part III, line 12.
	. neo compiete ti	rea best for any add	<u>лионацияюнта</u>	ilion, (See instr	ruetions),		<u></u> .	
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Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-2047

2013

Name of the organization

Employer identification number

	THE TAOS COMMUNITY FOUNDATION, INC.	85-0425147
Organization type (check	к оле):	
Filers of:	Section:	
Form \$90 or 990-EZ	X 501(c)(3) (enter number) organization	
	—————————————————————————————————————	1
	527 political organization	
Form 990-P <i>F</i>	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note, Only a section 501(General Rule For an organizati	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule and II.	
Special Rules		
509(a)(1) and 17:	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of \$\frac{1}{2} \texts{0}(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	he regulations under sections of the greater of (1) S5,000 or (2) 8%
total contribution	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one ns of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, ficruelty to children or animals. Complete Parts I, II, and III.	contributor, during the year, , or educational purposes, or
contributions for If this bax is che purpose. Do not	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one use exclusively for religious, charitable, etc., purposes, but these contributions did cked, enter here the total contributions that were received during the year for an excomplete any of the parts unless the General Rule applies to this organization bed ble, etc., contributions of \$5,000 or more during the year	not total to more than \$1,000. kolusively religious, charitable, etc.,
but it must answer 'No" o	that is not covered by the General Rule and/or the Special Rules does not file Sche on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or or et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	idule B (Form 990, 990-EZ, or 990-PF), n its Form 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

333451 10-24-58

Employer identification number

THE	TAOS	COMMUNITY	FOUNDATION,	INC

85-0425147

Part l	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP ÷ 4	(c) Total contributions	(d) Type of contribution				
1		s 100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
2		79,896.	Person X Payroll Noncash (Complete Part II for nercash contributions.)				
(a) No.	(b) Name, address, and ZtP + 4	(c) Total contributions	(d) Type of contribution				
3		- \$ <u>55,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Yotal contributions	(d) Type of contribution				
4_		\$ <u>40,100.</u>	Person X Payroll Noncash (Complete Part If for noncash contributions.)				
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
5		s <u>35,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
6		s <u>32,800.</u>	Person X Payroll				

Schedula 3 (Form 990, 990-EZ, or 990-Pr) (2013) Name of organization Employer identification number THE TAOS COMMUNITY FOUNDATION, INC. 85-0425147

Part I	Contributors (see instructions). Use duplicate copies of Part Lif additional space is needed.					
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
7		\$31,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
8		\$30,25 <u>0.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
9		s <u>30,000.</u>	Person X Payroll Noncash (Complete Part II for nencash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
10		s <u>20,700.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
\$23452 15-24-5	9	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			

2013.05000 THE TAOS COMMUNITY FOUNDA 623650_1

Employer identification number

THE TAOS COMMUNITY FOUNDATION, INC.

85-0425147

art II	Noncash Property (see industrial) live in the second	-	0425147
	Noncash Property (see instructions). Use duplicate copies of Part	Il if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	STOCK STARES - FARXE, ATRIX, GXC, AKREX, MAPIX, AAPL		12/31/13
(a) No. from Part l	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a)		\$	
No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(0)		ss	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		*	
(a) No. from Part I	(b) Description of nancash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of orga	Dization		Employer identification number	_
THE TAC	OS COMMUNITY FOUNDATION	N, INC.	85-0425147	
Part []]	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, et Use duplicate copies of Part III if additions	idual contributions to section 501(c) he following line catry. For organization, contributions of \$1,000 or less for	(7), (8), or (10) organizations that total more than \$1,000 for the tions completing Part III, enter or the year. (Interties increation under	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	_
				_ - -
- 		(e) Transfer of gif		<u>-</u>
	<u>Transfer</u> ee's name, address, ar	•	Relationship of transferor to transferee	
-				- -
(a) No.				-
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
-				- -
	·· <u>·</u> ·	(e) Transfer of gif	ft :	
	Transferee's name, address, an	od ZIP + 4	Relationship of transferor to transferee	_
-				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
-		***************************************		-
_		(e) Transfer of giff	ft	—
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee	_
-				-
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	_
Part I	(A) a poet 5. gain	(c) OSE OF GIT	(d) Description of now gift is need	 -
				-
		(e) Transfer of gift	ft	_
-	Transferee's name, address, an	nd ZIP + 4	Relationship of transferor to transferee	_
				-

SCHEDULE D

(Form 990)

Department of the Treasury Internal Ravenue Service

Supplemental Financial Statements

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

Open to Public

Inspection ...

OMB No. 7545-2047

	ne of the organization THE TAOS COMMUNITY FOUN	DATION, INC.	- 1	Employer identification number $85-0425147$
Pa	rt I Organizations Maintaining Donor Advised Fund	s or Other Similar Funds (or Acco	Ounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.			Title: Complete II are
		a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of year	37	1-7	89
2	Aggregate contributions to (during year)	546,873.		1,644,722.
3	Aggregate grants from (during year)	343,046.		412,436.
4	Aggregate value at end of year	1,662,176.		5,955,269.
5	Did the organization inform all donors and donor advisors in writing the		d fundo	5,553,209,
	are the organization's property, subject to the organization's exclusive	. least control?	a lutius	X γes □ No
6	Did the organization inform all grantees, donors, and donor advisors in	regal controls	non	
	for charitable purposes and not for the benefit of the donor or donor a	dvisor orforany other evenes a	sec only	
				X Yes — No
Pa	impermissible private benefit? rt II Conservation Easements. Complete if the organization	asswered 'Ves' to Form CO3 De	et N.C. Box	X Yes No
1	Purpose(s) of conservation easements held by the organization (check	ellithet apply	ur iv, mie	
	Preservation of land for public use (e.g., recreation or education)		~-! ~ !!	
	Protection of natural habitat	Preservation of an hist Preservation of a certif		
	Preservation of open space	Preservation of a centif	ied Mistor	ac structure
2	·		_	
_	Complete lines 2a through 2d if the organization held a qualified conse day of the tax year.	avation contribution in the form of	ra consei	Vation easement on the last
	ou) of the tax year.		_	T
-	Total number of conservation easements		ļ	Held at the End of the Tax Year
a h	T-1-1			
			2	
ا ا	Number of conservation easements on a cartified historic structure inc	suded in (a)	<u>.2</u>	<u>e. </u>
ď	Number of conservation easements included in (c) acquired after 8/17/	T6, and not on a historic structure	•	
•	listed in the National Register		2	
3	Number of conservation easements modified, transferred, released, ex year ►	unguished, or terminated by the o	irganizatio	on during the tax
a	Number of states where property subject to conservation easement is			
5				
J	Does the organization have a written policy regarding the periodic mor			
6	violations, and enforcement of the conservation easements it holds?			Yes No
7	Staff and volunteer hours devoted to monitoring, inspecting, and enfor	Cing conservation casements duri	ing the ye	ear 🛌
8	Amount of expenses incurred in manitoring, inspecting, and enforcing	conservation easements during th	se year 🕨	· \$
•	Does each conservation easement reported on line 2(d) above satisfy than section $170(h)(4)(\beta)(ii)$?			
9				Yes L_jNo
-3	In Part XIII, describe how the organization reports conservation easem	ants in its revenue and expense st	tatement,	and balance sheet, and
	include, if applicable, the text of the footnote to the organization's final	icial statements that describes th	e organiz	ation's accounting for
Pai	conservation easements. It IN Organizations Maintaining Collections of Art, His	etorical Transures, or Oth	or Cimi	lou Boards
	Complete if the organization answered "Yes" to Form 990, Part	Wiles a	er siini	iar Assets.
12				
•	If the organization elected, as permitted under SFAS 116 (ASC 958), no	ot to repart in its revenue stateme	nt and ba	ಪ್ರವಾಧಕ sheet works of art.
	historical treasures, or other similar assets held for public exhibition, ex	របេងហេតា, or research in furtherand 	e of publ	ic service, provide, in Part XIII,
ъ	the text of the footnote to its financial statements that describes these			
ų.	If the organization elected, as permitted under SFAS 116 (ASC 968), to	report in its revenue statement a	nd baland	A sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education,	or research in furtherance of publi	d service,	provide the following amounts
	relating to these items;			
	(i) Revenues included in Form 990, Part VIII, line 1			· \$
2	(ii) Assets included in Form 990, Part X			• \$
2	If the organization received or held works of art, historical treasures, or	Other similar assets for financial g	jain, pro√	ide
_	the following amounts required to be reported under SFAS 116 (ASC 9	58) relating to these items;		
a	Revenues included in Form 990, Part VIII, line 1			· \$
	Assets included in Form 990, Part X		. •	- \$

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990. 332051 09-25-13

Schedule D (Form 990) 2013

Sch	edule D (Form 990) 2013 THE TAC	S COMMUNIT	Y FOUNDATI	ON, INC	T.		<u>85-04</u>	2514	7	ane 2
Pa	The Corganizations Maintaining (Collections of A	ત, Historical Tre	easures, o	r Öthe	r Simila	r Assets	3 /	!!	
3	Using the organization's adquisition, access	ion, <mark>and othe</mark> r record	is, check any of the	following tha	tare a si	 igniācant u	ise of its o	con	n item	s
	(спеск ал тлат арріу):			-		•				•
а	<u></u>		d ∏ Loan orexo	change progr	ams					
b	Scholarly research	6	e [Other							
c	Preservation for future generations							•		
4	Provide a description of the organization's of	ollections and explain	n how they further th	ne ozganizatio	on's exer	mpž purpos	se in Part	XIII.		
5	During the year, did the organization solicit of	or receive donations i	of art, historical treas	sures, or othe	er similar	rassets				
_	to be sold to raise funds rather than to be mi	aintained as part of t	he organization's co	illection?				Yes		" No
Pa	Escrow and Custodial Arran	gements, _{Comple}	ete if the organizatio	n answered '	"Yes" to	Form 990.	Part IV. (ne 9. or		
	reported an amount on Form 990, Pa	rt X, line 21,					,	., .		
1a	is the organization an agent, trustee, custodi	ian or other intermed	lary for contributions	s or other ass	sets not i	included				
	on Form 990, Part X?						[Yes		
Ь	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing table:							_
								Amour	nt	
c	Beginning balance					1c				
Ь	Additions during the year			• • • • • • • • • • • • • • • • • • • •		1d				
e	Distributions during the year					. te				
Ť	Ending balance					. 1 f				
	াও চাৰ organization include an amount on Fi	orm 990, Part X, lîne	21?				<u>C</u>	Yes	[,_	No
Day	If 'Yes," explain the arrangement in Part XIII. † V Endowment Funds, Complete:	Check here if the ex	planation has been i	<u>provided in F</u>	art Xill					<u></u>
r ai	t V Endowment Funds. Complete					D				
4.	Desirate and a	(a) Current year	(b) Prior year	(c) Wolyear		(d) Three y		(e) Fou	r years	back
	Beginning of year balance	7,025,479.	6,118,493.		7,509.		83,982.	4	,048,	
b	Contributions	498,843.	348,592.		032.		64,669.			285.
C	Net investment earnings, gains, and losses	969,160.	δ69,195.	75	8,850.	9'	78,954.			675.
d	Grants or scholarships	-							253,	654.
e	Other expenditures for facilities									
	and programs	405 007								
1	Administrative expenses	406,003. 7,089,793.	110,101.		898.		20,095.			180.
9	End of year balance	•	7,025,479,		,493.	6,04	£7,309.	 =	,083,	980,
2	Provid≑ the estimated percentage of the curr	ent y≑arend balance) held as:						
а Ь	Board designated or quasi-endowment Permanent endowment 95.00		_%							
	Temporarily restricted endowment	% 5_00								
·	The percentages in lines 2a, 2b, and 2c shou									
3=			N. 18 1 1 1 1							
-	Are there endowment funds not in the posset by:	ssion of the organiza	uon πiat are neid an	ia zaministen	ed for the	e organiza:	tion			
	•							L	Yes	No
	2		1.1			· - ·· - ······		3a(i)		<u>X</u>
ь	(ii) related organizations	listed as required as	 Spinodula D2					3a(ii)		<u>X</u>
4	Describe in Part XIII the intended uses of the	omanization's andox	rockedule his					35		
Par	t VI Land, Buildings, and Equipm	ent.	winem jurius.							
	Complete if the organization answered		Part IV line 11a So	a =orm 900	Dort V. Ii	ina 10				
	Description of property	(a) Cost or of				ccumulate	<u>,</u>	(d) 300	Fe	
		basis (investm	4-1			occiniciated preciation	'	(a) 500	K Value	3
1a	Land			- i		· . """	-			
b	Buildings				· · · · ·	· ·	` '-i -			
С	Leasehold improvements	·	1	0,723.		4,15	5.		6,50	58.
	Equipment			1,275.		43,19			8,0	
e	Officer					/			· / ·	•
Total	. Add lines 1a through 1e. (Column (d) must en	rual Enzm 990 . Po+ t	Cookima /BL Sec. #0	16-11			<u> </u>	ä.	4.64	4 4

Schedule D (Form 990) 2013

Doubles I Table 1990 2013	MMUNITY FOUND.	ATLON, INC		5-0425147	Page.
Part VII Investments - Other Securities.					, alie
Complete if the organization answered "Yes"	to Form 990, Part IV, line "	11b. See Form 990,	Part X, line 12.		
(a) Description of security of category (national name of security)	(b) Book value	(c) Method of	valuation: Cost or e	nd-of-year market v	alue
(1) Financia derivatives					
(2) Closely-held equity interests			_		
(3) Other	<u> </u>				
(A)					
<u>(B)</u>					
<u>(0)</u>				"	
<u>(D)</u>					
<u>(E)</u>					
(F)					
_ (G)					
(H)					
Total, (Col. (b) inust agual Form 990, Part X, col. (B) line 12.)					
Part VIII Investments - Program Related.				-	
Complete if the organization answered "Yes"	to Form 990. Part IV, line 1	1c. See Form 990,	Part X, line 13.		
(a) Description of Investment	(b) Book value	(c) Method of s	valuation: Cost or er	id-of-year market v	alus
(1)					
(2)					
(3)		,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	<u>-</u>		
(4)					
(5)					
(6)					
<u>(7)</u>					
(8)			,		
(9)	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
Total. (Col. (b) must equal Form 990, Part X. col. (B) line (3.) ▶ Part IX Other Assets.	<u> </u>	·	<u> </u>		٠.
	_				
Complete if the organization enswered "Yes"	to Form 990, Part IV, Ene 1:	1d. See Form 990, I	Part X, line 15.		
	Description			(b) Book va	Jue
(1)					
(2)					
(3) (4)				<u> </u>	
(6)				 .	
(6)				<u> </u>	
(8)				·	
(9)					
Total, (Column (b) must squal Form 990, Part X, col. (8) line					
Part X Other Liabilities.	<u> 15 /</u>		····	<u>. </u>	
Complete if the organization answered "Yes" t	to Form 990 - Part IV Koo 11	to gette Coo Form	. 000 E-+ V E 00		
(a) Description of liability		b) Book value	1 850, Part X, II/16 25	<u>. </u>	
(1) Federal income taxes	1	b) 500K Value	1		
(2) FUNDS HELD AS AGENCY ENDOW	MRNTS 1	2,845,268.			
3) DEFERRED COMPENSATION		165,271.			
(4)	· · · · · ·	1001611.			7 V.
(5)	·· - ··				
(6)					
(8)					. : ': '

Total. (Column (b) must equal Form 990. Part X. col. (B) line 25.) 2. Liability for uncertain tax positions, in Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

3,010,539.

Schedule D (Form 990) 2013

Part VI Page politication of December 1405 COMMUNITY	FOUNDATION, INC.	85-0425147 Page 4
Part XI Reconciliation of Revenue per Audited Finance	ial Statements With Revenue	per Return.
Complete if the organization answered "Yes" to Form 990, F 1 Total revenue, gains, and other support per audited financial statem		
2 Amounts included on line 1 but not on Form 990, Part VIII. iine 12:	ents	
a Net unrealized gains on investments	151	1.44
b Donated services and use of facilities	2a	—— , #\$4
c Recoveries of prior year grants	2Ь	
[- · · · ·] · · · · · · · · · ·	2c	
	2d	- []
e Add lines 2a through 2d 3 Subtract line 2e from line 1		
 Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1; 		
a Investment expenses not included on Form 990, Part VIII, line 7b	1.1	
b Other (Describe in Part XIII.)	4a 4b	
c Add lines 4g and 4b	40	
c Add lines 4a and 4b 5 Yotal revenue. Add lines 3 and 4c. (This must equal Form 990, Part)	See no i	1 1
Part XII Reconciliation of Expenses per Audited Finance	cial Statements With Expense	s per Return
Complete if the organization answered "Yes" to Form 990, P.		•
Total expenses and losses per audited financial statements	art IV, line 12a.	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities	2a	[55]
b Prior year adjustments	2b	
c Other losses	2c	· · · ·
d Other (Describe in Part XIII.)	24	
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII.)	4b	
c Add lines 4a and 4b		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Pan	: Liipe 18.)	
Part XIII Supplemental Information.		
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines	ta and 4; Part IV, lines 1b and 2b; Part	V, line 4; Part X, line 2; Part XI,
lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p	rovide any additional information.	
PART V, LINE 4:		
TILL V MILITE 4.		
THE INTENT OF THE ENDOWED FUNDS IS TO	CREATE AND BITTIN A	
	CAMMITE INTO DOLLD A	
PERMANENT FINANCIAL RESERVE, THE EARN	INGS FROM WHICH CAN	BE USED FOR
CHARITABLE PURPOSES.		
•		
PART X, LINE 2:		
MUR BOIDING TAN DEGOCRATES THE TANK AND THE		·
THE FOUNDATION RECOGNIZES THE TAX BENT	EFIT FROM UNCERTAIN	TAX
POSTTIOMS ONLY IF IT IS MODE ITERAL MI	TANI NOOM MYTAM OUTE OAN	
POSITIONS ONLY IF IT IS MORE LIKELY TO	AN NOT THAT THE TAX	POSITIONS WILL
BE SUSTAINED ON EXAMINATION BY THE TAX	Y ATTUMONTURE BACET	ON THE BECUNTANT
	- TAO XARONIA ZIEGO, DROME	ON THE INCHINACIAL
MERITS OF THE POSITION. ANY SUCH TAX I	BENEFIT IS MEASURED	BASED ON THE
LARGEST BENEFIT THAT HAS A GREATER THE	AN 50% LIKELIHOOD OF	BEING REALIZED
UPON ULTIMATE SETTLEMENT. THE FOUNDAT:	ION HAD NO UNRECOGNI	ZED TAX BENEFITS
32254 05-23-13	25	Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 THE TAOS COMMUNITY FOUNDATION, INC. 85-0425147 Page 5 Part XIII Supplemental Information (continued)
AT JUNE 30, 2014 OR 2013. THE FOUNDATION FILES AN EXEMPT ORGANIZATION
RETURN WITH THE INTERNAL REVENUE SERVICE (IRS). THE FOUNDATION HAD NO
TAXABLE UNRELATED BUSINESS INCOME FOR THE YEARS ENDED JUNE 30, 2014 AND
2013. ACCORDINGLY, A PROVISION FOR INCOME TAXES HAS NOT BEEN ESTABLISHED
IN THE ACCOMPANYING FINANCIAL STATEMENTS. THE FOUNDATION IS NO LONGER
SUBJECT TO INCOME TAX EXAMINATIONS BY THE IRS FOR TAX YEARS THROUGH JUNE
30, 2010.
· · · · · · · · · · · · · · · · · · ·

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

0/3 No. 1545-004/

2013

Open To Public Inspection

Name of the organization Employer identification number THE TAOS COMMUNITY FOUNDATION, INC. 85-0425147 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ, filers are not Part I required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply, Mail solicitations Solicitation of non-government grants. b Internet and email solicitations Solicitation of government grants Phone solicitations ¢ Special fundraising events đ in-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990. Part VII) or entity in connection with professional fundraising services? Yes _ No b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did tupdre ger have destedy or centre of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) or entity (fundraiser) fundraiser from activity organization listed in col. (i) No Yes 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration. or licensing,

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2013.

Sch Pe	edu ert	ls G (Form 990 or 990 EZ) 2013 THE TAC	S COMMUNITY	FOUNDATION, 1	INC. 85-	0425147 Page 2
<u>. </u>		Fundraising Events. Complete if the of fundraising event contributions and gr	ne organization answered toss income on Form 990	I "Yes" to Form 990, Part I-EZ, lines 1 and 6h. List e	: fV, line 18, or reported : wents with gross recoint	more than \$15,000 to greater than \$5,000
			(a) Event #1	(b) Event#2	(c) Other events	(d) Total events
			DIDOR & MITON	BUCKAROO	-	(add col. (a) through
			RIDGE-A-THON (event type)	(event type)	(total number)	col. (c))
OLIG O			(======================================	(87011.5790)	(total namber)	
Revenuo	1	Gross receipts	30,951.	21,855.	20,601.	73,407.
	2	Less: Contributions	30,951.	5,185.	16,941.	53,077.
	3	Gross income (line 1 minus line 2)		16,670.	3,660.	20,330.
	4	Cash prizes				
penses	5	Noncash prizes		-		
	6	Rent/facility costs	!			
Direct Expenses	7	Food and beverages		2,524.	13,527.	16,051.
٦	8	Entertainment				
	9	Other direct expenses	11,899.	1,848.	7,689.	21,436.
	10	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from I			.	37,487.
Pa	rt I	Gaming. Complete if the organization	ine 3, column (a) answered "Yes" to Form	990, Part IV. line 19, or re		-17,157.
		\$15,000 on Form 990-EZ, line 6a.				
evenue			(a) Bingo	(b) Full tabs/instant bingc/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Ě	1	Gross revenue	<u></u>			
563	2	Cash prizes				
Expens	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
,	6	Volunteer labor	Yes% No	Yes%	Yeş %	and register of the second of
	7	Direct expense summary, Add lines 2 through	n 5 in column (đ)		•	
	8	Net gaming income summary. Subtract line 7				
		Test daying income surmary, odbitact line /	monthine t, column (at	<u></u>		
		er the state(s) in which the organization opera				 -
		he organization licensed to operate gaming ac		tates?		Yes No
b	IT "	No," explain:				
			 .			
		re any of the organization's gaming licenses re fes," explain:		minated during the tax ye	ear?	Yes No
	_	·				
 23204	2 09	13.15			Schedulo G (For	m 990 pr 990-EZ\ 2013

Schedula G (Form 990 or 990 EZ) 2013 THE TAOS COMMUNITY FOUNDATION, INC. 85~0	<u> 125.</u>	147	Page 3
11 Does the organization operate gaming activities with nonmembers?			□ No
12 is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
to administer charitable gaming?	,	Yes	□ No
indicate the percentage of gaming activity operated in:	- 1		
a The organization's facility	13a		%
b An outside facility	13b		
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
Name 🕨			
Address >			
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	—,	<i>s</i>	□ No
		res	NO
bilf "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount			
of garning revenue retained by the third party \$			
c If "Yes," enter name and address of the third party:			
a to 1995; Since harno and address of the filling party.			
Name b			
Name D			
Address In			
Address >			
12 Caming manager information.			
16 Gaming manager information;			
Mana N.			
Name >			
C			
Garning manager compensation ► S			
Description of services provided -			
Director/officer Employee Independent contractor			
17 Mandatory distributions:			
a is the organization required under state law to make charitable distributions from the gaming proceeds to			
retain the state gaming license?	Y	fes.	No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
organization's own exempt activities during the tax year 🕨 \$			
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, line	s 9, 91	ხ, 10ხ	, 15b,
16c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions),			
······································			
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592053 08-12-13 Schedule G (Form 9	190 or	- 000-	F71 2012

| Employer Identification number Information about Schodule I (Form 990) and its instructions is at www.ics.ouv/forms80. Complete if the organization answered "Yes" to Form 990, Part IV, fine 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, Attach to Form 990. Name of the organization Department of the Treseury internal Reversite Service SCHEDULE (Form 990)

CMB No. 1845 0:147

Open to Public

THE TAOS	THE TACS COMMUNITY FOUNDA	FOUNDATION,	, INC.				85-0425147
Part General Information on Grants and Assistance	and Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection	to substantiate the	amount of the grants	or assistanco, the	grantees' eligibility	for the grants or assis	stance, and the selection	un
critoria used to award the grants or assistance?	stance?						X Yes
2 Describe in Part IV the organization's procedures for monitoring the use of grant fends in the United States.	ocedures for monit	oring the use of grant f	unds in the United	States.			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Compileie if the organization answered "Yos" to Form S80, Part IV, line 21, for any	Governments and	Organizations in the	United States, C	anplate if the orga	riization answered "Y	os" to Form S80, Part	IV, line 21, for any
recipiont that received more than \$5,000. Part II can be duplicated	\$5,000. Part II can	be ouplicated if addition	if additional space is nocded	od.			
1 (a) Name and address of organization or government	(b) EIN	(c) RC section if applicable	(d) Amount of cash grant	(a) Amount of non-cash assistance	(f) Mathod of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) l'urposo of grant or assistance
ALC HANDS VOLUMERERS				!"'			
6 COUNTY RD. SOITE 6							
MATTAPOIBETZ, MA 02739	20 3414952 501 (C)	501 (c) 3	000'5	0,			CORE SUPPORT GRANT
BIG BROTHERS BIG SISTERS OF							
NORTHERN NEW MEXICO - 1229 SOUTE				•			
st. flancis dr santa fe, ne							
87505	85 0276498	501 (c) 3	10,250,	0.			3 CORE SUPPORT GRANTS
BRIDGES PROJECT FOR EDUCATION PO ROX 304		. "					
TAOS, NW 87571	85-0448943	501 (c) 3	10,250.	0,			3 CORE SUPPORT GRANUS
							PUILDING A LEARNING
CENTER FOR EDUCATION AND STUDY OF							COMMONITY AT MESA VISTA
DIVERSE POPULATI - 1112 PEAZA DEL							CONSOLIDATED SCHOOL
NORTE - ESPANOLA, NM 87532			75,000.	0.			DISTRICT
BONSTOLY TSSTEDS VETNIMEDO							
PO BOX 169							
TAGS, NM 87571	85-0285504	501 (c) 3	5,000,	٥.			CORE SUFFORT GRANT
PREMERS PROTECT							

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table LPA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 Laple...

Schedule J (Form 990) (2013)

CORE SUPPORT GRANT

5,000.

85-0462470 BO1 (C) 3

TAOU, NM 87571

PO TOX 1677

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Page 1

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, INC.	cations in the United States (Schedule I (Fo
NDATION,	ornmonts and Organiz
COMMUNITY FOUR	Assistance to Gov
TAOS	and Other
THE	of Grants
e i fhorm aad	Continuation of
Schedul	Part

(a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (f) organization or government valuation if applicable cash grant non-cash (book, FMV, assistance (book, FMV, appraisal, other)	(b) EIN	(c) IRC section if applicable	(d) Anxount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(th) Purpose of grant or assistance
BQUINE SPIRIT SANCTUARY 13 GOS CARALIOS RD, RANCHOS DE WAOS, DM 87557	29655-02	501 (c.) 3	14,993,	0.			4 CORE SUPPORT GRANTS;
FRIENDS OF ANAMSI CHARTER SCHOOL PO BOX 1709 Rt. PRADD, NW 87529	30-3888030	501 (c.) 3	10,000,	6			GRANT FOR NEW SCHOOL BUILDING SUND
HUMAN RESOURCE DEVELOPMENT CENTER PO BOX 913 TAOS, NW 87571	85-03741.14 501 (C	501 (c) 3	10,000.	0			2 GRANTS FOR CIRLS CIRCLE PROJECT AT TACS MISSLE SCHOOL
UNE FORNDATION (URRHOOD MUSUEM OF ART) - 238 ERDGUX ST, - TAOS, RM 87571	85 D27540B	501 (C) 3	5,000,2	0.			CORR SUPPORT GHANT FOR
MIELICENT ROGERS MUSEUM PO BOX 1210 TAOS, NM 87571	13-616170\$ 501	501 (c) 3	.000,3	ö		12	COME SUPPORT GRANE
NEW MEXICO FOUNDATION FOR HUXAN ENRICHMENT 1337 GUBDORF RD, SUITE G - TAOS, NM 87571	85-0318984	502 (C.) 3	25,000.	0,			VIDEO EXCUMENTARY ON DECUGHY IN NORTHERM NEW MEXICO
NEW MEXICO MESA 2008 CENTRAL SE, SUITE 122 ALBUQUERQUE, NM 87106	85-0371954	501 (5) 3	5,000.	°			CORB SUPPORT GRANT
NOMVIOLENCE WORKS PO BOX 2238 TAOS, NN 87571	26-1486393	501 (C.) 3	5,000,	ò		į	CORE SUFFOUR GRANT
NORTHERN NEW MEXICO BIRTH CENTER 1331 MARSTAR RD TACE, NY 87571	85-0283539	501 (C.) 3	5,000,	÷			CORE SUPPORT GRANT
							Schedule i (Form 990)

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Page 1

	s (Schedule I (Form 990), Part II.)
	rganizations in the United States (Schedule I (Fo
THE TAOS COMMUNITY FOUNDATION, INC.	overnments and Organi
COMMUNIT	Assistance to G
THE TAOS	and Other
THE	of Grants
c I (Form 99 <u>0)</u>	Continuation
Schodul	Partil

(a) Namo and addross of organization or government	(a)	(o) IRC яесикл if applicable	illon (d) Amount of (e) Amous ole cash grant non-eas assistan	_ ≠ = 8	(f) Method of (g valuation noi (book, FMV, appraisal, othor)	(g) Description of non-cash assistance	(h) Purpose of grant of assistance
RED WILLOW CENTBR PO BOX 2063 TAOB, NW 87571	37-3196148 501 (C	501 (C.) 3	23,000.	0			2 GRANTS POR COME SUPPORT AND AN ART/BRVIRONMENTSI, GRANT
RIVERS AND BIRDS PO BOX 319 ARROYO SACO, NM 67514	85-0457644	501 (c } 3	,000,4	ċ			CORB SUPPORT FOR YOUTH
HOCKY MOUNTAIN YOUTH CORPS FO BOX 1960 FANCHOS DE WAOS, NM 87557	85-0404817	501 (c.) 3	5,750,	0,			G CRANTS FOR CORE SUPPORTAND A FINANCIAL LITERACY WORKSIOP
BANTA 2E COMMUNITY POUNDATION 501 HALONA SP. SANYA FY, NM 87505	65 0303044	501 (c.) 3	,000,2	Ċ.			BUPPORT OF THE 2014 GIVE
TAOS CENTER FOR THE ARTS 133 PASEO DEL PUEBLO NORTE TROS, NE 87571	85-0113452	501 (c) 3	5,000.	0			CORE SUPPORT GRAMFT
TAGS COALITION TO BRD HOMELESSNESS FO BOX 1516 TAGS, NK 87571	30-4495416 501	501 (c.) 3	11,900,	0			4 CORE SUPPORT GRANTS
TAOS LAND TRUST PO BOX 3076 TAOS, NM 87571	B5-0418988	507 (C.) 3	52,107.	Ö			GRANTS FOR CORESUPPORT, AGENCY DISBURGEMENT, LEADERSHIP
TAUS SCHOOL OF MUSIC, INC. PO BOX 2630 TAOB, WM 87571	85-6012256	501, (c. } 3	87,768,	,0		•	AGENCY FURD DISBURGERRAY
TEAM PRIDE 1667 PULTON ST. #A SAN PRANCISCO, CA 94117	65-1197820 501 (C)	501 (C.) 3	12,246,	0			2ND YBAR SUPPORT FOR TARKNONDO LEALDRUITP PROGRAM
							Schodule /Form 0001

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Schedule 1 (Form 990) THE TAOS	COMMUNITY	THE TAOS COMMUNITY FOUNDATION, INC.	INC.	oteo, cotos	and who are an area of the state of the stat		85-0425147 Page 1
(a) Name and address of (b) EIN (c) INC section (d) Amount of (e) Amount of (f) Method	NE (4)	(c) IRC section If applicable	(d) Amount of cash grant	(a) Amount of non-cash assistance	(f) Method of valuation (hook, PM), appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNN FOUNDATION (ADULY LEARNING CENTER-TAGE) 1157 COUNTY RD 110 - RANCHOS DE TAGE, NE 87857	85 0275408	501 (C) 3	16,250.	0.1			4 GRANTS FOR THE TADS ADULT LEARNING CENTER AND A FLEANCIAL LITERACY WORKSHO
YOUTH HEARTLINE PO DOX 1664 WACS, NM 87571	85-0397100	501 (C } 3	10,000.	•0			POSTER CARE SUPPORT PROJECT

Schodule | (Form 990)

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c.	COO L IN THE TAIL IN THE TAIL
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FOUNDATION,	On contrast lifetime
THE TAOS COMMUNITY F	a to the district of the first of the state
TAOS	Land Mark Alberta
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(Form 990) (2013)	
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Page 2

85-0425147

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. Part III

(4) Type of grant or assistance	(b) Number of reclylents	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation(book, FMV, appraisal, other)	(f) Description of non-cash asslatence
SCHOLARSHIPS	9	33,500.	0.		
TEACHER GRANTS	99	32,772.	0		
Part IV Supplemental Information. Provide the information required in Part 1, line 2, Part III, column &, and any other additional information.	uirad in Part 1, line	2, Part III, column	क्षेत्रे, and any other ack	ilitional information.	

PART I, LINE 2:

GRAWTS OF \$1,000 OR MORE TO INDIVIDUALS OR ORGANIZATIONS ARE

REQUIRED TO HAVE A SITE VISIT AND A FINAL GRANT REPORT SUBMITTED, WHICH IS

A STANDARD REPORT TEMPLATE. THE GRANTS OFFICER MAY REQUEST A SITE VISIT AT

OTHER TIMES, DEPENDING ON PARTICULARS OF THE AGENCIES (I.E. CHANGES IN

OR IF CONCERNS ARISE IN THE COMMUNITY THAT GRANT-FUNDED SERVICES ARE NOT

LEADERSHIP, CONCERNS OF THE AGENCY'S FISCAL HEALTH, GRANTS TO A NEW AGENCY,

BEING ADMINISTERED) IN ALL AWARDS TO GRANTEES, A FINAL GRANT REPORT DATE IS

ESTABLISHED AS THE AGENCY IS NOTIFIED THAT A SITE VISIT MAY BE REQUESTED

332102 10-29-19

Schedule I (Form 990) (2013)

Schedul	<u>e JrFç</u>	<u>ეთ 990) —</u>		THE 1	<u>'AO</u> S CO	MMUNITY	FOUNI	DATI	ON.	INC.		85-0425	147	Page 9
Part [V S	Supplem	ental Inform	nation	"					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				FEQUE 2
,										<u>-</u> .		•		
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			CBIBINE	<u> </u>	GIVINI	AGVERNIE	титр Т	TIA I	GKAI	GAATK	ARE	REQUIRED	TU	
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SUDM.	LT.													
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SCHEDULE M (Form 990)

Noncash Contributions

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

OMB No. 1545-0347

Open to Public Inspection

Secarment of the Treasury .ntzпкі Явичгие Загиіса

Name of the organization

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

THE TAOS COMMUNITY FOUNDATION, INC.

Employer identification number 85-0425147

Pa	rt f Types of Property		- "-	-			
1	Art - Motha of out	(a) Check if applicable		(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	etermining ution amour	
-	Art - Works of art	^	10	291_	FAIR MARKET	VALUE	<u>:</u>
2	Art - Historical treasures				· · · · · · · · · · · · · · · · · · ·		
3	Art - Fractional interests			<u></u> .			
4	Books and publications		· · · · · · · ·				
5	Clothing and household goods	X	tat gladiji	541.	FAIR MARKET	VALUE	<u> </u>
6	Cars and other vehicles				·	_	
7	Boats and planes			.,			
8	Intellectual property		_				
9	Securities - Publicly traded	Х	2	78,394.	FAIR MARKET	VALUE	<u>:</u>
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or						
	trust interests						
12	Securities - Miscellaneous		·				
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory			_			
20	Drugs and medical supplies						
21	Taxidermy		· · · · · · ·				
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts		_				
25	Other (FURNITURE)	X	7		FAIR MARKET		
26	Other (MISCELLANEOUS)	X	85	1,007.	FAIR MARKET	VALUE	<u> </u>
27	Other • ()	:	·				
<u>28</u>	Other ()						
29	Number of Forms 8283 received by the organiz						
	for which the organization completed Form 828	33, Part IV, D	ionee Acknowledg	ement 29			
~~	D. A. B. Park J.					Yes	No
SUB	During the year, did the organization receive by	/ contribution	n any property repo	orted in Part I, lines 1 - 28, th	at it must hold for		1
	at least three years from the date of the initial of						
	the entire holding period?					30a	X
	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance p				tions?	31 X	<u> </u>
vza	Does the organization hire or use third parties of						
	contributions?					32a X	
э 33							
	If the organization did not report an amount in o describe in Part II.	commu (c) to	or a type of propert	y for which column (a) is che	oked,	:	
	assoniation control					<u> </u>	

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

Schedule M (Form 990) (2013)

Schedule	(Form 990; 2013) THE TAOS COMMUNITY FOUNDATION, INC.	85-0425147	Page 2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 3 is reporting in Part I, column (b), the number of contributions, the number of items received, or a contribution and additional information.	3, and whether the organize abination of both. Also com	
SCHEDI	LE M, LINE 32B:		
ART RI	CEIVED BY DONATION IS HELD ON CONSIGNMENT IN		
<u>GAL</u> LBI	TES.		
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832142 08-05-19

Schedule M (Form 990) (2013)

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at Jaway irs any/form990

OMS No. 1545-0047 Open to Public

:::Inspection

Name of the organization THE TAOS COMMUNITY FOUNDATION, INC.	Employer identification number 85-0425147
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISS	ION:
SERVE.	
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MI	SSION:
COMMUNITY, AND PROVIDING LEADERSHIP FOR KEY COMMUNITY INIT	IATIVES.
30,000 PEOPLE SERVED.	
FORM 990, PART VI, SECTION B, LINE 11:	
THE FORM 990 IS MADE AVAILABLE TO THE ORGANIZATION'S GOVERN	NING
BODY FOR REVIEW. IN ADDITION, THE TREASURER AND THE FINANCE	E COMMITTEE
REVIEW THE FORM 990 BEFORE FILING.	***********
FORM 990, PART VI, SECTION B, LINE 12C:	
OFFICERS, DIRECTORS, AND KEY EMPLOYEES ARE REQUIRED TO	
DISCLOSE ANY CONFLICTS ANNUALLY AND THE DISCLOSURES ARE CO	NFIRMED ANNUALLY.
ANY BOARD MEMBER WITH A CONFLICT IS NOT ALLOWED TO VOTE ON	THE TRANSACTION.
FORM 990, PART VI, SECTION B, LINE 15:	
IN DETERMINING COMPENSATION FOR OFFICERS AND KEY EMPLOYEES	, AN
INDEPENDENT REVIEW WITH COMPARABILITY DATA IS PERFORMED AND	D THE PROCESS IS
DOCUMENTED. THE PROCESS HAS NOT CHANGED SINCE THE PRIOR Y	EAR AND WAS LAST
COMPLETED IN 2013.	
THE ORGANIZATION MAKES IT GOVERNING DOCUMENTS, CONFLICT OF	
INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE	PUBLIC ON

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

832211 05-04-18

Schedule O (Form 990 or 990-EZ) (2013)

Schedule O (Fo.m. 990 or 990-EZ) (2013)	Page 2
Name of the organization THE TAOS COMMUNITY FOUNDATION, INC.	Employer identification number 85-0425147
REQUEST. THE FOUNDATION'S FORM 990 AND FINANCIAL STATEMEN	TS ARE ALSO
AVAILABLE ON THE ORGANIZATIONS WEBSITE.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
BOOK TAX DIFFERENCE AGENCY FUND ADJUSTMENT	-337,283.
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	- "

Open to Public Inspection ►Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Information about Schodulo R (Form 930) and its instructions is at www.in.onutlopn990 Related Organizations and Unrelated Partnerships ▼ See separate instructions. Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33 ij ▶ Attach to Form 990. FOUNDATION, COMMUNITY TAOS THE Name of the organization Decisionent of the Treatury Internal Eavelide Service, SCHEDULE R (Form 990) Part

2013

Employer Identification number

85.0425147

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Direct controlling PAOS CUMMUNITY FOUNDATION End-of-yoar assets 0 æ ं Total income Î Legal domicile (state or foroign country) CEW MEXICO RRAL ESTATE GIFTS FOR THE BENEFIT OF THE FOUNDATION TO ACCEPT AND LIQUIDATE Prinsary activity TAOS FOUNDATION FOR PROPERTY GIME, INC. 87571 Name, address, and EIN (if applicable) 27-0998249, PO BOX 1925, TAO9, NM of disregarded entity

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 980, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Part II

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

837181 09-12-13 LHA

Schedule R (Form 990) 2013

Page 2 85-0425147

Schodule H (Form 990) 2013 THE TAOS COMMUNITY FOUNDATION, INC.

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, lino 34 bocause it had one or more related organizations treated as a partnership during the tax year.

		4	93		-	1			-	1	1		
(a) Name, address, and ElN	(b) Primary activity	E 2				(1) Share of total	Share of	(M)		(i) Code V-UBJ	Genera.	(K)	906
of related organization		connelle (state or fereign country)	ontity		(related, uorelated, excluded from tax under sections 512-514)	Income	and of year assets			emount in box 20 of Schodula K-1 (Form 1065)	naliaging partnor?	malisating ownership Yes No	
	1											É	
	·F· 1				•								
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust organizations treated as a corporation or trust during the tax year.	ganizations Taxablo as reposition or trust during	s a Corpo) the tax y		mplete if the	Complete if the organization answered "Yos" on Form 990, Part IV, IIAA 34 because it had one or more related	answered "Yos"	on Form 990	Part IV, Ilo	e 34 bec	ause it had o	one or m	ore related	l_
(8)		i		(0)	(g)			3			€] _
Name, addross, and LIN of rotatod organization		Z	Pinnary activity	Legal comicilo (slate or fore:gn	Direct controlling entity	Ing Type of entity (C colp. S corp.		Share of total	다. 라마 아마 아마 아마 아마 아마 아마 아마 아마 아마 아마 아마 아마 아마	Share of Poend-of-yoar of	Реговинаде омпетарір	9 518(b)(18) 3 aprimoled 9 entity?	නු ව _ි
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302162 0k·12-13				42						Schedu	le H (For	Schedule R (Form 990) 2013	<u>-</u>

85-0425147 Page 3

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

Note. Complete line 1 if any entity is listed in Parts II, ill, or IV of this schedule.				Yes	2
1 During the tax year, did the organization ongago in any of the following transactions with one or more related organizations listed in Parts INVP	ns with one or more rei	rated organizations listed	in Parts INV?	1	
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				13	
is Gift, grant, or capital contribution to related organization(s)				=	
				10	
				19	
				-	
f Dividends from related organization(s)				1	
g Sale of assets to related organization(s)				10	
h Purchase of assets from related organization(s)				÷	-
				÷	
rolated organization(s)				=	
					ſ.,
k Lease of facilities, equipment, or other assets from related organization(s)				¥	
! Performance of services or membership or fundralsing solicitations for related organization(s)				-	
ni Performance of services or membership or fundraising solicitations by rolated organization(s)	Inization(s)			-tm	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				-	
:				0	
р Heimbursement pald to related organization(s) for expenses				13	
				19	
				7.7	.;.
r Other transfer of casts or property to related organization(s)				11.	
				19	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete this	s line, including covered a	relationships and transaction thresholds.		
(a) Name of related organization	(b) Transaction type (4:8)	(c) Amount Involved	(d) Method of determining amount involved	volved	1
E	-				1
(2)					1
(3)					
[4]]
					İ
(5)		i		İ	ļ
(9)					
S1-51-63 S61-325			Schedulo	Schedule R (Form 990) 2013	913

Page 4

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

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

(K) Acentage wnership					Schedule 8 (Form 980) 2013
(j) Carrector Per menegling or pariner?		<u> </u>			- 15 E
§§§¶∰ 8-	•	<u> </u>		 	
(h) (i) (j) (k) 18-propin Code V-UBI Centeage Rangular In Dox 20 menceding connership Rangular In Dox 20 menceding connership Rangular In State Percentage Percenta					Inpedos
(h) Esproprilianse Escalente Escalente Escalente Free No					
<u> </u>	<u> </u>		 		 <u> </u>
(g) Share of ond of year assets					
(f) Share of total income					
(e) Accid Cellors soc. 50(2)(5) Aus ?					
) Yes		ļ <u>.</u>		 	
(d) Steduminant income ca (letated, unrelated, exchoded from tax under section 512-514) y					
(c) Logal domicilo (state or foreign country)					
(b) Primary activity					
(a) (b) (c) (d) (d) (e) Name, address, and EIN Primary activity Logal domicile Preduminant income (state or foreign callulated, metaled, metaled, country) under section 512-514					

Schedule F	1 (Form 990) 2013	THE T	'AOS	COMMUNITY	FOUNDATION,	ŢŅC.	85-04251 <u>4</u> 7	Page 5
Part VII	Supplemental Info	ormation		•				
	Provide additional infor	mation for resi	ponses	to questions on Sci	hedule R (see instructio	ns)		
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