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## ALB770 04/22/2010 Form \$90

Department of the Treasury Internal Revenue Service

#### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

2008
Open to Public Inspection

Form **990** (2008)

7/01/08 6/30/09 For the 2008 calendar year, or tax year beginning and ending Albuquerque Rotary Charitable Please Check if applicable C Name of organization D Employer identification number use IRS Foundation, Inc. Address change label or 85-0371097 Doing Business As print or Name change type. Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Initial return See 505-242-2651 P.O. Box 3807 Specific Termination City or town, state or country, and ZIP + 4 1,680,160 G Gross receipts \$ Instruc-Albuquerque NM 87190 Amended return tions. Name and address of principal officer H(a) Is this a group return for Application pending Ann Singer affiliates? H(b) Are all affiliates P.O. Box 3807 Albuquerque NM 87190 If "No." attach a list, (see instructions) |X| 501(c) ( 3 ) **◄** (insert no.) Tax-exempt status website: ▶ www.rotaryabq.nm.org **H(c)** Group exemption number ▶ Type of organization X Corporation Trust Year of formation 1988 M State of legal domicile Part I Summarv Briefly describe the organization's mission or most significant activities To solicit and receive contributions, gifts, grants or bequests of SREMED JUNCWittes 2018 Pernance property to maintain, use and apply the income and the principal for charitable, scientific, literary, or educational purposes. 2 Check this box I if the organization discontinued its operations or disposed of more than 25% of its assets 10 Number of voting members of the governing body (Part VI, line 1a) 10 4 Number of independent voting members of the governing body (Part VI, line 1b) 0 5 5 Total number of employees (Part V, line 2a) 100 6 Total number of volunteers (estimate if necessary) 6 7a 7a Total gross unrelated business revenue from Part VIII, line 12, column (C) b Net unrelated business taxable income from Form 990-T, line 34 7b Prior Year Current Year 45 Contributions and grants (Part VIII, line 1h) 141 146,318 Program service revenue (Part VIII, line 2g) -103,647 78.517 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -92,468 -69,721 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12<mark>7,</mark>194 -27**,**050 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 43,950 51,251 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4). Salaries, other compensation, employee benefits (Part IX, column (A), lines ഗ്ഗ 16a Professional fundraising fees (Part IX, column (A), line 11e) RS-0 2010 b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f 24f) 380 14. 578 330 65,829 18 Total expenses Add lines 13-17 (must equal Part IX, column 65,864 -92, 879 19 Revenue less expenses Subtract line 18 from line 12 Beginning of Year End of Year 20 Total assets (Part X, line 16) 311 410 115, 389 25 776 21 Total liabilities (Part X, line 26) 089 22 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge ssar Sign Signature of officer Here Type or print name and title Preparer's identifying number Check if Preparer's (see instructions) Paid signature P00742516 employed Preparer's Broderick & Company, 20-0214657 EIN Firm's name (or yours Use Only 2201 San Pedro Dr NE 2-104 if self-employed), Phone address, and ZIP + 4 505-881-7721 Albuquerque, MM 87110 May the IRS discuss this return with the preparer shown above? (see instructions) Yes

DAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

(Must equal Part IX, Line 25, column (B).)

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4e Total program service expenses

P	art IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			ĺ
	Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		Х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VIII, IX, or X as applicable	11		Х
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	1		
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15_		_X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	-		
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		Χ
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete	1		
	Schedule J .	23		X
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 questions			
	24b–24d and complete Schedule K. If "No," go to question 25.	24a	LI	X
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
đ		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	25a	<b>  </b>	Х
b	·			
	person from a prior year? If "Yes," complete Schedule L, Part I	25b_	<del>                                     </del>	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			٠,
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u>X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or	1		

substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

27

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			l
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			ĺ
	complete Schedule L, Part IV	28b		Х
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			l
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			l
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			ĺ
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			 
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	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 .	37		Х

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509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?  Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		Statements Regarding Other IRS Finings and Tax Compliance					т —	т —
U.S. Information Returns. Enter-0- if not applicable Enter the number of Forms W-20 calculated in line 1s Enter 4- if not applicable U.S. Enter the number of Forms W-20 calculated in line 1s Enter 4- if not applicable U.S. Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, filed for the celember year ending with or within the year covered by this terturn I if all teads most is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1s and 2a is greater than 250, you may be required federal employment tax returns? Note, if the sum of lines 1s and 2a is greater than 250, you may be required federal employment tax returns? Note, if the sum of lines 1s and 2a is greater than 250, you may be required for eline this return. (see instructions) a. D. Id the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  b. If Yes, 'has if filed a Form 990-T for this year? If Yes,' provide an explanation in Schedule O. 3b. — 4 At any time during the celendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. In the second of the foreign country.  b. If Yes, 'enter the name of the foreign country. In the second of the s	12	Enter the number reported in Box 3 of Form 1096. Annual Summary and Transmittal of					Yes	No
be Enter the number of Forms W-2G included in line 1 a Enter J-I find applicable of the tonganization comply with backing withholding rules for reportable payments to vendors and reportable gaming (gambling) withings to prize withinses?  2a Enter the number of employees exported on Form W-3, Transmittal of Wage and Tax Statements, Rule for the calcular year ending with or within the year covered by this return?  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  3b If we will be used to the calcular year ending with or within the year covered by this return?  3c Note, If the sum of lines 1 and 7d as in geneter than 250, you may be required to effeit this return. (see institutions)  3c If Yes, 1 sea 4 filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  4c At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in organization prize of the organization of the organization in Schedule O  4c A tary time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in organization organi	ıa	•	12	l٥			l	
but the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (pambing) withrings to prize winners?  2a Entet the number of employees reported on Form W/3, Transmittal of Wigge and Tax  Statements, fled for the calendar year ending with or within the year covered by this tertum  If at least one is reported on line 25, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1s and 2s is greater than 250, you may be required federal employment tax returns?  Note. If the sum of lines 1s and 2s is greater than 250, you may be required for elificial this return. (see instructions)  3b Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  3c If Yes,* has filled a Form 990-T for this year? If Yillo,* provide an explanation in Schedule O.  3d At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. (such as a bank account, securities account, or other financial accounts?  3d If Yes,* enter the name of the foreign country. (so the security of the year of foreign Bank and Financial Accounts  3c Was the organization or party to a prohibited tax shelter transaction at any time during the tax year?  3d Was the organization protein that It was or is a party to a prohibited tax shelter transaction?  4d Yes, and the organization or that year or the party or prohibited tax shelter transaction?  5d Uff Yes, and the organization that It was or is a party to a prohibited tax shelter transaction?  5d Uff Yes, and the organization what it were not tax deductable?  5d Uff Yes, and the organization that it was or is a party to a prohibited tax shelter transaction?  5d Uff Yes, and the organization with were not tax deductable?  5d Uff Yes, and the organization noticed with every solicitation an express statement that such contributions or gradient prohibited Tax Shelter Transa	h	••		-				
againing (gambling) winnings to prize winners?  Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax  Statements, filed for the calendar year anding with or within the year covered by this return  If at least one is reported on line 2 a, did the organization file all required federal employment tix returns?  Note. If the sum of lines 1 a and 2 as greater than 250, you may be required federal employment tix returns?  3.3 Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  3.4 A tary time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account)?  3.6 If "Yes," enter the name of the foreign country. ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  3.6 Was the organization a party to a prohibited fax shelter transaction at any time during the tax year?  3.7 Did any tix vable party notify the organization that it was or is a party to a prohibited fax shelter transaction?  3.8 Was the organization and party to a prohibited fax shelter transaction?  3.9 Did the organization solicid swith every solicidation an express statement that such contributions or gifts were not tax deductible?  3.9 Did the organization ordical swith every solicidation an express statement that such contributions or gifts were not tax deductible?  3.0 Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$7.5°  3.7 Organizations that may receive deductible contributions under section 170(c).  3.8 Did the organization provide goods or services in exchange for any quid proque contribution of more than \$7.5°  3.0 Did the organization provide goods or services in exchange for individely or indirectly, to pay premiums on a personal benefit contract?  4.0 Did the organization ordicing the yea		••						1
2a Einer the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, field for the calonidar year ending with or within the year covered by this return? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3b Old the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 1b If "Yes," has if filed a Form 990-T for this year? If "No", provide an explanation in Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securises account, or other financial account) 2c If "Yes," enter the name of the foreign country.  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 2c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  5c Post the organization solicit any contributions that were not tax deductible?  5c Post the organization solicit any contributions what every solicitation an express statement that such contributions or gifts were not tax deductible?  5c Post the organization provide goods or services in exchange for any quid pro quo continbution of more than 375?  5c Post the organization provide goods or services in exchange for any quid pro quo continbution of more than 375?  7c Post protections that may receive deductible contributions under section 176(c).  7d If "Yes," indicate the number of Forms 8282 filed during the year  7d If	·		Ortabic	•		10	x	
Statements, filed for the calendar year ending with or within the year covered by this return  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)  3a	22		1 1	ſ		10	<u> </u>	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note, If the sum of lines 1a and 2 as greater than 230, you may be required to e-file this return. (see instructions)  3a Dut the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  3b If "Yes," has if filed a Form 990-T for this year? If "No", provide an explanation in Schedule O  3b If "Yes," and uning the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country.  5c If "Yes," enter the name of the foreign country.  5c Even the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  5c Was the organization all party to a prohibited tax shelter transaction at any time during the tax year?  5c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity  6c Regarding Prohibited Tax Scheler Transaction?  5c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity  6c Regarding Prohibited Tax Scheler Transaction?  5c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity  6c Regarding Prohibited Tax Scheler Transaction?  5c If "Yes," to did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c Tax Vision of the organization provide goods or services in exchange for any quid pro quo contributions or more than 575?  6c Tryes," indicate the number of Forms 8282 filed during the year  6c Tax Vision of the organization provide goods or services in exchange for any quid pro quo contribution of more than 575?  7c Tax Vision of the organization of qualified inellectual property, did the organization file a F	2.a		22	l ո				
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-flie this return. (see instructions)  3a   11 * Ves.*, has it flied a Form 990-T for this year? If *No.* provide an explanation in Schedule O 3b    3b   11 * Ves.*, fire the name of the foreign country. ▶  3ce the instructions for exceptions and filing requirements for Form *TD F 90-22 1, Report of Foreign Bank and Financial Accounts and Financial Acc	h					2h		
amstructions)  about the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  bit "Yes," has it filled a Form 990-T for this year? If "No," provide an explanation in Schedule O  At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts)  At any time and in a foreign country.  b If "Yes," either the name of the foreign country.  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  be Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Id any taxable party notify the organization filing from 8865-T, Disclosure by Tax-Exempt Entry Regarding Prohibited Tax Shelter Transaction?  c If "Yes," to question 5 acr 5b, did the organization file form 8865-T, Disclosure by Tax-Exempt Entry Regarding Prohibited Tax Shelter Transaction?  c If "Yes," do the organization shelt may receive deductible contributions an express statement that such contributions or grifts were not tax deductible?  c If "Yes," did the organization on include with every solicitation an express statement that such contributions or grifts were not tax deductible?  c If the organization provide goods or services in exchange for any quild pro quo contributions of more than \$759'  b If Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization on the form 8282 filed during the year  required to file Form 8282?  If Yes, "filed the organization on, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  f If X X If Yes, "filed the organization on the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  f If Yes, "form this town of cars, boats, airplanes, and oth	U		13:			10		
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  3a X  b If "Yes," has it filled a Form 990-T for this year? If "No," provide an explanation in Schedule O  3b I "Yes," this is the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securines account, or other financial account in a foreign country (such as a bank account, securines account, or other financial account in a foreign country.  See the instructions for exceptions and filling requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a X  b DI damy texable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b X the "Yes," of during upsticing the organization in Form 808-T. Disclosure by Tax-Exempt Entity  Regarding Prohibited Tax Shelter Transaction?  5b DI the organization shoth arm yorithributions that were not tax deductible?  5c So DI the organization include with every solicitation an express slatement that such contributions or gifts were not tax deductible?  5c So DI the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?  7b DI the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?  7c X W  If "Yes," did the organization notify the donor of the value of the goods or services provided?  7c Did the organization shall may receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7d Uniform the provide goods or services in the provided of the provided or								
this return?  If "Yes," has it flied a Form 990-T for this year? If "No," provide an explanation in Schedule O  At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account?  At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account?  At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country.  If "Yes," either the name of the foreign country.  Sae the instructions for exceptions and filling requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  Sae the instructions for exceptions and filling requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  Sae We instructions for exception and filling requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  Sae We instruction for exception and filling requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  Sae We instruction for exception and filling requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  If "Yes," to guestion 5a or 5b, did the organization file Form 8896-T, Disclosure by Tax-Exempt Entity  Regarding Prohibited Tax Shetter Transaction?  So If "Yes," to guestion 5a or 5b, did the organization file Form 8898 is required to file the organization include with every solicitation an express statement that such contributions or grid with the support of the goods or services provided?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  If "Yes," did the organization notify the donor of the value of the goods or services provided?  If "Yes," indicate the number of Forms 8282 filed during the year and the foreign such as a file of the proparization sell, exchange, or otherwise dispose of langible personal property for which it	3a	·	l by			ł		
A tary time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country.  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization appriy to a prohibited tax shelter transaction at any time during the tax year?  5b Id any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  6c If *Yes,** to question Sa or Sb, did the organization file Form 8886-T, Disclosure by Tax-Exempl Entity  Regarding Prohibited Tax Shelter Transaction?  6c Dut the organization of prohibited Tax Shelter Transaction?  6d Dut the organization of the state of the organization provide goods or services in exchange for any quid pro quic contribution of more than \$75?  7a X  1f *Yes,** did the organization notify the donor of the value of the goods or services provided?  7b If *Yes,** indicate the number of Forms 8282 filed during the year required to file Form 8282.  7c X  7f Ves,** indicate the number of Forms 8282 filed during the year organization file Form 8899 as required?  7d Did the organization of Juming the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7b Did the organizat			•			3a		Х
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organization, have excess business holdings at any time during the year?  Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?  Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations. Enter  Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	8							
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?  9 Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  1 Section 501(c)(12) organizations. Enter  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12b		509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a spon-	soring					
Did the organization make any taxable distributions under section 4966?  Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12  Did Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations. Enter  Gross income from members or shareholders  Did Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  Dif "Yes," enter the amount of tax-exempt interest received or accrued during the year						8		<u>X</u>
b Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12  B Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations. Enter  Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12b	9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.				ļ		
O Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  1 Section 501(c)(12) organizations. Enter  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  10a  10a  11b  11b	а	Did the organization make any taxable distributions under section 4966?						
a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b Section 501(c)(12) organizations. Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  10a 10b 11b 12a	þ					9b		X
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  1 Section 501(c)(12) organizations. Enter  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  10b  11a  11a  12a  12a	0	Section 501(c)(7) organizations. Enter:						
Section 501(c)(12) organizations. Enter  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12a	а	• •						
a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  11a  11b  12a  12a			[10b]			_		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	1							
amounts due or received from them.)  2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	а		11a			_		
2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	b							
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	_	•				<del></del>		
						12a		
	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		<del></del>	<u> </u>		

Form 990 (2008) Albuquerque Rotary Charitable 85-0371097 F

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management						
						Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe	the					
	circumstances, processes, or changes in Schedule O. See instructions	1	1				
1a	Enter the number of voting members of the governing body	1a	<u>L</u> :	10	<u> </u>		
b	Enter the number of voting members that are independent	1b		10	]		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with			]		
	any other officer, director, trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customarily performed by or under the o	direct					
	supervision of officers, directors or trustees, or key employees to a management company or other per				3		_X
4	Did the organization make any significant changes to its organizational documents since the prior Form		was	filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets'	?			5		X
6	Does the organization have members or stockholders?				6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more mem	bers					
	of the governing body?				7a		<u>X</u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other person	ns?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken du	ring		•			
	the year by the following:						
а	The governing body?				8a	Х	
b	Each committee with authority to act on behalf of the governing body?				8b	Χ	
9a	Does the organization have local chapters, branches, or affiliates?			•	9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such cha	apters,	i,				
	affiliates, and branches to ensure their operations are consistent with those of the organization?				9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All orga	nızatio	ons				
	must describe in Schedule O the process, if any, the organization uses to review the Form 990				10	Х	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be read	ched a	at	·			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O				11		X
Sec	tion B. Policies						
						Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13				12a		<u>X</u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could	give					
	rise to conflicts?				12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye	es,"					
	describe in Schedule O how this is done				12c		
13	Does the organization have a written whistleblower policy?				13		<u>X</u>
14	Does the organization have a written document retention and destruction policy?				14		X
15	Did the process for determining compensation of the following persons include a review and approval by	ру					1 :
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and	decisio	ıon.				
а	The organization's CEO, Executive Director, or top management official?				15a		<u>X</u>
b	Other officers or key employees of the organization?				15b		X
	Describe the process in Schedule O (see instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	ent					
	with a taxable entity during the year?				16a		<u>X</u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evalua						
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeg	guard			-		1
	the organization's exempt status with respect to such arrangements?		_	<del></del>	16b		
	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed NM						
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (5	i01(c)(	(3)s	only)			
	available for public inspection. Indicate how you make these available. Check all that apply						
	Own website Another's website X Upon request	_	_				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, con	iflict of	f int	erest			
	policy, and financial statements available to the public.						
20	State the name, physical address, and telephone number of the person who possesses the books and		ds o	f the			
	organization ▶ Ann Singer 3301 Menaul			7			
ות	buquerque N	M 8	5/3	LU /			

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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

(A)	x if the organization did not compensate any officer, director, trustee, or key employee  (B) (C) (D) (E)  Average Position (check all that apply) Reportable Reportable					(F) Estimated				
Name and Title	hours per week	Individual trustee or director		Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Keith D. Bal										
Director	1	X			_			0	0	
Tony Fernand										
Director	1	X			L		_	0	0	(
Tracy R. Spr	oul						ĺ			
Director	1	X						0	0	(
Janet M. Tho	mpson									
Director	1	X	<u> </u>		<u> </u>		_	0	0	
John Shoemak	er									
Director	1	<u> </u>					_	0	0	(
Larrry W. Mc	Clintock				l			_		
Director	1	X			<u> </u>			0	0	(
Dianna J. Sh										
President	2		<u> </u>	Х	<u> </u>	<u> </u>	<u> </u>	0	0	(
Robert C. Ja		ı			ŀ					
Vice Pres.	2			Х	-			0	0	
4	tevens			.,					0	,
Secretary	2	+-	<u> </u>	X				0	0	(
Mark C. Meie				٠,						
<u>Treasurer</u>	2			X				0	0	(
<del></del>		-								
1										

<u>. Ра</u>	rt VII Section A	A. Officers, Directors, Trus	stee:	s, Ke	ey Er	npic	yees	s, ar	na Hignest Compensated	Employees (continued)				
(A) (B) (C)  Name and title Average Position (check all that apply)					(D)	(E)		(F)						
	Name and title	Average	$\vdash$			,	,		Reportable	Reportable		Estima		
		hours per week	吕콜	Inst	Officer	Key employee	൲	Former	compensation	compensation	1	amoun		
		week	檀	Ē	ह	e a	best	럘	from the	from related organizations	١,	othe ompens		
			힞튵	ona.		ğ	8g		organization	(W-2/1099-MISC)	`	from t		
			Individual trustee or director	Institutional trustee		yee	Highest compensated employee	Ì	(W-2/1099-MISC)	,	İ	organiza		
			8	St e	ĺ		) Sa					and rela		
				"			Ē				'	organiza	tions	
						<del>                                     </del>								
			$\vdash$	$\vdash$	_		_	_			<del>                                     </del>			
	· ·	•												
				-										
			Н											
	·													
	•													
	•													
	•													
1b	Total							<b></b>						
2		viduals (including those in 1	la) w	/ho r	ecei	ved i	more	tha	n \$100,000 in reportable co	ompensation from the				
	organization ▶ 0		•											
													Yes	No
3	Did the organization	list any former officer, dire	ctor	or tri	ustee	e, ke	y em	ploy	ee, or highest compensate	ď	1			
	employee on line 1a	? If "Yes," complete Schedu	ule J	for s	such	ındı	/ıdua	ı				3		X
4	For any individual lis	ted on line 1a, is the sum o	f rep	ortal	ble c	omp	ensa	ition	and other compensation fr	om			ł	
	_	related organizations grea	ter th	nan S	\$150	,000	?  f "	Yes	," complete Schedule J for	such		~-	ł	X
5	Individual	t on line 1a receive or accri	ue c	nmne	anea	tion	from	anv	unrelated organization for		1	4		
·		the organization? If "Yes,"										5		X
Sec	tion B. Independent													
1		for your five highest compe	nsate	ed in	depe	ende	nt co	ntra	actors that received more th	an \$100,000 of				
		(A) Name and business address							Description	(B) bon of services		Con	(C) npensati	on
					_		_	_						
		· · · · · · · · · · · · · · · · · · ·								· <del>-</del>		-	_	
	<del> </del>													
2	Total number of inde compensation from t	pendent contractors (included the organization ▶	ling i	thos	e in '	1) wi	no re	ceiv	red more than \$100,000 in			0		
													000	

<u> Pa</u>	<u>irt V</u>	III Stater	<u>nent of Rev</u>	<u>renue</u>		,,, .,, ., ., ., ., ., ., ., ., ., ., .,				
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
S S	1a	Federated car	mnaions	1a		·····		Tevenue		512, 513, 01 514
Program Service Revenue   Contributions, gifts, grants and other similar amounts	h	Membership o		1b		· · · · · ·				
P. B		Fundraising e		1c	1	04,559				
ifts	ا ا	-			<u>_</u>	04,339				
i.g	a	Related organ	1	1d						
Sin	е	Government grants	,	1e		<del></del>				
ğ	f	All other contribution	ns, gifts, grants, s not included above							
달등						41,759 83,559				
P	g	Noncash contribution		la-1f \$	;	83,559				
<u>0"</u>	h	Total. Add line	es 1a-1f			<u> </u>	146,318			
Jue						Busn. Code				
e e	2a									
ž	b									
ķ	С									
Ser	d						_			
ᇤ	е		•							
ğ	f	All other progr	am service rev	enue						
ے	g	Total. Add line				<b></b>				
	3	Investment inc	come (including	divider	nds, interes	t, and				
		other similar a	mounts)			•	20,397			20,397
	4	Income from it	nvestment of ta	x-exem	pt bond pro	ceeds >				
	5	Royalties				•		-		
		•	(ı) Real		(II) Pe	ersonal				
	6a	Gross Rents	-							
	b	Less rental exps							* *	
	c	Rental inc or (loss)								!
	ď	Net rental inco			·	<u> </u>				
	7a	Gross amount from	(i) Secunti	es	T (u)	Other				
		sales of assets	1 4 6 6		(.,					
	ь.	other than inventory  Less cost or other	1,102	., 000						
	U	basis & sales exps	1,586	5 700						
	С	Gain or (loss)		,044	<del> </del>					
	d	Net gain or (lo		7011	<u> </u>	•	-124,044			-124,044
		Gross income from		onte			121,011			124/044
ا و	Va	(not including \$								l 1
립		of contributions r								i i
اق		See Part IV, line		″a		50,789				1
Other Revenu	h	Less: direct ex		b		120,510				1
美		Net income or		- 1		120,510 •	-69,721	-69,721		<del></del>
۲		Gross income from		7	- V-01113		09,121	09,121	<u>-</u>	
	Ja	See Part IV, line		ವ. a						
ļ	ь	Less direct ex		b						
		Net income or	-		nutios					
		Gross sales of		- 1	IVILIES					
	IVa	returns and all	=	a						
	5	Less: cost of g		. a						1
		=		- 1	·onton	<b>•</b>	The state of the s			
ŀ		Net income or	ellaneous Revenu			Busn. Code				;
ŀ	440	Wilse	ellaricous revent	-		Dusii. Oode				
	11a				}					
ļ	b				ł					
Ì	٦ C	All 645-5-5-5			}		-			
	d	All other reven			ι					
		Total Revenue		2- 2	4 E C-1 T-1	. •		<u> </u>		
	12	Total Revenue		, ∠g, ૩, ⁴	4, 5, 60, /0	_ 1	27 050	60 701	۸	. 102 647
		9c, 10c, and 1	ie				-27,050	-69,721	0	-103,647

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

		(4)	(B) I	(0)	· · · · · · · · · · · · · · · · · · ·
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b	, 8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	3		54 054		
	organizations in the U.S. See Part IV, line 21	51,251	51 <b>,</b> 251		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22			<u> </u>	
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
•	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	· ·		····	
11	Fees for services (non-employees)				
	Management		·		
	Legal	6,009	<del></del>	6,009	
	Accounting	0,009		0,009	
	Lobbying	· · · · · · · · · · · · · · · · · · ·			
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees		_	+	<u>-</u>
	Other		<del></del>	-	
12	Advertising and promotion	1 200		1 200	
13	Office expenses .	1,266		1,266	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
				ļ	
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				:
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				,
а	Investment Fees	7,303		7,303	
b			<u>_</u>		
С					
d					
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	65,829	51,251	14,578	
26	Joint Costs. Check here ▶ if following		<u> </u>		
	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation				

	,			(A) Beginning of year		(B) End of year		
_	1	Cash—non-interest bearing	<del></del>	63,488	1	43,904		
	2	Savings and temporary cash investments		36,065		1,001,004		
	3	Pledges and grants receivable, net		64,621	3	68,993		
	4	Accounts receivable, net	•	04,021	4	00,333		
	1	·	austons kov					
	5	Receivables from current and former officers, directors, to			5			
	_	employees, or other related parties. Complete Part II of S	•		-			
	6	Receivables from other disqualified persons (as defined in						
		4958(f)(1)) and persons described in section 4958(c)(3)(E	o) Complete					
	۱ ـ	Part II of Schedule L			6			
ets	7	Notes and loans receivable, net			7			
Assets	8	Inventories for sale or use		-	8	1 400		
4	9	Prepaid expenses and deferred charges	١ ا		9	1,488		
	10a		10a					
	b	Less accumulated depreciation Complete						
		Part VI of Schedule D	10b	1 1 1 1 2 2 2 2	10c			
	11	Investments—publicly traded securities		1,147,236				
	12	Investments—other securities See Part IV, line 11			12	· <del></del>		
	13	Investments—program-related. See Part IV, line 11			13			
	14	Intangible assets			14			
	15	Other assets See Part IV, line 11			15			
	16	Total assets. Add lines 1 through 15 (must equal line 34)		1,311,410	16	1,115,389		
	17	Accounts payable and accrued expenses			17	7,000		
	18	Grants payable			18			
	19	19	18,776					
46	20	Tax-exempt bond liabilities			20			
Liabilities	21	Escrow account liability. Complete Part IV of Schedule D			21			
III	22	Payables to current and former officers, directors, trustee	s, key					
ab		employees, highest compensated employees, and disqua						
٦		persons. Complete Part II of Schedule L  Secured mortgages and notes payable to unrelated third parties  22  Secured mortgages and notes payable to unrelated third parties						
	23							
	24	Unsecured notes and loans payable			24			
	25	Other liabilities Complete Part X of Schedule D			25			
	26	Total liabilities. Add lines 17 through 25	·		26	25,776		
S		Organizations that follow SFAS 117, check here ▶ X	and					
nces		complete lines 27 through 29, and lines 33 and 34.	=					
<u> a</u>	27	Unrestricted net assets		1,075,095	27	869,387		
Bala	28	Temporarily restricted net assets		236,315	28	220,226		
힏	29	Permanently restricted net assets			29			
Fund		Organizations that do not follow SFAS 117, check here	e <b>▶</b> 🗍					
ᄓ		and complete lines 30 through 34.						
S	30	Capital stock or trust principal, or current funds			30			
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment	fund		31			
š	32	Retained earnings, endowment, accumulated income, or			32			
7	33	Total net assets or fund balances		1,311,410	33	1,089,613		
ž	34	Total liabilities and net assets/fund balances		1,311,410	34	1,115,389		
Pa	art X							
						Yes No		
1	Acc	ounting method used to prepare the Form 990 Ca	ash X Accrual	Other				
2a		re the organization's financial statements compiled or review		countant?		2a X		
b		re the organization's financial statements audited by an inc	•			2b X		
		es" to lines 2a or 2b, does the organization have a commi	•	ollity for oversight of				
•		audit, review, or compilation of its financial statements an	•	· -		2c X		
3a		a result of a federal award, was the organization required t	•	•				
		Single Audit Act and OMB Circular A-133?		<del></del>		3a X		
h		'es," did the organization undergo the required audit or au	dits?			3b		
		es, ale allo organization andorgo the required addit of add						

## SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Nam	e of t	he organizatio	Albuquerque Foundation,		Charitab	le						oloyer identific		umber
P	art I	Reas	on for Public Charity		Il organization:	s must	comple	te this	part.)	(see i				
		<del></del>	a private foundation because	•						<u> </u>		,		
1			nvention of churches, or ass		<del>-</del>	_	•	MAMi).						
2	Н	-	scribed in section 170(b)(1)			0000.01.	()(	<i>,,,,,,</i> ,						
3	Н		a cooperative hospital serv			ction 170	hV4VAVi	iii) (Atta	ch Scha	dule H				
4	Н	•	search organization operate	=								enitalie name		
4	ш		= :	a in conjuncti	on with a nospital t	Jescribed	iii Secuoi	11 170(1)	( 1)(^)(1)	ı, Liilei	the no	spital 5 Hairie,		
5		city, and state An organizat	e ion operated for the benefit	of a college o	r university owned	or operate	ed by a go	overnme	ntal unit	describ	ed in			
	_	section 170	(b)(1)(A)(iv). (Complete Par	t II.)										
6	Ш	A federal, sta	ate, or local government or g	jovernmental	unit described in se	ection 17	0(b)(1)(A)	)(v).						
7	$\sqcup$	An organizat	ion that normally receives a	substantial pa	art of its support fro	m a gove	rnmental	unit or fr	om the	general	public			
		described in	section 170(b)(1)(A)(vi). (C	omplete Part	II.)									
8		A community	trust described in section	170(b)(1)(A)(v	i). (Complete Part	II.)								
9	X	An organizat	ion that normally receives. (	1) more than 3	33 1/3 % of its supp	port from	contributio	ons, men	nbership	fees, a	nd gros	ss		
		receipts from	activities related to its exer	npt functions-	-subject to certain	exception	s, and (2)	no mor	e than 3	3 1/3 %	of its			
		support from	gross investment income a	nd unrelated b	ousiness taxable in	come (les	s section	511 tax)	from bu	isinesse	s			
		acquired by t	he organization after June 3	30, 1975. See	section 509(a)(2).	(Complet	e Part III.	)						
10	$\Box$	An organizati	ion organized and operated	exclusively to	test for public safe	ety See s	ection 50	9(a)(4).	(see inst	tructions	s)			
11	An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the													
		purposes of o	one or more publicly suppor	ted organizatio	ons described in se	ection 509	(a)(1) or s	section 5	09(a)(2)	. See s	ection			
	509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h													
		а П Туре	el bo. ∏ Typell	c 🗌	Type III-Functions	ally Integr	ated	ď	🗌 Тур	e III–Ot	her			
е		By checking t	this box, I certify that the org	anization is n	ot controlled directl	y or indire	ctly by or	e or mo	re dısqu	alıfied				
		persons othe	r than foundation managers	and other tha	in one or more pub	licly supp	orted orga	anizatıon	s descri	bed in s	ection			
		509(a)(1) or s	section 509(a)(2).											
f		If the organiz	ation received a written dete	ermination from	n the IRS that it is	a Type I,	Type II, or	Type III	support	ing				
		organization,	check this box											
g		Since August	t 17, 2006, has the organiza	tion accepted	any gift or contribu	ition from	any of the	9						
		following per	rsons?											
		(i) A persor	n who directly or indirectly co	ontrols, either	alone or together v	vith perso	ns descril	bed ın (ıı	)				Yes	No
		and (ıiı) l	below, the governing body o	of the supporte	ed organization?							11g(i)		
		(ii) A family	member of a person describ	bed in (ı) abov	re?							11g(ii)		
		(iii) A 35% c	ontrolled entity of a person	described in (i	) or (iı) above?							11g(iii	)	
h		Provide the f	following information about t	the organization	ons the organizatio	n support	s							
(i)	Name	of supported	(ii) EIN	(iii) Type	e of organization	(iv) is the	organization	(v) Did v	ou notify	(vi)	s the	(vii) Am	ount of	
``		anization	` '	(describ	ed on lines 1-9		sted in your	the organ	uzation in	organizat	ion in col	sup		
					or IRC section nstructions))	governing	document?		of your cort?	(i) organı	zed in the			
				1966 11	iisti uctions))	Yes	No	Yes	No	Yes	No			
		·	<del> </del>	<del> </del>	51.4	1	'''							
						i						:		
			<del>  -</del>	<del>                                     </del>			<del>                                     </del>			-				
				İ								1		
						<del>                                     </del>	<del> </del>	<del> </del> -						
			<del> </del>			<del>                                     </del>								
		-		<u> </u>										
						<u></u>								

Se	ction B. Total Support						
C	alendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						

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

Section C. Computation of Public Support Percentage Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 % 15 33 1/3 % support test—2008. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box

and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support test—2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions 18

Schedule A (Form 990 or 990-EZ) 2008

12

12

Gross receipts from related activities, etc (see instructions)

Section A. Public Support

85-0371097

Page 3

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Ca	llendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	99,234	71,145	206,977	141,145	146,318	664,81
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	73,015	53,878	39,038	50,196	50,789	266,910
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5	172,249	125,023	246,015	191,341	197,107	931,735
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000	68,015	48,878	34,038	45,196	45,789	241,916
С	Add lines 7a and 7b	68,015	48,878	34,038	45,196	45,789	241,916
8	Public support (Subtract line 7c from	104,234	76,145	211,977	146,145	151,318	
500	tion B. Total Support		<u></u>	<u>.</u>			689,819
	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	172,249	125,023	246,015	191,341	197,107	931,735
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	24,813	35,969	23,969	53,268	20,397	158,416
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	24,813	35,969	23,969	53,268	20,397	158,416
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)	197,062	160,992	269,984	244,609	217,504	1,090,151
14	First five years. If the Form 990 is for the organization, check this box and stop here	=	second, third, fourth	n, or fifth tax year	as a section 501(c)	(3)	<b>&gt;</b> [
<u>Sec</u>	tion C. Computation of Public Su	pport Percent	age				
15	Public support percentage for 2008 (line 8,	**	•	<b>(f)</b> )		15	63.2774 %
16	Public support percentage from 2007 Sche			· · · · · · · · · · · · · · · · · · ·		16	87.5507 %
-	tion D. Computation of Investme				<del></del>		<del> </del>
17	Investment income percentage for 2008 (lin			olumn (f))		17	14.5316 %
18	Investment income percentage from 2007 3			A and line 45 is =	noro than 22 4 <i>1</i> 2 m		12.4493 %
19a	33 1/3 % support tests—2008. If the organ 17 is not more than 33 1/3 %, check this bo	ox and stop here. T	he organization qu	alifies as a publici	y supported organi	zation	<b>▶</b> [X
b	33 1/3 % support tests—2007. If the organ						
	line 18 is not more than 33 1/3 %, check th		=				₹  -
20	Private foundation. If the organization did	not check a box on	iine 14, 19a or 19b	, cneck this box a	na see instructions		<u></u> ▶ <u>L</u>

Schedule A (Form 990 or 990-EZ) 2008 Albuquerque Rotary Charitable

85-0371097

Page 4

Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Financial Statements**

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
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Name of the organization Employer identification number Albuquerque Rotary Charitable 85-0371097 Foundation, Inc. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990. Part IV line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c C d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year Number of states where property subject to conservation easement is located 5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

-		ue Rotary Cha			371097	Page 2
	art III Organizations Maintaining					ets (continuea)
3	Using the organization's accession and other items (check all that apply):	records, check any of the	following that are a s	significant use of its	collection	
а	Public exhibition	d \ Loan	or exchange prograr	ms		
b	Scholarly research	e Other	or onumengo program	•		
c	Preservation for future generations	0 🗀 011101		- <del>-</del>		-
	_		h	-i4il4		
4	Provide a description of the organization's col Part XIV.	lections and explain now t	ney turtner the orgai	nization's exempt pu	irpose in	
	During the year, did the organization solicit or assets to be sold to raise funds rather than to	be maintained as part of t	he organization's co	llection?		Yes No
Pa	rt IV Trust, Escrow and Custod				red "Yes" to F	orm 990,
	Part IV, line 9, or reported a		<u> </u>			
1a	Is the organization an agent, trustee, custodia	n or other intermediary for	contributions or oth	er assets not		
	included on Form 990, Part X?					∐ Yes ∐ No
b	If "Yes," explain the arrangement in Part XIV a	and complete the following	table <sup>.</sup>			
						Amount
C	Beginning balance				1c	
d	Additions during the year				1d	
е	Distributions during the year				1e	
f	Ending balance		•		1f	
2a	Did the organization include an amount on Fo	rm 990, Part X, line 21?	•	•		∐ Yes ☐ No
<u>b</u>	If "Yes," explain the arrangement in Part XIV					
Pa	rt V Endowment Funds. Compl	lete if organization a	nswered "Yes"	to Form 990, Pa	art IV, line 10.	
	<u> </u>	(a) Current year	(b) Pnor year	(c) Two years back	(d) Three years b	ack (e) Four years back
1a	Beginning of year balance	465,498	······			
b	Contributions		<del></del>			
C	Investment earnings or losses	-87 <b>,</b> 187				
d	Grants or scholarships					
е	Other expenditures for facilities					
	and programs					
f	Administrative expenses					
g	End of year balance	378,311				
2	Provide the estimated percentage of the year	end balance held as			<del>-</del>	<del></del>
а	Board designated or quasi-endowment	100.00%				
ь	Permanent endowment ▶ %					
С	Term endowment ▶ %					
	Are there endowment funds not in the possess	sion of the organization tha	at are held and admi	nistered for the		
	organization by	•				Yes No
	(i) unrelated organizations					3a(i) X
	(ii) related organizations	•	•			3a(ii) X
ь	If "Yes" to 3a(ii), are the related organizations	listed as required on Sche	dule R?			3b
4	Describe in Part XIV the intended uses of the	•				<u></u>
Pa	rt VI Investments—Land, Buildi			0. Part X. line 1	0.	
	Description of investment	(a) Cost or other basis	(b) Cost or oth		epreciation	(d) Book value
	•	(investment)	basis (other			
1a	Land					<u> </u>
	Buildings					
	Leasehold improvements		1	- <del></del>		<del></del>
	Equipment					
	Other					
	. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X. column (B	3), line 10(c).)		<b>•</b>	
			·			

Schedule D (Form 990) 2008 Albuquerque Rotary Cha		85-0371097	Page :
Part VII Investments—Other Securities. See Form 99			
(a) Description of security or category	(b) Book value	(c) Method of val	
(including name of security)		Cost or end-of-year m	arket value
Financial derivatives and other financial products			
Closely-held equity interests			<del> </del>
Other	_		
- <b></b>			
		<u> </u>	
			<u> </u>
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See Form 99	0, Part X, line 13.		
(a) Description of investment type	(b) Book value	(c) Method of val	uation
		Cost or end-of-year m	arket value
	-		
<del> </del>			
			,
- W			
	<u> </u>		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX   Other Assets. See Form 990, Part X, line 15.			
(a) Description		· I	(b) Book value
			-, `,'
			· · · · · · · · · · · · · · · · · · ·
			· · · · · · · · · · · · · · · · · · ·
		•	
	·		
	-		
Total. (Column (b) should equal Form 990, Part X, col (B) line 15)		<b>•</b>	
Part X Other Liabilities. See Form 990, Part X, line 25	5		<del></del>
(a) Description of liability	(b) Amount	*	·
Federal income taxes	(b) randam	†	
ederal moonie taxes		†	
	_	-	
		4	
		4	
		-	
	<del> </del>	-	
		-{	
	<del> </del>	-	
	<u> </u>	4	
		1	
otal. (Column (b) should equal Form 990, Part X, col (B) line 25.)	<u> </u>		
n Part XIV, provide the text of the footnote to the organization's financial state	ements that reports the org	anization's liability for	
incertain tax positions under FIN 48			

Sche	dule D (Form 990) 2008 Albuquerque Rotary Charitable		85-037109	<u> 7                                    </u>	Page 4
Pa	art XI Reconciliation of Change in Net Assets from Form 990 to	<u>o Fina</u>	ncial Statements	<del></del>	<del>, </del>
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities _			_5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4-8			9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Statem	ents W	lith Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	_2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	] ]			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)			5	
	rt XIII Reconciliation of Expenses per Audited Financial Staten	nents \	Nith Expenses per l	Retur	'n
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b		1 !	
	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d		1 1	
	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:	1 1			
	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
h	Other (Describe in Part XIV)	4b		1 1	
	Add lines 4a and 4b	_ <del>10</del> _		4c	
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	•		5	
	rt XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines	nes 12 au	nd 4 Part IV lines 1h		<del></del>
	the descriptions required for Part II, lines 3, 3, and 3, Part III, lines 2d and 4b, and Part XIII, lines 2d and 4b, a		IU 4, Falt IV, lines ID		
			nde		
'	<u> Part V, Line 4 - Intended Uses for Endowmen</u>	<u>ıc ru</u>	<u> 11α5</u> – – – –	· — ·	
	<u> The board-designated endowment fund is an i</u>	<u>nter</u>	<u>nally designa</u>	it <u>e</u> d	_f <u>und</u>
_'	<u>created_so                                    </u>	<u>nve</u> s	<u>ted</u>	· — ·	
_		<b>–</b> – ·	<del>-</del>	· — ·	
_					
-		<del>-</del> - ·	<del>-</del> -		
_					
-	· <del>-</del> _ <del>-</del>				

#### SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

# Supplemental Information Regarding Fundraising or Gaming Activities

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Albuquerque Rotary Charitable

OMB No 1545-0047

**Employer identification number** 

Open To Public Inspection

85-0371097 Foundation, Inc. Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Solicitation of government grants Email solicitations Special fundraising events Phone solicitations In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table (iii) Did fund-(ii) Activity (iv) Gross receipts (v) Amount paid to (vi) Amount paid to (i) Name of individual raiser have from activity (or retained by) (or retained by) or entity (fundraiser) custody or organization fundraiser listed in control of contributions? col (i) Yes List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Page 2

<u> P</u>	art l				anization answere 6a. List events w					epon	ea
		more than with	(a) Event f	n ll Fie	(b) Event #2 Spring Fli		(c) Other Events  None (total number)		(d) Total (Add col (i	a) throu	gh
Revenue	1	Gross receipts		L21 <b>,</b> 957		33,391			1	55,	348
œ	2	Less Charitable contributions		99 <b>,</b> 559		5,000				04,	
	3	Gross revenue (line 1 minus line 2)		22,398	2	28,391				50,	789
	4	Cash prizes									
ses	5	Non-cash prizes									
Direct Expenses	6	Rent/facility costs							<del></del>		
Direc	7	Other direct expenses	1	L01,665		L8,845			1	20,	510
D	8 9 art l	Net income summary Com	ombine lines 3 and 8	in column (d)	d) swered "Yes" to Fo	orm 990	Part IV line 19	or ren	_	20, 69,	510) 721
F	ait i		on Form 990-EZ		swered res to r			от тер	onca more		
Revenue			(a) Bingo		(b) Pull tabs/Insta bingo/progressive b		(c) Other gaming		(d) Total gan col (a) throu		
Rev	1_	Gross revenue									
ses	2	Cash prizes									
Direct Expenses	3	Non-cash prizes									
Direct	4	Rent/facility costs									
	5	Other direct expenses									
	6	Volunteer labor	Yes .	%	Yes No	%	Yes No	%			
	7	Direct expense summary	Add lines 2 through	5 in column (d	. (E			<b>•</b> (			
	8	Net gaming income sumr	mary Combine lines	1 and 7 in colu	ımn (d)			•			
9		er the state(s) in which the							-	Yes	No
a b		he organization licensed to No," Explain	o operate gaming act	villes in each	or these states?			•	<u>9a</u>		
10a b		re any of the organization res," Explain.	's gaming licenses re	voked, suspei	nded or terminated duri	ng the tax ye	ear?		10a		-
11 12	ls t	es the organization operat he organization a grantor,	beneficiary or trustee			nip or other e	entity		11		,
	forr	ned to administer charitab	ole gaming?				Schedu	ile G (Fo	12 orm 990 or 99	90-EZ)	2008

	edule G (Form 990 or 990-EZ) 2008 Albuquerque Rotary Charitable	85-03710	97	F	Page 3	š
_				Yes	No	_
13	Indicate the percentage of gaming activity operated in					Į
а	The organization's facility	13a 9	_	]		-
b	An outside facility	13b 9	6			1
14	Provide the name and address of the person who prepares the organization's gaming/special events books		Ì			
	and records					
	Name ►					
	Address ▶					
15a	Does the organization have a contract with a third party from whom the organization receives gaming					
	revenue?		15a	ļ	Ļ	
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$	and the				
	amount of gaming revenue retained by the third party ▶ \$ .					-
С	If "Yes," enter name and address					
	Name ▶ .					-
	Address ►					-
16	Gaming manager information					
	Name ▶					
	Gaming manager compensation ▶ \$					
	Description of services provided ▶					
	☐ Director/officer ☐ Employee ☐ Independent contractor					į
17	Mandatory distributions					
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to				<b> </b>	
	retain the state gaming license?		17a			
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent	•				
	in the organization's own exempt activities during the tay year		1	1 :	1 1	

Schedule G (Form 990 or 990-EZ) 2008

5	
22/2	
9	
8770	
¥	

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

OMB No 1545-0047. 2008

X Yes

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

Foundation,

Part I

Open to Public Inspection Employer identification number 85-0371097 ► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990. Rotary Charitable General Information on Grants and Assistance Albuquerque

<b>≗</b> □		it l	ת					
⊠ Yes	wered "Yes" on ore than \$5,000. Ut	(h) Purpose of grant or assistance	General Support					
	ganization ansv ent received mo	(g) Description of						
	nplete if the org no one recipie	(f) Method of valuation (book, FMV, appraisal, other)						
in the United States.	ited States. Con Check this box if	(e) Amount of non-cash assistance					·	
	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	(d) Amount of cash grant	22,000					
ant funds ır		(c) IRC section if applicable	m					
the selection criteria used to award the grants or assistance?  2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	vernments and scipient that rectional sites of the scipient that rectional sites of the scipient sites of the scient	(p) EIN	85-0135073					
	Grants and Other Assistance to Governments and Form 990, Part IV, line 21, for any recipient that rece Part IV and Schedule I-1 (Form 990) if additional spi	s of organization ment	NM 87107					
the selection criteria used to Describe in Part IV the organ	Part II Grants and Or Form 990, Par Part IV and Sc	(a) Name and address of organization or government	RCI, Inc. 1111 Menaul Blvd. NE Albuguergue					
• •		Ι΄	N L K			•		

Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations

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

Schedule I (Form 990) 2008

Page 2 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. 85-0371097 Use Schedule I-1 (Form 990) if additional space is needed Schedule (Form 990) 2008 Albuquerque Rotary Charitable Part III

_	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	omplete this part to p	provide the informati	on required in Part I,	line 2, and any other addit	ional information.

Procedures for Monitoring the Use of Grant Funds ı Part I, Line 2

A Board member of the Foundation will monitor the organization that

This member will report back to the Foundation on the receives a grant.

Also, the Foundation requests a written follow-up from the organization in which they progress of the particular project that the grant is related to.

describe the benefits the organization and the public it serves received

from the grant.

#### ALB770 04/22/2010 SCHEDULE M (Form 990)

**NonCash Contributions** 

► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No 1545-0047

2008

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Albuquerque Rotary Charitable

Foundation, Inc

Employer identification number 85-0371097

_		,, <u>.</u>		•			1,00	00110.			
Pa	art I Types of Property			ī							
		(a)	(b)	(c)				(d)			
		Check if	Number of Contributions	Revenues reported on				of determining	ng .		
		applicable		Form 990, Part VIII, line 1g				evenues			
1	Art—Works of art		<u>.</u>				<del> </del>				
2	Art—Historical treasures										
3	Art—Fractional interests										
4	Books and publications						-				
5	Clothing and household	}									
	goods					_					
6	Cars and other vehicles										
7	Boats and planes										
8	Intellectual property										
9	Securities—Publicly traded			· · · · · · · · · · · · · · · · · · ·		_					
10	Securities—Closely held stock			<u></u>							
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 .		<u> </u>								
18	Collectibles										
19	Food inventory										
20	Drugs and medical supplies										
21	Taxidermy										
22	Historical artifacts			<del></del>							
23	Scientific specimens										
24	Archeological artifacts					_					
25	Other ► ( Advertising )	X	4	56,904			Market				
26	Other ▶ (Food & Coffee )	X	1				Market				
27	Other ► (OtherMiscPrizes)	X	20	16,655	<u>Fa</u>	<u>ir</u>	Market	Value	<del>}</del>		
28	Other ► (										
29	Number of Forms 8283 received by the	-	= =		i						
	which the organization completed For	m 8283, P	art IV, Donee Acknowled	dgement (	29						
										Yes	No
30a	During the year, did the organization	•	• • • •	•					į		
	it must hold for at least three years from			n, and which is not required	l to be					***	
	used for exempt purposes for the ent	-	penod?						30a	$\vdash$	X
b	If "Yes," describe the arrangement in										,
31	Does the organization have a gift acc	eptance p	olicy that requires the rev	iew of any non-standard							;
	contributions?								31	Х	$\vdash$
32a	Does the organization hire or use thir	d parties o	r related organizations to	solicit, process, or sell no	n-cash						١
	contributions?								32a	<b> </b>	X
þ	If "Yes," describe in Part II										,
33	If the organization did not report reve	nues in col	umn (c) for a type of pro	perty for which column (a) i	s chec	ked,					
	describe in Part II			··· · · · · · · · · · · · · · · · · ·					<u></u> :		

Schedule M (Form 990) 2008 Albuquerque Rotary Charitable 85-0371097

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b,

Page 2

32b, and 33. Also complete this part for any additional information.

ALB770 04/22/2010

#### SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Foundation, Inc.

#### **Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the

OMB No 1545-0047 2008

Open to Public Form 990 or to provide any additional information. Inspection Albuquerque Rotary Charitable

**Employer identification number** 85-0371097

Form 990, Part VI, Line 10 - Organization's Process Used to Review Form 990 The 990 tax return is reviewed by the Treasurer of the Board. present the 990 to the rest of the Board of Directors for approval.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Governing documents are available at the Albuquerque Rotary Charitable Foundation office for inspection upon request.

(Rev April 2009)

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

OMB No 1545-1709

Department of the Treasury

File a separate application for each return.

Internal Revenue	Service		i i	
If you are:	iling for an Automatic 3-Month Extension, complete only Part I and check this box			<b>▶</b> X
If you are 1	iling for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form	ı)	••	_
-	ete Part II unless you have already been granted an automatic 3-month extension on a previously filed For	•		
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed)	•	· •	
A corporation i	equired to file Form 990-T and requesting an automatic 6-month extension—check this box and complete			▶ □
All other corpo	rations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an exten	sion of	• • •	, ,
time to file inco	me tax returns			
one of the retu	ng (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of tirms noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 88	68		
-	(1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870,	-		
	mposite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Par		m	
	edetails on the electronic filing of this form, visit www.irs gov/efile and click on e-file for Charities & Nonprof			
Type or	Name of Exempt Organization	Employ	er identification nun	nber
print	Albuquerque Rotary Charitable	٥٢ ٥	271007	
File by the due date for	Foundation, Inc.	85-0	371097	<del></del>
iling your eturn See	Number, street, and room or suite no If a P.O box, see instructions.  P.O. Box 3807			
nstructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions.  Albuquerque NM 87190			
Check type of	return to be filed (file a separate application for each return):			
X Form 996 Form 996 Form 996	Form 990-T (corporation) P-BL Form 990-T (sec. 401(a) or 408(a) trust) F-EZ Form 990-T (trust other than above)		Form 4720 Form 5227 Form 6069 Form 8870	
Telephone  If the organ  If this is for or the whole gr	agation does not have an office or place of business in the United States, check this box a Group Return, enter the organization's four digit Group Exemption Number (GEN)	If this is		▶ 🗆
	an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time	<del></del>		
-	/15/10 , to file the exempt organization return for the organization named above. The extension is			
•	ganization's return for:			
▶ 🗍 ه	alendar year or			
► X t	ax year beginning $7/01/08$ , and ending $6/30/09$ .			
2 If this tax	year is for less than 12 months, check reason: Initial return Final return Change i	n account	ting period	
= =	fication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,		_	
	nonrefundable credits. See instructions	3a	\$	
	lication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax			
	made Include any prior year overpayment allowed as a credit	3b	\$	
	Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,			
•	th FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment	30	s	
	See instructions. are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-l	3c	1 . ♥	
or payment ins				

Form 8868 (F	(ev. 4-2009)		Page 2						
● If you are	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box		<b>▶</b>  X						
	mplete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 88								
If you are	fling for an Automatic 3-Month Extension, complete only Part I (on page 1).								
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no	copies	needed).						
Type or	Name of Exempt Organization	Employ	er identification number						
print	Albuquerque Rotary Charitable								
File by the	Foundation, Inc.	<u>85-0</u>	371097						
extended due date for		For IRS	use only						
filing the	P.O. Box 3807		A						
return, See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.								
instructions.	Albuquerque NM 87190	•	( ) (c)						
	f return to be filed (File a separate application for each return):		_						
X Form 99			Form 6069						
Form 99									
Form 99									
	complete Part II if you were not already granted an automatic 3-month extension on a previously file	a rorm	3868.						
	are in the care of > Ann Singer								
Telephone			,						
If the organization does not have an office or place of business in the United States, check this box									
	If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)								
	for the whole group, check this box								
	mes and EINs of all members the extension is for								
4   reques	t an additional 3-month extension of time until 5/15/10.								
5 For cale	ndar year or other tax year beginning $7/01/08$ , and ending $6/30/09$ year is for less than 12 months, check reason: Initial return Final return Change in	,							
		aocoum	ng penoa						
7 State in	detail why you need the extension tional time is requested to gather information to pr	ener	e a complete						
		ébar	ë a chiibiece						
anu.	accurate return.	• ••							
Se If this as	plication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,	1	<del></del>						
•	nonrefundable credits. See instructions.	8a	s						
	plication is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and	-	_ <del></del> ,						
	d tax payments made. Include any prior year overpayment allowed as a credit and any	. [							
	paid previously with Form 8868	8ь	\$						
	Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit								
	coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$						
***************************************	Signature and Verification								
Under penalties o	of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my i	nowledge	and belief,						
it is true, correct,	and complete, and that I am authorized to prepare this form	•							
Signature	James C Benderii Title Agent		Date 1 2/12/16						
			Form 8868 (Rev. 4-2009)						