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Form **990-PF**

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2009

	Amended return Name of foundation	Address char	<u> </u>	Name change A Employer identification	n number
	e the IRS Name of foundation label.				
	herwise, The Salazar Partners	hip		85-0481104	<u> </u>
	print Number and street (or P O box number if mail is not or	delivered to street address)	Room/suite	B Telephone number	
	or type. 978 Indian Ridge Rd			505-986-50	153
	City or town, state, and ZIP code Santa Fe, NM 87501			C If exemption application is p D 1. Foreign organization	
- -	Check type of organization X Section 501(c)(3) 6	exempt private foundation		Foreign organizations makes the check here and attach or	eeting the 85% tes
	Section 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation	E If private foundation sta	
l Fa	air market value of all assets at end of year J Account		Accrual	under section 507(b)(1	
		Other (specify)		F If the foundation is in a	
	\$ 24,804. (Part I, coll			under section 507(b)(1	
P	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(0) Disburt for chantable (cash basi
	1 Contributions, gifts, grants, etc., received	33,630.			(Casii Dasi
	2 Check if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	95.	95	•	Stateme
	4 Dividends and interest from securities				
	5a Gross rents				<u></u>
	b Net rental income or (loss)		' '' 	·-	····
ĭe	ball Net gain or (loss) from sale of assets not on line 10 h Gross sales price for all				
Revenue	7 Capital gain net income (from Part IV, line 2)		0	•	***************************************
æ	8 Net short-term capital gain				
	9 Income modifications 103 Gross sales less returns RECEIVED]			
	and anowarices		***************************************		
	b Less Cost of goods sold				
	c Gross profit pelloss) MAY 1 3 2010			,	
	12 Total Add lines through 1	33,725.	95	0.	
	13 Compensation of officers, directors, trustees, etc.	0.	0	. 0.	
	14 Other employee salaries and wages		· · · · · · ·		ļ
S	15 Pension plans, employee benefits				-
Expenses	16a Legal fees b Accounting fees Stmt 2	3,121.	0.	0.	
χĎ	c Other professional fees	0,121	<u> </u>		
ive	17 Interest				
trat	18 Taxes Stmt 3	4.	0.	. 0.	
and Administrative	19 Depreciation and depletion				<u> </u>
mp/	20 Occupancy	806.	0.	0.	
pu 🗸	21 Travel, conferences, and meetings22 Printing and publications	154.	0.	1	
	23 Other expenses Stmt 4	10,527.	0.	A	8
Operating	24 Total operating and administrative				
per	expenses. Add lines 13 through 23	14,612.	0.	0.	8
J	25 Contributions, gifts, grants paid	17,690.			17
	26 Total expenses and disbursements.	22 202	0.	0.	25
	Add lines 24 and 25 27 Subtract line 26 from line 12	32,302.			23
	a Excess of revenue over expenses and disbursements	1,423.			
	b Net investment income (if negative, enter -0-)	,	95.		
000-	C Adjusted net income (if negative, enter -0-)			0.	
92350 02-02	Diagrams and majorite (in regard, enter 40) 1.10 LHA For Privacy Act and Paperwork Reduction 1.505 757902 71305	Act Notice, see the instruct	ions.		Form 990-F

22	Other liabilities (describe)		
23	Total liabilities (add lines 17 through 22)	0.	0.
	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.		
24	Unrestricted	<u> </u>	
25 26	Temporarily restricted Permanently restricted		
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.		
27	Capital stock, trust principal, or current funds	23,381.	24,804.
28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.
29	Retained earnings, accumulated income, endowment, or other funds	0.	0.
30	Total net assets or fund balances	23,381.	24,804.
ı		1	

Part III Analysis of Changes in Net Assets or Fund Balances

Total liabilities and net assets/fund balances

1 7	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	must agree with end-of-year figure reported on prior year's return)	1	23,381.
	Enter amount from Part I, line 27a	2	1,423.
3 (Other increases not included in line 2 (Itemize)	3	0.
4 /	Add lines 1, 2, and 3	4	24,804.
5 [Decreases not included in line 2 (itemize)	5	0.
6 T	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	24,804.
			200 DE

Form **990-PF** (2009)

Net Assets or Fund Balances

23,381.

24,804

2-Story Drick Ware	e the kind(s) of property sold (e g , real esta house, or common stock, 200 shs MLC Co	1,10,	b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a					
b NON	E				
<u>c</u>					
<u>d</u>					
<u>e</u>					
(e) Gross sales price		Cost or other basis us expense of sale		(h) Gain or (loss (e) plus (f) minus (
a					
b					
<u>C</u>					
<u>d</u>					
Complete only for accets showing	goin in column (h) and award by the found	tion on 19/21/60			
Complete only for assets showing (gain in column (h) and owned by the founda) Gains (Col (h) gain (k), but not less thar	
(i) F M V as of 12/31/69		Excess of col. (i) over col. (j), if any		Losses (from col (h))
a					
b					
C					
d					
e <u> </u>			 		
Capital gain net income or (net capit	al loss) $\begin{cases} \text{ If gain, also enter in Part I, I} \\ \text{ If (loss), enter -0- in Part I,} \end{cases}$	ine 7	2		
Net short-term capital gain or (loss) If gain, also enter in Part I, line 8, col	as defined in sections 1222(5) and (6)	•	1		
If (loss), enter -0- in Part I, line 8	wiiii (C)) 3		
Part V Qualification Und	der Section 4940(e) for Reduc	ed Tax on Net In	vestment Inc	ome	
section 4940(d)(2) applies, leave this					
section 4940(d)(2) applies, leave this /as the foundation liable for the section "Yes," the foundation does not qualify	part blank 1 4942 tax on the distributable amount of an under section 4940(e) Do not complete this	y year in the base period spart			Yes X
section 4940(d)(2) applies, leave this /as the foundation liable for the section "Yes," the foundation does not qualify Enter the appropriate amount in each	part blank 1 4942 tax on the distributable amount of an under section 4940(e) Do not complete this h column for each year, see instructions bet	y year in the base period s part ore making any entries	1?		
section 4940(d)(2) applies, leave this 'as the foundation liable for the section "Yes," the foundation does not qualify	part blank 1 4942 tax on the distributable amount of an under section 4940(e). Do not complete this h column for each year, see instructions between the column for each year, see instructions between the column for each year, see instructions between the column for each year, see instructions to the column for each year, see instructions to the column for each year.	y year in the base period s part ore making any entries Net value of nonc	1? (c) hantable-use assets	Distrib (col (b) divi	(d) ution ratio ded by col (c))
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Forr	m 990-PF (2009) , The Salazar Partnership 85	-048	1104	ļ	Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see	instr	uctio	ns)
18	a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)				
t	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ 🔲 and enter 1% 🗼 🔟				2.
	of Part I, line 27b				
	c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b) ノ				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	-			<u>0.</u>
3	Add lines 1 and 2				2.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		·····		2.
6	Credits/Payments.				
a	a 2009 estimated tax payments and 2008 overpayment credited to 2009				
	Exempt foreign organizations - tax withheld at source				
C	: Tax paid with application for extension of time to file (Form 8868)				
d	1 Backup withholding erroneously withheld				_
7	Total credits and payments Add lines 6a through 6d	+			<u>0.</u>
8					
9	· · · · · · · · · · · · · · · · · · ·				2.
10					
	Enter the amount of line 10 to be Credited to 2010 estimated tax ► Refunded ► 11				
	art VII-A Statements Regarding Activities		 	V	NI
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No X
	any political campaign?		1a		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	• ••	1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				
	distributed by the foundation in connection with the activities.		4.		х
	Did the foundation file Form 1120-POL for this year?		10		Α_
0	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation ▶ \$ 0 • (2) On foundation managers ▶ \$0 •				
_	(-)				
E	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$ 0 .				
9	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	•	х
_	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	Ì	х
Δa	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
		N/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		Х
•	If "Yes," attach the statement required by General Instruction T.	•		"	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law				
	remain in the governing instrument?		6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year?		7	Х	
	If "Yes," complete Part II, col. (c), and Part XV.				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	NM				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation	-	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar				
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	-	9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If type attach a schedule listing their names and addresses	5 ت	10	Х	

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

Form 990-PF (2009) The Salazar Partnership			85-04811	04 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	nued)	
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?	Y	es X No	
(2) Influence the outcome of any specific public election (see section 4955),	or to carry on, directly or indi	rectly,		
any voter registration drive?		Y	es 🗶 No	
(3) Provide a grant to an individual for travel, study, or other similar purpose	s?	Y	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organizati	on described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or	for		
the prevention of cruelty to children or animals?		Y	es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur	nder the exceptions described	in Regulations		
section 53 4945 or in a current notice regarding disaster assistance (see instr	uctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check	here			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption	from the tax because it mainta	ained		
expenditure responsibility for the grant?			es 🔲 No	
If "Yes," attach the statement required by Regulations section 53.494	15-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?		Y ₁	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			Sb X
If "Yes" to 6b, file Form 8870.		•	-	
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Y ₁	es X No	
b If yes, did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A 7	7b
Part VIII Information About Officers, Directors, Trust	tees, Foundation Ma	anagers, Highly	y	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
William C. Carson	President		-	
978 Indian Ridge Rd				
Santa Fe, NM 87501	1.00	0.	0.	0.
Georgia Carson	Director			
978 Indian Ridge Rd				
Santa Fe, NM 87501	1.00	0.	0.	0.
Anne Fullerton	Secretary			
PO Box 382				
Santa Fe, NM 87504	1.00	0.	0.	0.
		<u> </u>	<u> </u>	
2 Compensation of five highest-paid employees (other than those inc	· · · · · · · · · · · · · · · · · · ·	enter "NONE."	(d) Cooking to the	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
		l		
Fotal number of other employees paid over \$50,000			▶	0

923561 02-02-10

Total. Add lines 1 through 3

1 5	Minimum Investment Return (All domestic foundations r			
	air market value of assets not used (or held for use) directly in carrying out charitab	le, etc., purposes		•
	verage monthly fair market value of securities		1a	0. 19,759.
	verage of monthly cash balances	•	1b	19,759
	air market value of all other assets		16	
	otal (add lines 1a, b, and c)		1d	19,759
e R	eduction claimed for blockage or other factors reported on lines 1a and	1		
1	c (attach detailed explanation)	1e	0.	
2 A	equisition indebtedness applicable to line 1 assets		2	0.
3 S	ubtract line 2 from line 1d		. 3	19,759.
4 C	ash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount	, see instructions)	. 4	296
5 N	et value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and oi	n Part V, line 4	5	19,463.
6 N	inimum investment return. Enter 5% of line 5		6	973.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) air foreign organizations check here		ons and certain	
1 N	inimum investment return from Part X, line 6		1	973.
2a T	ix on investment income for 2009 from Part VI, line 5	2a	2.	· · · · · · · · · · · · · · · · · · ·
	come tax for 2009 (This does not include the tax from Part VI)	2b		
	dd lines 2a and 2b		2c	2.
3 D	stributable amount before adjustments. Subtract line 2c from line 1		3	971.
	ecoveries of amounts treated as qualifying distributions		4	0.
	dd lines 3 and 4	•	5	971.
-	eduction from distributable amount (see instructions)	• • • •	6	0.
	stributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part	XIII. line 1	7	971.
	XII Qualifying Distributions (see instructions)			
1 A	nounts paid (including administrative expenses) to accomplish charitable, etc., рип	ooses.		
a E	penses, contributions, gifts, etc total from Part I, column (d), line 26		1a]	25,936.
	ogram-related investments - total from Part IX-B		1b	25,936. 0.
	nounts paid to acquire assets used (or held for use) directly in carrying out charitat	ole, etc., purposes	2	
	nounts set aside for specific charitable projects that satisfy the			
	utability test (prior IRS approval required)		3a	
	ish distribution test (attach the required schedule)		3b	
	ialifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, ar	nd Part XIII. line 4	4	25,936.
4 Q:	undations that qualify under section 4940(e) for the reduced rate of tax on net inve			•
5 Fo			5	0.
5 Fo	come Enter 1% of Part I, line 27b [Justed qualifying distributions. Subtract line 5 from line 4		6	<u>0.</u> 25,936.

Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,	, , , , , , , , , , , , , , , , , , , ,			
line 7				971.
2 Undistributed income, if any, as of the end of 2009	MI 1 - HIHAA!'	·		
a Enter amount for 2008 only		,	0.	
b Total for prior years	· - - - - - - - 	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		**************************************
<u>u</u> rotal to prior your		0.		
3 Excess distributions carryover, if any, to 2009				11 ¹ 11 ¹ 1-11111
a From 2004				
b From 2005			,	
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				***************************************
Part XII, line 4 ▶\$25, 936.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior	r.,, ., ., ., ., ., ., ., ., ., ., ., .,			
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			11 111	
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount			***************************************	971.
· · ·	24,965.			J/1.
e Remaining amount distributed out of corpus	0.			0.
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			<u> </u>
6 Enter the net total of each column as Indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	24,965.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2008 Subtract line			· · · · · · · · · · · · · · · · · · ·	***************************************
4a from line 2a Taxable amount - see instr			0.	
1 Undistributed income for 2009 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	20,758.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	4,207.			
IO Analysis of line 9.				
a Excess from 2005		•		,
b Excess from 2006		Į.		
c Excess from 2007				
d Excess from 2008		1		
E Excess from 2009 4, 207.	1	i i	1	

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Y		Payment	, · 	
• Recipient • Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
a Paid dunng the year Santa Fe Public Schools 610 Alta Vista Street Santa Fe, NM 87505	or substantial contributor	Public School	To provide funding for teacher salaries	12,500
Cooking with Kids 3508 Camino Jalisco Santa Fe, NM 87507	None.	501(c)3	Health Services	2,538
Salazar Elementary School 1300 Osage Ave Santa Fe, NM 87501	None.	Public School	Health and Emergency	1,952
Agua Fria Elementary School 3160 Agua Fria St. Santa Fe, NM 87501	None.	Public School	Health and Emergency	700
Total			▶ 3a	17,690
b Approved for future payment				
None				
			N 2	0.
Total	<u> </u>			m 990-PF (2009)

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The same and	Unrelated	business income	Excluded	by section 512, 513, or 514	(5)
nter gross amounts unless otherwise indicated	(a)	(b)	(C) Exclu-	(d)	(e) Related or exempt
1 Program service revenue.	Business code	Amount	code	Amount	function income
a	_ [
b	_				
C					
d		- <u></u> -			
e	_				
1					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash				0.5	
investments		<u> </u>	14	95.	
Dividends and interest from securities	<u> </u>		ļļ		
Net rental income or (loss) from real estate:	-				
a Debt-financed property			 	· · · · · · · · · · · · · · · · · · ·	-
b Not debt-financed property	-		1		
Net rental income or (loss) from personal					
property Other investment income			 		
Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue					
a					
b					
C					
d					 -
e					
Subtotal Add columns (b), (d), and (e)		0.		95.	
Total. Add line 12, columns (b), (d), and (e)				13	9
ee worksheet in line 13 instructions to verify calculations.)					

Part XV	Relationship of Activities to the Accomplishment of Exempt Purposes
Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)

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Part XVII	Information Regarding	Transfers To and	Transactions and	Relationships Wit	h Noncharitable
	Exempt Organizations				

1	Did t	he organization directly or indi	rectly engage in any of the following	ng with any other organiza	ation described in section 501(c) of		Yes	No
		•	(3) organizations) or in section 5		anizations?			
	a Trans	sfers from the reporting found	ation to a noncharitable exempt or	ganization of				
	(1)	Cash .	-			1a(1)		X
	(2)	Other assets				1a(2)		X
	b Other	rtransactions				-		
	(1)	Sales of assets to a noncharita	ble exempt organization			1b(1)		X
	(2)	Purchases of assets from a no	ncharitable exempt organization	•		1b(2)		<u>X</u>
	(3)	Rental of facilities, equipment,	or other assets			16(3)		X
	(4)	Reimbursement arrangements	i	•		1b(4)		X
	(5) 1	oans or loan guarantees				1b(5)		X
	(6) I	Performance of services or me	embership or fundraising solicitation	ons		1b(6)		X
	c Shari	ng of facilities, equipment, ma	illing lists, other assets, or paid em	ployees		10	<u> </u>	X
	d if the	answer to any of the above is	"Yes," complete the following sche	edule Column (b) should	always show the fair market value of the goods, o	other ass	ets,	
	or se	rvices given by the reporting fo	oundation. If the foundation receiv	ed less than fair market va	alue in any transaction or sharing arrangement, s	how in		
	colur	nn (d) the value of the goods,	other assets, or services received					
(a	Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions, and	shanng an	rangeme	nts
			N/A					
_								
2:	s Is the	foundation directly or indirect	lly affiliated with, or related to, one	or more tax-exempt orga	nizations described			
			r than section 501(c)(3)) or in sect			Yes	TX	No
,		s," complete the following sche						,
		(a) Name of org		(b) Type of organization	(c) Description of relationsh	IIP		
_		N/A						
		- : • :	···					
	Under p	enalties of perjury, I declare that I ha	ave examined this return, including acco	mpanying schedules and state	ements, and to the best of my knowledge and belief, it is t	rue, correx	ct,	
	and con	plete Declaration of preparer (other	r than taxpayer or fiduciary) is based on	all information of which prepar	er has any knowledge			
			,		L			
9	Su	gnature of officer or trustee	11100 1800	Date 5-10-1	Title President			
неге		· · · · · · · ·	were cons	Jule 3		's identify	ing num	ber
5	ارم ح	Preparer's Signature	taloga a R	exico.	a colf	3139	975	
n	Paid Preparer's Use Only	ייינים מ	T.I.C	5-1-00				
	P. Se pi	Tittle Stiglice (Or yours	Office Box 936					
	ᇫᄀ		querque, New Me		3656 Phone no (505)	90	8-32	200
		AIDU(querque, new Me.	ATCO 0/133-		m 990 -		
					FOI	33U.	- F F (2	2009)

Schedule B. (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

Name of the organizatio	Employer identification number				
T	he Salazar Partnership	85-0481104			
Organization type (check					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
Note. Only a section 501(c	is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule, (2), (3), (6), or (10) organization can check boxes for both the General Rule and a Special Rule, (3), (6), (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule, (10)				
	plete Parts I and II.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Special Rules					
509(a)(1) and 170	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the region (b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the fig. Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.				
aggregate contrib	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.				
contributions for the lifthis box is chect purpose. Do not control to the lift is the lift	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributes exclusively for religious, charitable, etc., purposes, but these contributions did not again ked, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the General Rule applies to this organization because it le, etc., contributions of \$5,000 or more during the year.	gregate to more than \$1,000. ly religious, charitable, etc.,			
out it must answer "No" or	that is not covered by the General Rule and/or the Special Rules does not file Schedule B in Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 ling requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	· ·			
LHA For Privacy Act and for Form 990, 990-E	·	(Form 990, 990-EZ, or 990-PF) (2009)			

Employer identification number

The Salazar Partnership

85-0481104

(a) No.	(b) Name, address, and ZIP + 4 William C & Georgia S Carson	(c) Aggregate contributions	(d) Type of contribution
1	William C & Georgia S Carson		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	978 Indian Ridge Rd	\$5,000.	Person X Payroll Noncash (Complete Part II if there
(a)	Santa Fe, NM 87508 (b)	(c)	is a noncash contribution.)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
2	William C & Georgia S Carson 978 Indian Ridge Rd Santa Fe, NM 87508	\$\$.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a)	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	Joyce Idema 1200 La Rambla Santa Fe, NM 87505	\$\$.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d) Type of contribution
923452 02-01	Name, address, and ZIP + 4	Aggregate contributions \$\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

The Salazar Partnership

85-0481104

Part II	Noncash Property (see instructions)					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
	Supplies					
2						
		\$2,800.	Various			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		 \$				
		"				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		\$	_			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
3453 02-01-		\$	0, 990-EZ, or 990-PF) (2			

Form 990-PF Interest on Sav	ings and Ten	nporary Cash I	nvestments	Statement 1	
Source				Amount	
Century Bank FSB			_	95.	
Total to Form 990-PF, Part I	, line 3, Co	olumn A	=	95.	
Form 990-PF	Accounti	ng Fees		Statement 2	
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Accounting & Tax Prep	3,121.	0.	0	0.	
To Form 990-PF, Pg 1, ln 16b	3,121.	0.	0	0.	
Form 990-PF	Taxes			Statement 3	
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Federal Income Taxes	4.	0.	0	. 0.	
To Form 990-PF, Pg 1, ln 18	4.	0.	0	. 0.	
Form 990-PF	Other E	xpenses		Statement 4	
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Fees Insurance Books Supplies	10. 1,270. 8,246. 1,001.	0. 0. 0.	0 0 0 0	. 0. 8,246.	
To Form 990-PF, Pg 1, ln 23	10,527.	0.	0	8,246.	
-				= ===========	

5

Form 990-PF

List of Substantial Contributors Part VII-A, Line 10

Statement

Name of Contributor

Address

William C and Georgia S Carson

978 Indian Ridge Rd Santa Fe, NM 87508