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Form 990



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)

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

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization

SANTA FE COMMUNITY FOUNDATION

Doing Business As

Number and street (or P O box if mail is not delivered to street address)Room/suite

PO BOX 1827

City or town, state or country, and ZIP + 4

SANTA FE, NM 87504

F Name and address of principal officer

BRIAN T BYRNES

PO BOX 1827

SANTA FE, NM 87504

D Employer identification number

85-0303044

E Telephone number

(505) 988-9715

G Gross receipts \$ 13,660,791

I Tax-exempt status

☒ 501(c)(3)

☐ 501(c) ()

☐ (insert no)

☐ 4947(a)(1) or

☐ 527

J Website: HTTP //WWW.SANTAFECF.ORG

K Form of organization

☒ Corporation

☐ Trust

☐ Association

☐ Other

L Year of formation 1981

M State of legal domicile NM

Part I	Summary																																										
Activities & Governance	<div><div>1</div><div>Briefly describe the organization’s mission or most significant activities</div><div>WE IMPROVE THE QUALITY OF LIFE FOR PEOPLE IN SANTA FE AND NORTHERN NEW MEXICO, NOW AND FOR FUTURE GENERATIONS BY BUILDING AND MANAGING ENDOWMENT FUNDS IN ORDER TO AWARD GRANTS HELPING NONPROFITS OPERATE MORE EFFECTIVELY CONVENING AREA RESIDENTS TO DISCUSS ISSUES OF CRITICAL IMPORTANCE TO THE COMMUNITY PROVIDING LEADERSHIP FOR KEY COMMUNITY INITIATIVES</div></div>																																										
Revenue	<div><div>2</div><div>Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets</div></div>																																										
	<table><tr><td>3</td><td>Number of voting members of the governing body (Part VI, line 1a)</td><td>20</td></tr><tr><td>4</td><td>Number of independent voting members of the governing body (Part VI, line 1b)</td><td>20</td></tr><tr><td>5</td><td>Total number of individuals employed in calendar year 2011 (Part V, line 2a)</td><td>9</td></tr><tr><td>6</td><td>Total number of volunteers (estimate if necessary)</td><td>150</td></tr><tr><td>7a</td><td>Total unrelated business revenue from Part VIII, column (C), line 12</td><td>0</td></tr><tr><td>7b</td><td>Net unrelated business taxable income from Form 990-T, line 34</td><td>0</td></tr></table>	3	Number of voting members of the governing body (Part VI, line 1a)	20	4	Number of independent voting members of the governing body (Part VI, line 1b)	20	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	9	6	Total number of volunteers (estimate if necessary)	150	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0	7b	Net unrelated business taxable income from Form 990-T, line 34	0																								
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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 and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

2012-10-15

Date

STEPHEN G GABER

TREASURER

Type or print name and title

Paid Preparer's Use Only

Preparer's signature

PAMELA ALEXANDERSON

Date

Check if self-employed ☐

Preparer's taxpayer identification number (see instructions)

P01218925

Firm's name (or yours if self-employed), address, and ZIP + 4

MOSS ADAMS LLP

6100 UPTOWN BLVD NE STE 400

ALBUQUERQUE, NM 87110

EIN

91-0189318

Phone no

(505) 878-7200

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes

☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2011)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III ☐ Yes ☒ No

1

Briefly describe the organization's mission

WE IMPROVE THE QUALITY OF LIFE FOR PEOPLE IN SANTA FE AND NORTHERN NEW MEXICO , NOW AND FOR FUTURE GENERATIONS, BY 1) BUILDING AND MANAGING ENDOWMENT FUNDS IN ORDER TO AWARD GRANTS2) HELPING NONPROFITS OPERATE MORE EFFECTIVELY3) CONVENING AREA RESIDENTS TO DISCUSS ISSUES OF CRITICAL IMPORTANCE TO THE COMMUNITY 4) PROVIDING LEADERSHIP FOR KEY COMMUNITY INITIATIVES

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 1,821,606 including grants of \$ 1,821,606) (Revenue \$)

GRANTS ARE MADE FROM DONOR ADVISED, DESIGNATED, SCHOLARSHIP, DISCRETIONARY, AND EMERGENCY FUNDS 50,000 SERVED

4b

(Code) (Expenses \$ 607,289 including grants of \$) (Revenue \$ 17,731)

PROGRAM SERVICES INCLUDE GRANTS PROGRAM MANAGEMENT, LITERACY PROGRAM SUPPORT AND TECHNICAL ASSISTANCE TRAININGS FOR LOCAL NONPROFIT ORGANIZATIONS IN GRANTS RESEARCH, FINANCIAL MANAGEMENT AND BOARD DEVELOPMENT 4,000 SERVED

4c

(Code) (Expenses \$ 647,000 including grants of \$ 647,000) (Revenue \$)

GRANTS ARE MADE FROM ENDOWMENT FUNDS TO LOCAL NONPROFIT ORGANIZATIONS IN THE ARTS, CIVIC AFFAIRS, EDUCATION, ENVIRONMENT, AND HEALTH AND HUMAN SERVICES

(Code) (Expenses \$ 64,806 including grants of \$ 6,000) (Revenue \$ 37,620)

THE PINON AWARDS IS AN ANNUAL EVENT WHEREBY THE FOUNDATION RECOGNIZES LOCAL NONPROFIT ORGANIZATIONS FOR THEIR ACHIEVEMENTS

4d

Other program services (Describe in Schedule O)

(Expenses \$ 64,806 including grants of \$ 6,000) (Revenue \$ 37,620)

4e

Total program service expenses \$ 3,140,701

Form 990 (2011)

Part 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.	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
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.		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.	Yes	
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.		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.		No
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.		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I.		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U.S.? If "Yes," complete Schedule F, Part II and IV.		No
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 U.S.? If "Yes," complete Schedule F, Part III and IV.		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I.		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H.		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements.		
20b			

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance						
Check if Schedule O contains a response to any question in this Part V <input type="checkbox"/>						
		Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a	36			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes			
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.	2a	9			
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 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a				No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a				No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing 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				No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b				No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a				No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c				No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e				No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f				No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8				No
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?	9a				No
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b				No
10	Section 501(c)(7) organizations. Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b				
11	Section 501(c)(12) organizations. Enter					
a	Gross income from members or shareholders.	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a				
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b				
c	Enter the aggregate amount of reserves on hand.	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a				No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b				

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1b	Enter the number of voting members included in line 1a, above, who are independent		
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?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		No
11b	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
12b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization		No
15b	If "Yes," to line 15a or 15b, 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 with a taxable entity during the year?		No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section 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 (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	SARAH SAWTELL 501 HALONA STREET SANTA FE, NM 87505 (505) 988-9715

Part VII

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PHILIP COOK CHAIR	8 00	X		X				0	0	0
(2) SUZANNE ORTEGA CISNEROS VICE-CHAIR	8 00	X		X				0	0	0
(3) JOHN VAZQUEZ VICE-CHAIR	8 00	X		X				0	0	0
(4) PATRICK DOLAN SECRETARY	8 00	X		X				0	0	0
(5) STEVE GABER TREASURER	8 00	X		X				0	0	0
(6) DARCI BURSON BOARD MEMBER	5 00	X						0	0	0
(7) THOMAS BUSTAMANTE BOARD MEMBER	5 00	X						0	0	0
(8) RICHARD CARPENTER BOARD MEMBER	5 00	X						0	0	0
(9) DOTTIE INDYKE BOARD MEMBER	5 00	X						0	0	0
(10) HERVEY JURIS BOARD MEMBER	5 00	X						0	0	0
(11) JAMES DUNCAN BOARD MEMBER	5 00	X						0	0	0
(12) KELLY EGOLF BOARD MEMBER	5 00	X						0	0	0
(13) ARTIE GARCIA BOARD MEMBER	5 00	X						0	0	0
(14) STEPHANIE KIGER BOARD MEMBER	5 00	X						0	0	0
(15) FELICE GONZALES BOARD MEMBER	5 00	X						0	0	0
(16) JILL HEPPENHEIMER BOARD MEMBER	5 00	X						0	0	0
(17) BARRY HERSKOWITZ BOARD MEMBER	5 00	X						0	0	0

Part VII

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) RICHARD HERTZ BOARD MEMBER	5 00	X						0	0	0
(19) PEGGY HUBBARD BOARD MEMBER	5 00	X						0	0	0
(20) BETH MOISE BOARD MEMBER	5 00	X						0	0	0
(21) BRIAN T BYRNES PRESIDENT & CEO	40 00			X				135,122	0	7,756
(22) SARAH SAWTELL VP OF FINANCE & OPERATIONS	40 00			X				84,132	0	15,819
(23) CHRISTIANA FRANKLIN VP OF COMMUNITY PHILANTHRO	40 00			X				65,194	0	8,664
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								284,448	0	32,239

2

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization▶1

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

2

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶0

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a						
	b	Membership dues	1b						
	c	Fundraising events	1c	69,216					
	d	Related organizations	1d						
	e	Government grants (contributions)	1e						
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	7,804,682					
	g	Noncash contributions included in lines 1a-1f \$ 481,705							
	h	Total. Add lines 1a-1f		7,873,898					
Program Service Revenue			Business Code						
	2a	PINON AWARDS	713990	37,620	37,620				
	b	WORKSHOP INCOME	611600	14,132	14,132				
	c	FUND SET-UP FEE	522100	3,074	3,074				
	d	HUB FEES	611430	525	525				
	e								
	f	All other program service revenue							
	g	Total. Add lines 2a-2f		55,351					
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		721,963			721,963		
	4	Income from investment of tax-exempt bond proceeds . .							
	5	Royalties							
	6a	Gross rents	(i) Real	(ii) Personal					
			28,706						
			b	Less rental expenses	0				
			c	Rental income or (loss)	28,706				
	d	Net rental income or (loss)		28,706			28,706		
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
			4,918,559						
			b	Less cost or other basis and sales expenses	4,781,808				
			c	Gain or (loss)	136,751				
	d	Net gain or (loss)		136,751			136,751		
	8a	Gross income from fundraising events (not including \$ 69,216 of contributions reported on line 1c) See Part IV, line 18	a	52,372					
			b	Less direct expenses	32,889				
			c	Net income or (loss) from fundraising events . .	19,483			19,483	
	9a	Gross income from gaming activities See Part IV, line 19	a						
			b	Less direct expenses					
			c	Net income or (loss) from gaming activities . .					
	10a	Gross sales of inventory, less returns and allowances	a						
b			Less cost of goods sold						
c			Net income or (loss) from sales of inventory . .						
Miscellaneous Revenue		Business Code							
11a	MISCELLANEOUS	900099	9,942			9,942			
b									
c									
d	All other revenue								
e	Total. Add lines 11a-11d		9,942						
12	Total revenue. See Instructions		8,846,094	55,351	0	916,845			

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)

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	2,474,606	2,474,606		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	315,234	127,023	73,237	114,974
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	220,171	90,169	50,158	79,844
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	5,637	2,180	1,677	1,780
9	Other employee benefits	16,145	6,306	3,457	6,382
10	Payroll taxes	36,006	13,978	8,414	13,614
11	Fees for services (non-employees)				
a	Management				
b	Legal				
c	Accounting	16,371	8,186	3,274	4,911
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	115,921		115,921	
g	Other	150,826	107,788	3,939	39,099
12	Advertising and promotion	19,943	12,620	2,535	4,788
13	Office expenses	198,499	105,252	30,872	62,375
14	Information technology	61,647	36,220	9,715	15,712
15	Royalties				
16	Occupancy	24,520	12,260	4,904	7,356
17	Travel	33,891	27,261	2,652	3,978
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	87,658	63,263	5,295	19,100
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	44,571	29,579	5,997	8,995
23	Insurance	11,102	5,293	2,097	3,712
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	OTHER FUNDRAISING EXPEN	66,521			66,521
b	WORKSHOP EXPENSE	16,676	16,616		60
c	MISCELLANEOUS	3,670	2,101	553	1,016
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	3,919,615	3,140,701	324,697	454,217
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments			5,500,789	2	7,586,128
	3	Pledges and grants receivable, net			119,741	3	148,799
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			6,626	9	3,846
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	2,594,621			
	b	Less: accumulated depreciation	10b	150,187	104,362	10c	2,444,434
	11	Investments—publicly traded securities			27,060,797	11	25,804,342
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			904,239	15	792,996
16	Total assets. Add lines 1 through 15 (must equal line 34)			33,696,554	16	36,780,545	
Liabilities	17	Accounts payable and accrued expenses			14,877	17	59,094
	18	Grants payable				18	10,000
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			2,179,712	25	2,003,081
	26	Total liabilities. Add lines 17 through 25			2,194,589	26	2,072,175
	Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
27		Unrestricted net assets			2,379,397	27	1,584,056
28		Temporarily restricted net assets			5,238,356	28	6,900,717
29		Permanently restricted net assets			23,884,212	29	26,223,597
Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.							
30		Capital stock or trust principal, or current funds				30	
31		Paid-in or capital surplus, or land, building or equipment fund				31	
32		Retained earnings, endowment, accumulated income, or other funds				32	
33		Total net assets or fund balances			31,501,965	33	34,708,370
34	Total liabilities and net assets/fund balances			33,696,554	34	36,780,545	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	8,846,094
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,919,615
3	Revenue less expenses Subtract line 2 from line 1	3	4,926,479
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	31,501,965
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-1,720,074
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	34,708,370

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization SANTA FE COMMUNITY FOUNDATION	Employer identification number 85-0303044
---	--

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10

☐

An organization organized and operated exclusively to test for public safety Se**section 509(a)(4).**

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	4,969,560	4,295,188	4,458,398	3,739,970	7,873,898	25,337,014
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	4,969,560	4,295,188	4,458,398	3,739,970	7,873,898	25,337,014
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						3,428,117
6 Public Support. Subtract line 5 from line 4						21,908,897

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	4,969,560	4,295,188	4,458,398	3,739,970	7,873,898	25,337,014
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,160,954	864,571	667,779	692,930	750,669	4,136,903
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	31,070	8,537	32,136	868	62,314	134,925
11 Total support (Add lines 7 through 10)						29,608,842

12 Gross receipts from related activities, etc (See instructions)

12394,886

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

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	73 990 %
15 Public Support Percentage for 2010 Schedule A, Part II, line 14	15	76 950 %
16a 33 1/3% support test—2011. 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		
b 33 1/3% support test—2010. If the organization did not check the 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—2011. 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		
b 10%-facts-and-circumstances test—2010. 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		
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		

Part IIIPart III

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

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV **Supplemental Information.** 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. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation
SCHEDULE A, PART IV, SUPPLEMENTAL INFORMATION PAGE 2, LINE 10 OTHER INCOME 2007 2008 2009 2010 2011 SETTLEMENT \$ 24 F/R GROSS INCOME \$31,070 \$8,537 \$32,112 \$52,372 MISCELLANEOUS \$868 \$ 9,942

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
Attach to Form 990. See separate instructions.

Name of the organization
SANTA FE COMMUNITY FOUNDATION

Employer identification number
85-0303044

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	92	
2 Aggregate contributions to (during year)	2,392,992	
3 Aggregate grants from (during year)	1,285,062	
4 Aggregate value at end of year	10,417,847	
5 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?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6 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 for any other purpose conferring impermissible private benefit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 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 importantly land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 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

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06

	Held at the End of the Year
2a	
2b	
2c	
2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 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

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

1b

If "Yes," explain the arrangement in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

2b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance	26,297,488	23,529,257	18,301,171	21,674,008	
1b Contributions	3,589,290	1,480,844	2,466,804	1,840,919	
1c Investment earnings or losses	-1,241,002	2,509,166	3,520,615	-4,449,643	
1d Grants or scholarships	1,073,567	1,133,069	689,070	705,961	
1e Other expenditures for facilities and programs					
1f Administrative expenses	115,921	88,710	70,263	58,152	
1g End of year balance	27,456,288	26,297,488	23,529,257	18,301,171	

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 1 000 %

b

Permanent endowment ▶ 93 000 %

c

Term endowment ▶ 6 000 %

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

(ii)

related organizations

3a(i)

Yes

No

3a(ii)

Yes

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
1b Buildings		2,177,245	13,957	2,163,288
1c Leasehold improvements		98,429	632	97,797
1d Equipment		318,947	135,598	183,349
1e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				2,444,434

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	8,846,094
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,919,615
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	4,926,479
4	Net unrealized gains (losses) on investments	4	-1,709,601
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-10,473
9	Total adjustments (net) Add lines 4 - 8	9	-1,720,074
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	3,206,405

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements	1	7,210,662
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-1,709,601
b	Donated services and use of facilities	2b	51,753
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	22,416
e	Add lines 2a through 2d	2e	-1,635,432
3	Subtract line 2e from line 1	3	8,846,094
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	8,846,094

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements	1	4,004,257
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	51,753
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	32,889
e	Add lines 2a through 2d	2e	84,642
3	Subtract line 2e from line 1	3	3,919,615
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	3,919,615

Part XIVSupplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE ORGANIZATION'S INTENDED USE OF ENDOWMENT FUNDS INCLUDES IMPROVING THE QUALITY OF LIFE FOR PEOPLE IN SANTA FE AND NORTHERN NEW MEXICO, NOW AND FOR FUTURE GENERATIONS, BY 1) BUILDING AND MANAGING ENDOWMENT FUNDS IN ORDER TO AWARD GRANTS 2) HELPING NONPROFITS OPERATE MORE EFFECTIVELY 3) CONVENING AREA RESIDENTS TO DISCUSS ISSUES OF CRITICAL IMPORTANCE TO THE COMMUNITY 4) PROVIDING LEADERSHIP FOR KEY COMMUNITY INITIATIVES
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE FOUNDATION IS SUBJECT TO THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, THAT ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THIS GUIDANCE, THE FOUNDATION MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN POSITION ONLY IF IT IS MORE-LIKELY-THAN-NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS. MANAGEMENT EVALUATED THE TAX POSITIONS FOR THE FOUNDATION AND CONCLUDED THAT THE FOUNDATION HAD TAKEN NO UNCERTAIN INCOME TAX POSITIONS THAT REQUIRE ADJUSTMENTS TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE. WITH FEW EXCEPTIONS, THE FOUNDATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STATE OR LOCAL AUTHORITIES FOR YEARS BEFORE 2007, WHICH IS THE STANDARD STATUTE OF LIMITATIONS LOOK-BACK PERIOD.
PART XI, LINE 8 - OTHER ADJUSTMENTS		CHANGES IN SPLIT INTEREST AGREEMENTS -10,473
PART XII, LINE 2D - OTHER ADJUSTMENTS		CHANGES IN SPLIT INTEREST AGREEMENT -10,473 FUNDRAISING EXPENSES 32,889
PART XIII, LINE 2D - OTHER ADJUSTMENTS		FUNDRAISING EXPENSES 32,889

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization
SANTA FE COMMUNITY FOUNDATION

Employer identification number
85-0303044

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☐ Mail solicitations

b

☐ Internet and e-mail solicitations

c

☐ Phone solicitations

d

☐ In-person solicitations

e

☐ Solicitation of non-government grants

f

☐ Solicitation of government grants

g

☐ Special fundraising events

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?

☐ Yes ☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total ▶						

3

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.

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50083H Schedule G (Form 990 or 990-EZ) 2011

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		<u>GOLF EVENT</u> (event type)	 (event type)	 (total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts	121,588		121,588
	2	Less Charitable contributions	69,216		69,216
	3	Gross income (line 1 minus line 2)	52,372		52,372
Direct Expenses	4	Cash prizes	1,800		1,800
	5	Non-cash prizes	1,385		1,385
	6	Rent/facility costs	15,182		15,182
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	14,522		14,522
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			(32,889)
	11	Net income summary Combine lines 3 and 10 in column (d). ▶			19,483

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			()
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶			

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain _____

- 11

Does the organization operate gaming activities with nonmembers?

☐

Yes

☐

No
- 12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐

Yes

☐

No

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a
b	An outside facility	13b

14

Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name

Address

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐

Yes

☐

No

b

If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$

c

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

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐

Yes

☐

No

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 tax year \$

Part IV

Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
------------	-----------------	-------------

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
SANTA FE COMMUNITY FOUNDATION

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2011

Open to Public
Inspection

Employer identification number
85-0303044

Part I

General Information on Grants and Assistance

- 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?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to 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 ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

113

3

Enter total number of other organizations listed in the line 1 table

0

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 PRIOR TO ISSUANCE OF ANY GRANT, SFCF STAFF FOLLOWS DUE DILIGENCE PROCEDURES TO ASCERTAIN THE SUITABILITY OF ANY GRANT GRANTEES RECEIVING FUNDS THROUGH ANY OF THE COMPETITIVE GRANT CYCLES MUST HAVE AN ON-SITE VISITATION BY SFCF STAFF OR A GRANTS COMMITTEE MEMBER GRANTS GREATER THAN \$ 5,000 REQUIRE A FINAL REPORT SHOULD A GRANTEE NOT BE ABLE TO MEET THE TERMS OF THE GRANT, THE GRANT IS REFUNDED TO SFCF _

Software ID:
Software Version:
EIN: 85-0303044
Name: SANTA FE COMMUNITY FOUNDATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACEQUIA MADRE PTC INC700 ACEQUIA MADRE SANTA FE,NM 87505	85- 0456141	501C3	20,502				FOR VIOLIN PROGRAM
ALBUQUERQUE COMMUNITY FOUNDATIONNEW MEXICO COLLABORATION TO END HUNGER3301 MENUAL BLVD STE 2 ALBUQUERQUE,NM 87107	85- 0295444	501C3	15,000				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CIVIL LIBERTIES UNION OF NEW MEXICO FOUNDATIONPO BOX 566 ALBUQUERQUE, NM 87103	85-0275276	501C3	10,750				FOR GENERAL OPERATING SUPPORT
AMIGOS BRAVOSPO BOX 238 TAOS, NM 87571	85-0363268	501C3	27,724				FOR GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANTHROPOSOPHIC PRESS INCPO BOX 799 GREAT BARRINGTON, MA 01230	13-1790720	501C3	20,000				FOR PUBLICATION OF "THE VIRTUAL SEASON"
ASSISTANCE DOGS OF THE WESTPO BOX 31027 SANTA FE,NM 87594	85-0431646	501C3	5,624				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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BIENVENIDOS OUTREACH INCPO BOX 5873 SANTA FE,NM 87502	85-0375278	501C3	10,750				FOR GENERAL OPERATING SUPPORT
BIG BROTHERS BIG SISTERS OF NORTHERN NEW MEXICO1229 ST FRANCIS DR STE C SANTA FE,NM 87505	85-0276498	501C3	20,500				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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BRIDGES PROJECT FOR EDUCATIONPO BOX 308 TAOS, NM 87571	85-0448942	501C3	5,250				FOR GENERAL OPERATING SUPPORT
BUREAU OF BUSINESS AND ECONOMIC RESEARCH - UNM NSC06 3510/ONATE HALL UNIVERSITY OF NEW MEXICO ALBUQUERQUE, NM 87131	85-6000842	501C3	8,000				FOR GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMPING AND EDUCATION FOUNDATION3515 MICHIGAN AVE CINCINNATI, OH 45208	31-0650653	501C3	25,000				FOR GENERAL OPERATING SUPPORT
CANONES EARLY CHILDHOOD CENTERPO BOX 55 CANONES, NM 87516	85-0367878	501C3	10,000				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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CENTER FOR CONTEMPORARY ARTS OF SANTA FE INC1050 OLD PECOS TRAIL SANTA FE, NM 87505	85-0313183	501C3	13,500				FOR GENERAL OPERATING SUPPORT, CHIMERA PROGRAM
CENTRAL CITY CONCERN232 NW 6TH AVE PORTLAND, OR 97209	93-0728816	501C3	6,000				FOR THE LETTY OWINGS CENTER, COMMUNITY VOLUNTEER CORPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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CHRISTUS ST VINCENT HOSPITAL FOUNDATION455 ST MICHAELS DR SANTA FE, NM 87505	85-0282847	501C3	13,100				FOR GENERAL OPERATING SUPPORT
CITIZEN SCHOOLS INC1420 CARLISLE BLVD NE STE 101 ALBUQUERQUE, NM 87110	04-3259160	501C3	25,000				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF SANTA FE ARTS COMMISSION PO BOX 909 SANTA FE, NM 87504	85- 6000168	501C3	5,550				FOR 2011 POET LAUREATE PROGRAM
COLLECTIVE HERITAGE INSTITUTE1607 PASEO DE PERALTA SUITE 3 SANTA FE, NM 87501	85- 0432731	501C3	11,850				FOR GENERAL OPERATING SUPPORT FOR BIONEERS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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COMING HOME CONNECTION418 CERRILLOS RD STE 27 SANTA FE,NM 87501	74-2853467	501C3	11,750				FOR GENERAL OPERATING SUPPORT
CONSERVATION VOTERS NEW MEXICO EDUCATION FUND507 WEBBER ST UNIT A SANTA FE,NM 87505	91-1982332	501C3	10,000				FOR GENERAL OPERATING SUPPORT, EDUCATION C3 PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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COOKING WITH KIDS 3508 CAMINO JALISCO SANTA FE, NM 87507	20- 4396207	501C3	6,250				FOR GENERAL OPERATING SUPPORT
CORNERSTONES COMMUNITY PARTNERSHIPS227 OTERO STREET SANTA FE, NM 87501	85- 0426771	501C3	30,400				FOR GENERAL OPERATING SUPPORT, YOUTH TRAINING PROGRAM CHALLENGE GRANT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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CREATIVITY FOR PEACE INC369 MONTEZUMA AVE 566 SANTA FE,NM 87501	85- 0366087	501C3	6,500				FOR GENERAL OPERATING SUPPORT
DREAMTREE PROJECT INCPO BOX BOX 1677 TAOS,NM 87571	85- 0462470	501C3	7,500				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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DUAL LANGUAGE EDUCATION OF NEW MEXICO 2501 YALE BLVD SE STE 303 ALBUQUERQUE, NM 87106	85-0477820	501C3	10,000				FOR GENERAL OPERATING SUPPORT
EARTH CARE INTERNATIONAL ZONA DEL SOL 6600 VALENTINE WAY BLDG A SANTA FE, NM 87507	33-1017292	501C3	7,500				FOR GENERAL OPERATING SUPPORT, AMERICORPS FOOD CADRE PROGRAM

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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ECOVERSITY2639 AGUA FRIA ST SANTA FE,NM 87505	85- 0477716	501C3	6,000				FOR GENERAL OPERATING SUPPORT
EMBUDO VALLEY LIBRARY AND COMMUNITY CENTERPO BOX 310 DIXON,NM 87527	85- 0314391	501C3	6,842				FOR GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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ESPANOLA VALLEY HUMANE SOCIETY108 HAMM PKWY ESPANOLA,NM 87532	85-0406234	501C3	5,750				FOR GENERAL OPERATING SUPPORT
ESPERANZA SHELTER FOR BATTERED FAMILIESPO BOX 5701 SANTA FE,NM 87502	85-0313174	501C3	16,594				FOR GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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FAIRVIEW CEMETERY PRESERVATION ASSOCIATIONPO BOX 5958 SANTA FE,NM 87502	85-0305350	501C3	17,815				FOR GENERAL OPERATING SUPPORT
FARM TO TABLE618 B PASEO DE PERALTA SANTA FE,NM 87501	85-0438238	501C3	22,500				FOR GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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FINE ARTS FOR CHILDREN AND TEENSPO BOX 22363 SANTA FE,NM 87502	85-0421387	501C3	9,541				FOR GENERAL OPERATING SUPPORT
FIRST SERVE - NM INCPO BOX 31904 SANTA FE,NM 87594	27-0044395	501C3	8,000				FOR GENERAL OPERATING SUPPORT

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FOOD DEPOT 1222 SILER RD SANTA FE,NM 87507	85- 0416803	501C3	26,794				FOR GENERAL OPERATING SUPPORT
FOOD FOR SANTA FEPO BOX 5758 SANTA FE,NM 87502	85- 0416027	501C3	28,378				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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FRIENDSHIP CLUB PO BOX 6723 SANTA FE, NM 87502	85- 0324089	501C3	5,250				FOR GENERAL OPERATING SUPPORT
FUTURES FOR CHILDREN9600 TENNYSON ST NE ALBUQUERQUE, NM 87122	85- 0254951	501C3	10,000				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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GERARD'S HOUSEPO BOX 28693 SANTA FE, NM 87592	74-2834283	501C3	11,000				FOR GENERAL OPERATING SUPPORT
GIRLS INCORPORATED OF SANTA FE301 HILLSIDE AVE SANTA FE, NM 87501	85-0129250	501C3	8,500				FOR GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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GOLDEN APPLE FOUNDATION OF NEW MEXICOPO BOX 40469 ALBUQUERQUE,NM 87196	85-0420305	501C3	16,380				FOR GENERAL OPERATING SUPPORT
GOLF FOR KIDS NEW MEXICO DBA FIRST TEE OF SANTA FE 1704 B LLANO ST 348 SANTA FE,NM 87505	20-3048071	501C3	11,000				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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GROW SANTA FE COMMUNITY COLLEGE FOUNDATION6401 RICHARDS AVE SANTA FE, NM 87508	20-1594570	501C3	9,471				FOR GENERAL OPERATING SUPPORT
HEART AND SOUL ANIMAL SANCTUARY369 MONTEZUMA AVE 130 SANTA FE, NM 87501	31-1549681	501C3	10,000				FOR GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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HOMEWISE INC 1301 SILER ROAD BLDG D SANTA FE,NM 87807	85- 0346325	501C3	17,900				FOR GENERAL OPERATING SUPPORT
IMPACT PERSONAL SAFETYPO BOX 8350 SANTA FE,NM 87504	85- 0475597	501C3	29,500				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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INTERFAITH COMMUNITY SHELTER GROUP INC311 E PALACE AVE SANTA FE, NM 87501	27-0736366	501C3	54,000				FOR GENERAL OPERATING SUPPORT
KITCHEN ANGELS 1222 SILER RD SANTA FE, NM 87507	85-0423492	501C3	18,123				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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KUNMMSC06 3520-1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE, NM 87131	85-0275408	501C3	12,500				FOR GENERAL OPERATING SUPPORT
LA FAMILIA MEDICAL CENTER 1035 ALTO ST SANTA FE, NM 87501	85-0220875	501C3	11,978				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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LAS CUMBRES COMMUNITY SERVICES INC805 EARLY ST STE B102 SANTA FE, NM 87505	23-7144268	501C3	19,300				FOR GENERAL OPERATING SUPPORT
MORA VALLEY COMMUNITY HEALTH SERVICES INCPO BOX 209 MORA, NM 87732	85-0233466	501C3	16,000				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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MUSEUM OF NEW MEXICO FOUNDATIONPO BOX 2065 SANTA FE, NM 87504	85-0202503	501C3	48,777				FOR GENERAL OPERATING SUPPORT
NATIONAL AUDUBON SOCIETY INC225 VARICK ST 7TH FLOOR NEW YORK, NY 10014	13-1624102	501C3	10,000				FOR GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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NATIONAL DANCE INSTITUTE NEW MEXICO INC1140 ALTO ST SANTA FE,NM 87505	85-0431846	501C3	24,000				FOR GENERAL OPERATING SUPPORT
NATIONAL TRUST FOR HISTORIC PRESERVATION IN THE US1785 MASSACHUSETTS AVE NW WASHINGTON,DC 20036	53-0210807	501C3	6,000				FOR GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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NATURE CONSERVANCY 4245 N FAIRFAX STE 100 ARLINGTON,VA 22203	53-0242652	501C3	10,000				FOR GENERAL OPERATING SUPPORT
NEW ENERGY ECONOMY343 E ALAMEDA ST SANTA FE,NM 87501	20-2845513	501C3	21,000				FOR GENERAL OPERATING SUPPORT

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NEW MEXICO ASSOCIATION OF GRANTMAKERSPO BOX 9280 SANTA FE,NM 87504	85-0437031	501C3	5,500				FOR GENERAL OPERATING SUPPORT
NEW MEXICO COMMUNITY FOUNDATION502 WEST CORDOVA RD 1 SANTA FE,NM 87505	85-0311210	501C3	23,850				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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NEW MEXICO ENVIRONMENTAL LAW CENTER1405 LUISA ST STE 5 SANTA FE, NM 87505	85-0360664	501C3	34,500				FOR GENERAL OPERATING SUPPORT
NEW MEXICO SCHOOL FOR THE DEAF1060 CERRILLOS RD SANTA FE, NM 87503	85-6000544	501C3	6,000				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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NEW MEXICO STATE UNIVERSITY FOUNDATIONPO BOX 3590 LAS CRUSES, NM 88003	85-0170157	501C3	7,500				FOR GENERAL OPERATING SUPPORT
NEW MEXICO SUICIDE INTERVENTION PROJECTPO BOX 6004 SANTA FE, NM 87502	85-0427990	501C3	9,000				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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NEW MEXICO SYMPHONIC CHORUSPO BOX 7900 ALBUQUERQUE, NM 87194	45-1261027	501C3	6,400				FOR GENERAL OPERATING SUPPORT
OUTSIDE IN PRODUCTIONSPO BOX 5714 SANTA FE, NM 87502	85-0474943	501C3	13,500				FOR GENERAL OPERATING SUPPORT

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PARTNERS IN EDUCATION FOUNDATION FOR THE SFPSP0 BOX 23374 SANTA FE, NM 87502	85-0392417	501C3	55,277				FOR GENERAL OPERATING SUPPORT
PECOS VALLEY MEDICAL CENTER INCPO BOX 710 PECOS, NM 87552	85-0229019	501C3	15,450				FOR GENERAL OPERATING SUPPORT

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PLANNED PARENTHOOD OF NEW MEXICO INC 719 SAN MATEO BLVD NE ALBUQUERQUE, NM 87108	85-0197745	501C3	33,500				FOR GENERAL OPERATING SUPPORT
PRESBYTERIAN MEDICAL SERVICES PO BOX 2267 SANTA FE, NM 87504	85-0206810	501C3	17,500				FOR GENERAL OPERATING SUPPORT

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ROCKY MOUNTAIN YOUTH CORP SPO BOX 1960 RANCHOS DE TAOS, NM 87557	85-0404817	501C3	15,500				FOR GENERAL OPERATING SUPPORT
SALAZAR PARTNERSHIP 978 INDIAN RIDGE ROAD SANTA FE, NM 87501	85-0481104	501C3	10,000				FOR GENERAL OPERATING SUPPORT

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SAMARITAN HOUSE INCPO BOX 1687 LAS VEGAS, NM 87701	75-5009107	501C3	10,250				FOR GENERAL OPERATING SUPPORT
SANTA FE ALLIANCE FOR SCIENCE115 E SUNRISE DRIVE SANTA FE, NM 87506	20-8879193	501C3	7,500				FOR GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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SANTA FE ANIMAL SHELTER AND HUMANE SOCIETY 100 CAJA DEL RIO SANTA FE,NM 87507	85-6000484	501C3	11,898				FOR GENERAL OPERATING SUPPORT
SANTA FE BUSINESS INCUBATOR3900 PASEO DEL SOL SANTA FE,NM 87505	85-0431271	501C3	5,400				FOR GENERAL OPERATING SUPPORT

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SANTA FE CHAMBER MUSIC FESTIVALPO BOX 2227 SANTA FE,NM 87504	85-0224461	501C3	26,100				FOR GENERAL OPERATING SUPPORT
SANTA FE CHILDREN'S MUSEUM1050 OLD PECOS TRAIL SANTA FE,NM 87505	85-0335070	501C3	8,000				FOR PARENT EDUCATION INITIATIVE, FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANTA FE COMMUNITY COLLEGE-- ENLACEGEAR UP COLLABORATIVE 6401 RICHARDS AVE SANTA FE, NM 87508	85-0311615	501C3	31,000				FOR AVID 2011-2012 TUTORING PROGRAM, FOR GENERAL OPERATING SUPPORT
SANTA FE CONSERVATION TRUSTPO BOX 23985 SANTA FE, NM 87502	85-0418988	501C3	24,221				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANTA FE FARMERS MARKET INSTITUTE626 KATHRYN AVE SANTA FE, NM 87505	30-0124953	501C3	17,250				FOR GENERAL OPERATING SUPPORT
SANTA FE INDIAN SCHOOL1501 CERRILLOS ROAD SANTA FE, NM 87505	85-0346497	501C3	5,500				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANTA FE INSTITUTE1399 HYDE PARK ROAD SANTA FE, NM 87501	85-0325494	501C3	7,000				FOR GENERAL OPERATING SUPPORT
SANTA FE MOUNTAIN CENTER INCPO BOX 449 TESUQUE, NM 87574	85-0272388	501C3	16,500				FOR GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANTA FE PREPARATORY SCHOOL1101 CAMINO DE LA CURZ BLANCE SANTA FE,NM 87505	85-0165745	501C3	57,750				FOR GENERAL OPERATING SUPPORT
SANTA FE PUBLIC SCHOOLS DOLLARS4SCHOOLS 610 ALTA VISTA ST SANTA FE,NM 87505	85-6000169	501C3	37,043				FOR GENERAL OPERATING SUPPORT, SANTA FE PUBLIC SCHOOLS SPECIAL PROJECTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANTA FE PUBLIC SCHOOLS TEEN PARENT CENTER 1300 CAMINO SIERRA VIS SANTA FE, NM 87505	85-6000169	501C3	20,000				FOR GENERAL OPERATING SUPPORT
SANTA FE RAPTOR CENTER PO BOX 32021 SANTA FE, NM 87594	77-0634562	501C3	6,500				FOR GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANTA FE TEEN ARTS CENTER - WAREHOUSE 21 1614 PASEO DE PERALTA SANTA FE,NM 87501	85-0442899	501C3	22,000				FOR GENERAL OPERATING SUPPORT
SANTA FE YOUTH SYMPHONY ASSOCIATION551 WEST CORODOVA RD 190 SANTA FE,NM 87505	85-0436819	501C3	13,109				FOR GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCHOOL FOR THE ARTS - NM275 EAST ALAMEDA SANTA FE,NM 87501	26-4764395	501C3	6,150				FOR GENERAL OPERATING SUPPORT
SHEEP SANCTUARY INC PO BOX 5233 SANTA FE,NM 87502	75-3222945	501C3	13,100				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SITE SANTA FE 1606 PASEO DE PERALTA SANTA FE, NM 87501	85-0413922	501C3	5,981				FOR GENERAL OPERATING SUPPORT
SOLACE CRISIS TREATMENT CENTER6601 VALENTINE WAY SANTA FE, NM 87507	85-0242274	501C3	18,946				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOMOS UN PUEBLO UNIDO1804 ESPINACITAS SANTA FE, NM 87505	20-4216836	501C3	20,750				FOR GENERAL OPERATING SUPPORT
SOUTHWEST WOMEN'S LAW CENTER1410 COAL AVE SW ALBUQUERQUE, NM 87104	20-2884027	501C3	13,500				FOR GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST ELIZABETH SHELTER804 ALARID STREET SANTA FE,NM 87505	85-0347650	501C3	81,250				FOR GENERAL OPERATING SUPPORT, CASA FAMILIA
TCC GROUP INC ATTN DIRECTOR OF FINANCE 21 WEST 27TH STREET 4TH FLOOR NEW YORK,NY 10001	23-2491136	501C3	5,225				FOR SF YOUTH COLLABORATIVE CCAT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TESUQUE ELEMENTARY PARENT TEACHER ASSOCIATIONPO BOX 440 TESUQUE,NM 87574	85-0379417	501C3	12,000				FOR GENERAL OPERATING SUPPORT
THE LENSIC SANTA FE'S PERFORMING ARTS CENTER211 W SAN FRANCISCO ST SANTA FE,NM 87501	85-0448396	501C3	30,354				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THEATER GROTTESCO NORTH AMERICA INC551 WEST CORODOVA RD 8400 SANTA FE,NM 87505	38- 2812525	501C3	6,000				FOR GENERAL OPERATING SUPPORT
THINK NEW MEXICO1227 PASEO DE PERALTA SANTA FE,NM 87501	31- 1611995	501C3	22,357				FOR GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRUCHAS SERVICES CENTER INCPO BOX 330 TRUCHAS,NM 87578	23-7319699	501C3	23,842				FOR GENERAL OPERATING SUPPORT
UNITED WAY OF SANTA FE COUNTY440 CERRILLOS RD STE A SANTA FE,NM 87501	85-0163601	501C3	16,194				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF COLORADO FOUNDATION4740 WALNUT STREET BOULDER, CO 80301	84-6049811	501C3	15,000				FOR GENERAL OPERATING SUPPORT
UNIVERSITY OF NEW MEXICO SCHOLARSHIP OFFICEMSC 11-6320 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE, NM 87131	85-6000642	501C3	36,000				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WILDEARTH GUARDIANS516 ALTO STREET SANTA FE,NM 87501	85-0406306	501C3	12,420				FOR GENERAL OPERATING SUPPORT
WILDLIFE CENTER INCPO BOX 246 ESPANOLA,NM 87532	85-0346210	501C3	7,470				FOR GENERAL OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WISE FOOL NEW MEXICO 2778 AGUA FRIA ST UNIT D SANTA FE, NM 87507	85-0473796	501C3	22,000				FOR GENERAL OPERATING SUPPORT
YOUNG WOMEN UNITED PO BOX 8490 ALBUQUERQUE, NM 87198	85-0418224	501C3	8,000				FOR GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTH MEDIA PROJECT1423 MONTEREY DRIVE SANTA FE,NM 87505	85-8439833	501C3	6,500				FOR GENERAL OPERATING SUPPORT
YOUTH SHELTERS AND FAMILY SERVICESPO BOX 28279 SANTA FE,NM 87592	85-0324625	501C3	32,200				FOR GENERAL OPERATING SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTHWORKS551 WEST CORODOVA RD 415 SANTA FE,NM 87505	85- 0480524	501C3	15,000				FOR GENERAL OPERATING SUPPORT

SCHEDULE M
(Form 990)

NonCash Contributions

OMB No 1545-0047

2011

Open to Public Inspection

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

Name of the organization
SANTA FE COMMUNITY FOUNDATION

Employer identification number
85-0303044

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art				
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	X	28	481,705	CASH RECEIVED AT SALE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ►()				
27 Other ►()				
28 Other ► ()				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement			29	0
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?				Yes No
b If "Yes," describe the arrangement in Part II				
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?			31	Yes
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?			32a	Yes
b If "Yes," describe in Part II				
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II				

Part III

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
THIRD PARTY USE	PART I, LINE 32B	STOCK CONTRIBUTIONS ARE SOLD THROUGH A CHARLES SCHWAB ACCOUNT SET UP THROUGH LOS ALAMOS NATIONAL BANK

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization SANTA FE COMMUNITY FOUNDATION	Employer identification number 85-0303044
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Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE INDEPENDENT ACCOUNTING FIRM CONDUCTING THE AUDIT WILL PREPARE THE FORM 990 BASED ON THE AUDIT WORKPAPERS AND ADDITIONAL SCHEDULES PROVIDED BY SFCF STAFF THE INDEPENDENT ACCOUNTING FIRM WILL REVIEW THE LINE ITEMS OF THE FORM 990 WITH THE FINANCE AND INVESTMENT COMMITTEE MEMBERS OF THE BOARD ARE INVITED TO ATTEND THE MEETING THE BOARD HAS AUTHORIZED THE FINANCE AND INVESTMENT COMMITTEE TO APPROVE THE 990 UPON APPROVAL OF THE FINANCE AND INVESTMENT COMMITTEE, THE FORM 990 WILL BE FILED WITH THE INTERNAL REVENUE SERVICE AND THE STATE OF NEW MEXICO A COPY OF THE RETURN, OMITTING SCHEDULE B, WILL BE PROVIDED TO EACH BOARD MEMBER

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY IS AVAILABLE AT THE SANTA FE COMMUNITY FOUNDATION OFFICE. ALL NEW BOARD MEMBERS MUST SIGN OFF ON RECEIPT OF THE POLICY. YEARLY, ALL BOARD MEMBERS AND KEY STAFF ARE TO COMPLETE THE QUESTIONNAIRE NOTED IN THE POLICY. THE LEGAL COMMITTEE SERVES AS THE CONFLICTS COMMITTEE TO MONITOR AND ENFORCE COMPLIANCE WITH THE POLICY. AFTER THE QUESTIONNAIRES ARE COMPLETED, THEY ARE REVIEWED BY THE VICE PRESIDENT OF FINANCE & OPERATIONS, THE PRESIDENT, AND THE LEGAL COMMITTEE. ANY ISSUES THAT ARISE ARE DISCUSSED WITH THE LEGAL COMMITTEE. ANY ACTION TO BE TAKEN BY THE BOARD IS RECOMMENDED BY THE LEGAL COMMITTEE. DUTY TO ABSTAIN: NO DIRECTOR SHALL VOTE ON ANY MATTER IN WHICH HE OR SHE HAS A MATERIAL AND DIRECT FINANCIAL INTEREST. DIRECTOR ABSTAINS AND THIS IS NOTED IN THE MINUTES.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15A	PART VI, SECT B LINE 15A THE SANTA FE COMMUNITY FOUNDATION INDEPENDENT BOARD OF DIRECTORS APPROVES THE COMPENSATION ARRANGEMENTS FOR THE PRESIDENT THIS PROCESS INCLUDES AN ANNUAL EVALUATION OF PERFORMANCE AND REVIEW OF COMPARABLE SALARIES PAID TO PERSONS IN COMPARABLE POSITIONS THE ORGANIZATION MAINTAINS CONTEMPORANEOUS DOCUMENTATION OF THE DECISIONS FOR 2011 SALARIES, THIS PROCESS WAS LAST COMPLETED IN DECEMBER 2010 LINE 15B THE PRESIDENT APPROVES THE COMPENSATION ARRANGEMENTS FOR THE REMAINING STAFF MEMBERS OF THE SANTA FE COMMUNITY FOUNDATION WITHIN THE BUDGET ESTABLISHED BY THE BOARD OF DIRECTORS THIS PROCESS INCLUDES AN ANNUAL EVALUATION OF PERFORMANCE AND REVIEW OF COMPARABLE SALARIES PAID TO PERSONS IN COMPARABLE POSITIONS FOR 2011, THE VICE PRESIDENT OF COMMUNITY PHILANTHROPY AND THE VICE PRESIDENT OF FINANCE & OPERATIONS WERE EVALUATED ACCORDING TO THIS PROCESS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 18	THE PUBLIC DISCLOSURE COPY OF THE FORM 990 IS AVAILABLE AT THE SANTA FE COMMUNITY FOUNDATION OFFICE AND IS ON-LINE AT GUIDESTAR ORG FORM 1023 IS AVAILABLE UPON REQUEST AT THE SANTA FE COMMUNITY FOUNDATION OFFICE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING/ORGANIZING DOCUMENTS ARE AVAILABLE UPON REQUEST AT THE SANTA FE COMMUNITY FOUNDATION OFFICE. THE CONFLICT OF INTEREST POLICY IS AVAILABLE AT THE SANTA FE COMMUNITY FOUNDATION OFFICE. ALL NEW BOARD MEMBERS MUST SIGN OFF ON RECEIPT OF THE POLICY. YEARLY, ALL BOARD MEMBERS AND KEY STAFF ARE TO COMPLETE THE QUESTIONNAIRE NOTED IN THE POLICY. THE AUDITED FINANCIAL STATEMENTS ARE AVAILABLE AT THE SANTA FE COMMUNITY FOUNDATION OFFICE. A SUMMARY APPEARS ON THE SANTA FE COMMUNITY FOUNDATION WEBSITE AND IN THE ANNUAL REPORT.

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -1,709,601 CHANGES IN SPLIT INTEREST AGREEMENTS -10,473 TOTAL TO FORM 990, PART XI, LINE 5 -1,720,074

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
SANTA FE COMMUNITY FOUNDATION

Employer identification number
85-0303044

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) SFCF LLC 501 HALONA STREET SANTA FE, NM 87501 45-3479032	HOLDS THE BUILDING IN WHICH THE SANTA FE COMMUNITY FOUNDATION OFFICES ARE LO	NM	28,706	2,311,944	SANTA FE COMMUNITY FOUNDATION
(2) SFCF PINON LEGACY LLC 501 HALONA STREET SANTA FE, NM 87501 85-0303044	HOLDS PROPERTY DONATED TO THE SANTA FE COMMUNITY FOUNDATION	NM	0	0	SANTA FE COMMUNITY FOUNDATION

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No

Part III

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V

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

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to related organization(s)

c

Gift, grant, or capital contribution from related organization(s)

d

Loans or loan guarantees to or for related organization(s)

e

Loans or loan guarantees by related organization(s)

f

Sale of assets to related organization(s)

g

Purchase of assets from related organization(s)

h

Exchange of assets with related organization(s)

i

Lease of facilities, equipment, or other assets to related organization(s)

j

Lease of facilities, equipment, or other assets from related organization(s)

k

Performance of services or membership or fundraising solicitations for related organization(s)

l

Performance of services or membership or fundraising solicitations by related organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

n

Sharing of paid employees with related organization(s)

o

Reimbursement paid to related organization(s) for expenses

p

Reimbursement paid by related organization(s) for expenses

q

Other transfer of cash or property to related organization(s)

r

Other transfer of cash or property from related organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

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

[illegible]

Part VII

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation	
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Additional Data

Software ID:
Software Version:
EIN: 85-0303044
Name: SANTA FE COMMUNITY FOUNDATION

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services
(Code) (Expenses \$ 64,806 including grants of \$ 6,000) (Revenue \$ 37,620) THE PINON AWARDS IS AN ANNUAL EVENT WHEREBY THE FOUNDATION RECOGNIZES LOCAL NONPROFIT ORGANIZATIONS FOR THEIR ACHIEVEMENTS