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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 Open to Public Inspection

A	For th	e 2011 calendar year, or tax year beginning $$ JUL 1 , 2011 $$ and ending	<u>JUN 30, 2012</u>	
	Check if applicab		D Employer identific	ation number
	Addre	NEW MEXICO BOYS AND GIRLS RANCHES, INC.		
	Name chang		85-01	125610
	lnitial return	Number and street (or P.O. box if mail is not delivered to street address) Room/s	uite E Telephone number	
	Termi		505-8	<u>381-3</u> 363
	Amen return	City or town, state or country, and ZIP + 4	G Gross receipts \$	4,008,147.
	Application	L ADDOQUERQUE, NM 0/110	H(a) is this a group re	turn
	pendi	F Name and address of principal officer ROBERT WALLACE	for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates incl	uded? Yes No
			527 If "No," attach a l	ist (see instructions)
		te: > WWW.THERANCHES.ORG	H(c) Group exemption	
			rear of formation: 1944 M	State of legal domicile: NM
P	art I	Summary		
မွ	1	Briefly describe the organization's mission or most significant activities SEE SCHE	DULE O	
Jan			0504 - 6 1 1	
Governance	2	Check this box	! - 1	
	3	Number of independent voting members of the governing body (Part VI, line 1b)	3 4	<u> </u>
, ფ ა	1	Total number of individuals employed in calendar year 2011 (Part V, line 1a)	5	60
್ರಿ ೬೮ ೬೬ Activities &		Total number of volunteers (estimate if necessary)	6	20
cţi 🤄	1	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
)	1	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
	† · · · ·		Prior Year	Current Year
ر ساے	8	Contributions and grants (Part VIII, line 1h)	3,013,707.	2,351,634.
ğε	9	Program service revenue (Part VIII, line 2g)	61,180.	55,417.
<u>ڏ</u> ڍِ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	48,289.	325,863.
SCANNEL UR	11	Other revenue (Part Vill, Column (A), lines \$60, 8c, 9c, 10c, and 11e)	393,621.	906,175.
<u> </u>	12	Total revenue add lines 8 through 11 (failst equal Part VIII, column (A), line 12)	3,516,797.	3,639,089.
Æ.	13	Grants and similar amounts paid (PartilX column (A), lines 1.3)	0.	0.
W.	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,156,171.	1,825,439.
ens	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25)	1 504 054	4 550 000
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,594,254.	1,752,900.
	1	Total expenses Add lines 13 17 (must equal Part IX, column (A), line 25)	3,750,425.	3,578,339.
_ v		Revenue less expenses Subtract line 18 from line 12	<233,628.	
Net Assets or Find Balances	00	Total coasts (Part V. Iva 16)	Beginning of Current Year 8,538,021.	End of Year
ASSE	20 21	Total assets (Part X, line 16) Total liabilities (Part X, line 26)	70,210.	6,255,421. 93,033.
Net.	22	Net assets or fund balances Subtract line 21 from line 20	8,467,811.	6,162,388.
	art II	Signature/Block	0,407,011.	0,102,500.
		alties of perjury declare that have examined his return, including accompanying schedules and sta	atements, and to the best of my	knowledge and helief, it is
		ct, and complete. Declaration of prepares other than officer) is based on all information of which prep	•	o
	·	Jaluat h		
Sig	ın	Synature of officer	Date	
He	re	ROBERT WALLACE, TREASURER		15-12
		Type or print name and title		
		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Pai	d	STEPHANIE J CATASCA, CPA	self-employe	
	parer	Firm's name ATKINSON & CO., LAD.	Firm's EIN	85-0211867
Use	Only	Firm's address ▶ P.O. BOX 25246		
		ALBUQUERQUE, NM 87125	Phone no. 50	05-843-6492
Ma	y the I	RS discuss this return with the preparer shown above? (see instructions)		X Yes No

	m 990 (2011) NEW MEXICO BOYS AND GIRLS RANCHES, INC. 85-0125	610 Page 2
Pa	art III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	
1	Briefly describe the organization's mission	
	A NON-PROFIT ORGANIZATION THAT OPERATES MULTI-DENOMINATIONAL CH	RISTIAN
	HOMES FOR CHILDREN FROM TROUBLED BACKGROUNDS, AND PROVIDES SERV	
	FOR STRUGGLING CHILDREN. SEE ATTACHMENT REGARDING PROGRAM INFOR	
	FOR STRUGGLING CHILDREN. SEE ATTACHMENT REGARDING FROGRAM INFOR	MATION.
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 X 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 █X 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 ex-	penses
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and alloc	
	others, the total expenses, and revenue, if any, for each program service reported	
42	(Code) (Expenses \$ 2,145,254 · including grants of \$) (Revenue \$	1
70	CARE OF CHILDREN, HOUSING, RECREATION, WORK THERAPY, AND EDUCAT	TON WEDE
		ION WERE
	PROVIDED BY NEW MEXICO BOYS AND GIRLS RANCHES, INC.	
	221 570	3E 901 \
4b	, , , , , , , , , , , , , , , , , , ,	35,801.)
4b	FOSTER CARE, ADOPTION SERVICES AND COUNSELING FOR FAMILIES, CHI	35,801. LDREN
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4b	FOSTER CARE, ADOPTION SERVICES AND COUNSELING FOR FAMILIES, CHILAND UNWED MOTHERS WERE PROVIDED BY FAMILIES FOR CHILDREN.	LDREN
4b	FOSTER CARE, ADOPTION SERVICES AND COUNSELING FOR FAMILIES, CHI AND UNWED MOTHERS WERE PROVIDED BY FAMILIES FOR CHILDREN. (Code)(Expenses \$ 805,171. including grants of \$) (Revenue \$)	19,616.)
	FOSTER CARE, ADOPTION SERVICES AND COUNSELING FOR FAMILIES, CHILAND UNWED MOTHERS WERE PROVIDED BY FAMILIES FOR CHILDREN.	19,616.)
	FOSTER CARE, ADOPTION SERVICES AND COUNSELING FOR FAMILIES, CHI AND UNWED MOTHERS WERE PROVIDED BY FAMILIES FOR CHILDREN. (Code)(Expenses \$ 805,171. including grants of \$) (Revenue \$)	19,616.)
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	FOSTER CARE, ADOPTION SERVICES AND COUNSELING FOR FAMILIES, CHILAND UNWED MOTHERS WERE PROVIDED BY FAMILIES FOR CHILDREN. (Code)(Expenses \$\frac{805,171}{10000000000000000000000000000000000	19,616.)
4c	FOSTER CARE, ADOPTION SERVICES AND COUNSELING FOR FAMILIES, CHIAND UNWED MOTHERS WERE PROVIDED BY FAMILIES FOR CHILDREN. (Code) (Expenses \$ 805,171. including grants of \$) (Revenue \$ ADMINISTRATION OF PROGRAMS, RESIDENTIAL CARE, COMMUNITY PROGRAMS COMMUNITY EDUCATION AND AGRICULTURE.	19,616.)
	FOSTER CARE, ADOPTION SERVICES AND COUNSELING FOR FAMILIES, CHI AND UNWED MOTHERS WERE PROVIDED BY FAMILIES FOR CHILDREN. (Code)(Expenses 8 805,171. including grants of \$) (Revenue \$ ADMINISTRATION OF PROGRAMS, RESIDENTIAL CARE, COMMUNITY PROGRAMS COMMUNITY EDUCATION AND AGRICULTURE. Other program services (Describe in Schedule O)	19,616.)
4c	FOSTER CARE, ADOPTION SERVICES AND COUNSELING FOR FAMILIES, CHI AND UNWED MOTHERS WERE PROVIDED BY FAMILIES FOR CHILDREN. (Code) (Expenses \$\frac{805,171.}{2000} mcluding grants of \$\frac{1}{2000} mcluding grants of \$\f	19,616.)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
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	_5_		_X_
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	6		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		3.7
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		v
_	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9		
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
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	10	- 22	
• •	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI	11a	х	
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	11b		Х
С	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	11c		X
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	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> X</u>
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	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		<u>X</u>
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	12b	_X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14h		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b		Α
13	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			41
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	1	Х
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	17		х
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	18		х
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	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990 (2011)

NEW MEXICO BOYS AND GIRLS RANCHES, INC. 85-0125610 Page 4 Part IV Checklist of Required Schedules (continued) Yes No 21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II Х 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX. Х column (A), line 29 If "Yes," complete Schedule I, Parts I and III 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Х Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х Schedule K If "No", go to line 25 24a 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 X disqualified person during the year? If "Yes," complete Schedule L, Part I 25a 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? If "Yes," complete Schedule L. Part I 25b X Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified 26 Х person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member Х of any of these persons? If "Yes," complete Schedule L, Part III 27 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) X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b 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 direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? Х If "Yes," complete Schedule N. Part I 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 Х 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-32 If "Yes," complete Schedule R, Part I X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 34 X Х 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of X section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х If "Yes," complete Schedule R, Part V, line 2 36

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37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

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

F <mark>órm 9</mark> 90 (2	2011)	NEW	MEXICO	BOYS	AND	GIRLS	RANCHES,	INC.	85-0125610	Page 5		
Part V Statements Regarding Other IRS Filings and Tax Compliance												
Check if Schedule O contains a response to any question in this Part V												
				-								

	Check if Schedule O contains a response to any question in this Part V			
	•			
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	\vdash	Yes	No
b	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 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			l
·	(gambling) winnings to prize winners?	1c	х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	''		\vdash
	filed for the calendar year ending with or within the year covered by this return 2a 60			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	-20	- 25	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<u> </u>
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
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			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a_	ļ———	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	i l		
	to file Form 8282?	_7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			v
e •	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f g	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f	N/	
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h	N/	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/A			
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		l
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966? N/A	9a		ł
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			ł
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	İ		l
11	Section 501(c)(12) organizations. Enter			1
а	Gross income from members or shareholders N/A 11a		,	
b	Gross income from other sources (Do not net amounts due or paid to other sources against		,	ł
	amounts due or received from them)	ı İ	. }	1
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b		. 1	İ
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		
1-	Note. See the instructions for additional information the organization must report on Schedule O			
a	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13b 13c			
с 14а	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	10-		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		
	7-5-, 31 offit 7-5 to report these payments in 140, provide an explanation in deficulte o	_I→D		

Form **990** (2011)

Form 990 (2011) NEW MEXICO BOYS AND GIRLS RANCHES, INC. 85-0125610 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions									
	Check if Schedule O contains a response to any question in this Part VI			X						
<u>Sec</u>	tion 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 1a 9									
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.									
b	Enter the number of voting members included in line 1a, above, who are independent 1b 8									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
_	officer, director, trustee, or key employee?	2	Х							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_		7.7						
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4 5		X						
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders?										
6	Did the organization have members or stockholders?	6		X						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	7-		v						
L.	more members of the governing body? Are any appropriate degrees of the arganization reconsider (or subject to appropriately) members, stockholders, or	7a		<u>X</u>						
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	76		х						
0	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b								
8	The governing body?	8a	Х							
a b	Each committee with authority to act on behalf of the governing body?	- 8b	X							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	OU								
3	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)	3		- 21						
	The second of th		Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		X						
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	ın Schedule O how this was done	12c	X							
13	Did the organization have a written whistleblower policy?	13	X							
14	Did the organization have a written document retention and destruction policy?	14		<u>X</u>						
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?									
а	The organization's CEO, Executive Director, or top management official	15a		<u> X</u>						
b	Other officers or key employees of the organization	15b		<u> </u>						
	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?	16a		X						
b	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									
<u> </u>	exempt status with respect to such arrangements?	16b								
	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed NM Section 5104 requires an arganization to make the Forms 1023 (or 1034 if applicable), 900, and 900 T (Section 501(a)(2)); applied	l - l	lo.							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) at fact public inspection. Indicate how you made those available. Check all that apply	ivaliab	ie							
	for public inspection. Indicate how you made these available. Check all that apply Own website									
10		d food	oro!							
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an statements available to the public during the tax year	u iiiar	icial							
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion 🕨								
20	ROBERT WALLACE - 505-881-3363	iioii 🏲								
	6209 HENDRIX NE, ALBUQUERQUE, NM 87110									
132006	ONO MANDELLE MAY MADOVOMINOUS MAT U/110									

Form **990** (2011)

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 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average		(C) Position do not check more than one lox, unless person is both an					(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	offi		ss pe id a d				compensation from	compensation from related	amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MICHAEL A ROMERO										
CHAIRMAN	2.00	X	<u> </u>	X				0.	0.	0
(2) WARREN BAUR	2 00	,,		,,		 			0	
VICE CHAIRMAN	2.00	X	-	Х		<u> </u>		0.	0.	0
(3) WYNONA DAVIS	2.00			х				0.	0.	0
SECRETARY (4) MICHAEL H KULL	2.00	^	-	Λ	_	 		0.	0 •	0
PRESIDENT	40.00	x		х			ļ	107,225.	11,914.	5,487
(5) LEO MENDOZA	1000							10,72251		3,10,
DIRECTOR	2.00	$ _{\mathbf{X}}$						0.	0.	0
(6) JON BARELA						Ì				
DIRECTOR	2.00	Х						0.	0.	0
(7) LINDA YATES										
DIRECTOR	2.00	X	<u> </u>				<u></u>	0.	0.	0
(8) DR JACOB MOBERLY										
DIRECTOR	2.00	X					_	0.	0.	0
(9) RICK AKINS		l								
DIRECTOR	2.00	X						0.	0.	0
(10) ROBERT WALLACE	10.00			7,				C1 F47	26 277	6 512
TREAS/PRES OF FOUNDATION	10.00		_	Х	_	┢		61,547.	26,377.	6,513
(11) NIKKI KULL	40.00			х				109,163.	0.	E 770
EXEC VICE PRESIDENT/COO	40.00	\vdash		^	-	 		109,103.	<u> </u>	5,778
(12) HEATH KULL VICE PRESIDENT	40.00			Х				76,229.	0.	4,863
(13) MICHELLE KULL	40.00						-	10,225.	•	=,005
VICE PRESIDENT	40.00			x				58,592.	0.	4,791
(14) SHARON SOLLARS	1000							30,73321		
VICE PRESIDENT	40.00			X				58,030.	0.	5,599
(15) GARY WHITE							Γ			
ASSOCIATE VICE PRESIDENT	40.00	<u> </u>		Х				54,255.	0.	6,882
		<u> </u>								
122007 01 22-12		-					_	1	<u>I</u>	Form 990 (2011

	t VII Section A. Officers, Directors, Tr (A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estima amoun othe	t of		
		(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the	organizations (W-2/1099-MIS	D)	compens from t organiza and rela organiza	ation he ation ated		
					-										
						-									
	Sub-total Total from continuation sheets to Part V	// Section A							525,041.	38,29	1.	39,9	913.		
	Total (add lines 1b and 1c) Total number of individuals (including but		ose	liste	d at	oove	e) wh	o re	525,041.	38,29 ,000 of reportable	1.	39,9			
	compensation from the organization											Yes	2 No		
3	Did the organization list any former officer line 1a? If "Yes," complete Schedule J for	such individual		•	•		•			,	_	3	х		
4 5	For any individual listed on line 1a, is the s and related organizations greater than \$15 Did any person listed on line 1a receive or	0,000? <i>If</i> "Yes,	" со	mple	te S	Sche	edule	J f	for such individual	ū		4	Х		
	rendered to the organization? If "Yes," con											5	X		
1	tion B. Independent Contractors Complete this table for your five highest or	ompensated inc	depe	ende	nt c	ontr	acto	rs t	hat received more than	\$100,000 of comp	ensa	tion from			
	the organization Report compensation for														
	(A) Name and business	address							(B) Description of s	ervices	Co	(C) mpensati	on		
P.(HIA D. BOX 5095, SANTA FE,		2						HEALTH INSUR	ANCE		186,9	931.		
	LADELPHIA INSURANCE C D. BOX 70251, PHILADEL DF TECH		A :	L91	.76	5		-	INSURANCE			156,331.			
)2 EUCLID AVE, ALBUQUE	RQUE, NI	1 N	371	.10)		_	CONSTRUCTION			154,5	<u>32.</u>		
	Total number of independent contractors														

Form **990** (2011)

Part VIII Statement of Revenue (D) Revenue (A) (B) (C) Total revenue Related or Unrelated excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns b Membership dues 1b c Fundraising events 1d 2,346,854 d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and 4,780. similar amounts not included above G Noncash contributions included in lines 1a-1f \$,351,634 h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a CHILD CARE/ADOPTION 110000 35,801 <u>35,801.</u> 19,616. AGRICULTURAL PROGRAMS 624100 19,616. f All other program service revenue g Total. Add lines 2a-2f 55,417 Investment income (including dividends, interest, and other similar amounts) 14,821 14,821. Income from investment of tax exempt bond proceeds 582,440. 582,440. 5 Royalties (ı) Real (II) Personal 44,750. 6 a Gross rents 0. b Less rental expenses 44,750. c Rental income or (loss) 44,750 d Net rental income or (loss) 44,750. 7 a Gross amount from sales of (i) Securities (II) Other 680,100. assets other than inventory b Less cost or other basis 369,058. and sales expenses 311,042. c Gain or (loss) 311,042. 311,042. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events \triangleright 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a OTHER REVENUE 900099 278,985 278,985. b d All other revenue 278,985. e Total. Add lines 11a-11d 639,089 55,417 1232038. Total revenue See instructions. 0. 12 132009 01-23-12 Form **990** (2011)

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 respons not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	, star sxpssss	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
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,	562,451.	438,356.	124,095.	
6	trustees, and key employees Compensation not included above, to disqualified	302,431.	430,330.	124,033.	······
6	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	956,201.	846,270.	109,931.	
8	Pension plan accruals and contributions (include	220,201.	040,210.	100,0010	
J	section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	174,202.	158,123.	16,079.	
10	Payroll taxes	132,585.	112,676.	19,909.	
11	Fees for services (non-employees)				
	Management				
b	Legal	34,238.	33,324.	914.	
С	Accounting	15,041.	14,500.	541.	
d	Lobbying	•			
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	100,872.	100,119.	753.	
12	Advertising and promotion	6,783.	4,958.	1,825.	
13	Office expenses	125,425.	112,849.	12,576.	
14	Information technology				
15	Royalties				
16	Occupancy	519,332.	493,171.	26,161.	
17	Travel	72,075.	62,893.	9,182.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	420 505	300 050	20 547	
22	Depreciation, depletion, and amortization	429,505.	398,958.	30,547.	
23	Insurance	183,521.	182,351.	1,170.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	GROCERIES/HOUSEHOLD	116,638.	116,638.		
b	TRAINING/RECRUITMENT	82,554.	39,902.	42,652.	
С	PROGRAM ACTIVITIES	43,785.	43,785.		
d	RECREATION	22,404.	22,404.		
е	All other expenses	727.	727.		
25	Total functional expenses. Add lines 1 through 24e	3,578,339.	3,182,004.	396,335.	0
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined	İ			
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

Form 990 (2011)
Part X Balance Sheet

Pa	rt X	Balance Sheet	-		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	357,847.	1	222,787.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
	1	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)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
.	l	employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net	1,100.	7	2,100.
Ass	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	17,125.	9	20,200.
	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 7,193,530.			
	b	Less accumulated depreciation 10b 4,801,829.	5,280,588.	10c	2,391,701.
	11	Investments - publicly traded securities	817,954.	11	2,391,701. 555,112.
	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	2,063,407.	15	3,063,521.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	8,538,021.	16	6,255,421.
	17	Accounts payable and accrued expenses	70,210.	17	93,033.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Labilities	22	Payables to current and former officers, directors, trustees, key employees,			
효		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	70 010	25	00 000
	26	Total liabilities. Add lines 17 through 25	70,210.	26	93,033.
		Organizations that follow SFAS 117, check here X and complete			
ĕ	07	lines 27 through 29, and lines 33 and 34.	6 006 011		4 501 200
lan	27	Unrestricted net assets	6,806,811.	27	4,501,388.
Ba	28	Temporarily restricted net assets Permanently restricted net assets	1,661,000.	28	1,661,000.
Ę.	29	F		29	
Ē		Organizations that do not follow SFAS 117, check here and			
Net Assets or Fund Balances	20	complete lines 30 through 34.		-	
se	30	Capital stock or trust principal, or current funds		30	
t As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
S	32	Retained earnings, endowment, accumulated income, or other funds	0 467 011	32	6 162 200
	33	Total net assets or fund balances Total liabilities and net assets/fund balances	8,467,811.	33	6,162,388.
	J*+	rotal habilities and het assets/fullu balafices	8,538,021.	34	6,255,421.

Form **990** (2011)

	n 990 (2011) NEW MEXICO BOYS AND GIRLS RANCHES, INC.	85-	01256	10	Pag	ge 12			
Pa	rt XI Reconciliation of Net Assets								
	Check if Schedule O contains a response to any question in this Part XI					\mathbf{X}			
	•								
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,	63	9,0	89.			
2	Total expenses (must equal Part IX, column (A), line 25)								
3	Revenue less expenses Subtract line 2 from line 1	3		_ 6	0,7	50.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,	46	7,8	11.			
5	Other changes in net assets or fund balances (explain in Schedule O)	5	<2,	36	$\overline{6,1}$	73. >			
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	6,	16	$\frac{1}{2}, 3$	88.			
Pa	rt XII Financial Statements and Reporting					<u></u>			
	Check if Schedule O contains a response to any question in this Part XII					\mathbf{x}			
			_		Yes	No			
1	Accounting method used to prepare the Form 990 Cash X Accrual 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?			2a		X			
b	Were the organization's financial statements audited by an independent accountant?			2b	Х				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ie audit,							
	review, or compilation of its financial statements and selection of an independent accountant?		_	2c	Х				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O							
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a							
	separate basis, consolidated basis, or both								
	Separate basis X Consolidated basis Both consolidated and separate basis								
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Auc	dit						
	Act and OMB Circular A-133?		L	3a		<u>X</u>			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	iired aud	lit						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b					
			F	orm	9 90 (2011)			

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

201⁻

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Employer identification number

			NEW MEX	CICO BOYS AND	GIRL	S RAN	CHES,	INC.		85	-0125	610	
Pa	rt I	Reason	for Public Char	rity Status (All organiz	zations mu	st complet	te this par	t) See ins	tructions.				
he	organ	ization is not a	a private foundation	because it is (For lines	1 through	11, check	only one b	ox)					
1	Щ	A church, co	nvention of churche	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(ı)).				
2		A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E)								
3		A hospital or	a cooperative hospi	ital service organization	described	ın section	170(b)(1)	(A)(ni).					
4		A medical res	search organization	operated in conjunction	with a hos	pital desci	ribed in se	ction 170	(b)(1)(A)(ii	ı). Enter th	ne hospital	's nam	ie,
		city, and stat											
5		An organizati	on operated for the	benefit of a college or u	niversity ov	wned or op	perated by	a governi	mental uni	t describe	d in		
		section 170	(b)(1)(A)(iv). (Compl	ete Part II)									
6		A federal, sta	ate, or local governm	ent or governmental uni	t describe	d in sectio	n 170(b)(I)(A)(v).					
7	LX	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general p	ublic desc	rıbed ı	n
		•	(b)(1)(A)(vi). (Comple	·									
8	\square			section 170(b)(1)(A)(vi).									
9				eives (1) more than 33							-		
			•	nctions - subject to certa	•					• •	•		
				axable income (less sec	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	ınızatıon a	fter June 3	0, 197	5
			509(a)(2). (Complete	•									
10	님	_		perated exclusively to te		•			•				
11	L]			perated exclusively for the									or
				ations described in secti				2) See sec	ction 509(a)(3). Che	ck the box	that	
				organization and compl	ete iines i c - Typ	_				٠,	T	741 ··	
_		• • • • • • • • • • • • • • • • • • • •		at the organization is not	• -		-	-		لـــا a	Type III - (_
е				han one or more publich									11
f			-	tten determination from		-				2(a)(1) 01 S	ection 509	(a)(Z)	
•		_	rganization, check th			at it is a Ty	pe i, Type	ii, or Type	5 111				
g			· T	organization accepted ar	ny aift or co	ontribution	from any	of the follo	owing per	eone?			
9		_		lirectly controls, either al			•		٠.			Yes	No
				upported organization?	01 109		po. 000 c		() aa (, 20.011,	11g(i)		
		_	• •	n described in (i) above?	,						11g(II)		
			•	person described in (i)		97					11g(iii)		-
h			-	about the supported or							3,000		
			•		•	` ,							
(i)	Name	of supported	(II) EIN	(iii) Type of	(iv) Is the c	organization	(v) Did you	notify the	(vi) ls	the	(vii) Am	nount o	f
(-)		ınızatıon	(,	organization (described on lines 1-9	in col. (i) h	sted in your			organizátic (i) organiz	ed in the		port	•
				above or IRC section	governing	document?	(i) of you	support?	U.S	.?			
				(see instructions))	Yes	No	Yes	No	Yes	No			
							•			1			
							-						
		· ·								-			
								 	 				
ota	<u> </u>				<u> </u>								

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

Schedule A (Form 990 or 990-EZ) 2011

132021 01-24-12

Schedule A (Form 990 or 990-EZ) 2011 NEW MEXICO BOYS AND GIRLS RANCHES, INC. 85-0125610 Page 2 Part II Support Schedule for Organizations Described in Sections 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)

Sec	ction A. Public Support						
Cale	ndar 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.")	5,615.	3254415.	3329477.	3013707.	2351634.	11954848.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities			i			
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	5,615.	3254415.	3329477.	3013707.	2351634.	11954848.
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						Ì
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4						11954848.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	5,615.	3254415.	3329477.	3013707.		11954848.
8	Gross income from interest,				-		
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	553,139.	329,558.	471,407.	410,447.	642,011.	2406562.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						14361410.
12	Gross receipts from related activities,	etc (see instruction	ons)	······································		12	
13	First five years. If the Form 990 is for	•	•	d, fourth, or fifth ta	ıx year as a sectioi	t	
	organization, check this box and stor	here				, , , ,	
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2011 (l	ine 6, column (f) di	vided by line 11, c	olumn (f))	- 11	14	83.24 %
15	Public support percentage from 2010	Schedule A, Part	II, line 14			15	82.23 %
16a	33 1/3% support test - 2011. If the o	organization did no	t check the box or	n line 13, and line	14 is 33 1/3% or m	nore, check this b	ox and
	stop here. The organization qualifies	as a publicly supp	orted organization				$\triangleright \mathbf{X}$
b	33 1/3% support test - 2010. If the c	organization did no	t check a box on l	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check t	his box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶
17a	10% -facts-and-circumstances tes	t - 2011. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	sis box and stop h	ere. Explain in Par	t IV how the orga	nization
	meets the "facts-and-circumstances"	test The organiza	tion qualifies as a j	publicly supported	dorganization	-	ightharpoons
b	10% -facts-and-circumstances tes	=			-	7a, and line 15 is	10% or
	more, and if the organization meets the	_					
	organization meets the "facts-and-circ				•		ightharpoons
<u>18</u>	Private foundation. If the organization		-	•			ns 🕨 🗌
						dula A (Form 900	

Schedule A (Form 990 or 990 EZ) 2011 Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support							
Cal	endar 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				1			
	ınclude 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 bus- iness under section 513							
4	Tax revenues levied for the organ-							
	ization'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			<u> </u>				
	a Amounts included on lines 1, 2, and							
	3 received from disqualified persons							
i	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
	Add lines 7a and 7b							
8	Public support (Subtract line 7c from line 6)							
	ction B. Total Support			1	- -			
Cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	Τ.	(e) 2011	(f) Total
9	Amounts from line 6							
10	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
ŀ	Unrelated business taxable income						· · · · · · · · · · · · · · · · · · ·	
	(less section 511 taxes) from businesses		ļ					
	acquired after June 30, 1975							
	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, thi	rd, fourth, or fifth t	ax year as a section	on 501	(c)(3) organi:	zation,
	check this box and stop here		·	, , , , , , , , , , , , , , , , , , , 				
	ction C. Computation of Publ					,		
15	Public support percentage for 2011 (I	ine 8, column (f) d	livided by line 13,	column (f))		15		%
	Public support percentage from 2010					16		%
	ction D. Computation of Inves							
17	Investment income percentage for 20)11 (line 10c, colur	mn (f) divided by li	ne 13, column (f))		17		%
	Investment income percentage from 2		· ·			18		%
19	a 33 1/3% support tests - 2011. If the						%, and line	17 is not
	more than 33 1/3%, check this box as	nd stop here. The	e organization qua	lifies as a publicly	supported organiz	ation		ightharpoons
t	33 1/3% support tests - 2010. If the	organization did r	not check a box o	n line 14 or line 19a	a, and line 16 is m	ore tha	an 33 1/3%,	and
	line 18 is not more than 33 1/3%, che	ck this box and s	top here. The org	anızatıon qualıfıes	as a publicly supp	orted	organization	▶□
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	struct	ons	<u> </u>
1320	23 01-24-12				ScI	nedule	A (Form 99	0 or 990-EZ) 2011

SCHEDULE D

(Form 990) .

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
➤ Attach to Form 990. ➤ See separate instructions.

2011
Open to Public Inspection

Name of the organization

NEW MEXICO BOYS AND GIRLS RANCHES, INC.

Employer identification number

Pa	rt I Organizations Maintaining Donor Advise		or Accounts Complete of the
ra			of Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	(a) Donor advised funds	(h) Funda and other accounts
		(a) Donor advised lunds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	-	
	are the organization's property, subject to the organization's	exclusive legal control?	L Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be u	ised only
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose o	
_	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Pa	art IV, line 7
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of an history	orically important land area
	Protection of natural habitat	Preservation of a certif	ied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form o	f a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic structui	re
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per	iodic 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 du	ring the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and e	enforcing conservation easements during t	he year 🕨 \$
8	Does each conservation easement reported on line 2(d) above	re satisfy the requirements of section 170(h	n)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and expense :	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes the	ne organization's accounting for
,	conservation easements		
Pa	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or Ot	her 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 (AS	C 958), not to report in its revenue statem	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	nibition, education, or research in furtheran	ce of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that describe	bes these items	
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement a	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pub	lic 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 trea	asures, or other similar assets for financial	gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		► \$ ► \$
	•		· · · · · · · · · · · · · · · · · · ·

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Schedule D (Form 990) 2011

	dule D (Form 990) 2011 NEW MEX	ICO BOYS AI									
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that are	a significant	use of its	collection	items			
	(check all that apply).										
а	Public exhibition	d	Loan or exc	hange programs							
b	Scholarly research	е	Other								
С	Preservation for future generations					-					
4	Provide a description of the organization's co	ollections and explain	n how they further th	he organization's	exempt purpo	ose in Pari	t XIV				
5	During the year, did the organization solicit of	r receive donations of	of art, historical trea	sures, or other sin	nılar assets						
	to be sold to raise funds rather than to be ma						Yes	☐ No			
Par	t IV Escrow and Custodial Arran				' to Form 990), Part IV,					
	reported an amount on Form 990, Pa		J				·				
1a	Is the organization an agent, trustee, custod	an or other intermed	lary for contribution	s or other assets	not included						
	on Form 990, Part X?		·				Yes	☐ No			
ь	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table								
	,	·	v				Amount				
С	Beginning balance				1c						
d	Additions during the year				1d						
e	Distributions during the year				1e						
f	Ending balance				1f						
2a	Did the organization include an amount on F	orm 990, Part X, line	21?		L_11		Yes	No			
	If "Yes," explain the arrangement in Part XIV	, · · · · · · · · · · · · · · · · ·									
Par		f the organization an	swered "Yes" to Fo	rm 990, Part IV, Iır	ne 10						
		(a) Current year	(b) Prior year	(c) Two years bac		ears back	(e) Four	years back			
1a	Beginning of year balance	6,720,687.	5,870,243.	5,546,38		24.083.	(3)				
b	Contributions	42,325.	672,005.	172,40		229 321.					
c	c Net investment earnings, gains, and losses <120,565. 315,814. 198,610. <1,787,293.										
d	d Grants or scholarships										
ŭ	e Other expenditures for facilities and programs 4,636, 126,513, 45,530.										
f	Administrative expenses	15,506.	10.862.	1,61		19,729.					
,	•										
2	g End of year balance 6,622,305, 6,720,687, 5,870,243, 5,546,382, 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as										
a	Board designated or quasi-endowment	ront your one balano	%	i)) Hold as							
h	Permanent endowment ► 100.00	%									
6	Temporarily restricted endowment	% %									
C	The percentages in lines 2a, 2b, and 2c shou										
32	Are there endowment funds not in the posse	•	ation that are held a	nd administered f	or the organi	zation					
Ja	by	or and organize	and are field a	administered i	a. a.o organi		٦	Yes No			
	(i) unrelated organizations						3a(ı)	X			
	(ii) related organizations							X			
h	If "Yes" to 3a(ii), are the related organizations	e lietad ae raquirad o	n Schedule R2					X			
4	Describe in Part XIV the intended uses of the	· ·					[30]	21			
Par	t VI Land, Buildings, and Equipm					_					
	Description of property	(a) Cost or of	1	or other (c) Accumulate	he	(d) Book	value			
	bosomption of property	basis (investr	1 1 1	(other)	depreciation		(u) Dook	Value			
12	Land	(8,750.			<u> </u>	750.			
	Buildings				2,613,0	12		,231.			
	Leasehold improvements		=,00	0,443. 2	1,010,0	<u> </u>	<u> </u>	1271.			
	Equipment		2 56	8,650. 2	2,188,8	17	370	,833.			
	, ,			7,887.	,,100,0	- ' • 		1,887.			
	Other	agual Form 000 Post						701			

Schedule D (Form 990) 2011

(a) Description of security or category (including name of security)	(b) Book value	00	(c) Method of valuati	
Including name of security) The inancial derivatives The inancial derivatives			of or end-or-year marki	st value
2) Closely-held equity interests				
3) Other		******		
(A)				
(B)				··-
(C)				
(D)				
(E)			<u></u>	
(F) (G)				
(H)				
(i)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related.		e 13		
(a) Description of investment type	(b) Book value	Co	(c) Method of valuations or end-of-year market	
(1)				
(2)				
(3)				
(4)			· v	
(5) (6)				
(7)				
(8)				
(9)				
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13)				
Part IX Other Assets. See Form 990, Part X, II				(1) D. I. I.
	a) Description			(b) Book value
(1) OTHER PROPERTY, NET (2) PROPERTY HELD FOR SALE				1,661,000 1,402,521
(2) PROPERTY HELD FOR SALE (3)				1,402,521
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)		· · ·		2 062 521
Fotal. (Column (b) must equal Form 990, Part X, col (B) I Part X Other Liabilities. See Form 990, Part		•		3,063,521
1. (a) Description of liability	A, III1e 25	(b) Book value		•
(1) Federal income taxes		(2)		
(2)			1	
(3)			1	
(4)			j	
(5)			ļ	
(6)			1	
(7)			-	
(8)			-	
(9)			_	
(10)			-	
(11) Fatal (Column (b) must equal Form 990, Part V, cal (P) (lan 25.)		-	
otal. (Column (b) must equal Form 990, Part X, col (B) I FIN 48 (ASC 740) Foolnote In Part XIV, provide the text of the foolnot FIN 48 (ASC 740)	e to the organization's financial sta	tements that reports the organ	 lization's liability for uncertain	tax positions under
32053				dule D (Form 990) 201

		NC.		0125610	Page 4
Pa		ciai St	atemeni		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		<u>3,639</u> ,	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		3,578,	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3			750.
4	Net unrealized gains (losses) on investments	4		<4,	676.
5	Donated services and use of facilities	5			
6	Investment expenses .	6			
7	Prior period adjustments	7			
8	Other (Describe in Part XIV)	8		<2,361,	497.
9	Total adjustments (net) Add lines 4 through 8	9		<2,366,	173.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		<2,305,	
	t XII Reconciliation of Revenue per Audited Financial Statements With Rever	nue pe	r Return		
1	Total revenue, gains, and other support per audited financial statements		1	2,658,	468.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments 2a <	4,67	6.5		
b	Donated services and use of facilities 2b				
c	Recoveries of prior year grants 2c				
ď	. , , ,	0,90	9.		
e	Add lines 2a through 2d	0,20	2e	1,366,	233.
3	Subtract line 2e from line 1		3	1,292,	235
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		3	1,252,	233.
7	Investment expenses not included on Form 990, Part VIII, line 7b				
а Ь		6,85	<u>/</u>		
b	Add lines 4a and 4b	0,05		2,346,	951
c			4c	3,639,	
5 Pa	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) rt XIII Reconciliation of Expenses per Audited Financial Statements With Expe	neae r			003.
		11363 F		4,309,	071
1	Total expenses and losses per audited financial statements		1	4,303,	7/1.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities 2a				
b	Prior year adjustments 2b				
C	Other losses 2c	1 (2	, 		
d		1,63		5 04	620
е	Add lines 2a through 2d		2e	731,	632.
3	Subtract line 2e from line 1		3	3,578,	339.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIV)				_
С	Add lines 4a and 4b		4c		0.
5			5	3,578,	339.
	rt XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Pa				4, Part
	e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to pro	-		ınformatıon	
<u>PAI</u>	RT V, LINE 4: THE ENDOWMENT FUNDS ARE HELD BY THEIR	RELA	TED		
ORG	GANIZATION THE NEW MEXICO BOYS & GIRLS RANCH FOUNDAT	ION,	85-0	328251.	THE
ENI	DOWMENT FUNDS ARE USED TO PROVIDE SCHOLARSHIPS TO CH	ILDR	EN TO	ENABLE	
THI	EM TO ATTEND THE RANCHES AND TO SUPPORT THE PROGRAM	ACTI	VITIE:	S OF THE	<u> </u>
RAI	NCHES. THIS YEAR, \$2,800,000 OF THE ENDOWMENTS WERE	ALLO	CATED	FOR	
_					
<u>SCI</u>	HOLARSHIPS.				

PART X, LINE 2: THE ORGANIZATION APPLIES THE PROVISIONS OF FINANCIAL
Schedule D (For

Schedule D (Form 990) 2011

Schedule D (Form 990) 2011 NEW MEXICO BOYS AND GIRLS RANCHES, INC. 85-0125610 Page 5 Part XIV Supplemental Information (continued)
ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS CODIFICATION (ASC)
740, INCOME TAXES. FASB ASC 740 PROVIDES DETAILED GUIDANCE FOR THE
FINANCIAL STATEMENT RECOGNITION, MEASUREMENT, AND DISCLOSURE OF UNCERTAIN
TAX POSITIONS IN AN ENTERPRISE'S FINANCIAL STATEMENTS. INCOME TAX
POSITIONS MUST MEET A MORE-LIKELY-THAN-NOT RECOGNITION THRESHOLD AT THE
EFFECTIVE DATE TO BE RECOGNIZED UPON THE ADOPTION OF FASB ASC 740 AND IN
SUBSEQUENT PERIODS. THE PROVISIONS OF FASB ASC 740 HAVE BEEN APPLIED TO
ALL OF THE ORGANIZATION'S INCOME TAX POSITIONS COMMENCING FROM THAT DATE.
THE ORGANIZATION'S POLICY IS TO CLASSIFY INCOME TAX PENALTIES AND INTEREST
AS MISCELLANEOUS EXPENSE. DURING THE YEARS ENDED JUNE 30, 2012 AND 2011,
THE ORGANIZATION RECOGNIZED NO PENALTIES. AS OF JUNE 30, 2012 AND 2011,
MANAGEMENT DOES NOT BELIEVE THE ORGANIZATION HAS ANY UNCERTAIN TAX
POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION, MEASUREMENT,
OR DISCLOSURE UNDER FASB ASC 740.
PART XI, LINE 8 - OTHER ADJUSTMENTS:
LOSS ON IMPAIRED ASSET -2,361,497.
PART XII, LINE 2D - OTHER ADJUSTMENTS:
NEW MEXICO BOYS AND GIRLS RANCH FOUNDATION 1,370,909.
PART XII, LINE 4B - OTHER ADJUSTMENTS:
DONATION FROM NEW MEXICO BOYS AND GIRLS RANCH FOUNDATION 2,346,854.
PART XIII, LINE 2D - OTHER ADJUSTMENTS:
NEW MEXICO BOYS AND GIRLS RANCH FOUNDATION 731,632.

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

NEW MEXICO BOYS AND GIRLS RANCHES, INC. 85-012561	0
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	
A NON-PROFIT ORGANIZATION THAT OPERATES MULTI-DENOMINATIONAL CHRISTIZ	AN
HOMES FOR CHILDREN FROM TROUBLED BACKGROUNDS, AND PROVIDES SERVICES	FOR
STRUGGLING CHILDREN. SEE ATTACHMENT REGARDING PROGRAM INFORMATION.	
FORM 990, PART IV, LINE 10	
THE ENDOWMENTS ARE HELD BY THEIR RELATED ORGANIZATION THE NEW MEXICO	
BOYS & GIRLS RANCH FOUNDATION, 85-0328251.	·
FORM 990, PART VI, SECTION A, LINE 2: CERTAIN BOARD MEMBERS/KEY EMPLO	OYEES
ARE MARRIED TO OTHER BOARD MEMBERS/KEY EMPLOYEES AND HAVE CHILDREN W	HO ARE
EMPLOYEES.	
FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS REVIEWED BY T	HE
TREASURER. AFTER HIS REVIEW HE FORWARDS THE FORM 990 TO THE BOARD OF	
DIRECTORS TO REVIEW. THE BOARD OF DIRECTORS HAVE THE ABILITY TO COMM	ENT. IF
NO COMMENTS ARE MADE, THE TREASURER FILES THE FORM 990.	
FORM 990, PART VI, SECTION B, LINE 12C: ANY ISSUES RELATED TO CONFLIC	CTS OF
INTEREST COME BEFORE THE BOARD OF DIRECTORS.	
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATIONS GOVERNING	
DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE	
AVAILABLE TO THE PUBLIC UPON REQUEST.	

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

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

Schedule O (Form 990 or 990-EZ) (2011)

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization NEW MEXICO BOYS AND GIRLS RANCHES, INC.	Employer identification number $85-0125610$
NET UNREALIZED LOSSES ON INVESTMENTS:	-4,676.
LOSS ON IMPAIRED ASSET	-2,361,497.
TOTAL TO FORM 990, PART XI, LINE 5	-2,366,173.
FORM 990, PART XII, LINE 2C	
THE FINANCE COMMITTEE ASSUMES RESPONSIBILITY FOR OVERSIGH	T OF THE AUDIT
OF ITS FINANCIAL STATEMENTS AND THE SELECTION OF AN INDEP	ENDENT
AUDITOR. THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR	•

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

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.

2011 Open to Public Inspection

OMB No 1545-0047

➤ See separate instructions.

Employer identification number Direct controlling 85-0125610 entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year) End-of-year assets e Total income Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) Legal domicile (state or foreign country) INC. NEW MEXICO BOYS AND GIRLS RANCHES, Primary activity Name, address, and EIN of disregarded entity Name of the organization Part 11 Part

(g) Section 512(b)(13) controlled Š × entity? Yes Direct controlling entity status (if section Public charity 501(c)(3)) 509(A)(3) <u>e</u> Exempt Code section 501(C)(3) ਉ Legal domicile (state or foreign country) NEW MEXICO 85-0328251, 6209 HENDRIX NE, ALBUQUERQUE, NM MANAGEMENT FOR NEW MEXICO NEW MEXICO BOYS AND GIRLS RANCH FOUNDATION - FUNDRAISING & INVESTMENT BOYS AND GIRLS RANCHES Primary activity Name, address, and EIN of related organization 87110

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

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Schedule R (Form 990) 2011

85-0125610 Schedule R (Form 990) 2011 NEW MEXICO BOYS AND GIRLS RANCHES, INC.

Page 2

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	t income related, tax under 2-514)	(f) Share of total income	(g) Share of cend-of-year assets	(h) Disproportionate allocations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	(a) (k) (k) (ceneral or Percentage managing ownership partner (ves No
Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	anizatıons Taxable a poratıon or trust durın	s a Corpo g the tax	oration or Trust (Co /ear)	implete if the	organizatic	n answered "Yes"	to Form 990, Par	t IV, line 34	because it had	one or mo	re related
(a) Name, address, and EIN of related organization	Z .		(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
132162 01-23-12	:			28	_				Schedu	le R (Forn	Schedule R (Form 990) 2011

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Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37)

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

(a)	(q)		e) (b) (7)	(4)	(5)	3	3	3	3
Name, address, and EIN of entity	Primary activity	nicile oreign	Predominant income parines sec (related, unrelated, order from 20, 0100.)	ي ب	Share of end-of-year	Dispropor- tionate allocations?	Dispropor Code V-UBI General or Percentage boate amount in box 20 managing ownership	General or F managing	ercentage
		country)	under section 512-514) yes	No	assets	Yes No	(Form 1065)	Yes No	
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Schedule R (Form 990) 2011

Schedule R	(Form 990) 2011 Supplemental Info	NEW	MEXICO	BOYS	AND	GIRLS	RANCHES,	INC.	85-0125610	Page 5
Part VII	Complete this part to pi	ormation	l tional informat	uan far ran		to aventions	on Cabadula D /		*	
•	Complete this part to pi	ovide addi	uonai informat	non for res	ponses	to questions	s on Schedule H (see instruc	tions)	
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2011-12 Service Statistics

The following numbers detail our programs and services for struggling children and their families. But the real measure of our success lies with the children these statistics represent – boys and girls whose lives were changed through the generosity of those who share our mission.

Boys & Girls Ranch		
Number of Residents	48	1
Residents in On-Campus School	48	1
Average Age	15	1
Average Time in Program (days)	316	1
Number of Inquiries for Placement	439	
Mountain Vista Ranch		
Number of Residents	17]
Average Age	17.8	1
Average Time in Program (days)	95	1
Number of Inquiries for Placement	26	
Families For Children		
Children Placed	3	
Number of Placements	5	
Average Age	10	1
Adoptions]
Licensed Foster Families	2	
Newly Licensed Foster Families		
Foster/Adopt Parent Inquiries	10	
Developing Capable Young People Attendance	39	
Children Impacted Thru DCYP	65	
Getting It Together		
ChildSHARE Anchor Churches	10	
New Mexico Family Connec	tion	
Counselors	3	* Lic Counselors & 1 Paid Intern
Residents Counseled	48	•
Resident Families Counseled	40]
Resident family members counseled	76]
Non-resident families counseled	10	
Non-resident family members counseled	22	
Placements prevented	6]

Ethnicity							
Ethnicity	BGR	MVR	FFC		- TTL		%
African American	3	1	2			6	10.00%
Asian	2					2	3.33%
Caucasian	14	2		1		16	26.67%
Hispanic	21	4	1			26	43 33%
Mixed	6	1				7	11 67%
Native American	2	1				3	5.00%
Totals	48	9	3	60		60	100.00%

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Residents by County					
COUNTY	BGR	MVR	FFC	TTL	%
Bernalillo	20	5	3	28	46 67%
Chavez	1			1	1.67%
Cibola	2			2	3.33%
Curry	1			1	1.67%
Dona Ana				0	0.00%
Eddy				0	0.00%
Guadalupe				0	0.00%
Lea				0	0 00%
Lincoln	3			3	5.00%
Los Alamos				0	0 00%
Luna				0	0.00%
McKınley				0	0.00%
Otero				0	0 00%
Out of State	4	1		5	8.33%
Quay				0	0.00%
Rio Arriba				0	0 00%
Roosevelt				0	0.00%
San Juan		1		1	1.67%
San Miguel	1			1	1.67%
Sandoval	4			4	6.67%
Santa Fe	4			4	6.67%
Sierra				0	0.00%
Socorro	1			1	1.67%
Taos				0	
Torrance	3			3	
Valencia	4	2		6	10.00%
Totals	48	9	3	60	100.00%