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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

<u>A</u>	For th	e 2012 calendar year, or tax year beginning $0011$ , $2012$ and $0$	ل ending	UN 30, 2013	
В	Check if applicab	C Name of organization		D Employer identific	cation number
Г	Addre	SS Communities In Schools of New Mexico			
Γ	Name	Deine December As		85-0	481104
Ē	Initial	· 1	Room/suite	E Telephone number	
F	Termi	•		1	954-1880
5	Amen			G Gross receipts \$	342,067.
Ē	Appli			H(a) Is this a group re	
_	pendi			for affiliates?	Yes X No
		same as C above		H(b) Are all affiliates inc	<del></del>
<u> </u>	Tax-ex	empt status X 501(c)(3)	or 527	1	list. (see instructions)
_		te: > cisnewmexico.org	<u>, , , , , , , , , , , , , , , , , , , </u>	H(c) Group exemption	
		organization: X Corporation Trust Association Other	L Year		State of legal domicile: NM
	art I	Summary	1 - 1 - 1 - 1	51 151 11 11 11 11 11 11 11 11 11 11 11	
_	1	Briefly describe the organization's mission or most significant activities. To st	urroun	d students	with a
Governance		community of support, empowering them to			
na Ta	2	Check this box In the organization discontinued its operations or dispos			
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	6
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	. 6
ος O	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	2
itie	6	Total number of volunteers (estimate if necessary)		6	80
Activities &	7 a	Total unrelated business revenue from Part VIII, column (S) dine 12/F)		7a	0.
⋖	b	Net unrelated business taxable income from form 990 L line 34		7b	0.
	<del>                                     </del>			Prior Year	Current Year
40	8	Contributions and grants (Part VIII, line 1h) FFB 1 2 2015		46,952.	327,010.
nge	9	Program service revenue (Part VIII, line 2g)		0.	15,000.
Revenue	10	Investment income (Part VIII column (A) lines 3 4 and 3db		79.	57.
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c and 1e		0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		47,031.	342,067.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		17,175.	120,615.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	'	0.	0.
v	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	125,450.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
per	b	Total fundraising expenses (Part IX, column (D), line 25)   37,70	06.		
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		20,831.	78,858.
	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		38,006.	324,923.
	19	Revenue less expenses Subtract line 18 from line 12		9,025.	17,144.
Net Assets or I	3		Be	ginning of Current Year	End of Year
ets	20	Total assets (Part X, line 16)		56,068.	80,236.
386 388	21	Total liabilities (Part X, line 26)		0.	7,024.
25	22	Net assets or fund balances Subtract line 21 from line 20		56,068.	73,212.
P	art II	Signature Block	<del></del>		<u> </u>
Und	der pena	ulties of perjury, I declare that I have examined this return, including accompanying schedules	s and statem	ents, and to the best of my	knowledge and belief, it is
•	-	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh			
		Daling Long		2/9	/15
Sig	ın	Signature of officer		Date /	
He		Barbara Gudwin, President			
	-	Type or print name and title	-	·	
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pai	d	Sean S. Weiner Sean & Weiner		2/6/15 self-employe	P00171183
	parer	Firm's name Weiner & Company, P.C.	•	Firm's EIN	45-2781062
	Only		1203		
1	-	Santa Fe, NM 87505		Phone no. (	505)424 <u>-7200</u>
Ma	y the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

232001 12-10-12 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2012)

P~-	990 (2012) Communities In Schools of New Mexico 85-0481104 Page 2
ral	t 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.
	To surround students with a community of support, empowering them to
	stay in school and achieve in life.
2	Did the organization undertake any significant program services during the year which were not listed on
_	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
2	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
3	
_	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 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 \$193,412. including grants of \$120,615.) (Revenue \$15,000.
	To place a full-time Site Coordinator at each CISNM designated school
	who provides integrated student service support school-wide and to the
	highest percentage of children and youth at-risk of dropping out.
4b	(Code) (Expenses \$
	To provide school books for educational programs for two elementary
	schools, benefitting 1,000 students.
4c	(Code) (Expenses \$
4c	To provide emergency funds for health and background checks for two
4c	(Code) (Expenses \$2,764. including grants of \$) (Revenue \$ To provide emergency funds for health and background checks for two elementary schools.
<b>4</b> c	(Code)(Expenses \$2,764. including grants of \$) (Revenue \$ To provide emergency funds for health and background checks for two elementary schools.
4c	(Code)(Expenses \$ 2,764. Including grants of \$
<b>4</b> c	(Code) (Expenses \$ 2,764. Including grants of \$
4c	(Code)(Expenses \$2,764. including grants of \$) (Revenue \$
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<b>4</b> c	(Code) (Expenses \$\frac{2,764.}{\text{ including grants of \$}} \]) (Revenue \$To provide emergency funds for health and background checks for two elementary schools.
<b>4</b> c	(Code ) (Expenses \$ 2,764. including grants of \$ ) (Revenue \$  To provide emergency funds for health and background checks for two elementary schools.
<b>4</b> c	(Code)(Expenses \$2,764. including grants of \$) (Revenue \$
<b>4</b> c	(Code)(Expenses \$\frac{2,764.}{2,764.} including grants of \$\frac{1}{2} \tag{ (Revenue \$\frac{1}{2}  (R
<b>4</b> c	(Code)(Expenses \$
<b>4</b> c	(Code)(Expenses \$ 2,764. including grants of \$) (Revenue \$
4c	(Code) (Expenses \$ 2,764. Including grants of \$
	elementary schools.
	elementary schools.  Other program services (Describe in Schedule O)

· .	AS AMENDED	104	_	
	1990 (2012) Communities In Schools of New Mexico 85-0481 rt IV Checklist of Required Schedules	104	F	Page 3
	Checkist of Required Scriedules			Τ
4	is the organization described in section 501(a)(2) or 4047(a)(1) (other than a private foundation)?	Γ	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	١.,	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	1	X	+
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	2	_	+
3	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	- <del>3</del> -		
7	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	<b>-</b>		<del>-</del> -
•	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			<del></del>
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	}	x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			<del></del>
	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			<del></del>
	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			<del>                                     </del>
	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		x
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	10		x
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.			
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	X	
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		X
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
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	_	X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	İ		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		_ X_
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 and XII 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
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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			•
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
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 United States? If "Yes," complete Schedule F, Parts II and IV	4.		
46	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		<u> </u>
16	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	4.0		v
47	·	16		X
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	47		x
1Ω	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		<u> </u>
18	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		
.5	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<del></del> -
			aan	(2012)

			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 1? If "Yes," complete Schedule I, Parts I and II	21	X	
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? If "Yes," complete Schedule I, Parts I and III	22		X
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			
	Schedule J	23		_X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	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		· [	37
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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			7.5
00	Schedule L, Part I	25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			x
27	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	26		
27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21		
20	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
Ŭ	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		1	
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	ļ	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		ĺ	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		ĺ	
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		ĺ	
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	<b>990</b> (	2012)

orm	990	(2012)	)

Form 990 (2012) Communities In Schools of New Mexico
Part V Statements Regarding Other IRS Filings and Tax Compliance

85-	048	311	04	Page 5

	Check if Schedule O contains a response to any question in this Part V								
				Yes	No				
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 2							
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0							
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportable gaming							
	(gambling) winnings to prize winners?		_1c	X					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return	2a 2							
b	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	s)	i .						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X				
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		ļ				
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, securities account, or other financial	account)?	4a		X				
þ	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.	1						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.	iction?	_5b_		X				
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		<del> </del> -				
ьа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the appropriate that were not toy deductible as shorteble posttyletons?	ne organization solicit			v				
<b>.</b>	any contributions that were not tax deductible as charitable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contribute.	cons or sifts	6a		X				
ь	were not tax deductible?	ions or gins	6b	!					
7	Organizations that may receive deductible contributions under section 170(c).		- 00	<del></del>	<del> </del>				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices provided to the payor?	7a		x				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	rious providud to the payor	7b						
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required	<u> </u>						
	to file Form 8282?	·	7c		x				
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontract?	7e		X				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri	act?	7f		Х				
g	If the organization received a contribution of qualified intellectual property, did the organization file February	orm 8899 as required?	7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		<u> </u>				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D				İ				
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any time during the year?	8		ļ				
9	Sponsoring organizations maintaining donor advised funds.								
a	Did the organization make any taxable distributions under section 4966?		9a						
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b						
10	Section 501(c)(7) organizations. Enter	المما							
a	Initiation fees and capital contributions included on Part VIII, line 12	10a							
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations. Enter:	_10b			1				
''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	110							
	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		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.	·	<u> </u>						
а	Is the organization licensed to issue qualified health plans in more than one state?		13a						
	Note. See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the				1				
	organization is licensed to issue qualified health plans	13b			1				
c	Enter the amount of reserves on hand	13c	ļ		<u> </u>				
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X				
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O	14b		Щ				
			Form	990	(2012)				

232005 12-10-12

Form 990 (2012) Communities In Schools of New Mexico 85-0481104 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			$\mathbf{x}$							
Sec	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										
	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 O.										
b	Enter the number of voting members included in line 1a, above, who are independent 1b 6										
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1									
	officer, director, trustee, or key employee?	2		X							
3											
	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		X							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х							
6	Did the organization have members or stockholders?	6		Х							
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?	7a		X							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or										
	persons other than the governing body?	7b		X							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
	The governing body?	8a	x								
	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										
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	i	X							
Sec	tion 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?	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?										
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			X							
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	Х								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	in Schedule O how this was done	12c	Х								
13	Did the organization have a written whistleblower policy?	13		X							
14	Did the organization have a written document retention and destruction policy?	14	X								
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
а	The organization's CEO, Executive Director, or top management official	15a	Х								
b	Other officers or key employees of the organization	15b	X								
	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		<u> </u>							
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										
	exempt status with respect to such arrangements?	16b									
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ▶NM										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	avaılab	le								
	for public inspection. Indicate how you made these available Check all that apply										
	Own website Another's website X Upon request Other (explain in Schedule O)										
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finan	cıal								
	statements available to the public during the tax year.										
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	tion: 🕨	·								
	Julia Bergen - 505-954-1880										
	300 Catron Street St. A, Santa Fe, NM 87501										
3200 2-10-		Form	990 (	2012)							

-		., -				
Form 990 (2012)	Communities	In School	ols of New	Mexico	85-0481104	Page 7
Part VII Compens	sation of Officers, Direc	tors. Trustee	s. Kev Employ	ees. 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

X Check this box if neither the organization (A)	(B)	Γ		(0	C)			(D)	(E)	(F)
Name and Title	Average	(do		Pos			one	Reportable	Reportable	Estimated
	hours per	box	(do not check more than one box, unless person is both an officer and a director/trustee)			is bot	h an	compensation	compensation	amount of
	week		T		I CCC	Ji/u us	100,	from	from related	other
	(list any hours for	Individual trustee or director				_		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	) o o c	stee		ŀ	sate		(W-2/1099-MISC)	(***-27 1033-141100)	organization
	organizations	trust	Institutional trustee		yee	Highest compensated employee		(** 2. **555 *****55,		and related
	below	lanpu	tuttou	ᡖ	Key employee	esto	声			organizations
	line)	횰	뺩	Officer	Key	돌통	퉏			
(1) William C. Carson	10.00		ł							
President				X				0.	0.	0.
(2) Georgia Carson	5.00									
Secretary				X				0.	0.	0.
(3) John Cassidy	3.00									
Treasurer		L	L	Х				0.	0.	0.
(4) Talitha Arnold	1.00									
Board Member		X						0.	0.	0.
(5) Joyce Idema	1.00									
Board Member		X						0.	0.	0.
(6) Charles Smith	1.00							1		
Board Member		X						0.	0.	0.
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			<del>                                     </del>				<u> </u>			
	L	4	1	1	l	1	l .	I	l	

Form **990** (2012)

Form **990** (2012)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

and Other S	f	All other contributions, gifts, gran similar amounts not included abo	1 1	327,010.				
<b>E</b>	g	Noncash contributions included in lines	1a-1f \$		205 010			
<u> </u>	h	Total. Add lines 1a-1f			327,010.			
		School Site Coo		Business Code 611710	15,000.	15,000.		
Revenue	b	• •						
ě	c d							
52	e				-			
	_	All other program service reve	enue					
į		Total. Add lines 2a-2f	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<b>•</b>	15,000.			<del></del>
	3	Investment income (including	dividends, inter		23,000			<del></del>
l	•	other similar amounts)		<b>&gt;</b>	57.			57.
	4	Income from investment of ta	x-exempt bond i	proceeds				
	5	Royalties		•				
	_		(i) Real	(ii) Personal	·			
	6 a	Gross rents	V					
ŀ	b							
	c	Rental income or (loss)						
		Net rental income or (loss)		<b></b>				
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses				İ		
	С	Gain or (loss)				-		
	d	Net gain or (loss)		<b></b>				
ايو	8 a	Gross income from fundraising	g events (not			ļ		
		including \$	of					
اقِ		contributions reported on line	1c) See			į		
Other Revenue		Part IV, line 18	а					
Ě∣	b	Less direct expenses	b					
<u> </u>	C	Net income or (loss) from fund	draising events					
	9 a	Gross income from gaming ac	ctivities. See					
		Part IV, line 19	а					
	-	Less. direct expenses	b	<b></b>				
		Net income or (loss) from gam	-					
	10 a	Gross sales of inventory, less	returns					
		and allowances	a					
		Less cost of goods sold	b					
ł	<u> </u>	Net income or (loss) from sale		D O. d.				
	44 -	Miscellaneous Revenu	•	Business Code				
	11 a							
Ì	b	<del></del>						<del>.,</del>
1	۲ د	All other revenue		<del>                                     </del>				
	d	Total. Add lines 11a-11d						
	12	Total revenue. See instructions.			342,067.	15,000.	0.	57.
3200 2-10		TOTAL TOTAL OF MORE COLUMN.			,,	,,		Form <b>990</b> (2012)
- ۱۵۰	- 12				10			, .
50	202	790890 0303	2	012.06010	Communitie	es In Scho	ols of N	03032

Form 990 (2012) Communities In Schools of New Mexico
Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) controls

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Section 501(c)(4) c

Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must co	mplete column (A).	
	Check if Schedule O contains a respon	se to any question in th			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	120,615.	120,615.		
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,				<del></del>
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	112,028.	64,755.	25,115.	22,158.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	2,981.	1,476.	521.	984.
10	Payroll taxes	10,441.	5,219.	3,367.	<u>1,855.</u>
11	Fees for services (non-employees):				
а	Management				
b	Legal				
	Accounting	7,049.		7,049.	
	Lobbying				
_	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,	21 625		0 006	10 700
	column (A) amount, list line 11g expenses on Sch O.)	21,635.		8,926.	12,709.
12	Advertising and promotion	15,088.		15,088.	
13	Office expenses Information technology	15,000.		15,000.	
14 15	Royalties				<del></del>
16	Occupancy	13,214.		13,214.	
17	Travel	766.		766.	
18	Payments of travel or entertainment expenses	7001		700.	
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	240.		240.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	371.		371.	
23	Insurance	8,855.	1,122.	7,733.	
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 0.)				
а	Books	5,708.	5,708.		
b	Other expenses	3,168.	225.	2,943.	
С	Emergency Fund	2,764.	2,764.		
d					
е	All other expenses				<del></del>
25	Total functional expenses. Add lines 1 through 24e	324,923.	201,884.	85,333.	37,706.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
-	Check here If following SOP 98-2 (ASC 958-720)		ļ		Form 990 (2012)

232010 12-10-12

Form **990** (2012)

Communities In Schools of New Mexico 85-0481104 Page 11 Form 990 (2012) Part X Balance Sheet Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 56,068. 15,399. Cash - non-interest-bearing 1 2 2 Savings and temporary cash investments 60,500. Pledges and grants receivable, net 3 3 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L 6 Loans and other 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 employees' beneficiary organizations (see instr) Complete Part II of Sch L 6 Notes and loans receivable, net 7 8 Inventories for sale or use 1,000. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 3,708. basis Complete Part VI of Schedule D 10a 371 3,337. 0. b Less accumulated depreciation 10b 10c Investments - publicly traded securities 11 11 Investments - other securities See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 56,068, 80,236 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 Accounts payable and accrued expenses 17 17 18 Grants payable 18 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 7,024. 0. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 64,942. 8,270. 48,258. 7,810. 27 Unrestricted net assets Temporarily restricted net assets 28 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds Paid in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32

73,212. 80,236. Form 990 (2012)

33

56,068.

56,068.

33

Total net assets or fund balances

Total liabilities and net assets/fund balances

	1990 (2012) Communities In Schools of New Mexico	<u>85-048</u>	<u> 1104</u>	Pag	<sub>le</sub> 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
		1 1			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	342		
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u>23.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			<u>44.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	56	<u>, 0</u>	<u>68.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	73	3,2	12.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
	<u>_</u>		'	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	e O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both.				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,			
	consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
c	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	$\mathbf{x}$	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				
	Act and OMB Circular A-133?	-	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	iired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	ĺ	
			Form 9	90 (2	2012)

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

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

Open to Public Inspection

Name of the organization

Communities In Schools of New Mexico

Communities In Schools of New Mexico

85-0481104

Public Charity Status (All organizations must complete this part.) See instructions

Par	t I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	te this par	t.) See inst	ructions.		- · - ·		
he o	rganı			because it is (For lines									
1			•	s, or association of chur	•		•	•	).				
2				/ <b>0(b)(1)(A)(ii).</b> (Attach Sc									
3	$\neg$			ital service organization of			170(b)(1)	(A)(iii).					
4		•		operated in conjunction					(b)(1)(A)(ii	i). Enter	the hospit	al's na	ıme.
•		city, and stat							(-)( ·)(· ·)(··	.,.			,
5 [	$\neg$	-		benefit of a college or ur	niversity o	wned or or	perated by	a governi	nental uni	t describ	ed in		
•			(b)(1)(A)(iv). (Compl	_			,	g					
6 [	$\neg$			ent or governmental unit	t describe	d in sectio	n 170/h)/-	IVAVA					
7 [	X		_ ·	eives a substantial part			, ,,		r from the	general	nublic des	cribac	t in
′ -	<b>43</b>	-	<b>b)(1)(A)(vi).</b> (Comple	·	or its supp	ort nom a	governme	antai uriit C	, 110111 the	genera	public des	CIDEC	2 111
<b>8</b> [	$\neg$	•		section 170(b)(1)(A)(vi).	(Complete	Part II )							
9 [	=						rom contri	hutione m	omborch	n food o	nd aross r	aaaınt	a fram
9 _		-	-	eives: (1) more than 33 1							_	•	
				nctions - subject to certa							_		
				axable income (less sect	uon 511 ta	x) from bu	isinesses a	icquirea b	y the orga	ınızatıon	aπer June	30, 18	<del>3</del> /5.
. Г	$\neg$		509(a)(2). (Complete	•	a <b>. fa.</b> . ab.l			- 500/-1//					
10 L	=	-	-	perated exclusively to te	•	•			•			-4	
T		•	•	perated exclusively for the						•			
				ations described in section				) See sec	tion 509(	a)(3). Cn	eck the bo	x tnat	
			· · · · · · · · · · · · · · · · · · ·	organization and comple		•			. — -				
Г	$\neg$	a L Type I		-		nctionally	_				n-function	-	-
e L		-		at the organization is not		-	-	-		-			
_			•	han one or more publicly		_				∂(a)(1) or	section 50	)9(a)(2	)
f		-		tten determination from t	the IRS tha	atitis a Ty	pe I, Type	II, or Type	<del>)</del> III				
		• • •	rganization, check th										لـــا
g		-		organization accepted ar			•					_	
			•	lirectly controls, either al	one or tog	ether with	persons o	lescribed i	n (II) and (	III) below		Yes	No No
		-	- ,	upported organization?							11g(i		
		• •	•	n described in (i) above?							11g(i	i)	
		(iii) A 35% d	controlled entity of a	person described in (i) o	or (II) abovi	e?					11g(ii	i)	
h		Provide the fo	ollowing information	about the supported org	ganızatıon	(s).							
			T	· · ·	•				1		1		
(i) N	ame	of supported	(ii) EIN	(iii) Type of organization		organization			(vi) ls  organizatio		(vii) Amou	nt of m	onetary
	orga	nızatıon				sted in your document?			(i) organiz U.S	ed in the	SL	ipport	
				(see instructions))									
					Yes	No	Yes	No	Yes	No			
			<u>.</u>		<del> </del>								_
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

232021 12-04-12

Schedule A (Form 990 or 990 EZ) 2012 Communities In Schools of New Mexico 85-0481104 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	fails to qualify under the tests			<del>'',</del>	<del></del>	-	
	· · · · · · · · · · · · · · · · · · ·	4-1-2002	#.) 0000	( ) 2045	( )) 224 :		Г————————————————————————————————————
	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not	22 620	42 042	74 642	46 050	207 010	F06 070
_	include any "unusual grants ")	33,630.	43,843.	74,643.	46,952.	327,010.	<u>526,078.</u>
2	Tax revenues levied for the organ-				:		
	ization's benefit and either paid to or expended on its behalf						
_	•						
	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
	-	33,630.	43,843.	74,643.	46 052	227 010	F26 070
	Total. Add lines 1 through 3	33,630.	43,043.	74,043.	46,952.	327,010.	526,078.
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)						01 500
	`'			-			91,592.
	Public support. Subtract line 5 from line 4			<u></u>			434,486.
	1	(=) 2009	<b>(b)</b> 2009	(=) 2010	(4) 0011	(-) 0010	(0 T-4-1
	ndar year (or fiscal year beginning in)	(a) 2008 33,630.	43,843.	(c) 2010 74,643.	(d) 2011 46,952.	(e) 2012 327,010.	(f) Total 526,078
	l l	33,030.	43,043.	74,043.	40,954.	347,010.	520,070
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources	95.	107.	69.	79.	57.	407.
9	Net income from unrelated business		107.		13.	37.	407
	activities, whether or not the						
	business is regularly carried on						
	Other income. Do not include gain		···				
	or loss from the sale of capital						
	assets (Explain in Part IV)						
	Total support. Add lines 7 through 10						526,485.
	Gross receipts from related activities,	etc. /eee instruction	ne)	·		12	15,000.
	First five years. If the Form 990 is for			fourth or fifth tax	L Vear as a soction		13,000.
13	organization, check this box and stop	_	mat, second, tima	, louitil, or milita	year as a section	1 30 1(0)(3)	
Sec	tion C. Computation of Publi		centage	<del></del>	*	<del>-</del> ·· · · · · · · · · · · · · · · · · ·	
	Public support percentage for 2012 (li		<u>_</u>	olumn (fi)		14	82.53 %
	Public support percentage from 2011	, ,,	,	(1)/		15	62.13 %
	33 1/3% support test - 2012. If the o			line 13, and line 1	ں 4 is 33 1/3% or m		
	stop here. The organization qualifies	•			. 10 00 17070 01 111		►X
	33 1/3% support test - 2011. If the o		-	ne 13 or 16a. and I	ine 15 is 33 1/3%	or more, check th	
	and stop here. The organization quali	-					▶□
	10% -facts-and-circumstances test	•	• •		13. 16a. or 16b. a	nd line 14 is 10%	or more
	and if the organization meets the "faci	<del>-</del>					
				•	•	o.gun	<b>▶</b> □
	meets the "facts-and-circumstances"	test. The organizati					
	meets the "facts-and-circumstances" 10% -facts-and-circumstances test		•	neck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
b	10% -facts-and-circumstances test	- <b>2011.</b> If the orga	nization did not ch				
b	10% -facts-and-circumstances test more, and if the organization meets the	t - <b>2011.</b> If the orga ie "facts-and-circum	nization did not ch nstances" test, che	eck this box and s	top here. Explain	in Part IV how the	
b	10% -facts-and-circumstances test	t - <b>2011.</b> If the orga te "facts-and-circum turnstances" test. T	nization did not ch nstances" test, che he organization qu	eck this box and solution alifies as a publicles	t <b>op here.</b> Explain ly supported orga	in Part IV how the	<b>▶</b> □

232022 12-04-12

#### 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)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(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 per-						
formed, 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			}		1	
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		<u> </u>		1		_
	(-) 0000	#\ 0000	(-) 0010	(-0.0044	(.) 0040	(0 T-1-1
Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6				<del> </del>		
10a Gross income from interest, dividends, payments received on				1		
securities loans, rents, royalties						
and income from similar sources				ļ		
<b>b</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)				<u> </u>		
14 First five years. If the Form 990 is for	the organization's	s first, second, thire	d, fourth, or fifth to	ax year as a sectio	n 501(c)(3) organiz	ation,
check this box and stop here						▶□
Section C. Computation of Publ	c Support Per	rcentage				
15 Public support percentage for 2012 (I	ine 8, column (f) di	ivided by line 13, c	olumn (f))		15	%
16 Public support percentage from 2011					16	%
Section D. Computation of Inves	tment Income	e Percentage				
17 Investment income percentage for 20	12 (line 10c, colun	nn (f) divided by lin	e 13, column (f))		17	%
18 Investment income percentage from 2	•	•	- **		18	%
19a 33 1/3% support tests - 2012. If the			on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box as						
b 33 1/3% support tests - 2011. If the	<u>-</u>	-				and
line 18 is not more than 33 1/3%, che	_					
20 Private foundation. If the organization		-				
		., 100				

## AS AWENDED

Sched	ule A	(Form																								LO4 Page	<b>∍ 4</b> _
Part	IV																				Part II,	, line	10; 1	Part	II, line 1	7a or 17b;	
		and F	art	III, line	e 12.	Also	com	plete	this	part	for a	iny a	addıtı	onal	ınforr	natio	n. (See	ınst	tructio	ns)							
<u>The</u>	or	gan	iz	<u>ati</u>	on	fi	le	d i	a s	shc	rt	y	ear	t	ax	re	turr	1 j	in 2	011	fo	r	a c	cha	nge	in	
acc	our	ting	g	per	io	d f	ro	m ·	ca:	len	da	r y	yea	ır	to	fi	scal	<u> </u>	<u>zear</u>	er	<u>ıdin</u>	g	Jur	<u>ie</u>	30,	2012.	
<u>The</u>	рe	rio	<u>a</u>	rep	ort	ted	l w	as	Ja	anu	ar	у :	1,	20	12	th	roug	jh	Jur	ie 3	30,	20	12	•			
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#### **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.

2012 Open to Public Inspection

Name of the organization

Employer identification number

	Communities In Sch	ools of New Mexico	85-0481104
Pa	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds o	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, Iin	e 6	
		(a) Donor advised funds	(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	writing that the assets held in donor advised	l funds
	are the organization's property, subject to the organization's	_	Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose co	
Da	impermissible private benefit?		Yes No
Pa	<del></del>		t IV, line 7.
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or e		rically important land area
	Protection of natural habitat	Preservation of a certifie	ed historic structure
_	Preservation of open space	final common street controls the forms of	
2	Complete lines 2a through 2d if the organization held a qualiday of the tax year	ned conservation contribution in the form of a	a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
•	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c
ď	Number of conservation easements included in (c) acquired	• •	
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the or	\ <u></u>
	year▶		· ·
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements during	ng the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during the	e year 🕨 \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(	(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organizar	tion's financial statements that describes the	e organization's accounting for
Pai	conservation easements t III   Organizations Maintaining Collections o	f Art Historical Treasures or Othe	er Similar Assets
	Complete if the organization answered "Yes" to Form		ci Olimai Assets.
12	If the organization elected, as permitted under SFAS 116 (AS	<del></del>	nt and halance cheet works of art
14	historical treasures, or other similar assets held for public ext		
	the text of the footnote to its financial statements that descri		o or public corrido, provido, intractivani,
b	If the organization elected, as permitted under SFAS 116 (AS		nd balance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, e		
	relating to these items		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial ga	
	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>&gt;</b> \$
b	Assets included in Form 990, Part X		► \$ ► \$

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

Schedule D (Form 990) 2012

	dule D (Form 990) 2012 Communities of till Organizations Maintaining Communities of the community of the com	ties In Sc Collections of A							81104 <b>ts</b> (continue	
3	Using the organization's acquisition, accessi	on, and other record	ls, check	any of the	following the	at are a sig	nıfıcant	use of its	collection r	tems
	(check all that apply):									
а	Public exhibition	d	ı 🔲 L	oan or ex	change progr	ams				
b	Scholarly research	е		Other						
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how the	ev further	the organizat	ion's exem	not purpo	ose in Par	XIII	
5	During the year, did the organization solicit of	•		•	-					
•	to be sold to raise funds rather than to be ma								Yes	☐ No
Par	t IV Escrow and Custodial Arran					"Yes" to F	orm 990	Part IV. I		110
	reported an amount on Form 990, Pa			g				, , .		
12	Is the organization an agent, trustee, custod	an or other intermed	lary for c	contributio	ns or other as	ssets not u	ncluded			
	on Form 990, Part X?								Yes	□ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	ahle.					_ 103	
D	ii res, explain the arrangement in Fart Alli	and complete the to	nowing to	aDI <del>C</del>			Г		Amount	
_	Darimaina balanca						4-		Amount	
С.	Beginning balance						1c			
đ	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f		٦	
	Did the organization include an amount on F							L	Yes	∐ No
	If "Yes," explain the arrangement in Part XIII									
Par	t V Endowment Funds. Complete	f the organization an	swered '	'Yes" to F	orm 990, Part					
		(a) Current year	<b>(b)</b> Pr	or year	(c) Two year	rs back (d	<b>d)</b> Three y	ears back	(e) Four ye	ears back_
1a	Beginning of year balance									
b	Contributions									<del></del>
С	Net investment earnings, gains, and losses					ļ				
d	Grants or scholarships									
е	Other expenditures for facilities									
•	and programs									
f	Administrative expenses		<del></del>							
	End of year balance				- <del> </del>					
g	Provide the estimated percentage of the curr	ront year and halana	o (lino 1c	- column	(a)) held as					
2	·	rent year end baland		, coluitiii	(a)) Held as.					
a	Board designated or quasi-endowment	0/	%							
b	Permanent endowment	%								
С	Temporarily restricted endowment	%								
	The percentages in lines 2a, 2b, and 2c should be a sh									
3a	Are there endowment funds not in the posse	ession of the organiza	ation tha	t are held	and administe	ered for the	e organiz	zation	<u></u>	<del></del>
	by.									es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(II), are the related organizations								3b	
_4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipm	nent. See Form 990	, Part X,	line 10						
	Description of property	(a) Cost or o	ther	(b) Cos	t or other	(c) Acc	cumulate	ed	(d) Book v	alue
		basis (investr	nent)	basis	(other)	depr	reciation			
1a	Land									
	Buildings									
	Leasehold improvements									
	Equipment	3.	708.				3	71.	3	,337.
	Other									,
	. Add lines 1a through 1e (Column (d) must e	qual Form 990 Part	X colum	n (R) line	10(c) l	<del></del>			3	,337.
rotal	. Add intes to through to (Column to) must e	quair oini 330, r ait	,, court	( <i>D)</i> , m (C	. 5(0).)			Schedule	D (Form 9	
								JUNEAUIE	~ 11 00 111 5	

Schedule D (Form 990) 2012 Communities	In Schools	of New Mexi	.co 85	5-0481104 Page 3
Part VII Investments - Other Securities. Sec			-alication Continue	d -4
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of V	/aluation. Cost or en	d-of-year market value
(1) Financial derivatives			<del> </del>	
(2) Closely-held equity interests		· · -		
(3) Other			<del></del>	
(A)				
(B) (C)				
(D)				
(E)				
(F)				
(G)				
(H)		-		
(1)				
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				,
Part VIII Investments - Program Related. Se	ee Form 990, Part X, Iir	ne 13		
(a) Description of investment type	(b) Book value	(c) Method of v	valuation. Cost or en	d-of-year market value
(1)				
(2)			<del></del>	
(3)				
(4)				
(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, line	15			
	Description			(b) Book value
	Description			(b) DOOK VAIDO
(1)			<del></del>	
(3)				
(4)				
(5)				
(6)	•			
(7)				
(8)		, <del>, ,</del>		
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line				
Part X Other Liabilities. See Form 990, Part X, I	ine 25		<del>,</del>	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes		<u></u>		
(2)				
(3)				
(4)				
(5)				
(6)				
			-	
(8)			1	
(9)			1	
(10)			1	
(11) Takel (Column (b) must equal Form 990, Part V, col. (R) line	25)		-	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the tex		organization's financia	l statements that ro	norte the organization's
liability for uncertain tax positions under FIN 48 (ASC 7				
madility for uncortain tax positions under 1 if 40 (AOC 1	.or. ondok nord ii tile	oo loodilote ilas	23011 PROVIDED III C	

232053 12-10-12 AS NMEMDED

•	1.	\[ \frac{1}{2}\frac{1}			
		(Form 990) 2012 Communities In Schools of N			-0481104 Page 4
Par	t XI	Reconciliation of Revenue per Audited Financial Statemer	its With Revenue per R	etur	n
1		revenue, gains, and other support per audited financial statements		1	
2		nts included on line 1 but not on Form 990, Part VIII, line 12:	1 1		
а		nrealized gains on investments	2a	-	
b		ted services and use of facilities	2b	ł	
С		veries of prior year grants	2c		
d		(Describe in Part XIII.)	2d		
е	Add I	nes 2a through 2d		2e	
3		act line 2e from line 1		3	
4		ints included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
а		tment expenses not included on Form 990, Part VIII, line 7b	4a	-	
b		(Describe in Part XIII.)	4b	1	
С		nes <b>4a</b> and <b>4b</b>		4c	
5		revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	The With Eventure	5	
Pai		Reconciliation of Expenses per Audited Financial Stateme	nts with Expenses per	I .	urn
1		expenses and losses per audited financial statements		1	
2		ints included on line 1 but not on Form 990, Part IX, line 25	1 - 1		
а		ted services and use of facilities	2a		
b		year adjustments	2b	ļ	
С		losses	2c		
d		(Describe in Part XIII )	2d	-	
е		nes 2a through 2d		2e	
3		act line 2e from line 1		3	
4		ints included on Form 990, Part IX, line 25, but not on line 1:	4-		
a		tment expenses not included on Form 990, Part VIII, line 7b	4a	1	
b		(Describe in Part XIII )	4b		
_		nes 4a and 4b		4c 5	
5 Dai		expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Supplemental Information		5	
			lines 1s and 4: Dort IV lines 1	b and	I Oh. Dort V. Ino 4: Dort
	•	nis part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p			120, Fart V, IIII 4, Fart
		t, Ai, lines 2: Income Taxes. CISNM is a New			-
Fai	<u> </u>	, line 2: income laxes. Cibam is a new	Mexico non pro	, <u>, , , , , , , , , , , , , , , , , , </u>	
ore	rani	zation that is exempt from income taxes	under Section	501	(c)(3) of
<u>OT C</u>	<u> </u>	Zacion chac is exempt from income cases	dilder beceron	<u> </u>	1,0/(3/ 01
the	e Ir	ternal Revenue Code and has been classi	fied as a publi	cal	lly
sur	roge	ted organization. Management has concl	uded that CISNM	i ha	as no
unc	cert	ain tax positions, and no interest or p	enalties have b	eer	included
as	an	expense in the accompanying financial s	tatements. Wit	h f	ew
exc	cept	ions, CISNM is no longer subject to fed	leral or state e	xan	ninations
foı	r ye	ears before 2010. Management believe the	ere are no uncer		<u>in tax</u>

232054 12-10-12

Schedule D (Form 990) 2012  Part XIII   Supplemental Info	Communities	In Schools	of New Mexico	85-0481104 Page 5
positions as of Ju				
posicions as or our	16 30, 2013			
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77.40				
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			-	Schedule D (Form 990) 2012

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ► Attach to Form 990. Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE I (Form 990)

OMB No 1545-0047	2012

Open to Public Inspection

Name of the organization	2 C C C C C C C C C C C C C C C C C C C	4	. V				Employer identification number	
Part   General Information on Grants and Assistance	and Assistance	3	NEW MEALCO				*0110*0-C0	
1 Does the organization maintain records to substantiate the amount of the	to substantiate the	e amount of the grants	or assistance, the	grantees' eligibility	y for the grants or ass	grants or assistance, the grantees' eligibility for the grants or assistance, and the selection		
	stance?						X Yes No	
깘	ocedures for moni	toring the use of grant	grant funds in the United States	d 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	Governments and	d Organizations in the	e United States. C	Complete if the orga	anization answered ")	Yes" to Form 990, Part	IV, line 21, for any	
recipient that received more than \$5,000. Part II can be duplicated if	\$5,000. Part II can	be duplicated if addit	additional space is needed	ded				
1 (a) Name and address of organization or government	(p) EIN	(c) IRC 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	ı
a Loods of Hill of chees								
610 Alta Vista							To support the secretary	
Santa Fe, NM 87505	85-6000169		90,615,	0				S
La Pamilia Medical Center							ų	ZALW
1035 Alto Street								315
Santa Fe, NM 87501	85-0220875	501(c)(3)	30,000,	0				1/2
								DED
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government or	ganizations listed in th	ie line 1 table				1.	
3 Enter total number of other organizations listed in the line 1 table	s listed in the line	1 table					1.	
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the Instruct	ions for Form 990.					Schedule I (Form 990) (2012)	_

(f) Description of non-cash assistance Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed as quartely financial statement of Funds given to La Familia Medical Center were monitored by monitored by the Executive Director having meetings with school principals the Executive Director having weekly meetings with the Site Coordinator to Line 2: Funds given to the SF Public Schools were (d) Amount of non-cash assistance (c) Amount of cash grant review services provided and performance measures. (b) Number of recipients to discuss the services provided as well (a) Type of grant or assistance Part I, funds expended. Schedule I,

as wimended

Schedule I (Form 990) (2012)

29

232102 12-18-12

Page 2

85-0481104

Communities In Schools of New Mexico

Schedule I (Form 990) (2012)

Part III

#### **SCHEDULE O**

(Form 990 or 990-EZ)
Department of the Treasury

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.

2012
Open to Public Inspection

Name of the organization

Communities In Schools of New Mexico

Employer identification number

Communicies in Schools of New Mexico   85-0481104
Form 990, Part I, Line 1, Description of Organization Mission:
in life.
Form 990, Part VI, Section B, line 11: A complete copy of the 990 was
reviewed by the Finance Committee, before the return was electonically
filed. A copy of the 990 is available by request to all board members.
Form 990, Part VI, Section B, Line 12c: The Board President explains the
function and details of the Conflict of Interest policy as outlined in the
organization's By-Laws to each new board member. If the policy is ever in
question, the position is discussed amongst the entire board during a board
meeting and a decision is voted on.
Form 990, Part VI, Section B, Line 15: The Executive Director's salary is
determined by the Board of Directors and from the national Communities In
Schools staff based on their salary schedules.
Form 990, Part VI, Section C, Line 19: These items are available upon
request. Any member of the public that would like to see such
documentation is invited to the office to review them. Form 990's are also
available through Guidestar and the NM Attorney General's Office.
990 Page 1 Section B
Amended Tax Return
The Organization discovered it did not recognize \$60,500 of
unconditional promises to give at June 30, 2013 and related
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2012)