

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

Department of the Treasury Internal Revenue Service

UMB NO 1343-0032	
2012	
Open to public Inspection	n

F	or cale	ndar year 2012 or tax year beginning OCT	1, 2012	, and ending	SEP 30, 2013	
		of foundation	A Employer identification	number		
		ora Foundation				
_	c/c	Mr. Jeffrey Bronfman	74-2660772			
-	lumber	and street (or P O box number if mail is not delivered to street	B Telephone number			
	551	West Cordova Rd, PMB #	505-988-59	24		
- (town, state, and ZIP code		•	C If exemption application is p	ending, check here
_		nta Fe, NM 87505-1825				
G	Chec	k all that apply: Initial return	_	rmer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return		Foreign organizations me check here and attach co	eting the 85% test.
-	<u> </u>	Address change	Name change		check here and attach co	mputation
Н		k type of organization. X Section 501(c)(3) ex		ht	E If private foundation sta	
۲.			Other taxable private founda	Accrual	under section 507(b)(1)	
ı		narket value of all assets at end of year J Accounting	ng method (A) Cash her (specify)	L ACCIUAI	F If the foundation is in a	
	(irom ►\$	Part II, col. (c), line 16) 0t		nasis l	under section 507(b)(1)	(B), Check here
П		Analysis of Revenue and Expenses		(b) Net investment	(a) Adinated ast	(d) Disbursements
. L.	- CIL	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	income	(c) Adjusted net Income	for charitable purposes (cash basis only)
1 -	1	Contributions, gifts, grants, etc., received	741,208.			
•	2	Check If the foundation is not required to attach Sch. B				
4	3	Interest on savings and temporary cash investments	196.	196.		Statement 1
ź	4	Dividends and interest from securities	39.	39.	39.	Statement 2
-	5	a Gross rents				44-14-14-14-14-14-14-14-14-14-14-14-14-1
j	1	Net rental income or (loss)				
	₀₀ 6	Net gain or (loss) from sale of assets not on line 10	<2,114.	>		
=	[교	Gross sales price for all assets on line 6a				
がない。	enueyeure 7	Capital gain net income (from Part IV, line 2)	<u>.</u>	0.		• • • • • • • • • • • • • • • • • • •
מ '	8	Net short-term capital gain			544.	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `
	9	Income modifications Gross sales less returns	······································	- 	 	
		and allowances				``
		Less Cost of goods sold		*******************		
		Gross profit or (loss)	750,000.	0.	750 000	Statement 3
	12	Other income	1,489,329.	235.	750,779.	
	13	Compensation of officers, directors, trustees, etc.	0.	0.	0.	0.
	14	Other employee salaries and wages			•	-
	1 '	Pension plans, employee benefits				
	¥7	Legal fees Stmt 4	19,246.	0.	0.	0.
		Accounting fees Stmt 5	9,823.	0.	0.	0.
		Other professional fees TIVEStmt 6	38,478.	0.	0.	0.
	17	Interest				
•	18	Taxes				
	19	Depreciation and depletion 9 2014	140.	0.	0.	
•	20	Occupancy C	18,522.	0.	0.	0.
•	21	Travel, conferences, and meetings 1.T.	39,238.	0.	0.	39,238.
	90 21 22 23 24 24 25 25 25 25 25 25 25 25 25 25 25 25 25	Printing and publications				
	23	Other expenses Stmt. 7	34,989.	<u> </u>	0.	0.
	24		7.60 40.5	_	_	22.22
,	5	expenses. Add lines 13 through 23	160,436.	0.	0.	39,238.
•	25	Contributions, grits, grants paid	869,744.			869,744.
	26		1 020 100	^	_	000 000
_	+==	Add lines 24 and 25	1,030,180.	0.	0.	908,982.
		Subtract line 26 from line 12:	150 140	,	ĺ	, , ,
		Excess of revenue over expenses and disbursements	459,149.	235.	`	
		Net investment income (if negative, enter -0-)	······································	233.	750,779.	
22	3501 -05-12	Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see i	inchruetions		130,119.	Form 990-PF (2012)
17.	JD-12	Lica i di i angimula Medulchuli Mel Milles, See i	maudbuuma.			(UIIII 33UTE F (ZU (Z)

For	rm 99	0-PF(2012) c/o Mr. Jeffrey Bronfman					
Part Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only			Beginning of year	End of	year		
<u> </u>	art	cotumn should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	6,968.	5,223.			
	2	*	206,116.	696,519.	696,519.		
	1	Accounts receivable		1	· · · · · · · · · · · · · · · · · · ·		
	"	Less allowance for doubtful accounts		:			
	4						
	*	Less: allowance for doubtful accounts		. `			
	_ ا						
	١ ـ	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons					
	7	Other notes and loans receivable		1	,		
		Less allowance for doubtful accounts					
ţ	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
Ř	10a	Investments - U.S and state government obligations					
	6	Investments - corporate stock					
	c	Investments - corporate bonds	32,591.	3,222.	3,222.		
	1	Investments - land, buildings, and equipment basis			` .		
		Less: accumulated depreciation			ŕ		
	12	Investments - mortgage loans					
	13	Investments - other					
	'*	Land, buildings, and equipment. basis 7,457. Less accumulated deprecation Stmt 9 7,457.	140.	0.	0.		
	1	Other assets (describe					
	15	Other assets (describe					
		- 1 1 - 4 - 1 1 N - 1 - N - C	245,815.	704,964.	704,964.		
_	$\overline{}$	Total assets (to be completed by all filers)	243/0131	70175010	701/3011		
	17	, , , , , , , , , , , , , , , , , , ,					
	18	Grants payable					
es	19	Deferred revenue					
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons					
Liabilities	21	Mortgages and other notes payable					
	22	Other liabilities (describe					
					,		
	23	Total liabilities (add lines 17 through 22)	0.	0.			
		Foundations that follow SFAS 117, check here			•		
un.		and complete lines 24 through 26 and lines 30 and 31.					
Se	24	Unrestricted			,		
lan	25	Temporarily restricted					
Ba	26	Permanently restricted					
пd		Foundations that do not follow SFAS 117, check here					
Ę		and complete lines 27 through 31.					
ō	27	Capital stock, trust principal, or current funds	0.	0.			
ě	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	,		
Asi	29	Retained earnings, accumulated income, endowment, or other funds	245,815.	704,964.	,		
Net Assets or Fund Balances	30	Total net assets or fund balances	245,815.	704,964.			
~							
	31	Total liabilities and net assets/fund balances	245,815.	704,964.			
L.F	art	Analysis of Changes in Net Assets or Fund Bal					
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 30)				
	(mu	st agree with end-of-year figure reported on prior year's return)		1	245,815.		
2	•	r amount from Part I, line 27a		2	459,149.		
3		r increases not included in line 2 (itemize)	· · ·	3	0.		
4		lines 1, 2, and 3		4	704,964.		
5		eases not included in line 2 (itemize)		5	0.		
-		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	ımn (b), line 30 .	6	704,964.		

223511 12-05-12

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Aurora Foundation c/o Mr. Jeffrey Bronfman

Part IV Capital Gains ar	nd Losses for Tax on Ir	vestmen	t Income					
	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)			P·	low acquired - Purchase - Donation		Date acquired no , day, yr)	(d) Date sold (mo , day, yr)
1a								
b See Attached	Statement					<u> </u>		
C ,				ļ		1		
d	<u></u>			<u> </u>	 	ļ		
<u>e</u>		,		<u>L_</u>	·····			
(e) Gross sales price	(f) Depreciation allowed (or allowable)	1 107	st or other basis expense of sale				(h) Gain or (loss) plus (f) minus	
<u>a</u>							··-	
<u>b</u>								
<u>C</u>								
d			660 50	é				-2 114
e 666,392.		1	668,50	0.				<2,114.
Complete only for assets showing							ins (Col. (h) gain , but not less tha	
(i) F.M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col. (j), if any				isses (from col. (
a								
b			·					
С								
d								· · · · · · · · · · · · · · · · · · ·
e		<u> </u>			.,			<2,114.
2 Capital gain net income or (net capit	fi gain, also enter tal loss) { If (loss), enter -0			.}[2			<2,114.
3 Net short-term capital gain or (loss)								
If gain, also enter in Part I, line 8, co		id (0)		71				
If (loss), enter -0- in Part I, line 8					3			544.
Part V Qualification Un	der Section 4940(e) for	Reduced	l Tax on Net	: Inv	estment i	ncon	ne	
Was the foundation liable for the sectio if "Yes," the foundation does not qualify 1 Enter the appropriate amount in each	under section 4940(e) Do not co	mplete this pa	art					Yes X No
(a) Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying dis		Net value of no	(c) onchar				(d) oution ratio vided by col. (c))
2011	56	2,762.			367,93	35.		1.529515
2010		7,829.			940,26	59.		.614536
2009		5,987.			197,92			1.091273
2008		1,152.			148,1			1.897381
2007	36	8,822.			100,00	52.		3.685935
							2	8.818640
3 Average distribution ratio for the 5-y the foundation has been in existence	· · · · · · · · · · · · · · · · · · ·		or by the number				3	1.763728
4 Enter the net value of noncharitable	-use assets for 2012 from Part X,	line 5 .		-			4	194,816.
5 Multiply line 4 by line 3							5	343,602.
6 Enter 1% of net investment income	(1% of Part I, line 27b)						6	2.
7 Add lines 5 and 6							7	343,604.
8 Enter qualifying distributions from F							8	908,982.
If line 8 is equal to or greater than h						_		
See the Part VI instructions.								om 990-PF (2012
EEUUE: 16-00-16			_				•	

Aurora Foundation c/o Mr. Jeffrey Bronfman Form 990-PF (2012) Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here

and enter "N/A" on line 1 (attach copy of letter if necessary-see instructions) Date of ruling or determination letter 2. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 3 Add lines 1 and 2 3 0. Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-5 6 Credits/Payments a 2012 estimated tax payments and 2011 overpayment credited to 2012 b Exempt foreign organizations - tax withheld at source 6с c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 0. 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ____ if Form 2220 is attached ... 8 2. 9 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. 11 Enter the amount of line 10 to be Credited to 2013 estimated tax Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in Х 1a any political campaign? Х 16 b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1aor 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. X 10 c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation ▶ \$ 0 • (2) On foundation managers ▶ \$ __ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers 🕨 \$ X 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or 3 bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes X 4a 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? N/A4h b If "Yes," has it filed a tax return on Form 990-T for this year? X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law Х

> Х Form **990-PF** (2012)

X

X

Х

8b

10

remain in the governing instrument?

TX,NM

If "Yes," complete Part II, col. (c), and Part XV.

7 Did the foundation have at least \$5,000 in assets at any time during the year?

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? If "No," attach explanation

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

X

X

3h

4a

N/A

of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2012)

had not been removed from jeopardy before the first day of the tax year beginning in 2012?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Aurora Foundation							
Form 990-PF (2012) c/o Mr. Jeffrey Bronfman			<u>74-26607</u>	72	Page 6		
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	ued)				
5a During the year did the foundation pay or incur any amount to							
(1) Carry on propaganda, or otherwise attempt to influence legislation (section		· · · —	s X No				
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire	ectly,					
any voter registration drive?		· · · · · <u></u>	s X No				
(3) Provide a grant to an individual for travel, study, or other similar purposes	Ye	s X No	-	1.			
(4) Provide a grant to an organization other than a charitable, etc., organization							
509(a)(1), (2), or (3), or section 4940(d)(2)?							
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or	l				
the prevention of cruelty to children or animals?		🗀 Ye	s X No				
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	ler the exceptions described i	n Regulations]				
section 53 4945 or in a current notice regarding disaster assistance (see instru				5b	X		
Organizations relying on a current notice regarding disaster assistance check h							
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined	ŀ				
expenditure responsibility for the grant?	3.7	. /	s No				
If "Yes," attach the statement required by Regulations section 53.4945			Ī	1			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to							
a personal benefit contract?		C Ye	s X No				
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?	-	L	6b	X		
If "Yes" to 6b, file Form 8870.							
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	. 🔲 Ye	s X No				
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b			
Information About Officers, Directors, Trusto	ees, Foundation Ma	nagers, Highly	,				
Part VIII Paid Employees, and Contractors							
1 List all officers, directors, trustees, foundation managers and their	compensation.						
	0 1 TML						
(a) Name and address	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) t	xpense		
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(CI) Contributions to employee benefit plans and deferred compensation	accou	xpense int, other wances		
	hours per week devoted	(If not paid, enter -0-)	employee benefit plans and deferred	accou	int, other		
	hours per week devoted to position President/Tre	(If not paid, enter -0-) asurer	employee benefit plans and deferred compensation	accou	int, other wances		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508	höurs per week devoted to position President/Tre	(If not paid, enter -0-)	employee benefit plans and deferred	accou	int, other		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne	hours per week devoted to position President/Tre	(If not paid, enter -0-) asurer	employee benefit plans and deferred compensation	accou	int, other wances		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910	hours per week devoted to position President/Tre 20.00 Secretary	(If not paid, enter-0-) asurer 0.	employee benefit plans and deferred compensation	accou	ont, other wances		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701	hours per week devoted to position President/Tre 20.00 Secretary 0.00	(If not paid, enter -0-) asurer	employee benefit plans and deferred compensation	accou	int, other wances		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701 Irvin F. Diamond	hours per week devoted to position President/Tre 20.00 Secretary	(If not paid, enter-0-) asurer 0.	employee benefit plans and deferred compensation	accou	ont, other wances		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701 Irvin F. Diamond P.O. Box 93656	hours per week devoted to position President/Tre 20.00 Secretary 0.00 Director	(If not paid, enter-0-) asurer 0.	employee benefit plans and deferred compensation	accou	O .		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701 Irvin F. Diamond	hours per week devoted to position President/Tre 20.00 Secretary 0.00	(If not paid, enter-0-) asurer 0.	employee benefit plans and deferred compensation	accou	ont, other wances		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701 Irvin F. Diamond P.O. Box 93656	hours per week devoted to position President/Tre 20.00 Secretary 0.00 Director	(If not paid, enter-0-) asurer 0.	employee benefit plans and deferred compensation	accou	O .		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701 Irvin F. Diamond P.O. Box 93656	hours per week devoted to position President/Tre 20.00 Secretary 0.00 Director	(If not paid, enter-0-) asurer 0.	employee benefit plans and deferred compensation	accou	O .		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701 Irvin F. Diamond P.O. Box 93656 Albuquerque, NM 871993656	hours per week devoted to position President/Tre 20.00 Secretary 0.00 Director 0.00	(If not paid, enter-0-) asurer 0.	employee benefit plans and deferred compensation	accou	O .		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701 Irvin F. Diamond P.O. Box 93656	hours per week devoted to position President/Tre 20.00 Secretary 0.00 Director 0.00	(If not paid, enter-0-) asurer 0.	employee benefit plans and deferred compensation O .	accou	O .		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701 Irvin F. Diamond P.O. Box 93656 Albuquerque, NM 871993656 2 Compensation of five highest-paid employees (other than those inc	hours per week devoted to position President/Tre 20.00 Secretary 0.00 Director 0.00	(If not paid, enter -0-) asurer 0. 0.	employee benefit plans and deferred compensation O .	accou	O .		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701 Irvin F. Diamond P.O. Box 93656 Albuquerque, NM 871993656 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position President/Tre 20.00 Secretary 0.00 Director 0.00	(If not paid, enter-0-) asurer 0.	employee benefit plans and deferred compensation	(e) E	O .		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701 Irvin F. Diamond P.O. Box 93656 Albuquerque, NM 871993656 2 Compensation of five highest-paid employees (other than those inc	hours per week devoted to position President/Tre 20.00 Secretary 0.00 Director 0.00	(If not paid, enter -0-) asurer 0. 0.	employee benefit plans and deferred compensation O O (d) Contributions to employee benefit plans and deferred	(e) E	0. O.		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701 Irvin F. Diamond P.O. Box 93656 Albuquerque, NM 871993656 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position President/Tre 20.00 Secretary 0.00 Director 0.00	(If not paid, enter -0-) asurer 0. 0.	employee benefit plans and deferred compensation O O (d) Contributions to employee benefit plans and deferred	(e) E	0. O.		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701 Irvin F. Diamond P.O. Box 93656 Albuquerque, NM 871993656 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position President/Tre 20.00 Secretary 0.00 Director 0.00	(If not paid, enter -0-) asurer 0. 0.	employee benefit plans and deferred compensation O O (d) Contributions to employee benefit plans and deferred	(e) E	0. O.		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701 Irvin F. Diamond P.O. Box 93656 Albuquerque, NM 871993656 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position President/Tre 20.00 Secretary 0.00 Director 0.00	(If not paid, enter -0-) asurer 0. 0.	employee benefit plans and deferred compensation O O (d) Contributions to employee benefit plans and deferred	(e) E	0. O.		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701 Irvin F. Diamond P.O. Box 93656 Albuquerque, NM 871993656 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position President/Tre 20.00 Secretary 0.00 Director 0.00	(If not paid, enter -0-) asurer 0. 0.	employee benefit plans and deferred compensation O O (d) Contributions to employee benefit plans and deferred	(e) E	0. O.		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701 Irvin F. Diamond P.O. Box 93656 Albuquerque, NM 871993656 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position President/Tre 20.00 Secretary 0.00 Director 0.00	(If not paid, enter -0-) asurer 0. 0.	employee benefit plans and deferred compensation O O (d) Contributions to employee benefit plans and deferred	(e) E	0. O.		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701 Irvin F. Diamond P.O. Box 93656 Albuquerque, NM 871993656 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position President/Tre 20.00 Secretary 0.00 Director 0.00	(If not paid, enter -0-) asurer 0. 0.	employee benefit plans and deferred compensation O O (d) Contributions to employee benefit plans and deferred	(e) E	0. O.		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701 Irvin F. Diamond P.O. Box 93656 Albuquerque, NM 871993656 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position President/Tre 20.00 Secretary 0.00 Director 0.00	(If not paid, enter -0-) asurer 0. 0.	employee benefit plans and deferred compensation O O (d) Contributions to employee benefit plans and deferred	(e) E	0. O.		
Jeffrey Bronfman 2 Brass Horse Road Santa Fe, NM 87508 Duncan E. Osborne 301 Congress Ave., #1910 Austin, TX 78701 Irvin F. Diamond P.O. Box 93656 Albuquerque, NM 871993656 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position President/Tre 20.00 Secretary 0.00 Director 0.00	(If not paid, enter -0-) asurer 0. 0.	employee benefit plans and deferred compensation O O (d) Contributions to employee benefit plans and deferred	(e) E	0. O.		

Form **990-PF** (2012)

Total number of other employees paid over \$50,000

Form 990-PF (2012) c/o Mr. Jeffrey Bronfman	74-2	2660772 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Mana Paid Employees, and Contractors (continued)	gers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
•		
Total number of others receiving over \$50,000 for professional services	 	<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities	······································	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	n such as the	Expenses
1 See statement 11 for narrative		
		_
		0.
2		
3		
4		
Part IX-B Summary of Program-Related Investments		. —
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		
2		
All other program-related investments. See instructions		
3		
Table Add been 1 through 2		0.
Total. Add lines 1 through 3		Form 990-PF (2012)

Form 990-PF (2012)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		
а	Average monthly fair market value of securities	1a	7,362.
b	Average of monthly cash balances	1b	7,362. 190,421.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	197,783.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	197,783.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,967.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	194,816.
6	Minimum investment return. Enter 5% of line 5	6	9,741.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here X and do not complete this part)	nd certain	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	
P	art XII Qualifying Distributions (see instructions)		
7	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		000 002
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	908,982.
	Program-related investments - total from Part IX-B	16	<u></u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
	Suitability test (pnor IRS approval required).	3a	
	Cash distribution test (attach the required schedule)	3b	000 000
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	908,982.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	2
_	income. Enter 1% of Part I, line 27b	5	908,980.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for t	ne section
	4940(e) reduction of tax in those years.		

Form **990-PF** (2012)

Part XIII Undistributed Income (s	ee instructions)	N/A		
	(a)	(b)	(c)	(d)
•	Corpus	Years prior to 2011	2011	2012
1 Distributable amount for 2012 from Part XI, line 7 '	,			
2 Undistributed income, if any, as of the end of 2012			, ,	
a Enter amount for 2011 only	· ·			
b Total for prior years				
Excess distributions carryover, if any, to 2012				
1				
a From 2007			, ,	
b From 2008				
c From 2009		-		
d From 2010				
e From 2011				
f Total of lines 3a through e		······································	······································	·
4 Qualifying distributions for 2012 from				
Part XII, line 4 🕨 \$				
a Applied to 2011, but not more than line 2a				
b Applied to undistributed income of prior				
years (Election required - see instructions)				<u> </u>
c Treated as distributions out of corpus	-	:		
(Election required - see instructions)				
d Applied to 2012 distributable amount				
e Remaining amount distributed out of corpus	· · · · · · · · · · · · · · · · · · ·	**************************************	- 	
5 Excess distributions carryover applied to 2012				
(If an amount appears in column (d), the same amount must be shown in column (a))	· · · · · · · · · · · · · · · · · · ·			
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income. Subtract			<u> </u>	<u> </u>
line 4b from line 2b				
c Enter the amount of pnor years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed			,	
d Subtract line 6c from line 6b Taxable				
amount - see instructions				
e Undistributed income for 2011 Subtract line			1	
4a from line 2a Taxable amount - see instr	4			
f Undistributed income for 2012 Subtract		1	1	
lines 4d and 5 from line 1. This amount must			,	
be distributed in 2013		<u> </u>		
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)				
8 Excess distributions carryover from 2007	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	11. 11. 11. 11. 11. 11. 11. 11. 11. 11.
not applied on line 5 or line 7				1
9 Excess distributions carryover to 2013.	·	- 	· · · · · · · · · · · · · · · · · · ·	**************************************
Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9	 		· · · · · · · · · · · · · · · · · · ·	
a Excess from 2008		1		,
b Excess from 2009	,	` .		
			12	,
c Excess from 2010				
d Excess from 2011		1		
e Excess from 2012.		<u>.t.</u>	<u>k</u>	1

c/o Mr. Jeffrey Bronfman

Part XIV Private Operating Fo	oundations (see ins	tructions and Part VII-	A, question 9)		
1 a If the foundation has received a ruling or				14/04	
foundation, and the ruling is effective for				14/94	
b Check box to indicate whether the found	ation is a private operating	g foundation described in		4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	<u> </u>	Prior 3 years	411.0000	
income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
investment return from Part X for		- 100	10 051		22 25.
each year listed	9,741.	5,139.	18,371.	0.	33,251.
b 85% of line 2a	8,280.	4,368.	15,615.	0.	28,263.
c Qualifying distributions from Part XII,		560 760	F 7 7 000	015 007	2 265 562
line 4 for each year listed	908,982.	562,762.	577,829.	215,987.	2,265,560.
d Amounts included in line 2c not					
used directly for active conduct of				•	•
exempt activities .	0.	0.	0.	0.	0.
e Qualifying distributions made directly			1		
for active conduct of exempt activities	000 000	560 760	E 7 7 0 2 0	215 007	2 265 560
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the	908,982.	562,762.	577,829.	215,987.	2,265,560.
alternative test relied upon.			1		
a "Assets" alternative test - enter					^
(1) Value of all assets			·		0.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0.
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed	6,494.	12,265.	31,342.	6,597.	56,698.
c "Support" alternative test - enter:	0,1511		0270121	5,55.5	
(1) Total support other than gross					
investment income (interest,	İ		ļ	ı	
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					0.
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(III)					0.
(3) Largest amount of support from					
an exempt organization	,	•			0.
(4) Gross investment income .					0.
Part XV Supplementary Infor	mation (Complet	e this part only i	f the foundation	had \$5,000 or mo	ore in assets
at any time during the				•	
1 Information Regarding Foundation					
a List any managers of the foundation who	have contributed more t	han 2% of the total contr	ibutions received by the f	oundation before the clos	se of any tax
year (but only if they have contributed m	ore than \$5,000) (See se	ction 507(d)(2))			
Jeffrey Bronfman					
b List any managers of the foundation who			or an equally large portion	n of the ownership of a pa	artnership or
other entity) of which the foundation has	a 10% or greater interest	.			
None				· · · · · · · · · · · · · · · · · · ·	
2 Information Regarding Contribution					
			organizations and does no		
the foundation makes gifts, grants, etc. (mplete items 2a, b, c, and	1 0
a The name, address, and telephone numb	er or e-mail of the persor	i to whom applications s	hould be addressed		
Gaa Chahamant 11					
See Statement 11					
b The form in which applications should be	submitted and informati	on and materials they sh	ould include		
c Any submission deadlines			···		
d Any makashan as limbahan	and a transfer	lamaa ahaddala #-1-1	lundo of institutes	the a feet a	
d Any restrictions or limitations on awards	, such as by geographica	i areas, charttable fields,	KINGS OF INSTITUTIONS, OF O	iner factors:	

Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year Allies of White Buffalo Calf Woman Public charity Support for Indigenous None Inc PO Box 32 1,800. Hill City , SD 57745 Amazon Conservation Team Public charity Support for None 4211 N. Fairfax Dr. Environmental Arlington, VA 22203 Preservation 5,000. Public charity Support for Indigenous American Indian Institute None 1639 Cross Center Drive 10,000. Norman , OK 73019 Bioneers (Collective Heritage Public charity Support for Education, None Environment and Institute) 1607 Paseo De Peralta #3 Indigenous Santa Fe, NM 87501 30,000. Public charity Support for D'Agrofloresta none 168 - CEP 73801-970 Educational, Formosa/GO, BRAZIL Environmental and 3,000. Spiritual See continuation sheet(s) ➤ 3a 869,744. Total b Approved for future payment None **▶** 3b ٥. Total

223611 12-05-12

Form **990-PF** (2012)

Form 990-PF (2012)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income			ded by section 512, 513, or 514	(e)
	_ (a)	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue.	Business code	Amount	sion	Amount	function income
a		,			
b					
c			-		
d					
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	196.	
4 Dividends and interest from securities			14	39.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					···
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	<2,114.	>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue.					
a Settlement Income		750,000.			
b					·
C					
d					· · · · · · · · - · · · · · · · · · · ·
e					
12 Subtotal Add columns (b), (d), and (e)		750,000.	<u> </u>	<1,879.	
13 Total. Add line 12, columns (b), (d), and (e)				13	748,121.
(See worksheet in line 13 instructions to verify calculations)					

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of							
	the foundation's exempt purposes (other than by providing funds for such purposes)							
11	Over a period of five years, the Aurora Foundation made sizable							
	charitable contributions to Uniao De Vegetal (UDV). The majority							
	of these contributions were for the express purpose of funding the							
	cost of litigation requred to combat discrimination against the UDV,							
	in the nature of local zoning ordinances that prevented the UDV from							
	building a church. The funding provided to the UDV was consistent							
	with Aurora Foundation's exempt purpose relating to the religious							
	liberty, human rights, and the preservation of traditional spiritual							
	and cultural values. Aurora Foundation agreed to this level of							
	support for the UDV, knowing that the law permitted the recovery of							
	legal fees, if the litigation was successful. The \$750,000 settlement							
	award was based on the reimbursement of legal fees for this litigation							
	which were funded by Aurora Foundation.							

223621 12-05-12

Form **990-PF** (2012)

c/o Mr. Jeffrey Bronfman Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

		Exempt Organ	nizations					
1	Did the	organization directly or ind	directly engage in any of the follow	ving with any other organization	described in section 501(c) of	F	Yes	No
	the Cod	de (other than section 501(d	c)(3) organizations) or in section	527, relating to political organiz	zations?	F		
а		•	dation to a noncharitable exempt			}		}
_		ish		g		1a(1)	1	х
		her assets						X
_						1a(2)		_
D		ransactions				.		7,
			able exempt organization			1b(1)		X
	(2) Pu	irchases of assets from a no	oncharitable exempt organization			1b(2)		X
	(3) Re	ental of facilities, equipment,	, or other assets			1b(3)		X
	(4) Re	eimbursement arrangements	s			1b(4)		X
		ans or loan guarantees				1b(5)		X
	(6) Pe	rformance of services or m	embership or fundraising solicita			1b(6)		X
c			ailing lists, other assets, or paid e			10		X
					ays show the fair market value of the goods, o		otc	
					e in any transaction or sharing arrangement, sl		et5,	
			, other assets, or services receive		in any transaction of snaring arrangement, si	IOW III		
/2).	ine no	(b) Amount involved		ble exempt organization	(4)			
(4)	Jue vo	(II) Amount involved			(I) Description of transfers, transactions, and s	hanng an	rangeme	nts
		<u> </u>	N/A					
		· · · ·		_				
								
_			 					
					 			
								
			 					
								
			1					
2a	Is the fo	oundation directly or indirec	ctly affiliated with, or related to, or	ne or more tax-exempt organiza	ations described			
			er than section 501(c)(3)) or in se			Yes	X	No
h		complete the following sch			· · · ·	163		טאונ
	11 163,	(a) Name of or		(b) Type of organization	(a) Description of relationsh	ın.		
		N/A	gamzauon	(b) Type of Organization	(c) Description of relationsh	ıh		
		N/A		 	· · · · · · · · · · · · · · · · · · ·			
		$-\Delta M$						
	Unc	der penalties of perjung li declare	that I have examined this return, include	ding accompanying schedules and st	tatements, and to the best of my knowledge	the IRS o	tiperion t	nic.
Sig	gn and	belief, it is thus, correct, and con	mplete Declaration of preparer (other ti	han taxpayer) is balsed on all infonhat	retur	n with the	e prepare	er
He		VM II		18/14/2017	President X	vn below Yes	(See Inst	No
	Si	ignature of pricer or trustee		Date	Title] 140
		Print/Týpe preparer's na			Date Check If PTIN			
				Signature I				
D -	:-4	Carol M. C		1200	o - / - / self- employed			
Pa		CPA, CEBS,		un can		354		
	epare	1	W LLC		Firm's EIN ► 85-02	034	31	
Us	e Oni	у						
		Firm's address ▶ PC	st Office Box	93656				
			buquerque, NM		Phone no. 505-9	98-	320	Ω
						<u>aan</u>		

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

Schedule of Contributors

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Employer identification number Name of the organization Aurora Foundation c/o Mr. Jeffrey Bronfman 74-2660772

Organization type (check one):											
Filers of	:	Section:									
Form 99	0 or 990-EZ	501(c)() (enter number) organization									
		4947(a)(1) nonexempt charitable trust not treated as a private foundation									
		527 political organization									
Form 99	0-PF	X 501(c)(3) exempt private foundation									
		4947(a)(1) nonexempt charitable trust treated as a private foundation									
		501(c)(3) taxable private foundation									
		covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.									
General	Rule										
X	For an organization contributor. Comple	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one ete Parts I and II.									
Special	Rules										
	509(a)(1) and 170(b)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.									
	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.										
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year											
	•	at is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to									

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization Aurora Foundation c/o Mr. Jeffrey Bronfman Employer identification number

74-2660772

Part I	Contributors	(see instructions).	Use duplicate copies of	Part I if additional	space is needed.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.								
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
1	Jeffrey Bronfman Living Trust 2 Brass Horse Road Santa Fe, NM 87508	\$\$.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
2	Jeffrey Bronfman Living Trust 2 Brass Horse Road Santa Fe, NM 87508	\$\$.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
		\$	Person Payroll Noncash (Complete Part II if there Is a noncash contribution.)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
223452 12-2		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)						

Name of organization

Aurora Foundation

c/o Mr. Jeffrey Bronfman

Employer identification number

74-2660772

(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Various stock contributions		
	<u> </u>	Various
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	 \$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	Description of noncash property given (b) Description of noncash property given	Description of noncash property given (c) (b) Description of noncash property given (b) Description of noncash property given (c) (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (f) FMV (or estimate) (see instructions) (g) FMV (or estimate) (see instructions) (h) Description of noncash property given (h) Description of noncash property given (h) (h) (h) Description of noncash property given (h) (h) (h) Description of noncash property given (h) (h) (h) (h) (h) (h) (h) (h

Continuation for 990-PF, Part IV 74-2660772 Page 1 of 1

Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (mo, day, yr) (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold 2-story brick warehouse, or common stock, 200 shs MLC Co (mo , day, yr) _{1a} 8130.147 SHS ARTISAN INTL SMALL CAP D 01/28/0910/11/12 b 292 SHS SPDR DOW JONES 01/28/0910/11/12 D 05/07/0910/11/12 c 171 D SHS SPDR DOW JONES TRUST Ď 01/28/09|10/11/12 35 SHS SPDR GOLD SHS 01/28/09|10/11/ SPDR GOLD TRUST D 3009.859 VANGUARD SHORT TERM BD P 10/06/10|10/31/ 12/17/1201/16/13 2761.947 SHS ARTISAN INTL SMALL D CAP D 03/18/13 h 1916.201 SHS ARTISAN INTL SMALL Various 09/28/12 03/18/13 3289.751 SHS ARTISAN INTL SMALL D D 12/17/1204/30/13 INTL FD CLASS 1782 SHS OAKMARK D 12/17/1205/30/13 3659 SHS OAKMARK INTL FD CLASS 2730 SHS 12/17/1207/09/13 VANGUARD VALUE INDEX D 760 SHS SECTOR SPDR FINCL SELECT SHARES OF BENEFI 12/17/1207/12/13 0 (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 172,115. 169,595. <2,520.> 20,980. 21,123. 143. b 12,370.12,286. 84. 6,022. 5,994. <28.> d 16,689. <75.> 16,614. 32,297. <262.> 32,035. 63,028. 63,221. 193. q 45,126. 45,644. <518.> h 77,474. <888.> 78,362. 41,503. 18. 41,521. 88,109. 585. 88,694. 77,182.76,058. 1,124. 15,443. 15,413. 30. m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col (h)) Gains (excess of col (h) gain over col (k), (j) Adjusted basis (k) Excess of col (i) (i) F M V as of 12/31/69 but not less than "-0-") over col (j), if any as of 12/31/69 <2,520.> 143. þ 84. <28.> d <75.> <262.> * * 193. a ** <<u>518.</u>> <888.> * * * * 18. ** 585. * * 1,124. * * 30. m . { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } <2,114.> 2 Capital gain net income or (net capital loss) -2 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6). If gain, also enter in Part I, line 8, column (c). 544. If (loss), enter "-0-" in Part I, line 8

Part XV Supplementary Information	on			
3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Continuation	
•		L		
Expressive Arts Institutes 2820 Roosevelt Road \$204	None	Public charity	Support for Art & Culture	
San Diego CA 92106			Culcure	5,000
July 20030 , on 19200				
Faith Action for Community Equity	None	Public charity	Support for Education	
(FACE)				
1352 Liliha Street, Room 2				
Honolulu, HI 96817			 	15,000
Floating Ophelia Productions	none	Public charity	Support for Education	
740A 14th Street #199				
San Francisco, CA 94114				5,805
High Desert Hari Society	None	Public charity	Support for Education	
826 Camino de Monte Rey, Suite A-4				
Santa Fe, NM 87505				1,250
Hygenia Foundation	none	Public charity	Support for	
PO Box 3943		abile charley	Environmental	
Woodbridge , CT 06525			Preservation	14,000
Indigenous Language Institute	None	nublic shorter		
1501 Cerrillos Road	None	Fubile charley	Support for indigenous	
Santa Fe, NM 87505				15,000
	_			
Inward Bound Ministries (iBme) PO Box 60014	None	Public charity	Support for Education	
Florence, MA 01062				2,000
				•
Jane Ayers Media 860 Via de la Paz	none	Education Grant	Support for Indigenous	
Pacific Palisades, CA 90272				5,000
1402220 142204405, 01. 70072				
Mauricio Hoffman	None	Education Grant	Support for Indigenous	
Sitio Felicidade Federal District of Brasil, BRAZIL				E 000
reddial Discitice of BidSil, BRAZIL				5,800
New Enchantment	none	Public charity	Support for	
5018 Agua Fria Park Road			Environmental	
Santa Fe, NM 87507			Preservation	40,000
Total from continuation sheets		` :		819,944

Part XV Supplementary Information Grants and Contributions Paid During the				1
Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
•				
New Mexico Dance Coalition	None	Public charity	Support for Art &	ļ
PO Box 284			Culture	
Santa Fe, NM 87504				5,000
Nova Encanto	None	Public charity	-	
Rua Primeiro De Marco 500 Sobreloja Jardim Guanabra Campinas.			Environmental	<u> </u>
BRAZIL			Preservation	8,000
				0,000
Organic Consumers Association	None	Public charity		
6771 South Silver Hill Drive Finland, MN 55603			Environmental	4 000
Finiand, Ma 35005				4,000
Permaculture America Latina	None	Public charity	1	
723 Allendale St			Environmental	30.00
Santa Fe, NM 87505			Preservation	38,050
Pete Jackson	None	Education Grant	Support for Art &	
2822 Don Quixote			Culture	
Santa Fe, NM 87505		 		8,318
The Hawaii Sustainable Community	none	Public charity	Support for	
Alliance			Enviromental	
12-247 West Pohakupele Loop			Preservation	
Pahoa, HI 96778				6,000
The Maui Tomorrow Foundation	None	Public charity	Support for	
55 N Church St, Ste A5			Environmental	
Wailuku, HI 96793		 	Preservation	14,150
The One Drop Foundation	none	Public charity	Support for	
8400 2nd Avenue			Educational,	
Montreal, Quebec, CANADA H1Z 4M6			Environmental and	
		<u> </u>	Spiritual	5,000
The Tracking Project	None	Public charity	Support for Art &	
PO Box 266			Culture and	
Corrales, NM 87048			Educational	26,082
Truth Out	поле	Public charity	Support for Art &	
PO BOX 276414			Culture	
Sacramento, CA 95827				500
Total from continuation sheets		<u> </u>		I

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount any foundation manager status of Name and address (home or business) recipient or substantial contributor Uniao De Vegetal None Public charity Support for 1000 Cordova Place, PM #710 Educational, Santa Fe, NM 87505-1825 Environmental and Spiritual 564,989. Waken Foundation None Public charity Support for Indigenous 875 Flazberry Lane San Rafael, CA 94903 31,000. Total from continuation sheets

						
Form 990-PF Interest on Savir	ngs and I	emporary C	ash :	Investments	Statement	1
Source					Amount	
JP Morgan				•	1:	96.
Total to Form 990-PF, Part I,	line 3,	Column A		-	19	96.
Form 990-PF Dividends	and Int	erest from	Seci	urities	Statement	2
Source	Gro	ss Amount		pital Gains Dividends	Column (A Amount)
Charles Schwab		39.	<u>-</u>	0.		39.
Total to Fm 990-PF, Part I, lr	1 4	39.		0.		39.
Form 990-PF	Other	Income			Statement	3
Description		(a) Revenue Per Book		(b) Net Invest- ment Income	_	
Settlement Income	•	750,	000.	0	. 750,0	00.
Total to Form 990-PF, Part I,	line 11	750,	000.	0	. 750,0	00.
Form 990-PF	Leg	al Fees	·		Statement	4
Description	(a) Expenses Per Book		est-			
Legal	19,24	6.	0	•	0.	0.
To Fm 990-PF, Pg 1, ln 16a	19,24	6.	0	_	0.	0.

Form 990-PF	Accounti	ng Fees	St	atement 5		
- 1'						
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes		
Accounting -	9,823.	0.	0.	0.		
To Form 990-PF, Pg 1, ln 16b	9,823.	0.	0.	0.		
Form 990-PF C	ther Profes	sional Fees	St	catement 6		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes		
Consulting	38,478.	0.	0.	0.		
To Form 990-PF, Pg 1, ln 16c	38,478.	0.	0.	0.		
Form 990-PF	Other E	xpenses	Statement 7			
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes		
Dues and Subscriptions Bank Service Charges Books Postage & Delivery Office Computer Miscellaneous Subscriptions Education/Training Media	510. 1,657. 269. 475. 102. 99. 9,697. 110. 2,000. 20,070.	0. 0. 0. 0. 0. 0.	0. 0. 0. 0. 0. 0. 0.	0. 0. 0. 0. 0. 0. 0.		
To Form 990-PF, Pg 1, ln 23	34,989.	0.	0.	0.		

Form 990-PF Co.		Statement			
Description		Book Value	Fair Marke Value	t	
Vanguard Short Term Bond		3,222.	3,2	22.	
Total to Form 990-PF, Part II, lin	e 10c	3,222.	3,2	22.	
Form 990-PF Depreciation of Asse	ts Not Held for	Investment	Statement	9	
Description	Cost or Other Basis	Accumulated Depreciation	Book Valu	e	
I-Mac Powerbook computer Computer COMPUTER	1,494. 3,525. 2,438.	1,494. 3,525. 2,438.		0. 0. 0.	
Total To Fm 990-PF, Part II, ln 14	7,457.	7,457.		0.	
	tantial Contrib II-A, Line 10	outors	Statement	10	
Name of Contributor	Address				
Jeffrey Bronfman	2 Brass Horse Road Santa Fe, NM 87508				

11

Form 990-PF

Grant Application Submission Information Part XV, Lines 2a through 2d

Statement

Name and Address of Person to Whom Applications Should be Submitted

Mr. Jeffrey Bronfman 1000 Cordova Place, PMB # 710 Santa Fe, NM 87505

Telephone Number

(505)988-5924

Form and Content of Applications

Travel and educational grant applications are required for some grants; travel grant procedures provided in prior filings, expenditure authority exercised over all travel & education grants.

Any Submission Deadlines

None

Restrictions and Limitations on Awards

Travel and educational grants; restrictions apply to some grants.

Internal Revenue Service

Depreciation and Amortization 990-PF

(Including Information on Listed Property) ➤ See separate instructions.

Attach to your tax return.

OMB No 1545-0172

Form 4562 (2012)

Business or activity to which this form relates Name(s) shown on return Identifying number Aurora Foundation c/o Mr. Jeffrey Bronfman Form 990-PF Page 1 74-2660772 Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 1 500,000. Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000. 3 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filling separately, see instructions (a) Description of property (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 8 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2011 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2013. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during 14 the tax year .. . 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Do not include listed property.) (See instructions.) 140. 17 17 MACRS deductions for assets placed in service in tax years beginning before 2012 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2012 Tax Year Using the General Depreciation System (b) Month and year placed (c) Basis for depreciation (business/investment use only - see instructions) (d) Recovery period (a) Classification of property (f) Method (g) Depreciation deduction in service 19a 3-year property b 5-year property 7-year property d 10-year property 15-year property 20-year property S/L 25 yrs. 25-year property g 27.5 yrs. MM S/L h Residential rental property S/L 27.5 yrs. MM 1 39 yrs. MM S/L i Nonresidential real property MM S/L Section C - Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12-year S/L ь 12 yrs. 40 yrs. MM 40-year S/L Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 140. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

	m 4562 (2012)		MI. J										2000		
P	Listed Proper amusement.)	ty (Include a	utomobiles,	certain ot	her vehic	iles, ceri	taın com	puters	s, and prop	perty use	ed for er	ntertainn	nent, rec	reation, o	or
	Note: For any	vehicle for wi	hich you are	using the	standar	d mileag	e rate or	dedu	cting lease	e expens	e, comp	lete oni	y 24a, 24	4b, colun	nns (a)
	through (c) of	Section A, all	of Section I	3, and Se	ction C if	applica	ble.								
	Section A	- Depreciation	on and Othe	er Informa	ation (Ca	ution: S	See the i	nstruc	tions for li	mits for i	passeng	er auton	nobiles.)		
<u>24a</u>	Do you have evidence to :		siness/invest	nent use c	laimed?	<u> </u>	es	No	24b If "Y	es," is th	e evide	nce writ	ten? L	∫ Yes L	No_
	` (a)	(b)	(c)	_,	(d)		(e)		(f)	(g)	1 ((h)		(i)
	Type of property	Date placed in	Busines Investme	nt	Cost or	l (bus	sis for depre siness/inve		Recovery		hod/	Depre	eciation uction		ted n 179
	(list vehicles first)	service	use percen		ther basis	L	use only	1)	period	Conv	ention	aeai	uction	1	st
25	Special depreciation all	owance for q	ualified liste	d propert	y placed	ın servic	ce dunno	the t	ax year an	d					
	used more than 50% in	a qualified b	usiness use		:						25				
26	Property used more that												•		
				%											
		:		%											
				%											
27	Property used 50% or l	ess in a qual	fied busines	s use:		·- · · · ·									
	, , - F -: - V			%					Γ	S/L -	-				
_				%						S/L·					
-				%						S/L·					
28	Add amounts in column	/h\ lines 25	through 27		re and or	line 21	page 1		·	10,2	28				
	Add amounts in column		-				, page 1						29		
29	Add amounts in column	i (i), iiiie 20. <u>c</u>	Tillet Hete al		7, page B - Infor				nicles					L	
C	mplete this section for ve	المممين ممامأهم	hl							ar ralata	i namar				
	mpiete this section for ve ou provided vehicles to y												ing this s	ection fo	nr.
•	se vehicles.	your employe	es, 11151 aus	wei liie d	uestions	iii Oecti	011 0 10 1	300 11	you meet	an excer	illon to t	completi	ing this s	ection ic	21
						т .				1 .					
		_		1	(a)		b)	١.	(c)	1	d)	1 '	e)	(f	-
30	Total business/investment		•	Ve	hicle	Vel	nicle	<u> </u>	/ehicle	Vet	icle	Vel	nicle	Veh	icle
	year (do not include com	muting miles)		<u> </u>		<u> </u>		<u> </u>				.			
	Total commuting miles	_		<u> </u>				<u> </u>							
32	Total other personal (no	oncommuting	j) miles	İ											
	driven														
33	Total miles driven during	g the year.													
	Add lines 30 through 32	2						<u> </u>							
34	Was the vehicle availab	le for person	al use	Yes	No	Yes	No	Yes	No No	Yes	No	Yes	No	Yes	No
	during off-duty hours?					<u> </u>				L					
35	Was the vehicle used p	rimarily by a	more										Ì		
	than 5% owner or relate	ed person?					<u> </u>	<u>.</u>		į					
36	is another vehicle availa	able for perso	onal												
	use ⁹														
		Section C	- Question	s for Emp	loyers V	/ho Pro	vide Vel	nicles	for Use b	y Their i	Employe	ees			
Ans	swer these questions to												re not m	ore than	5%
	ners or related persons.		•	•						•					
37	Do you maintain a writte	en policy sta	tement that	prohibits	all person	nal use o	of vehicle	es. Inc	ludina co	mmutina	. by you	r		Yes	No
	employees?	,			•			•	J						
38	Do you maintain a writte	en policy sta	tement that	prohibits	personal	use of v	ehicles.	excer	ot commu	ina. by i	our	•			
	employees? See the ins			•	-									1	
39	Do you treat all use of v									•			-		1
	Do you provide more th											• •		·	
70	the use of the vehicles,					iiiiOiiiiai		ı you.	cripioyee	3 about					
41	Do you meet the require					monetra	Stion use		•					·	+
₩1	•		• .									•		 	٠
D.	Note: If your answer to art VI Amortization	37, 38, 39, 4	U, or 41 is "	res, ao r	ot comp	iete Sec	tion B IC	or the	coverea ve	enicies					_
	(a)			(b)		(c)			(d)	—-т	(e)	Г		(f)	
	Description of	of costs	[0	late amortization	,	Amortizal			Code		Amortiz	note		mortization	
40	Amortization of acces at	ant basis = -!	<u></u>	begins	<u> </u>	amoun			section		penod or pe	ineurage		or this year	
42	Amortization of costs th	iat begins du	iring your 20	ı ≥ tax ye	ar:										<u>-</u>
								+							
					——					L		T 40			
	Amortization of costs th		-					-		• •		43			
<u>44</u>	Total. Add amounts in	<u>column (f). S</u>	<u>ee the instru</u>	<u>ictions foi</u>	r where to	o report				· •		44			

216252 12-28-12

Form 8868 (Rev. 1-2013)						Page 2	
If you are filing for an Additional (Not Autom	atic) 3-Month Ex	tension, d	complete only Part II and check this	box		► X	
Note. Only complete Part II if you have already I					8868.		
 If you are filing for an Automatic 3-Month Ex 	tension, comple	te only Pa	ert i (on page 1).				
Part II Additional (Not Automati	c) 3-Month E	xtensio	n of Time. Only file the origina	al (no c	opies nee	:ded).	
•			Enter filer's i	dentifyi	ng number,	see instructions	
Type or Name of exempt organization or oth	er filer, see ınstru	ctions		Employe	r identification	on number (EIN) or	
print Aurora Foundation							
File by the C/O Mr. Jeffrey Bro	nfman				74-26	60772	
						er (SSN)	
return See 551 West Cordova Rd		- <u></u>					
City, town or post office, state, and Santa Fe, NM 87505		oreign add	ress, see instructions.				
Enter the Return code for the return that this ap	plication is for (file	e a separa	te application for each return)			0 4	
Application		Return	Application			Return	
ls For		Code	Is For			Code	
Form 990 or Form 990-EZ		01		<u></u>	~.		
Form 990-BL		02	Form 1041-A			08	
Form 4720 (individual)		03	Form 4720			09	
Form 990-PF		04	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)		05	Form 6069			11	
Form 990-T (trust other than above)		06	Form 8870			12	
STOP! Do not complete Part II if you were not			natic 3-month extension on a previ	ously file	ed Form 886	i8	
	y Bronfma		DWD #710 G		N 0750	E 100E	
• The books are in the care of \triangleright 1000 C	Ordova P.	race,		e, N	M 8/30	3-1823	
Telephone No. ► 505-988-5924			FAX No. ▶			. \Box	
If the organization does not have an office or	•					. • 🗀	
• If this is for a Group Return, enter the organization		1					
box . If it is for part of the group, check			t 15, 2014	all memo	ers the exte	nsion is for.	
4 i request an additional 3-month extension			2012	CFD	30, 2	013	
For calendar year, or other tax yeIf the tax year entered in line 5 is for less t				Final		<u>015</u> .	
Change in accounting period	nan 12 months, c	HECK IEAS	on minaretum	_ Filiali	etum		
7 State in detail why you need the extension	_						
Additional time is ne		rathe	r information to fi	le a	compl	ete and	
accurate tax return.							
	<u> </u>						
8a If this application is for Form 990-BL, 990-	PF. 990-T. 4720.	or 6069. e	nter the tentative tax, less any				
nonrefundable credits. See instructions.	,	, .		8a	s	0.	
b If this application is for Form 990-PF, 990-	T, 4720, or 6069,	enter any	refundable credits and estimated				
tax payments made. include any prior yea							
previously with Form 8868.			,	8b	s	0.	
c Balance due. Subtract line 8b from line 8	a. Include your pa	yment wit	h this form, if required, by using				
EFTPS (Electronic Federal Tax Payment S				8c	\$	0.	
			st be completed for Part II o	nly.			
Under penalties of perjury, I declare that I have examinit is true, correct, and complete, and that I am authoriz	ed this form, includ ed to prepare this fo	ing accomp irm.	panying schedules and statements, and to	the best o	of my knowled	ge and belief,	
Signature >	Title ► (CPA		Date	▶		
	1100 2		······································			8868 (Rev. 1-2013)	