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## Form **990**

## **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

		nai Reven			<u>pout Form 990 and its instruc</u>			VIIOIIII99	<i>J.</i>	. 20	J. 1011	
				endar year, or tax year begin		, 2013, and en			D Employe	r Identification	number	
	_		applicable.		DS OF THE SANTA FE PUBL	C LIBRARY, INC	<u>.                                    </u>		D Employe			
	Ė	Address	_	Doing Business As	x if mail is not delivered to street ac	Idropa) Boom	n/suite		E Tolophon	51-0161692		
	_	Name ch	•	·	x ii maii is not delivered to street at	luress) Hoon	VSuite		E Telephone number			
	ᆜ	initial reti		145 WASHINGTON AVE.						<u>505-955-2839</u>		
	Ш	Terminat	ed	City or town, state or province,	, country, and ZIP or foreign postal	code						
	ᆜ	Amende		SANTA FE, NM 87501	<del> · . · · · · · · · · · · · · · · · </del>				G Gross receipts \$ 491,5			
	Ш	Applicati	on pending	F Name and address of principal	officer KITTY SHERLOCK			H(a) is this a g	roup return for s	ubordinates? 🔲 Ye	es ⊻ No	
				SAME AS C ABOVE						ıncluded? 🔲 Ye		
	<u></u>	Tax-exer	npt status:	✓ 501(c)(3)	)1(c) ( ) ◀ (Insert no ) 🔲 49	47(a)(1) or 527	7	If "N	o," attach a	list. (see instruct	ions)	
	J	Website	: ► ww	w.santafelibraryfriends.org				H(c) Group	exemption r	number ►		
	K	Form of o	organization	Corporation Trust As	ssociation ☐ Other ►	L Year of for	rmation	1974	M State	of legal domicile	NM	
	P	art I	Summ	nary								
		1	Briefly de	escribe the organization's r	mission or most significant	activities:						
	ë		TO PROV	IDE FUNDING AND SUPPOR	RT FOR THE SANTA FE PUBI	LIC LIBRARY						
	ă											
<b>S</b>	Ę	2	Check th	nis box ▶∏ if the organizat	tion discontinued its operat	ions or dispose	ed of n	nore than	25% of ı	ts net assets		
2018	Governance				governing body (Part VI, line	-					12	
ବର		1			mbers of the governing bod						12	
M	es				red in calendar year 2013 (P		-				0	
	Activities	6			te if necessary)						109	
NS.	Ć	l .		,	rom Part VIII, column (C), lin				7a	<u> </u>		
	•	1							7b		0	
		ь	iver unite	lated business taxable inco	ome from Form 990-T, line	<u> 34</u>	<del>-i-</del>	Prior Ye		Current	O Year	
<b>CANNED</b>		_	0	#		Carrent						
<b>Z</b>	PE	_			line 1h)				77,989		81,956	
<b>K</b>	Revenue	9		service revenue (Part VIII,								
$\mathcal{D}$	ě	10		•	nn (A), lines 3, 4, and 7d)				21,237		32,002	
00	_	11			), lines 5, 6d, 8c, 9c, 10c, ar				76,070		66,655	
		12			11 (must equal Part VIII, colu				175,296	· · · · · · · · · · · · · · · · · · ·	180,613	
		13			Part IX, column (A), lines 1-3	•			3,097		20,162	
		14	Benefits	paid to or for members (Pa	art IX, column (A), line 4) .							
	S	15	Salaries,	other compensation, employ	yee benefits (Part IX, column	(A), lines 5-10)	L					
	Expenses	16a	Profession	onal fundraising fees (Part	IX, column (A), line 11e) .							
	9	b	Total fun	draising expenses (Part IX	, column (D), line 25) 🕨	6,507	7					
	ш	17	Other ex	penses (Part IX, column (A	i), lines 11a-11d, 11f-24e)				135,821	,	150,137	
		18			nust equal Part IX, column (	A). line 25) .			138,918		170,299	
		19			ine 18 from ॡि—12 ├   \/ ├				36,378		10,314	
	58	<del>†                                      </del>			14.61.10	0	Beg	inning of Cu		End of \		
	and a	20	Total ass	sets (Part X, line 16)		. lõl			1,138,278	<del> </del>	1,243,490	
	Net Assets of Fund Balanci	21		oulities (Part X, line 26)	MAY 1 9 20	14 0	-		658		599	
	25	22		ets or fund balances. Subtr		S			1,137,620		1,242,891	
		art II		ture Block	OGDEN. L	<del> 李   辰   · · ·</del>	1		1,137,020		1,242,031	
	_				this return, including accompanyi				<u> </u>			
					r than officer) is taked on all inform					ny knowledge al	na bellet, it is	
	_		T &	MA	4/1/	> ///	7 00 0			-/1-/	red	
	e:.		<u> </u>	/ VINA X	) 1000	, ma	, su			<u> </u>		
	Sig	_	Sign	nature of officer  MOIRA	H. SELTZIN	16 7	<b>~</b> ~	Da سرد جسام		•		
	He	ere		<del> </del>	H. SHILL	, , , ,	PE	4507				
			1	e or print name and title			T =		<del></del>			
	Pa	id	Pnnt/Ty	ype preparer's name	Preparer's signature	0	Date		Check 2			
		epare	DEAN	NA EINSPAHR	Deling M. Gen	apstr	5-1	5-14	self-emp		055646	
		se Onl		name DEANNA EINSPAI	HR	0		Firm	n's EIN ▶			
	_			address ► 725 MESILLA RD,	SANTA FE, NM 87501			Pho	one no	505-983-	5643	
	Ma	y the IF	RS discus	ss this return with the prepa	arer shown above? (see ins	tructions)				🗸 Y	es 🗌 No	
			- 4. 5 - 4.	ection Act Nation see the se							990 (2013)	

6/74

Form 99	(2013) Page 2
Part	Statement of Program Service Accomplishments  Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO PROVIDE FUNDING AND SUPPORT FOR THE SANTA FE PUBLIC LIBRARY
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	f "Yes," describe these new services on Schedule O.  Old the organization cease conducting, or make significant changes in how it conducts, any program services?
4	f "Yes," describe these changes on Schedule O.  Describe the organization's program service accomplishments for each of its three largest program services, as measured be 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 \$ 41,597 including grants of \$ ) (Revenue \$ )
	THE FRIENDS OF THE SANTA FE PUBLIC LIBRARY SUPPLEMENTS THE SANTA FE PUBLIC LIBRARY'S BOOKS AND MATERIALS BUDGET AND FULLY FUNDS THE LIBRARY'S E-BOOK LENDING PROGRAM.
	-
	Code: ) (Expenses \$ 29,823 including grants of \$ ) (Revenue \$ )
	THE FRIENDS OF THE SANTA FE PUBLIC LIBRARY FULLY FUNDS ALL YOUTH AFTER-SCHOOL AND SUMMER READING PROGRAMS AT ALL THREE SANTA FE PUBLIC LIBRARY BRANCHES.
	AFTERSCHOOL PROGRAMS FOR ELEMENTARY AND HIGH SCHOOL STUDENTS: MAIN LIBRARY HELD 90 PROGRAMS ATTENDED
	BY 2,693 PARTICIPANTS; LA FARGE LIBRARY HELD 55 PROGRAMS ATTENDED BY 1,611 PARTICIPANTS AND SOUTHSIDE LIBRARY HELD 86 PROGRAMS ATTENDED BY 2,707 PARTICIPANTS, FOR A TOTAL OF 7,101 PARTICIPANTS, A 2.9% INCREASE DVER 2012.
	SUMMER READING PROGRAMS FOR ELEMENTARY AND HIGH SCHOOL STUDENTS: SIX-WEEK PROGRAMS WERE HELD AT ALL
	THREE BRANCH LIBRARIES, AND ATTENDANCE AT MAIN LIBRARY WAS 262; ATTENDANCE AT LA FARGE LIBRARY WAS 393, ANI
	ATTENDANCE AT SOUTHSIDE LIBRARY WAS 668, FOR A TOTAL OF 1,323 PARTICIPANTS, A 4.2% INCREASE OVER 2012 ATTENDANCE.
4c	Code: (Expenses \$ 24,610 including grants of \$ ) (Revenue \$ )
	THE FRIENDS OF THE SANTA FE PUBLIC LIBRARY FULLY FUNDS BOOKS AND BABIES, A YEAR-ROUND, EARLY CHILDHOOD READING AND ACTIVITIES PROGRAM FOR PARENTS AND CHILDREN. FOURTEEN SIX-WEEK SESSIONS
	WERE HELD AT TWO LIBRARY BRANCHES WITH 322 ATTENDEES AT LA FARGE LIBRARY (AN AVERAGE OF 32 EACH WEEK) AND 382 ATTENDEES AT SOUTHSIDE LIBRARY (AN AVERAGE OF 46 EACH WEEK). IN 2012, A TOTAL OF 624 CHILDREN
	ATTENDED, WHILE IN 2013 THE TOTAL WAS 704, AN INCREASE OF 12.8%.
	BOOKS AND BABIES IS ALSO PRESENTED TO TEEN MOTHERS AT SANTA FE'S TWO PUBLIC HIGH SCHOOLS. AT CAPITAL HIGH SCHOOL, FOUR 6-WEEK SESSIONS AVERAGED 15 TEENS PER SESSION AND SANTA FE HIGH SCHOOL AVERAGED 30 TEENS PER SESSION.
4d	Other program services (Describe in Schedule O.)  Expenses \$ 43,466 including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 139.496

Form 99	0 (2013)		ı	Page 3
Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<b>√</b>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4	-	<del>  •</del>
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	<u> </u>		
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV			
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	9	ļ	<b>✓</b>
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	1	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.	, '5- 1		-1.1
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		<b>√</b>
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		1
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		1
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		1
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	<del>                                     </del>	1
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		-	1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	12a		1
40	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	-	ļ <u>.</u>
13 14 a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a	ļ	<b>✓</b>
b		144	-	<b>  *</b>
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
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 (see instructions)			
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		<b>✓</b>
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	<b>✓</b>
*	If "Yes," complete Schedule G, Part III	19		✓
20 a	• , , , , , , , , , , , , , , , , , , ,	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	<u> </u>	

Form 99	90 (2013)		F	age '
Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓
22	Did the organization report more than \$5,000 of grants or 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		1
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		1
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 25a	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		<b>√</b>
d 25a		24d 25a		✓ ✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		<b>√</b>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	10.00	1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28b 28c		<b>√</b>
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		<b>√</b>
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		<b>V</b> ✓
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		<b>∀</b>
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		<b>▼</b>
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<b>√</b>
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		
37	related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	ļ	✓
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 

37

38

Form 99	)Ô (2013)		F	age 5
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 13			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
0-	reportable gaming (gambling) winnings to prize winners?	1c	✓	ļ
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  1 at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		_
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	<del></del>		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			١.
	organization solicit any contributions that were not tax deductible as chantable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	۱		1
_	gifts were not tax deductible?	6b	<del></del>	-
7 a	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		-
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	<u> </u>		
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
ө	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	ļ	ļ
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		ļ	
ο.	Sponsoring organizations maintaining donor advised funds.	8	-	
9 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	<del></del>	<u> </u>
10	Section 501(c)(7) organizations. Enter:	<u> </u>		
а	Initiation fees and capital contributions included on Part VIII, line 12			1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	]		1
11	Section 501(c)(12) organizations. Enter:	1		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			1
40	against amounts due or received from them.)			
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	12a		<del>                                     </del>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	-
u	Note. See the instructions for additional information the organization must report on Schedule O.	1.54	<del>                                     </del>	
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans		1	
C	Enter the amount of reserves on hand			L
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

Part	<b>Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 through 7b below, and response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See in										
	Check if Schedule O contains a response or note to any line in this Part VI			tructi	_						
Secti	on A. Governing Body and Management	· · · · · ·	<u> </u>	<u>· · · ·</u>	✓						
0000	on A doverning body and management		<del></del> -T	Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 12			1						
	If there are material differences in voting rights among members of the governing body, or			j							
	if the governing body delegated broad authority to an executive committee or similar		i l								
	committee, explain in Schedule O.										
b		1b 12		,							
2	Did any officer, director, trustee, or key employee have a family relationship or a business re	lationship with			لـــا						
•	any other officer, director, trustee, or key employee?		2		<b>✓</b>						
3	Did the organization delegate control over management duties customarily performed by or u supervision of officers, directors, or trustees, or key employees to a management company or other		_		,						
4		-	3		<b>-</b>						
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 Did the organization become aware during the year of a significant diversion of the organization		<b>4 5</b>	<b>√</b>	<b>√</b>						
6	Did the organization become aware during the year of a significant diversion of the organization Did the organization have members or stockholders?	is assets?.	6								
7a	Did the organization have members, stockholders, or other persons who had the power to e	lect or appoint		•							
	one or more members of the governing body?	• • •	7a	1							
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	✓							
8	Did the organization contemporaneously document the meetings held or written actions und	ertaken during									
	the year by the following:	ļ									
a	The governing body?		8a	<b>√</b>							
ь 9	Each committee with authority to act on behalf of the governing body?		8b	<b>✓</b>							
9	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9								
Secti	on B. Policies (This Section B requests information about policies not required by the			nde )	_						
	on an analysis of the second o		-	Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	!	10a	-	<b>√</b>						
b	If "Yes," did the organization have written policies and procedures governing the activities of										
	affiliates, and branches to ensure their operations are consistent with the organization's exemp		10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	filing the form?	11a	✓	<u> </u>						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				نـــــا						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	mon to conflicto?	12a		<b>✓</b>						
b			12b		<b></b>						
С	Did the organization regularly and consistently monitor and enforce compliance with the per describe in Schedule O how this was done	olicy r ir res,	12c								
13	Did the organization have a written whistleblower policy?		13		1						
14	Did the organization have a written document retention and destruction policy?		14		1						
15	Did the process for determining compensation of the following persons include a review ar	id approval by									
	independent persons, comparability data, and contemporaneous substantiation of the deliberation a	and decision?									
а	The organization's CEO, Executive Director, or top management official		15a		<b>✓</b>						
b	Other officers or key employees of the organization		15b		✓_						
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar	r omangament									
IVa	with a taxable entity during the year?		16a		<b>/</b>						
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization		102		<b>  •</b>						
_	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	_ ~							
	on C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ► NEW MEXICO										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, an	d 990-T (Section	501(	c)(3)s	only)						
	available for public inspection. Indicate how you made these available. Check all that apply.	- duit- (0)									
19	<ul> <li>Own website</li></ul>										
	financial statements available to the public during the tax year.	to, commet or file	JI 691	Juncy	, and						
20	State the name, physical address, and telephone number of the person who possesses the box	oks and records	of the	<del>)</del>							
	Organization: ► MOIRA GEHRING PO BOX 31343 SANTA FE NM 87594 505-467-8647										

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Page	•

Form 990 (2013)

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(a) Name and Title Position (do not check more than one box, unless person is both an office and a derector/trustee) (do not check more than one box, unless person is both an office and a derector/trustee) (do not check more than one box, unless person is both an office and a derector/trustee) (do not check more than one box, unless person is both an office and a derector/trustee) (do not check more than one box, unless person is both an office and a derector/trustee) (do not check more than one box, unless person is both an office and a derector/trustee) (do not check more than one box, unless person is both an office and a derector/trustee) (do not check more than one box, unless person is both an office and a derector/trustee) (do not check more than one box, unless person is both an office and the compensation from the organizations (w-2/1099-MISC) (do not check more than one box, unless person is both an office and the compensation from the organizations (w-2/1099-MISC) (do not check more than one box, unless person is both an office and the compensation from the organizations (w-2/1099-MISC) (do not check more than one box, unless person is both an office and the compensation from the organizations (w-2/1099-MISC) (do not check more than one box, unless person is both an office and the compensation from the organizations (w-2/1099-MISC) (do not check more than one box, unless person is both an office and the compensation from the organization (w-2/1099-MISC) (w-2/1099-MIS	Check this box if neither the organization no	r any relate	d org	anız			ompe	nsa	ted any curren	t officer, director	r, or trustee.
Name and Title			ŀ		(0	C)			<b>†</b>		
Average   hours per office and a director/turbustor of the proper of the property of t	(A)	(B)	,						(D)	(E)	(F)
11 KITTY SHERLOCK, CO-PRESIDENT   S.O.   PO BOX 5003, SANTA FE, NM 87502   V   V   V   V   V   V   V   V   V	Name and Title	hours per	box, i	unles	s pe	rson	ıs both	an	compensation	compensation from	amount of
PO BOX 5003, SANTA FE, NM 87502		hours for related organizations below dotted	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizations (W-2/1099-MISC)	compensation from the organization and related
(2) SUSAN SHELDON, CO-PRESIDENT   2.0   2301 LAS CASITAS, SANTA FE, NM 87507   7   7   0   0   0   0   0   0   0	(1) KITTY SHERLOCK, CO-PRESIDENT	50									
2301 LAS CASITAS, SANTA FE, NM 87507	PO BOX 5003, SANTA FE, NM 87502		<b>✓</b>		✓				0	0	0
(3) PAUL BRICE, RECORDING SECRETARY   2.0   2503 CALLE DE LOS NINOS, SF, NM 87505   7	(2) SUSAN SHELDON, CO-PRESIDENT	2.0					1				
2503 CALLE DE LOS NINOS, SF, NM 87505	2301 LAS CASITAS, SANTA FE, NM 87507		1		✓				0	O	0
(4) SANDRA BUNDY, CORRESPONDING SEC 1.0  13 BLUE JAY DR. SANTA FE, NM 87506	(3) PAUL BRICE, RECORDING SECRETARY	2.0	İ								
13 BLUE JAY DR. SANTA FE, NM 87506	2503 CALLE DE LOS NINOS, SF, NM 87505		1		✓				o	0	. 0
(5) MOIRA GEHRING, TREASURER PO BOX 31343, SANTA FE, NM 87594  (6) EVA MONIKA BORINS 3.0  671 GARCIA ST. SANTA FE, NM 87505  (7) DEBBIE RAMIREZ 906 RIO VISTA ST. SANTA FE, NM 87501  (8) CAROL ROSE (PARTIAL YEAR) 2014 OTOWI RD. SANTA FE, NM 87505  7 PUEBLO DR. SANTA FE, NM 87505  (10) SPENCER K. WERTZ 754 CAMINO FRANCISCA, SF, NM 87506  (11) DOLORES WHITAKER (BEGINNING 11/2013) 4218 VUELTA COLORADA BOX 13, SF, NM 87507  (12) ELIZABETH EGELHOFF (BEGINNING 9/2013) 3005 S. ST. FRANCIS DR. #249, SF, NM 87508  (13) WENDY HITT (BEGINNING 10/2013) 2.0  (14) LAURIE WALKER (BEGINNING 9/2013) 1.0  (14) LAURIE WALKER (BEGINNING 9/2013) 1.0		1.0	1		1				0	0	0
PO BOX 31343, SANTA FE, NM 87594		10.0									
(6) EVA MONIKA BORINS  671 GARCIA ST. SANTA FE, NM 87505  (7) DEBBIE RAMIREZ  906 RIO VISTA ST. SANTA FE, NM 87501  (8) CAROL ROSE (PARTIAL YEAR)  2014 OTOWI RD. SANTA FE, NM 87505  (9) LUCINDA SURBER  7 PUEBLO DR. SANTA FE, NM 87505  (10) SPENCER K. WERTZ  754 CAMINO FRANCISCA, SF, NM 87506  (11) DOLORES WHITAKER (BEGINNING 11/2013)  4218 VUELTA COLORADA BOX 13, SF, NM 87507  (12) ELIZABETH EGELHOFF (BEGINNING 9/2013)  3005 S. ST. FRANCIS DR. #249, SF, NM 87505  48 OLD GALISTEO WAY, SANTA FE, NM 87508  (14) LAURIE WALKER (BEGINNING 9/2013)  1.0  (14) LAURIE WALKER (BEGINNING 9/2013)  1.0  (14) LAURIE WALKER (BEGINNING 9/2013)  1.0	***************************************	· · · · · · · · · · · · · · · · · · ·	1		✓				0	0	0
(7) DEBBIE RAMIREZ 906 RIO VISTA ST. SANTA FE, NM 87501 (8) CAROL ROSE (PARTIAL YEAR) 2014 OTOWI RD. SANTA FE, NM 87505 (9) LUCINDA SURBER 7 PUEBLO DR. SANTA FE, NM 87505 (10) SPENCER K. WERTZ 754 CAMINO FRANCISCA, SF, NM 87506 (11) DOLORES WHITAKER (BEGINNING 11/2013) 4218 VUELTA COLORADA BOX 13, SF, NM 87507 (12) ELIZABETH EGELHOFF (BEGINNING 9/2013) 3005 S. ST. FRANCIS DR. #249, SF, NM 87505 (13) WENDY HITT (BEGINNING 10/2013) 48 OLD GALISTEO WAY, SANTA FE, NM 87508 √ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		3.0									
(7) DEBBIE RAMIREZ       1.0         906 RIO VISTA ST. SANTA FE, NM 87501       ✓       0       0       0         (8) CAROL ROSE (PARTIAL YEAR)       1.0       ✓       0       0       0         2014 OTOWI RD. SANTA FE, NM 87505       ✓       0       0       0         (9) LUCINDA SURBER       5.0       ✓       0       0       0         7 PUEBLO DR. SANTA FE, NM 87505       ✓       0       0       0         (10) SPENCER K. WERTZ       1.0       ✓       0       0       0         754 CAMINO FRANCISCA, SF, NM 87506       ✓       0       0       0       0         (11) DOLORES WHITAKER (BEGINNING 11/2013)       1.0       ✓       0       0       0         4218 VUELTA COLORADA BOX 13, SF, NM 87507       ✓       0       0       0       0         (12) ELIZABETH EGELHOFF (BEGINNING 9/2013)       1.0       ✓       0       0       0         3005 S. ST. FRANCIS DR. #249, SF, NM 87505       ✓       0       0       0       0         (13) WENDY HITT (BEGINNING 10/2013)       2.0       ✓       0       0       0         48 OLD GALISTEO WAY, SANTA FE, NM 87508       ✓       0       0       0       0 <td>671 GARCIA ST. SANTA FE, NM 87505</td> <td></td> <td>1</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0</td> <td>o</td> <td>0</td>	671 GARCIA ST. SANTA FE, NM 87505		1						0	o	0
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3005 S. ST. FRANCIS DR. #249, SF, NM 87505	(12) ELIZABETH EGELHOFF (BEGINNING 9/2013)	1.0									
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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
					•	<b>&gt;)</b>							
	(A)	(B)	(don	ot ch		rtion more	than o	one	(D)	(E)	(F	•	
	Name and title	Average hours per					is both		Reportable compensation	Reportable compensation from	Estim n amou		
		week (list any		_	_	r- 1	or/trust	<u> </u>	from	related	ott	ner	
		hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizations (W-2/1099-MISC)	compe		
		organizations	ecte	tig	"	ηg	st co	뾱	(W-2/1099-MISC)		organi	zation	
		below dotted (ine)	֓֞֞֞֟֝֟֝ <u>֚</u>	altr		oyee	omp				and re		
			i ee	uste		"	ensa						
			l	ă			ıted						
(15) JA	N BEST (PARTIAL YEAR)	0.5										-	_
17	N. SPARROW LN, SANTA FE, NM 87506		✓						0		<u> </u>		0
(16)		ļ 											
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(17)													
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\ <u></u> !		·											
(25)			<u> </u>					<u> </u>				_	_
1b	Sub-total								0		0		0
C	Total from continuation sheets to Part			•									_
<u>d</u>	Total (add lines 1b and 1c)						<u></u> .	<u> </u>	0	· ·	D		0
2	Total number of individuals (including but		to th	ose	list	ed a	above	e) w	tho received m	ore than \$100,0	000 of		
	reportable compensation from the organi	zation > 0									·····	Yes N	
3	Did the organization list any former of	ficer, direc	tor. c	or tr	uste	aa.	kev e	eme	olovee, or high	est compensat		162 N	-
	employee on line 1a? If "Yes," complete								· · · · ·		. 3		<del></del> -1
4	For any individual listed on line 1a, is the	sum of re	portal	ble (	con	nper	nsatio	n a	ind other comp	ensation from	the		
	organization and related organizations	greater th	an \$1	150,	000	7 /	f "Ye	s, "	complete Sch	edule J for su	ıch	L_	
	ındividual			•	•						4	- ✓	<u> </u>
5	Did any person listed on line 1a receive of									ration or individ			
Castia	for services rendered to the organization	rir res, c	:ompi	ete	SCI	ieai	ile J 1	or s	sucn person	· : : · ·	. 5	✓	_
Secure 1	on B. Independent Contractors  Complete this table for your five highest	component	od in	100	and	ont	oontr		orn that recover	nd mare than C	100.000.af		_
•	compensation from the organization. Rep	ort compe	nsatio	aepe	or th	JA C	alend	acu ar v	vear ending wit	h or within the	roanizatioi	n'e tav	
	year.	, , , , , , , , , , , , , , , , , , ,						<u>,</u>	, our orlaing in		organization	· o tax	
	(A)							Γ	(B)	· T	(C)		—
	Name and business add	ress							Description of s	ervices	Compensa	tion	
NONE													
								L					
										<del></del>	<del> </del>		—
2	Total number of independent contractor	rs (includir	ng bi	ıt n	ot I	imit	ed to	L th	nose listed ah	ove) who		_	<del></del> ;
	received more than \$100,000 of compens								0	-,			}

Part	VIII	Statement of Reve							_
		Check if Schedule C	ontains	a res	ponse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
क क	1a	Federated campaigns	s	1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues .		1b	10,047			ļ	
D. E	c	Fundraising events .		1c	4,055				1
ifts ar A	ď	Related organizations		1d	4,000				
2,≝	e	Government grants (cor		1e					
Si	f	All other contributions, g	•	<u> </u>		ŀ		[	İ
ig je	-	and similar amounts not in		1f	67,854	ļ			
はは	g	Noncash contributions inclu		<u></u>	27,762				
	h	Total. Add lines 1a-1				81,956			
	<del></del>	Totali / Go III Go Tu T	<del></del>	<u>· · · · </u>	Business Code	61,530			<del> </del>
- Di	2a								
<u>چ</u>	ь								<del> </del>
8	c						<del></del>		<del> </del>
Έ	ď				<u> </u>				
Š	e							<del></del>	
Ē	f	All other program ser							
Program Service Revenue	g	Total. Add lines 2a-2			•				<u> </u>
	3	Investment income							T
		and other similar amo				36,543	~		36,543
	4	Income from investmen	t of tax-exer	not be	ond proceeds▶	30,343			30,343
	5			•					
		,	(i) Real		(II) Personal				
	6a	Gross rents .							
	b	Less: rental expenses							
	С	Rental income or (loss)		_					
	d	Net rental income or			· <b>&gt;</b>				
	7a	Gross amount from sales of	(i) Securit		(II) Other				
		assets other than inventory	30	6,402		i			
	b	Less cost or other basis		•					
		and sales expenses .	31	0,943					
	С	Gain or (loss)		,541)					
	d	Net gain or (loss) .			▶	(4,541)			(4,541)
_		, ,							(,,,,,,,
venue	8a	Gross income from fuevents (not including \$	undraising						
Other Reven	!	of contributions report See Part IV, line 18 .	ed on line 1	c). • a					
Ę	ь	Less: direct expenses	s	. b					1
_		Net income or (loss) t			events . 🕨				
	9a	Gross income from ga							
		See Part IV, line 19 .		· a		ł			
		Less: direct expenses							
	1	Net income or (loss) f	_	_	vities ▶				
	10a	Gross sales of in				1			
		returns and allowanc				1			
	b	Less: cost of goods s							
	<u> </u>	Net income or (loss) t		of Inv	<del></del>				
	L	Miscellaneous F	Revenue		Business Code				
	11a	BOOK SALES			451211	66,655			66,655
	b								
	С				ļ <u> </u>				
	d	All other revenue .							
	е .	Total. Add lines 11a-			🕨	66,655			
	112	Total revenue, See i	nstructions		<b>▶</b> 1	400.040		1	

Form 990 (2013) Page 10 Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service expenses Do not include amounts reported on lines 6b. 7b. (A) Total expenses (C) (D) Fundraising Management and 8b. 9b. and 10b of Part VIII. general expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 20,162 20,162 2 Grants and other assistance to individuals in the United States, See Part IV, line 22 . . . Grants and other assistance to governments, 3 organizations, and individuals outside the United States, See Part IV, lines 15 and 16 . . . Benefits paid to or for members . . . . 5 Compensation of current officers, directors, trustees, and key employees . . . . . Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages . . . . . Pension plan accruals and contributions (include R section 401(k) and 403(b) employer contributions) Q Other employee benefits . . . . 10 Payroll taxes . . . . . . . . Fees for services (non-employees): 11 Management . . . . . . 9.031 903 5,870 2.258 **b** Legal . . . . . . . Accounting . . . . . . 3,091 3,091 Lobbying . . . . . . . . . Professional fundraising services. See Part IV, line 17 Investment management fees . . . . . 10,068 10.068 Other, (If line 11g amount exceeds 10% of line 25, column q (A) amount, list line 11g expenses on Schedule O.) . . Advertising and promotion . . . . 12 4,207 4,207 13 Office expenses . . . . . 6,482 972 4,213 1,297 14 Information technology . . . 15 Royalties . . . . . . 16 Occupancy . . . . 17 Travel . . . . . . . . . . . . 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 20 Payments to affiliates . . . . 21 22 Depreciation, depletion, and amortization . 23 844 844 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) **BOOKS AND MATERIALS** 41,597 41,597 **CHILDREN AND YOUTH PROGRAMS** þ 29,823 29,823 EARLY CHILDHOOD PROGRAMS C 24,610 24,610 EDUCATION AND TRAINING d 9,185 9,185 е All other expenses 11,199 8,037 210 9522, Total functional expenses. Add lines 1 through 24e

170,299

139,496

24,296

25

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) . . . . .

6,507

Form 990 (2013) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X . . . . . . (A) (B) Beginning of year End of year 1 1 Cash—non-interest-bearing . . . . . . . . 9,691 5,541 2 Savings and temporary cash investments . . . . 2 275,492 234,400 Pledges and grants receivable, net . . . . . 3 3 4 Accounts receivable, net . . . . . 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 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 instructions). Complete Part II of Schedule L. . . . . . 6 Notes and loans receivable, net . . . . . 7 Inventories for sale or use . . . . . . 8 8 Prepaid expenses and deferred charges 2,318 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10b Less: accumulated depreciation . . . . 10c Investments—publicly traded securities . . . . 11 11 850,737 1,003,549 12 Investments—other securities. See Part IV, line 11 . 12 13 Investments -- program-related. See Part IV, line 11. 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 1,138,278 1,243,490 17 Accounts payable and accrued expenses . . . . . . . 658 17 18 18 19 19 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, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . . . 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 24 Unsecured notes and loans payable to unrelated third parties . . . 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 . . . 26 658 599 Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets . . . . . 27 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

Retained earnings, endowment, accumulated income, or other funds .

Total liabilities and net assets/fund balances . . .

32

33

1,243,490 Form **990** (2013)

1,242,891

1,242,891

32

33

1,137,620

1,137,620

1,138,278 34

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a

☐ 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 audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

2c

Form **990** (2013)

separate basis, consolidated basis, or both:

☐ Separate basis

Schedule O.

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

### **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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 20**13** 

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Employer identification number Name of the organization FRIENDS OF THE SANTA FE PUBLIC LIBRARY, INC. 50-0161692 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated **b** Type II **d** Type III-Non-functionally integrated e By checking this box. I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes Νo (iii) below, the governing body of the supported organization? . . . . . . . . . . . . 11g(i) 11g(li) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . . . 11g(iii) Provide the following information about the supported organization(s). (iv) is the organization (i) Name of supported (ii) EIN (iii) Type of organization (v) Did you notify (vii) Amount of monetary (vi) is the in col (i) listed in your the organization in organization (described on lines 1-9 support col (ii) of your governing document? (i) organized in the above or IRC section support? U.S.? (see instructions)) Yes No Yes Yes No No (A) (B) (C) (D) (E)

**Total** 

Part							
	(Complete only if you checked the Part III. If the organization fails to				•	•	alify under
Secti	on A. Public Support	quality und	er the tests in	sted below, p	icase comple	te i ait iii.)	<del></del>
	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			(-)	(,,====	(4)
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
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)						
6	Public support. Subtract line 5 from line 4.			1-2	, ,	, , ,	
	on B. Total Support	L		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
7 -	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carned on			-	-		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10		3 1	~ :		- '	
12 13	Gross receipts from related activities, etc First five years. If the Form 990 is for the organization, check this box and stop he	ne organizatio					
Secti	on C. Computation of Public Suppor	rt Percentaç	ge				
14 15 16a	Public support percentage for 2013 (line 6) Public support percentage from 2012 Sch 331/2% support test—2013. If the organic	hedule A, Part	II, line 14 .			14   15   3% or more, c	% heck this
	box and stop here. The organization qua						. ▶ □
b	331/3% support test—2012. If the organ check this box and stop here. The organ					9 15 is 33 <sup>1</sup> /3%	
17a	10%-facts-and-circumstances test—26 10% or more, and if the organization me Part IV how the organization meets the "forganization	ets the "facts	-and-circumsta	ances" test, che	eck this box ar	nd <b>stop here.</b> E	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization or Explain in Part IV how the organization or supported organization	tion meets th	e "facts-and-c	ircumstances"	test, check th	nis box and st	op here.
18	Private foundation. If the organization di	d not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	

#### 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.)

Secti	on A. Public Support	446. 6		,,,	mpioto i direi		
Calen	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	64,932	269,062	56,674	77,989	81,956	550,613
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the	!				:	
	organization's tax-exempt purpose	ľ					
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513	İ					
4	Tax revenues levied for the						
	organization's benefit and either paid					1	
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the			İ			
	organization without charge						
6	Total. Add lines 1 through 5	64,932	269,062	56,674	77.989	81,956	550,613
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3			1		}	
	received from other than disqualified						
	persons that exceed the greater of \$5,000			-			
	or 1% of the amount on line 13 for the year					. [	
	Add lines 7a and 7b						0
8	Public support (Subtract line 7c from						
<u> </u>	line 6.)					1	550,613
	on B. Total Support			4 N == T			
	idar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	64,392	269,062	56,674	77,989	81,956	550,613
10a	Gross income from interest, dividends, payments received on securities loans, rents,			·			
	royalties and income from similar sources .						
_	· · ·	12,649	12,433	15,185	21,237	32,002	93,506
þ	Unrelated business taxable income (less section 511 taxes) from businesses			j		i	
	acquired after June 30, 1975						
С	Add lines 10a and 10b	12,649	12,433	15,185	21,237	32,002	02.500
11	Net income from unrelated business	12,043	12,433	13,163	21,237	32,002	93,506
••	activities not included in line 10b, whether				i	ŀ	
	or not the business is regularly carried on				1		
12	Other income. Do not include gain or						
	loss from the sale of capital assets				i		
	(Explain in Part IV.)	81,341	73,192	76,706	76,070	66,655	373,964
13	Total support. (Add lines 9, 10c, 11,			15,755			515,001
	and 12.)	158,382	354,687	148,565	175,296	180,613	1,017,543
14	First five years. If the Form 990 is for the						1 501(c)(3)
	organization, check this box and stop he	re					▶ 🗆
Secti	ion C. Computation of Public Suppor	t Percentage	9	_			
15	Public support percentage for 2013 (line 8	3, column (f) di	vided by line 1	3, column (f))		15	54.11 %
16	Public support percentage from 2012 Sch			<u></u>		16	54.16 %
Secti	ion D. Computation of Investment In						
17	Investment income percentage for 2013 (					17	9.19 %
18	Investment income percentage from 2012					18	7.15 %
19a	331/3% support tests—2013. If the organ						
	17 is not more than 331/3%, check this box					_	
b	331/3% support tests - 2012. If the organiz						
	line 18 is not more than 331/3%, check this l						
20	Private foundation. If the organization di	d not check a l	box on line 14,	. 19a, or 19b, c	heck this box	and see instruc	tions 🕨 🗍

Schedule À (Form 990 or 990-EZ) 2013						
Part IV	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).					
PART III, L	. 12: OTHER INCOME IS INCOME FROM SALES OF DONATED BOOKS.					
	·					

#### SCHEDULE D (Form 990)

**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.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization Employer Identification number FRIENDS OF THE SANTA FE PUBLIC LIBRARY, INC. Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . . 1 2 Aggregate contributions to (during year). Aggregate grants from (dunng year) . . Aggregate value at end of year . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . . . ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? **Conservation Easements.** Part II Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat ☐ Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of 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 Total acreage restricted by conservation easements . . . . 2b Number of conservation easements on a certified historic structure included in (a) . . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) ☐ Yes ☐ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: 

Assets included in Form 990, Part X

\$

Part							
3	Using the organization's acquisition, collection items (check all that apply):		er records, ched	ck any of th	e followi	ing that are a s	ignificant use of its
а	☐ Public exhibition		d 🗌 Loar	or exchang	ge progra	ams	
b	☐ Scholarly research		e 🗌 Othe	r			
C	☐ Preservation for future generation:						
4	Provide a description of the organiza XIII.	tion's collections a	nd explain how t	they further	the orga	anization's exen	npt purpose in Part
5	During the year, did the organization	solicit or receive of	lonations of art,	historical ti	reasures,	, or other simila	ar
	assets to be sold to raise funds rather	r than to be maıntaı	ned as part of th	ie organizati	on's coll	ection?	☐ Yes ☐ No
Part	IV Escrow and Custodial Arra						
	Complete if the organization 990, Part X, line 21.						
1a	Is the organization an agent, trustee included on Form 990, Part X?						ot □ Yes □ No
b	If "Yes," explain the arrangement in P	art XIII and comple	te the following t	able:			
						A	mount
С	Beginning balance				1c		
d	Additions during the year				1d		
е	Distributions during the year				1e		
f	Ending balance				1f		
2a	Did the organization include an amou	nt on Form 990, Pa	rt X, line 21? .				☐ Yes ☐ No
<u>b</u>	If "Yes," explain the arrangement in P	art XIII. Check here	If the explanation	n has been	provided	d in Part XIII .	<u> </u>
Par							
	Complete if the organization						
		(a) Current year	(b) Prior year	(c) Two year	rs back (	(d) Three years back	(e) Four years back
1a	Beginning of year balance	898,209	806,443	<u> </u>			
b	Contributions	56,598	34,256	i			
C	Net investment earnings, gains, and						
	losses	126,916	62,855	<u> </u>			
d	Grants or scholarships			ļ			
е	Other expenditures for facilities and						
	programs	35,975					
f	Administrative expenses	10,068	5,345	<u> </u>			
g	End of year balance	1,035,680	898,209				<u> </u>
2	Provide the estimated percentage of	•		g, column (a	a)) held as	s:	
а	Board designated or quasi-endowme		2%				
b	Permanent endowment	%					
С	Temporarily restricted endowment ▶						
_	The percentages in lines 2a, 2b, and						
3a	Are there endowment funds not in th	ie possession of the	e organization th	at are held	and adm	ninistered for th	
	organization by:						Yes No
	(i) unrelated organizations						3a(i) ✓
	(ii) related organizations						3a(ii) ✓
b	If "Yes" to 3a(ii), are the related organ						3b
4	Describe in Part XIII the intended use		n's endowment	runus.			
Pan	Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.						
	Description of property	(a) Cost or oth	1,,,	or other basis other)		ccumulated preciation	(d) Book value
1a	Land		<del>-  </del> '		<del> </del>		<del></del>
b	Buildings	·	<del></del>		<del> </del> -		
	Leasehold improvements				-		· · · · · · · · · · · · · · · · · · ·
q	Equipment	•					
d e	Other	•			<del> </del>	-	<del></del>
	Add lines 1a through 1e. (Column (d))	must equal Form 99	00 Part X colum	n (B) line 11	0(c) )		

Part VII	Investments—Other Securities				
	Complete if the organization answ	wered "Yes" to For	m 990, Part IV, line	e 11b. See Form	990, Part X, line 12.
	<ul> <li>(a) Description of security or category (including name of security)</li> </ul>	,	(b) Book value	1 ''	nod of valuation of-year market value
(1) Financial	denvatives				
	eld equity interests				
(A)					
(B)					
(C)					
(D) (E)					·
(F)	•				
(G)			· · · · · · · · · · · · · · · · · · ·		
(H)					
	b) must equal Form 990, Part X, col. (B) line 12.) ▶				
Part VIII	Investments-Program Related	<u>.                                    </u>		3 ,	
	Complete if the organization answer		m 990, Part IV, line	e 11c. See Form	990. Part X. line 13.
	(a) Description of investment		(b) Book value	(c) Meth	nod of valuation.
				Cost or end-	of-year market value
(1)		·			
(2)		<del></del>			····
(3)					
_(4)					<u>-</u>
(5)	<del></del>				
(6)			<b></b>		
<u>(7)</u>					
(8)		•			<del> </del>
Total (Column (	b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Assets.		<b>.</b> .	·	
	Complete if the organization ans	wered "Yes" to For	m 990, Part IV, line	e 11d. See Form	990, Part X, line 15.
	(a	a) Description			(b) Book value
(1)					
(2)					
(3)					
_(4)					
(5)		<del>-</del> -			
(6)					
(7)					
(8)					
(9)	mn (b) must equal Form 990, Part X, co	ol. (B) line 15.)	<del></del>		
Part X	Other Liabilities.	o (5)o (5)	· · · · · · · · · · · · · · · · · · ·		<del></del>
	Complete if the organization ans	wered "Yes" to For	m 990, Part IV, line	e 11e or 11f. See	Form 990, Part X.
	line 25.		,,,		
1.	(a) Description of liability	(b) Book value		<del></del>	
(1) Federal ır	ncome taxes				
(2)					
(3)					
(4)					
(5)					
(6)		ļ			
(7)		<del> </del>			
(8)					
(9)	b) must equal Form 990, Part X, col (B) line 25.)	<u> </u>			
	r uncertain tax positions. In Part XIII, provi	Ide the text of the foot:	note to the organization	n's financial etateme	nts that remorts the
	s liability for uncertain tax positions under				

D	,
Page	•

Part	XI Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per	Return.	
	Complete if the organization answered "Yes" to Form 990, F	art IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	1	
C	Recoveries of pnor year grants	2c	1	
d	Other (Describe in Part XIII.)	2d	1	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1	
b	Other (Describe in Part XIII.)	4b	1	
С	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)	5	
Part	XII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses po	er Retur	'n.
	Complete if the organization answered "Yes" to Form 990, F	Part IV, line 12a.		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b	1	
¢	Other losses	2c	1	
d	Other (Describe in Part XIII.)	2d	1	
е	Add lines 2a through 2d		2e	-
3	Subtract line <b>2e</b> from line <b>1</b>		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	] ]	
b	Other (Describe in Part XIII.)	4b		
C	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)	5	
	XIII Supplemental Information.	<del></del>		·
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and			
	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part			
SCHE	DULE D, PART V, LINE 4: THE INTENDED USE OF THE ORGANIZATION'S QUA	SI-ENDOWMENT FUNDS AR	E TO ENS	URE
THE A	BILITY TO CONTINUE TO PROVIDE SUPPORT IN FUTURE YEARS TO THE SAN	ITA FE PUBLIC LIBRARY, TO	O FUND T	HE PURCHASE
0F D0	OVER AND MATERIAL C. SURNITURE SIXTURES AND SOURMENT AS WELL A	C TO FUND VOUTU DDOOD	*****	ANDLIDDADY
OF BO	OKS AND MATERIALS, FURNITURE, FIXTURES AND EQUIPMENT, AS WELL A	S TO FUND YOUTH PROGR	AMMING	AND LIBRARY
CTAFE	FRUCATION			
SIAFF	EDUCATION.			
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#### SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

#### **Noncash Contributions**

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open To Public Inspection

Employer identification number Name of the organization FRIENDS OF THE SANTA FE PUBLIC LIBRARY, INC. 51-0161692 Part I Types of Property (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art - Works of art . . . . 1 2 Art—Historical treasures . . . 3 Art — Fractional interests . . . 4 Books and publications . . . 5 Clothing and household goods . . . . . . . . . 6 Cars and other vehicles . . . 7 Boats and planes . . . 8 Intellectual property . . . . 9 Securities-Publicly traded . . 2 27,762 Stock Market Quotations Securties - Closely held stock . 10 Securities - Partnership, LLC, 11 or trust interests . . . . . 12 Securities - Miscellaneous . . 13 Qualified conservation contribution-Historic structures . . . . . . . . Qualified conservation 14 contribution - Other Real estate - Residential . . 15 16 Real estate - Commercial . . 17 Real estate - Other . . . . Collectibles . . . . 18 19 Food inventory 20 Drugs and medical supplies . . 21 Taxidermy . . . . . . . 22 Historical artifacts . . . 23 Scientific specimens . . . Archeological artifacts . . . 24 25 Other ► ( \_\_\_\_\_) 26 Other ► ( \_\_\_\_\_) Other ► ( 27 Other ▶ ( 28 Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . . . 29 n Yes No During the year, did the organization receive by contribution any property reported in Part I, lines 1 - 28, that 30a it must hold for at least three years from the date of the initial contribution, and which is not required to be 30a b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a b If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked.

describe in Part II.

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

#### 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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number

FRIENDS OF THE SANTA FE PUBLIC LIBRARY, INC. 51-0161692 FORM 990, PART III, LINE 4d: OTHER PROGRAM SERVICES: FUNDING AND SUPPORT FOR SANTA FE PUBLIC LIBRARY OPERATIONS, INCLUDING PUBLIC LECTURE PROGRAMS, LIBRARY STAFF EDUCATION AND TRAINING, AND ADULT EDUCATION PROGRAMS. FORM 990, PART VI, SEC. A, LINE 4: CHANGES TO GOVERNING DOCUMENTS THE BYLAWS OF THE FRIENDS OF THE SANTA FE PUBLIC LIBRARY WERE REVISED AND APPROVED IN JANUARY 2013 AS FOLLOWS: ARTICLE I: NAME AND PURPOSE. CHANGES AND ADDITIONS MORE ACCURATELY DEFINE THE FRIENDS OF THE SANTA FE PUBLIC LIBRARY'S MISSION AND ROLE OF THE BOARD OF DIRECTORS. ARTICLE II: MEMBERSHIP AND VOTING. NO CHANGE. ARTICLE III: BOARD OF DIRECTORS. SECTION D REVISION ALLOWS FOR THE BOARD TO RETAIN AN OFFICER AS A VOTING MEMBER UNTIL AN APPROPRIATE REPLACEMENT IS ACCEPTED. ARTICLE IV: OFFICERS. REVISIONS REFERENCE NEWLY DEVELOPED JOB DESCRIPTIONS; CLARIFY A GRAMMATICAL AMBIGUITY; AND ALLOW THE EXECUTIVE COMMITTEE TO EMPLOY A PAID ADMINISTRATIVE ASSISTANT. ARTICLE V: NOMINATING COMMITTEE. NO CHANGE. ARTICLE VI: ACTIVITIES. REVISIONS BETTER DEFINE COMMITTEE ACTIVITIES AND RESPONSIBILITIES. ARTICLE VII: ENDOWMENT FUND. REWRITTEN TO BETTER DEFINE THE PURPOSE OF THE FUND; THE MANAGEMENT OF THE FUND; TERM LENGTH FOR MEMBERS OF THE ENDOWMENT ADVISORY COMMITTEE; AND THE FUND'S DISTRIBUTION RATE. ARTICLE VIII: GENERAL MEETINGS. REVISION REQUIRES THE MINIMUM NOTICE OF 48 HOURS FOR SPECIAL MEETINGS. ARTICLE IX: AUDIT OF BOOKS. REVISION REQUIRES BOOKS AND ACCOUNTS TO BE KEPT IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES ARTICLE X: PARLIAMENTARY AUTHORITY. NO CHANGE. ARTICLE XI: AMENDMENTS. NO CHANGE. ARTICLE XII: PERMANENT RECORDS. REVISION REQUIRES STORAGE LOCATION TO BE DETERMINED BY THE FRIENDS OF THE SANTA FE PUBLIC LIBRARY EXECUTIVE COMMITTEE. ARTICLE XIII: END DISTRIBUTION OF ASSETS AT DISSOLUTION. REVISION REQUIRES THAT FRIENDS OF THE SANTA FE PUBLIC LIBRARY ASSETS BE DISTRIBUTED FOR THE BENEFIT OF THE SANTA FE PUBLIC LIBRARY.

Cat No 51056K

Schedule O (Form 990 or 990-EZ) (2013)

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

Schedule O (Form 990 or 990-EZ) (2013)	Page <b>2</b>
Name of the organization FRIENDS OF THE SANTA FE PUBLIC LIBRARY, INC.	Employer identification number 51-0161692
FORM 990, PART VI, SEC. A, LINE 7a: THE ORGANIZATION'S BYLAWS REQUIRE THAT ELECTIONS BE	
OFFICERS AND DIRECTORS TAKE OFFICE AT THE CLOSE OF THE MEETING AT WHICH THEY ARE ELE	
STATE THAT ANY VOTING MEMBER VACANCIES WHICH ARISE IN THE TIME BETWEEN ANNUAL MEETI	NGS ARE TO BE FILLED BY
APPOINTMENT BY THE PRESIDENT WITH CONFIRMATION BY A MAJORITY BOARD VOTE	
ELECTORS ARE MEMBERS IN GOOD STANDING, WHO ARE DEFINED AS THOSE WHO HAVE PAID ANNU	JAL DUES AND ARE THEREBY
ENTITLED TO MAKE MOTIONS AND VOTE AT GENERAL MEMBERSHIP MEETINGS. THE PRESENCE OF	TWENTY (20) MEMBERS
CONSTITUTES A QUORUM AT ANY GENERAL MEMBERSHIP MEETING, INCLUDING THE ANNUAL MEET	ING.
FORM 990, PART VI, SEC. A, LINE 7b: REVISIONS TO THE ORGANIZATION'S BYLAWS ARE SUBJECT TO	O APPROVAL BY ELECTORS AT
THE NEXT GENERAL MEMBERSHIP MEETING OF THE ORGANIZATION. ELECTORS ARE MEMBERS IN C	GOOD STANDING, WHO ARE
DEFINED AS THOSE WHO HAVE PAID ANNUAL DUES AND ARE THEREBY ENTITLED TO MAKE MOTION	S AND VOTE AT GENERAL
MEMBERSHIP MEETINGS. SEE ABOVE FOR CHANGES TO BYLAWS ADOPTED IN 2013 BY ELECTORS.	
FORM 990, PART VI, SEC. B, LINE 11b: THE ORGANIZATION'S FORM 990 IS REVIEWED AND APPROVED	O BY THE EXECUTIVE COMMITTEE
OF THE BOARD. ALL MEMBERS OF THE BOARD HAVE AN OPPORTUNITY TO REVIEW THE FORM 990 E	
FORM 990, PART VI, SEC. C, LINE 19: THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINANCIA	STATEMENTS ARE MADE
	E STATEMENTS ARE MADE
AVAILABLE UPON REQUEST AND WILL BE POSTED ON THE ORGANIZATION'S WEBSITE.	······
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