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DLN: 93493316017784

Form **990** 

Department of the Treasury Internal Revenue Service

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

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

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS

2013

OMB No 1545-0047

Open to Public Inspection

generally cannot redact the information on the form

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

Α Fο	r the	2013 cal	endar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31-		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
		2013 Cai applicable	C Name of organization	2013	D Emplo	yer i	dentification number
	dress cl		LOS ALAMOS NATIONAL LABORATORY FOUNDATION		 74-28	-	
— Na	me cha	inge	Doing Business As		, , 29		
Init	ial retu	ım	Number and street (or P O box if mail is not delivered to street address) Room/suite	,	E Tolombo		umhar
— <sub>Ter</sub>	mınate	ed	1112 PLAZA DEL NORTE	-	E Telepho		
— <sub>Am</sub>	ended	return	City or town, state or province, country, and ZIP or foreign postal code		(505)	753	-8890
— Apr	olicatioi	n pending	ESPANOLA, NM 87532		G Gross n	ecein	ts \$ 5,744,400
			F Name and address of principal officer	H(a)	Is this a group		
			SUSAN HERRERA		subordinates?	1010	┌ Yes ┌ No
			1112 PLAZA DEL NORTE ESPANOLA,NM 87532	H(b)	A wa all aubawdu		s
					Are all subordi included?	nate	s   Yes  No
<b>I</b> Ta	x-exen	npt status	▼ 501(c)(3)		If "No," attach	a lis	st (see instructions)
J W	ebsite	e:► WV	VW LANLFOUNDATION ORG	H(c)	Group exempt	ıon r	number ►
<b>K</b> For	m of or	manızatıon	Corporation	· ` ´	r of formation 19	97	<b>M</b> State of legal domicile
		garnzation	Association other P	L rea	i or ioimation 13		NM
Pa	rt I	Sum	mary				
			escribe the organization's mission or most significant activities UNDATION'S MOST SIGNIFICANT ACTIVITIES ARE PROVIDING FU	NDC E		ОРТ	OF CHADITABLE AND
			TIONAL ACTIVITIES IN NORTHERN NEW MEXICO	ND3 F	OR THE SUPP	OKI	OF CHARITABLE AND
<u>ခို</u>							
Governance							
ş	2	Check tl	his box দ if the organization discontinued its operations or disposed of	more t	han 25% of its	net	assets
						ı	1
<b>40</b> 40 40			of voting members of the governing body (Part VI, line 1a)			3	
Ě			of independent voting members of the governing body (Part VI, line 1b) mber of individuals employed in calendar year 2013 (Part V, line 2a).			5	
Activities &			mber of volunteers (estimate if necessary)			6	
•			related business revenue from Part VIII, column (C), line 12			7a	
			elated business taxable income from Form 990-T, line 34			7t	+
					Prior Year		Current Year
	8	Contr	butions and grants (Part VIII, line 1h)		2,795,0	011	3,307,075
Revenue	9	Progra	am service revenue (Part VIII, line 2g)		61,	185	26,145
e vet	10		tment income (Part VIII, column (A), lines 3, 4, and 7d)		1,293,2		1,358,886
ш.	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		39,:	100	32,050
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		4,188,5	595	4,724,156
	13		s and similar amounts paid (Part IX, column (A), lines 1–3)		2,577,3	378	2,590,000
	14	Benef	its paid to or for members (Part IX, column (A), line 4)			0	0
ø	15		es, other compensation, employee benefits (Part IX, column (A), lines		1,065,9	112	1,386,869
Expenses	16a	5-10	) ssional fundraising fees (Part IX, column (A), line 11e)		1,005,	0	1,380,809
क ≘	b		indraising expenses (Part IX, column (A), line 11e)				
Ð	17		expenses (Part IX, column (D), line 25) (Part IX, column (D), line 25) (Part IX, column (A), lines 11a–11d, 11f–24e)		2,034,5	555	1,546,309
	18		expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		5,677,8		5,523,178
	19		nue less expenses Subtract line 18 from line 12		-1,489,2	$\overline{}$	-799,022
\$ <b>₹</b>				Beg	inning of Curre	nt	End of Year
Net Assets or Fund Balances	20	T - 4- 1	pageta (Part V. ling 16)	-	Year	, ,	
A B	20		assets (Part X, line 16)		66,904,2 2,617,6	-	74,682,022 2,449,927
2 E	22		ssets or fund balances Subtract line 21 from line 20		64,286,6	_	72,232,095
	1111		nature Block		0 1,200,1	,,,	, 2,202,000
Unde my ki	r pena nowle	alties of dge and	perjury, I declare that I have examined this return, including accompanyi belief, it is true, correct, and complete Declaration of preparer (other tha nowledge				
		****	***		2014 11 07		
Sign	ì	IB	ature of officer		2014-11-07 Date		
Her		WAY	NE KENNEDY TREASURER			_	
		Туре	e or print name and title				
			Print/Type preparer's name Preparer's signature Dat STEPHEN E LIVINGSTON CPA	te	Check If	PTIN POO	N 317845
Paid		-	Firm's name		self-employed Firm's EIN ► 4:		
	pare		Time and dropp to FOO MADOLIETTE NIM CUTTE OOO		Dhor /505	\ 0.10	9200
Use	On	ly	Firm's address ► 500 MARQUETTE NW SUITE 800		Phone no (505	) 842	-0290
		1	ALBUOUEROUE, NM 87102		1		

May the IRS discuss this return with the preparer shown above? (see instructions)  $\,$  .

✓ Yes ☐ No

orm	n 990 (2013) Page	<u> </u>
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	<del>,</del>
1	Briefly describe the organization's mission	
ГНЕ	FOUNDATION WAS ORGANIZED FOR THE PURPOSE OF RECEIVING AND ADMINISTERING GIFTS AND GRANTS DEDICATED	
ГО 1	THE SUPPORT OF CHARITABLE AND EDUCATIONAL PUBLIC SERVICE ACTIVITIES IN NORTHERN NEW MEXICO	_
		_
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a	(Code ) (Expenses \$ 2,100,000 including grants of \$ 2,100,000 ) (Revenue \$ )	_
	EDUCATIONAL ENRICHMENT GRANTS ARE GIVEN TO SCHOOL DISTRICTS IN THE SEVEN NORTHERN NEW MEXICO COUNTIES (EXCEPT LOS ALAMOS)	
		_
4b	(Code ) (Expenses \$ 471,336 including grants of \$ ) (Revenue \$ )	_
	INQUIRY SCIENCE EDUCATION CONSORTIUM (ISEC) IS A REGIONAL PROGRAM TO IMPROVE PERFORMANCE OF HIGH-NEED STUDENTS IN GRADES K-8 THROUGH THE SUPPORT OF INQUIRY SCIENCE IT IS CURRENTLY WORKING WITH 512 TEACHERS IN 37 SCHOOLS IN 7 NORTHERN NEW MEXICO SCHOOL DISTRICTS ALSO INCLUDED IS THE LASER I3 PROGRAM THAT IS PRIMARILY FUNDED BY US DEPT OF EDUCATION FUNDS TO THE SMITHSONIAN TO DO A RANDOMIZED CONTROL TRIAL OF INQUIRY SCIENCE IN NORTHERN NEW MEXICO, HOUSTON AND NORTH CAROLINA SIMILAR IN PROGRAM TO THE ISEC, IT WORKS IN SCHOOLS NOT IN ISEC WITH 7310 STUDENTS AND 257 TEACHERS THE LANL FOUNDATION IS A PARTNER IN THIS LASER I3 INITIATIVE	
4c	(Code ) (Expenses \$ 390,000 including grants of \$ 390,000 ) (Revenue \$ )	_
	ACADEMIC SCHOLARSHIPS ARE PROVIDED TO STUDENTS PURSUING UNDERGRADUATE DEGREES IN SCIENCE, ENGINEERING, OR OTHER FIELDS THAT ARE CRUCIAL TO THE SUCCESS OF THE LABORATORY ALL RECIPIENTS LIVE IN ONE OF THE SEVEN NORTHERN NEW MEXICO COUNTIES, INCLUDING LOS ALAMOS	
	/Code	_
	(Code ) (Expenses \$ 136,255 including grants of \$ ) (Revenue \$ )  THE FIRST BORN PROGRAM PROVIDES EDUCATIONAL HOME VISITATIONS TO IMPROVE THE HEALTH AND WELLNESS OF FIRST-TIME FAMILIES AND BUILD FAMILY	
	STRENGTHS AND COMPETENCIES THROUGH EFFECTIVE COMMUNITY RELATIONSHIPS	
		_
	(Code ) (Expenses \$ 100,000 including grants of \$ 100,000) (Revenue \$ )  EDUCATIONAL OUTREACH GRANTS ARE MADE TO NONPROFIT ORGANIZATIONS THAT DO STEM WORK - SCIENCE, TECHNOLOGY, MATH, AND ENGINEERING	
		_
	(Code ) (Expenses \$ 100,558 including grants of \$ ) (Revenue \$ 26,145 )	
	ANNUAL CONFERENCE PROVIDES ONGOING PROFESSIONAL DEVELOPMENT PRIMARILY FOR TEACHERS IN THE ISEC PROGRAM AND FOR ALL TEACHERS INTEREST IN INQUIRY SCIENCE EDUCATION AS WELL	ED
	(Code ) (Expenses \$ 1,731,781 including grants of \$ ) (Revenue \$ )	_
	PROGRAM OPERATING EXPENSES - THESE ARE EXPENSES THAT ARE ALLOCABLE TO ALL OF THE PROGRAMS CONDUCTED BY THE ORGANIZATION AS PREVIOUSLY DESCRIBED THESE EXPENSES HAVE NOT BEEN ALLOCATED TO THE INDIVIDUAL PROGRAMS	
4d	Other program services (Describe in Schedule O )	
	(Expenses \$ 2,068,594 including grants of \$ 100,000 ) (Revenue \$ 26,145 )	
4e	Total program service expenses ► 5,029,930	

			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{*}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			No
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		110
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $V^{\square}$	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
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	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
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		No
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		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^{\gamma}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
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	Yes	
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? <i>If "Yes," complete Schedule J</i>	23	Yes	
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
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		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
_		F	orm <b>99</b> 0	0 (2013)

GII	Check if Schedule O contains a response or note to any line in this Part V			г
	Check if Schedule O contains a response of note to any fine in this part v	· ·	Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   35			
)	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable  1b  0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
3	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	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
1	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	F-		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a		N
•	organization have annual gross receipts that are normally greater than \$100,000, and did the	_ oa		IN
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		N
	services provided to the payor?	76		
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	7b		
	file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	_		
		8		
	Sponsoring organizations maintaining donor advised funds.	_		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	facilities Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	12-		
	Note. See the instructions for additional information the organization must report on Schedule O	13a		
,	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	ection A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	14			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	14			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2		No
3	Did the organization delegate control over management duties customarily performed supervision of officers, directors or trustees, or key employees to a management cor	d by o		3		No
4	Did the organization make any significant changes to its governing documents since filed?		·	4		No
5	Did the organization become aware during the year of a significant diversion of the or	raanız	ation's assets?	5		No
6	Did the organization have members or stockholders?			6		No
	Did the organization have members, stockholders, or other persons who had the pow		elect or appoint one or	7-		
	more members of the governing body?			7a		No
	Are any governance decisions of the organization reserved to (or subject to approval or persons other than the governing body?			7b		No
8	Did the organization contemporaneously document the meetings held or written action year by the following	ons u	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	•		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No
Se	ection B. Policies (This Section B requests information about policies not i	requi	ired by the Internal R	even	ue Cod	e.)
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	Yes	No No
	If "Yes," did the organization have written policies and procedures governing the act	ivitie	s of such chapters,	10a 10b	Yes	
b		ivitie on's e	s of such chapters, xempt purposes?	10b	Yes	
b 11a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of its	ivitie on's e s gov	s of such chapters, xempt purposes? erning body before filing 	10b		
b 11a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of its the form?	ivitie on's e s gov • • •	s of such chapters, exempt purposes? erning body before filing 	10b		
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually	s gov s gov orm 9	s of such chapters, exempt purposes? erning body before filing	10b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?  Describe in Schedule O the process, if any, used by the organization to review this Form the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with	ivitie on's e s gov form 9	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.	ivitie on's e s gov form 9	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c	Yes Yes Yes	
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?	s gov s gov orm s the p	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revi	ivitie on's e s gov  form 9  y inte the p	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes	
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revisindependent persons, comparability data, and contemporaneous substantiation of the	s gov s gov form s y inte the p	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revisite organization of the process for determining compensation of the following persons include a revisite organization of the process for determining compensation of the following persons include a revisite organization of the process for determining compensation of the following persons include a revisite organization of the process for determining compensation of the following persons include a revisite organization of the process for determining compensation of the following persons include a revisite organization of the process for determining compensation of the following persons include a revisite organization of the process for determining compensation of the following persons include a revisite organization organization organization of the following persons include a revisite organization organization organization organization organization organi	ivitie on's e s gov form 9 y inte the p the p ew ar e deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revisite persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official.  Other officers or key employees of the organization	ivitie on's e s gov form 9 y inte the p the p ew ar e deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	s gov form s the p	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  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 of taxable entity during the year?	ivitie on's e s gov form 9 ivitie the p ivitie e deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  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 of	ivitie on's e s gov form 9 ivitie the p ivitie e deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official.  Other officers or key employees of the organization.  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 of taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organic participation in joint venture arrangements under applicable federal tax law, and take	ivitie on's e s gov form 9 ivitie the p ivitie e deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?  Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  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 of taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organication in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	ivitie on's e s gov form 9 ivitie the p ivitie e deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►MIHAELA POPA-SIMIL 1112 PLAZA DEL NORTE ESPANOLA, NM 87532 (505) 753-8890

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	ition than on is a dir	one bot ect	not box h ar or/tr	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation			
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) LIDDIE MARTINEZ	2 00	Х						0	0	0
PAST PRESIDENT										
(2) WILLIAM BILL WADT PRESIDENT	2 00	х		х				0	0	0
(3) CATHERINE MARTINEZ-BERRYHILL	1 00									
		Х						0	0	0
MEMBER-AT-LARGE (4) CHARLES MCMILLAN	1.00									
(4) CHARLES MCMILLAN	1 00	х						0	0	0
MEMBER-AT-LARGE										
(5) WALTER DASHENO	1 00	x						0	0	0
MEMBER-AT-LARGE		_ ^						ĺ	o o	U
(6) JERRY LOPEZ	1 00									
MEMBER-AT-LARGE		Х						0	0	0
(7) GLENN MARA	1 00									
		x						0	0	0
MEMBER-AT-LARGE  (8) JERRY ETHRIDGE										
(8) JERRY ETHRIDGE	1 00	х						0	0	0
MEMBER-AT-LARGE										
(9) JEFFREY HOWELL	1 00	x						0	0	0
MEMBER-AT-LARGE		^							O O	U
(10) WAYNE KENNEDY	2 00									
TREASURER		Х		Х				0	0	0
(11) RICH MARQUEZ	2 00									
		×		Х				0	0	0
VICE-PRESIDENT (12) GINGER RICHARSON	2.00									
(12) GINGER RICHARSON	2 00	х		Х				0	0	0
SECRETARY										
(13) KATHRYN HARRIS TIJERINA	1 00	x						0	0	0
MEMBER-AT-LARGE		^						Ĭ	Ü	O
(14) NAN SAUER	1 00									
MEMBER-AT-LARGE		Х						0	0	0
(15) SUSAN HERRERA	40 00									
, ,				Х				130,813	0	23,793
CEO (16) MIHAELA POPA-SIMIL	40.00									
	40 00			Х				80,938	0	23,236
<u>CFO</u>										· 
	I	l								Form <b>990</b> (2013)

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

Name and Title  Name and Title  A verage bours per week (list bor elated or or person is both an officer person is both and in the person is both an												T			
organizations below detected line)    Section B. Independent Contractors   Section B. Independent Contractors   Facility Enlices   Facility Enlices   Facility   Faci			A verage hours per more than one box, unless compensation week (list any hours and a director/trustee)  A verage hours per more than one box, unless compensation from the and a director/trustee)  A verage hours position (do not check reportable compensation with the person is both an officer and a director/trustee)  A verage hours person is to both an officer or ganization (W- organization with the person is both an officer and a director/trustee)  A verage hours per more than one box, unless compensation or ganization (W- organization with the person is both an officer and a director/trustee)								Reportable compensation from related organizations (W	/-	Estima amount o compens from t	ited f other sation the	
1b Sub-Total .  c Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c) .  2 Total ambier of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule? If or such individual .  3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule? If or such individual .  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization of reportable compensation from the individual .  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule? If or such individual .  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule? If or such person listed on line 1a receive or accrue compensation from the organization of services rendered to the organization report compensation for the calendar year ending with or within the organizations report compensation from the calendar year ending with or within the organizations report compensation from the calendar year ending with or within the organizations report compensation for the calendar year ending with or within the organizations report compensation from the calendar year ending with or within the organizations report compensation for the calendar year ending with or within the organizations report compensation. Report compensation from the organizations report compensation from the organization report compensation for the calendar year ending with or within the organizations report compensation for the calendar year ending with or with			organizations below	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensat employee	Former	2/1033	-14130)	2/1099-MI3C		relate	ed
Total from continuation sheets to Part VII, Section A								2							
Total from continuation sheets to Part VII, Section A															
Total from continuation sheets to Part VII, Section A															
Total from continuation sheets to Part VII, Section A															
Total from continuation sheets to Part VII, Section A															
Total from continuation sheets to Part VII, Section A															
Total from continuation sheets to Part VII, Section A															
Total from continuation sheets to Part VII, Section A															
Total from continuation sheets to Part VII, Section A															
Total from continuation sheets to Part VII, Section A															
Total from continuation sheets to Part VII, Section A															
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►1  Tyes No Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	1b	Sub-Total							<b> </b>						
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►1  3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule I for such individual is ted on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such individual is compensation in the organization of individual is compensation. The provided is compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person is compensation. Seetion B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A)  No Description of services  FEINITY ENTERPRISES PO BOX 1349 ESPANOLA NM 87532  PART OF ESPANOLA PUBLIC SCHOOLS GRANT  754,489			-			•	•	•	<b>F</b>		211 751		0		47.020
\$100,000 of reportable compensation from the organization      Yes   No								d abov	e) w	ho receive			<u> </u>		47,029
Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual									,						
on line 1a? If "Yes," complete Schedule J for such individual	_	D. H. L.	66				1							Yes	No
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such Individual	3						. кеу •	• mpic	yee, •	or nignes	compen.	sated employee	3		No
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	4	organization and related organ													_
Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year  (A)  (B)  (C)  Compensation  FART OF ESPANOLA PUBLIC SCHOOLS GRANT  PART OF ESPANOLA PUBLIC SCHOOLS GRANT  754,489	5		a receive or acc	rue cor	 mpen	• satı	• on fr	• • om anv	• / unr	· ·	anızatıon	or individual for	4	Yes	
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Name and business address  EFINITY ENTERPRISES PO BOX 1349 ESPANOLA NM 87532  PART OF ESPANOLA PUBLIC SCHOOLS GRANT  754,489  754,489													5		No
compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year  (A)  Name and business address  EFINITY ENTERPRISES PO BOX 1349 ESPANOLA NM 87532  PART OF ESPANOLA PUBLIC SCHOOLS GRANT  754,489	Se	ection B. Independent Co	ntractors												
Name and business address  Description of services  Compensation  PART OF ESPANOLA PUBLIC SCHOOLS GRANT  754,489	1													s tax year	
SCHOOLS GRANT 754,489		N		address							Des				
	EFINI	TY ENTERPRISES PO BOX 1349 ESPANO	DLA NM 87532												754,489
2 Total number of independent contractors (including but not limited to those listed above) who received more than															

\$100,000 of compensation from the organization 1-1

Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f g
Program Service Revenue	2a b c d e f
Revenue	3 4 5 6a b c d 7a b
Other I	b c 9a b c 10a
	11a b c d

Form 99		·						Page <b>9</b>
Part V	7111	Statement of Revenue Check if Schedule O contain		se or note to any lin	e in this Part VIII			
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s S	1a	Federated campaigns	1a					
ant	ь	Membership dues	. 1b					
٦	С	Fundraising events	1c					
iifts ar /	d	Related organizations	. 1d					
m:G	е	Government grants (contributions)	1e	1,000,000				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants similar amounts not included abov	s, and <b>1f</b> e	2,307,075				
ntrib d Ot	g	Noncash contributions included in l 1a-1f \$	ines	25,018				
ರ ೯	h	Total. Add lines 1a-1f		· · · •	3,307,075			
ë	_		-	Business Code				
Ke n	2a   .	ANNUAL CONF REG FEES		900099	26,145	26,145		
<u>윤</u>	b							
Š	d							
38	e							
<u>=</u>	f	All other program service re	venue					
Program Serwce Revenue			L					
	g 3	<b>Total.</b> Add lines 2a-2f.  Investment income (including)			26,145			
		and other similar amounts)			722,586			722,58
	4	Income from investment of tax-ex	empt bond p	roceeds .				
	5	Royalties		(u) Danaanal				
	6a	(1) Rea	32,050	(II) Personal				
	ь	Less rental	0					
	c	expenses Rental income	32,050					
	d	or (loss)  Net rental income or (loss)			32,050		25,797	6,25
		(ı) Securi		(II) Other				
	7a	Gross amount from sales of 1, assets other	656,544					
	b	than inventory Less cost or	+					
	"		020,244					
	С		636,300					
	d	Net gain or (loss)			636,300			636,30
an.	8a	Gross income from fundraisi events (not including \$	ng					
Other Revenue		of contributions reported on See Part IV, line 18						
her	Ь	Less direct expenses .	a _ b					
₹	c	Net income or (loss) from fu		vents 🛌				
	9a	Gross income from gaming a See Part IV, line 19	.					
		Local direct expenses	a h					
	1	Less direct expenses .  Net income or (loss) from ga		ities				
		Gross sales of inventory, les	_	- ' <b>F</b>				
		returns and allowances .	L					
	h	Lace cost of goods cold	a					
	1	Less cost of goods sold .  Net income or (loss) from sa	_	ntory 🛌				
	_	Miscellaneous Revenue		Business Code				
	11a							
	ь							
	С							
	d	All other revenue	·					
	e	<b>Total.</b> Add lines 11a-11d		🛌				
	12	Total revenue. See Instruct	ions	🕨	4.724.156	36 145	3F 707	1 205 12
	1			1	4,/24.1561	26,145	25,797	1,365,1

#### Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizati	ons must comp	lete column (A )	
	Check if Schedule O contains a response or note to any line in this				<u>.</u> .
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	( <b>A</b> ) Total expenses	( <b>B</b> ) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	2,200,000	2,200,000		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	390,000	390,000		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	258,779	56,964	139,973	61,842
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	925,043	767,932	125,968	31,143
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	27,380	25,073	2,205	102
9	Other employee benefits	86,319	78,573	5,633	2,113
10	Payroll taxes	89,348	63,973	18,852	6,523
11	Fees for services (non-employees)				
а	Management				
b	Legal	8,570	4,446	4,124	
c	Accounting	26,204	18,762	5,529	1,913
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	280,839	230,846	49,993	
12	Advertising and promotion	20,060	7,979	+3,555	12,081
13	Office expenses	64,331	57,173	5,209	1,949
14	Information technology	379	270	109	1,545
15	Royalties	377	270	103	
16	Occupancy	45,311	37,548	5,768	1,995
17	Travel	83,156	79,932	2,395	829
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	03,130	73,332	2,333	023
19	Conferences, conventions, and meetings	53,382	33,774	13,783	5,825
20	Interest	71,107	51,778	14,361	4,968
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	129,573	111,833	13,180	4,560
23	Insurance	17,946	13,530	3,281	1,135
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	INQUIRY SCIENCE EDUCATI	471,336	471,336		
b	FIRST BORN	136,255	136,255		
С	ANNUAL CONFERENCE	100,558	100,558		
d	EQUIPMENT LEASE & REPAI	29,578	23,552	4,478	1,548
e	All other expenses	7,724	67,843	-66,883	6,764
25	Total functional expenses. Add lines 1 through 24e	5,523,178	5,029,930	347,958	145,290
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	tΧ	Check if Schedule O contains a response or note to any line in this P	art X			
		· · · · · · · · · · · · · · · · · · ·		(A)		(B)
				Beginning of year		End of year
	1	Cash-non-interest-bearing		55,498		87,904
	2	Savings and temporary cash investments		464,638	2	576,594
	3	Pledges and grants receivable, net		525,709	3	468,089
	4	Accounts receivable, net		14,339	4	109,429
	5	Loans and other receivables from current and former officers, directed employees, and highest compensated employees. Complete Part II Schedule L	of		5	
Assets	6	Loans and other receivables from other disqualified persons (as defi 4958(f)(1)), persons described in section 4958(c)(3)(B), and contri and sponsoring organizations of section 501(c)(9) voluntary employ organizations (see instructions) Complete Part II of Schedule L	buting employers		6	
82	7	Notes and loans receivable, net			7	
4	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		32,009	9	10,444
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  10a		·		,
	Ь	Less accumulated depreciation	+	1,470,906	10c	1,357,967
	11	Investments—publicly traded securities		, ,	11	
	12	Investments—other securities See Part IV, line 11		64,341,197	12	72,071,595
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		66,904,296	16	74,682,022
	17	Accounts payable and accrued expenses		102,180		112,958
	18	Grants payable		1,404,380	18	1,097,743
	19	Deferred revenue		53,027	19	197,490
	20	Tax-exempt bond liabilities	•		20	
_	21	Escrow or custodial account liability Complete Part IV of Schedule			21	
lities	22	Loans and other payables to current and former officers, directors, t key employees, highest compensated employees, and disqualified				
Liabilit		persons Complete Part II of Schedule L			22	0
Ï	23	Secured mortgages and notes payable to unrelated third parties .		1,054,449	23	1,038,166
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related thand other liabilities not included on lines 17-24) Complete Part X o				
		D		3,570		3,570
	26	Total liabilities. Add lines 17 through 25		2,617,606	26	2,449,927
ce s		Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and lines 27 through 29, and lines 33 and 34.	d complete			
an I	27	Unrestricted net assets		858,532	27	802,591
න ස	28	Temporarily restricted net assets		20,173,132	28	28,111,998
Ξ	29	Permanently restricted net assets		43,255,026	29	43,317,506
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► complete lines 30 through 34.	┌─ and			
	30	Capital stock or trust principal, or current funds			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31	
As	32	Retained earnings, endowment, accumulated income, or other funds			32	
Net	33	Total net assets or fund balances		64,286,690	33	72,232,095
~	34	Total liabilities and net assets/fund balances		66,904,296	34	74,682,022
						Form 000 (2012)

Day	t XI Reconcilliation of Net Assets			<u>'</u>	age 1
Pai	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		4 -	724,156
2	Total expenses (must equal Part IX, column (A), line 25)	-		7,7	24,130
		2		5,5	523,178
3	Revenue less expenses Subtract line 2 from line 1	3		- 7	799,022
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
_		4		64,2	286,690
5	Net unrealized gains (losses) on investments	5		8,7	744,427
6	Donated services and use of facilities				
7	Investment expenses	6			
,	Threstment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	$\overset{\bullet}{-}$			
-	, and the state of	9			C
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		72.2	232,095
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 🔽
				Yes	No
1	Accounting method used to prepare the Form 990 Cash F Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If Yes, 'check a box below to indicate whether the financial statements for the year were compiled or review	wed on			
	a separate basis, consolidated basis, or both				
_	Separate basis Consolidated basis Both consolidated and separate basis			١	
Ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	it of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	า			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

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SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

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#### **Public Charity Status and Public Support**

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

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

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization LOS ALAMOS NATIONAL LABORATORY FOUNDATION	Employer identification number
	74-2853972
Part I Paggar for Public Charity Status (All arganizations must complete this	nart \ Coo instructions

3972 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) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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). 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). 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 Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated 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 I, Type II, or Type III supporting organization, check this box 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) Yes No and (III) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see	(iv) Is it organization col (i) lis your gove docume	the organization ed in in col (i) of your rning support?		zation of your	(vi) Is the organization in col (i) organized in the US?		(vii) A mount of monetary support	
		instructions))	Yes	No	Yes	No	Yes	No	1	
Total										

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

Provide the following information about the supported organization(s)

11g(iii)

Schedule A (Form 990 or 990-EZ) 2013 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 4,206,078 4,182,222 4,050,056 2,795,011 3,307,075 18,540,442 include any "unusual grants ") 7 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 4,206,078 4,182,222 4,050,056 2,795,011 3,307,075 18,540,442 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 3,892,467 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column Public support. Subtract line 5 14,647,975 from line 4 Section B. Total Support Calendar year (or fiscal year (f) Total (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 **(e)** 2013 beginning in) 🟲 4,206,078 4,182,222 4,050,056 2,795,011 3,307,075 18,540,442 Amounts from line 4 Gross income from interest, dividends, payments received on 1,023,624 1,083,484 892,330 728,839 securities loans, rents, royalties 1,020,620 4,748,897 and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support (Add lines 7 23,289,339 through 10) Gross receipts from related activities, etc (see instructions) 12 12 1,116,538 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and  $\operatorname{stop}$  here  $\ldots\ldots\ldots\ldots\ldots$ Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 62 900 % Public support percentage for 2012 Schedule A, Part II, line 14 15 15 63 410 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box **▶**▽ and **stop here.** The organization qualifies as a publicly supported organization b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

supported organization

instructions

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6 ) ction B. Total Support						
	ndar year (or fiscal year beginning	( ) 2000	(1) 2010	( ) 2011	(1) 2012	( ) 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	( <b>B)</b> 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	<b>(B)</b> 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	<b>(b)</b> 2010	(6) 2011	(4) 2012	(5,232	
9	in)  A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	<b>(b)</b> 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	( <b>b)</b> 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	( <b>b)</b> 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	( <b>b)</b> 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	( <b>b)</b> 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (	on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here  ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization  ic Support Performance (line 8, column ( 2 Schedule A, Paragraphic Performance)  colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or  13, column (f))  ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the second of the secon	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or  13, column (f)) <b>ge</b> by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

<b>Part IV</b> Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).							
	Facts And Circumstances Test						
Retu	ırn Reference	Explanation					
		Schodulo A / Form 000 o	000 E7) 201				

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493316017784

#### OMB No 1545-0047

Open to Public Inspection

#### **SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

**Political Campaign and Lobbying Activities** 

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B

◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-F7, Part V, line 35c (Proxy Tax), then

_0.	ame of the organization IS ALAMOS NATIONAL LABORATORY FOUI	NDATION		Emplo	yer ide	ntification number
	S ALAMOS NATIONAL EABORATORT TOOL	VOALION		74-28	5397	2
aı	rt I-A Complete if the or	ganization is exempt und	er section 501(	c) or is a section	n 52	7 organization.
L	Provide a description of the or	ganızatıon's dırect and ındırect po	olitical campaign ac	tivities in Part IV		
2	Political expenditures				<b>F</b>	\$
3	Volunteer hours					
a	THE: Complete if the or	ganization is exempt und	er section 501 <i>(</i>	c)(3)		
		e tax incurred by the organization			<b>&gt;</b>	<u> </u>
2		e tax incurred by organization ma			<b>.</b>	\$
3		section 4955 tax, did it file Form	_			⊤ Tyes
la	Was a correction made?	ŕ	·			☐ Yes ☐ No
b	If "Yes," describe in Part IV					
a	rt I-C Complete if the or	ganization is exempt und	er section 501(	c), except sect	ion 5	01(c)(3).
L	Enter the amount directly exp	ended by the filing organization fo	r section 527 exem	pt function activities	s 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed t	o other organization	s for section 527	<b>-</b>	\$
3	Total exempt function expend	itures Add lines 1 and 2 Enter h	ere and on Form 112	20-POL, line 17b	•	¢
ļ	Did the filing organization file	Form 1120-POL for this year?				→ — Fyes F No
5	organization made payments	nd employer identification numbe	r (EIN) of all section	i 527 political organ	uzatioi	
	amount of political contributio	ns received that were promptly an political action committee (PAC)	r the amount paid fr nd directly delivered	om the filing organiz to a separate politi	ation's cal org	funds Also enter the janization, such as a
_	amount of political contributio	ns received that were promptly ai	r the amount paid fr nd directly delivered	om the filing organiz to a separate politi	ation's cal org inform d from ion's	funds Also enter the panization, such as a ation in Part IV  (e) A mount of politic contributions receive
	amount of political contributio separate segregated fund or a	ns received that were promptly a political action committee (PAC)	r the amount paid fr nd directly delivered ) If additional space	om the filing organize to a separate politic is needed, provide  (d) A mount pain filing organizate	ation's cal org inform d from ion's	(e) Amount of politic contributions receive and promptly and directly delivered to separate political organization If none
	amount of political contributio separate segregated fund or a	ns received that were promptly a political action committee (PAC)	r the amount paid fr nd directly delivered ) If additional space	om the filing organize to a separate politic is needed, provide  (d) A mount pain filing organizate	ation's cal org inform d from ion's	(e) Amount of politic contributions receive and promptly and directly delivered to separate political organization If none
_	amount of political contributio separate segregated fund or a	ns received that were promptly a political action committee (PAC)	r the amount paid fr nd directly delivered ) If additional space	om the filing organize to a separate politic is needed, provide  (d) A mount pain filing organizate	ation's cal org inform d from ion's	(e) Amount of politic contributions receive and promptly and directly delivered to separate political organization If none
	amount of political contributio separate segregated fund or a	ns received that were promptly a political action committee (PAC)	r the amount paid fr nd directly delivered ) If additional space	om the filing organize to a separate politic is needed, provide  (d) A mount pain filing organizate	ation's cal org inform d from ion's	(e) Amount of politic contributions receive and promptly and directly delivered to separate political organization If none
	amount of political contributio separate segregated fund or a	ns received that were promptly a political action committee (PAC)	r the amount paid fr nd directly delivered ) If additional space	om the filing organize to a separate politic is needed, provide  (d) A mount pain filing organizate	ation's cal org inform d from ion's	(e) Amount of politic contributions receive and promptly and directly delivered to separate political organization If none
	amount of political contributio separate segregated fund or a	ns received that were promptly a political action committee (PAC)	r the amount paid fr nd directly delivered ) If additional space	om the filing organize to a separate politic is needed, provide  (d) A mount pain filing organizate	ation's cal org inform d from ion's	(e) Amount of politic contributions receive and promptly and directly delivered to separate political organization If none
	amount of political contributio separate segregated fund or a	ns received that were promptly a political action committee (PAC)	r the amount paid fr nd directly delivered ) If additional space	om the filing organize to a separate politic is needed, provide  (d) A mount pain filing organizate	ation's cal org inform d from ion's	(e) Amount of politic contributions receive and promptly and directly delivered to separate political organization If none
	amount of political contributio separate segregated fund or a	ns received that were promptly a political action committee (PAC)	r the amount paid fr nd directly delivered ) If additional space	om the filing organize to a separate politic is needed, provide  (d) A mount pain filing organizate	ation's cal org inform d from ion's	(e) Amount of politic contributions receive and promptly and directly delivered to separate political organization If none
	amount of political contributio separate segregated fund or a	ns received that were promptly a political action committee (PAC)	r the amount paid fr nd directly delivered ) If additional space	om the filing organize to a separate politic is needed, provide  (d) A mount pain filing organizate	ation's cal org inform d from ion's	(e) Amount of politic contributions receive and promptly and directly delivered to separate political organization If none

section 4911 tax for this year?

┌ Yes ┌ No

# Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

C	heck	<b>▶</b> □	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN	٧,
			expenses, and share of excess lobbying expenditures)	

B Check ► I if the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)	0	
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	0	
c	Total lobbying expenditures (add lines 1a and 1	b)	0	
d	Other exempt purpose expenditures		5,523,178	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	5,523,178	
f	Lobbying nontaxable amount Enter the amount to	from the following table in both	426,159	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)	106,540	
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -	0	
i	Subtract line 1f from line 1c If zero or less, ente	er -0-	0	
j	If there is an amount other than zero on either lii	ne 1h or line 1i, did the organization file Form 472	0 reporting	

# 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expe	nditures During 4	l-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	( <b>d)</b> 2013	<b>(e)</b> Total
2a	Lobbying nontaxable amount	437,220	512,717	433,892	426,159	1,809,988
ь 	Lobbying ceiling amount (150% of line 2a, column(e))					2,714,982
_c	Total lobbying expenditures					
d	Grassroots nontaxable amount	109,305	128,179	108,473	106,540	452,497
е 	Grassroots ceiling amount (150% of line 2d, column (e))					678,746
f	Grassroots lobbying expenditures				lula C (Farma 200 d	

	Part II-B Complete if the organization is exempt under section filed Form 5768 (election under section 501(h)).					
For e	r each "Yes" response to lines 1a through 1ı below, provide in Part IV a detailed descri	ption of the lobbying	(8	a)	(1	b)
	tivity.		Yes	No	Amo	ount
1 a	legislation, including any attempt to influence public opinion on a legislative r through the use of					
b c	b Paid staff or management (include compensation in expenses reported on line	es 1c through 1ı)?				
d	d Mailings to members, legislators, or the public?					
e	e Publications, or published or broadcast statements?					
f	f Grants to other organizations for lobbying purposes?					
g	<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislati	ive body?				
h i		ımılar means?				
j	•			1		
2a	<b>.</b>	on 501(c)(3)?				
b						
C	, , , , , , , , , , , , , , , , , , , ,			İ		
	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for	-				
Par	art III-A Complete if the organization is exempt under section 501(c)(6).	on 501(c)(4), section 5	01(c	)(5), c	or sect	ion
	301(0)(0).				Ye	s No
1	Were substantially all (90% or more) dues received nondeductible by membe	rs?		Г	1	111
2					2	
3					3	
Pai	art III-B Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 a line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not inclease for which the section 527(f) tax was paid).	lude amounts of political	20			
a	•		2a			
b			2b 2c			
с 3		a saction 163(a) duas	3			
4						
•	does the organization agree to carryover to the reasonable estimate of nonde political expenditure next year?	•	4			
5	, , , , , , , , , , , , , , , , , , , ,		5			
P	Part IV Supplemental Information					
	Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line Part II-B, line 1 Also, complete this part for any additional information	e 5, Part II-A (affiliated grou	p lıst),	Part II	-A , line	2, and
	Return Reference Explanation					

201104410 0 (101111 330 01 330 12) 2013		i age <del>-i</del>
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	

Schedule D (Form 990) 2013

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#### DLN: 93493316017784

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

**Supplemental Financial Statements** 

Open to Public

Ciriai	Ticacing Scivice			Inspection
	me of the organization ALAMOS NATIONAL LABORATORY FOUNDATION			oloyer identification number
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990			
		(a) Donor advised funds		(b) Funds and other accounts
•	Total number at end of year			
2	Aggregate contributions to (during year)			
}	Aggregate grants from (during year)			
ļ	Aggregate value at end of year			
•	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or		nor adv	Yes No
•	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benef conferring impermissible private benefit?			
Pa i	rt II Conservation Easements. Complete if	the organization answered "Yes"	to Forn	n 990, Part IV, line 7.
2	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education)  Preservation of a Preservation of a	certifie	ically important land area d historic structure n of a conservation
	easement on the last day of the tax year			
_	Total number of conservation easements		1	Held at the End of the Year
a b	Total acreage restricted by conservation easements		2a 2b	
	Number of conservation easements on a certified histo	oric structure included in (a)	2D 2c	
c d	Number of conservation easements included in (c) acq	• •	20	
u	historic structure listed in the National Register		2d	
•	Number of conservation easements modified, transferr	ed, released, extinguished, or terminal	tea by tr	ie organization during
	the tax year ▶			
ļ	Number of states where property subject to conservati	ion easement is located 🟲		
•	Does the organization have a written policy regarding t enforcement of the conservation easements it holds?	the periodic monitoring, inspection, hai	ndling of	Fviolations, and Yes No
;	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ements o	during the year
	<u> </u>			
,	Amount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easemen	ts durın	g the year
	<b>▶</b> \$			
3	Does each conservation easement reported on line 2(of and section 170(h)(4)(B)(II)?	d) above satisfy the requirements of se	ection 1	70(h)(4)(B)(ı)
)	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financia		
ar	Complete if the organization answered "Y	s of Art, Historical Treasures, 'es" to Form 990, Part IV, line 8.	, or Ot	her Similar Assets.
a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education	, or rese	arch in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ts held for public exhibition, education		
	(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$
	(ii) Assets included in Form 990, Part X			<b>▶</b> \$
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS			· -
а	Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$
ь				
_	Assets included in Form 990, Part X			<b>▶</b> \$

Part 1	Organizations Maintaining Control	llections of Art,	Histo	rical Trea	sures, or O	<u>ther</u>	<u>Similar Ass</u>	ets (cor	ntınued)
	Jsing the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, chec	k any of the f	following that a	re a s	ignificant use o	ofits	
аГ	Public exhibition		dΓ	_ Loan or e	xchange progra	ams			
ьΓ	Scholarly research		е Г	Other					
сΓ	<ul> <li>Preservation for future generations</li> </ul>								
	Provide a description of the organization's c Part XIII	ollections and explai	n how tl	hey further th	ie organization	's exe	mpt purpose ın		
	During the year, did the organization solicit								<b>-</b>
Part	assets to be sold to raise funds rather than  IV Escrow and Custodial Arrang			<del>-</del>				Yes	No_
Part	Part IV, line 9, or reported an ar					л те	3 נט רטוווו אי	,0,	
	s the organization an agent, trustee, custod ncluded on Form 990, Part X?					ets no		Yes	┌ No
<b>b</b> I	f "Yes," explain the arrangement in Part XI $$	II and complete the	followin	g table	_				
					-		Amo	ount	
c [	Beginning balance				<u> </u>	1c			
	Additions during the year				-	1d			
_	Distributions during the year				-	1e			
f [	Ending balance					1f			
<b>2a</b> [	Old the organization include an amount on F	orm 990, Part X, line	21?				Г	Yes	□ No
<b>b</b> I	f "Yes," explain the arrangement in Part XI	II Check here if the	explana	ation has bee	n provided in P	art X	III		Г
Part	V Endowment Funds. Complete								
4	)	(a)Current year 61,484,811	( <b>b</b> )Prio	or year <b>b (c</b> 56,804,907	Two years back 60,460,344	<b>(d)</b> Th	ree years back (	e)Four yea	ars back 3,694,337
	Beginning of year balance	62,480	•	71,416	87,176		65,418	40	75,123
	Contributions	02,400		71,410	67,170		03,418		73,123
<b>c</b> N	Net investment earnings, gains, and losses	9,241,984		6,184,834	-2,081,282		5,911,469	7	7,919,893
d G	Grants or scholarships	1,813,100		1,576,346	1,661,331		1,711,288		38,000
a	Other expenditures for facilities and programs								
	Administrative expenses	60.076.175		-1 404 044	FC 004 007		60.460.344		
_	End of year balance	68,976,175		51,484,811	56,804,907		60,460,344	56	5,651,353
<b>2</b> P	Provide the estimated percentage of the cur	rent year end balanc	e (line 1	1g, column (a	i)) held as				
a E	Board designated or quasi-endowment 🕨								
<b>b</b> P	Permanent endowment ► 62 800 %								
	Femporarily restricted endowment ► 37 The percentages in lines 2a, 2b, and 2c sho	200 % uld equal 100%							
	Are there endowment funds not in the posse	ssion of the organiza	ition tha	it are held an	d administered	for th	ne		
	organization by (i) unrelated organizations						3a(i)	Yes Yes	No
_	(ii) related organizations		• •			•	3a(i		N o
•	f "Yes" to 3a(II), are the related organization		· · I on Sch	edule R? .		٠. ٠	3b	<u> </u>	
	Describe in Part XIII the intended uses of t								
Part	VI Land, Buildings, and Equipme		he orga	anızatıon ar	nswered 'Yes'	to F	orm 990, Par	t IV, lın	
	11a. See Form 990, Part X, line	10.							
		10.		(a) Cost or othe pasis (investmen			(c) Accumulated depreciation	( <b>d</b> ) Boo	ok value
	11a. See Form 990, Part X, line					r)		( <b>d</b> ) Boo	
1a La	11a. See Form 990, Part X, line  Description of property				nt) basis (othe	r) .711			ok value
<b>1a</b> La <b>b</b> Bu	Description of property	10. · · · · · · · · · · · · · · · · · · ·			basis (othe	r) .711	depreciation		ok value 165,711
<b>1a</b> La <b>b</b> Bu <b>c</b> Le	11a. See Form 990, Part X, line  Description of property  and	10. 			basis (othe	711 .813	depreciation	1	ok value 165,711
1a La b Bu c Le d Eq e Ot	11a. See Form 990, Part X, line  Description of property  and		·	asis (investmer	165, 1,308, 401, 220,	711 .813 .251	depreciation	1	165,711 ,115,397

Part VII Investments—Other Securities. Comp See Form 990, Part X, line 12.	lete if the organization a	answered 'Yes' to Form 990, Part IV, line 11b
(a) Description of security or category (including name of security)	<b>(b)</b> Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		Cost of end-of-year market value
(2)Closely-held equity interests		
(3)Other		
(A) GENERAL ENDOWMENT POOL MANAGED BY THE U	72.071.505	_
OF CALIFORNIA	72,071,595	F F
Total. (Column (b) must equal Form 990. Part X. col. (B) line 12.)	72.071.505	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)  Part VIII  Investments—Program Related. Com	72,071,595	
See Form 990, Part X, line 13.	ipiete ii tile organization	ranswered les to form 990, Part IV, line 1.
(a) Description of investment	( <b>b)</b> Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)  Part IX Other Assets. Complete if the organization a	enswered 'Ves' to Form 990	] , Part IV, line 11d See Form 990, Part X, line 15
(a) Description		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)		
Part X Other Liabilities. Complete if the organ	ızatıon answered 'Yes' to	Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25.  (a) Description of liability	(b) Book value	
-	(b) Book value	
Federal income taxes	2.570	
SECURITY DEPOSIT	3,570	
+		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	3,570	o organization of financial electromate that

Par		Revenue per Audited Financial Stat Wered 'Yes' to Form 990, Part IV, line 1		nts Wit	th Revenue <sub> </sub>	per R	l <b>eturn</b> Complete if
1		er support per audited financial statements				1	13,468,583
2	A mounts included on line 1 bu	ut not on Form 990, Part VIII, line 12					
а	Net unrealized gains on inves	tments	2a		8,744,427		
b	Donated services and use of f	acılıtıes	2b				
c	Recoveries of prior year grant	s	2c				
d	Other (Describe in Part XIII )		2d			1	
e	Add lines <b>2a</b> through <b>2d</b> .	2e	8,744,427				
3	Subtract line <b>2e</b> from line <b>1</b> .	3	4,724,156				
4	A mounts included on Form 99	0, Part VIII, line 12, but not on line <b>1</b>					
а	Investment expenses not inc	uded on Form 990, Part VIII, line 7b .	4a				
b	Other (Describe in Part XIII )		4b				
c	Add lines <b>4a</b> and <b>4b</b>		·	·		4c	0
5	Total revenue Add lines 3 and	d <b>4c.</b> (This must equal Form 990, Part I, line	12)			5	4,724,156
Part		xpenses per Audited Financial Sta			ith Expense:	s per	Return. Complete
		nswered 'Yes' to Form 990, Part IV, line or audited financial statements				1	T 5 522 170
1			•			<u> </u>	5,523,178
2		ut not on Form 990, Part IX, line 25	1	. 1			
a		acılıtıes	2a	-		1	
b			2b	-		-	
С .			20	_		_	
d	·	)	<b>2</b> d				
e	-		•	• • •		2e	5.532.170
3						3	5,523,178
4		0, Part IX, line 25, but not on line 1:	1 .	1			
a	·	uded on Form 990, Part VIII, line 7b	_	+		-	
b	`	)	4b	<u> </u>			
_ C						4c	0
5	·	nd <b>4c.</b> (This must equal Form 990, Part I, lir	ne 18	)	· · · ·	5	5,523,178
Prov Part		r Part II, lines 3, 5, and 9, Part III, lines 1a , lines 2d and 4b, and Part XII, lines 2d and					de any additional
	Return Reference	Explanation					
PART	V, LINE 4	EDUCATIONAL ENRICHMENT ENDOWM SUPPORT IN THE NM COUNTIES IN TH THE OTHER FOUR ENDOWMENTS ALL P TO COLLEGE STUDENTS IN ONE TO FO	E VIC ROVI	INITY O DE COM	F LOS ALAMOS PETITIVELY A	SNAT	IONAL LABORATORY
PART	X, LINE 2	THE INCOME TAX FOOTNOTE CONTAI (ASC 740) IT THEN STATES AS OF DE REVIEW OF ITS MATERIAL TAX POSITI MEASUREMENT STANDARDS ESTABLIS FOUNDATION QUALIFIED AS A TAX EX THE IRC AND DID NOT IDENTIFY ANY MEET THE MORE-LIKELY-THAN-NOT T	CEMB ONS I SHED I (EMPT ENTIT	ER 31, 2 IN ACCO BY GAAP ORGAN Y LEVEL	013, THE FOU RDANCE WITH AS A RESULT IZATION UND	NDAT I REC OF T ER SE	ION PERFORMED A OGNITION AND HIS REVIEW, THE CTION 501(C)(3)OF

•	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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DLN: 93493316017784

OMB No 1545-0047

Schedule I

(Form 990)

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

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

Department of the Treasury Internal Revenue Service	► Informatio		► Attach to Form 990 orm 990) and its instruct	ions is at <u>www.irs.gov/</u>	form990.		pen to Public Inspection
Name of the organization LOS ALAMOS NATIONAL LABORA						Employer identificati	on number
LOS ALAMOS NATIONAL LABORA	TORY FOUNDATION					74-2853972	
Part I General Information	on on Grants and	l Assistance					
<ul> <li>Does the organization maintain the selection criteria used to a</li> <li>Describe in Part IV the organization</li> </ul>	ward the grants or as ation's procedures fo	sistance <sup>?</sup> r monitoring the use o	f grant funds in the Unite	ed States			√ Yes ┌
<b>Part II Grants and Other A</b> Form 990, Part IV, lin				e <b>United States.</b> Cor art II can be duplicate			es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
2 Enter total number of section 5		=	ed in the line 1 table .			· <b>,</b> _	10

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, lii	ne 22
	Part III can be duplicated if additional space is needed.	

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIPS WERE AWARDED TO NORTHERN NEW MEXICO HIGH SCHOOL STUDENTS TO ATTEND THE COLLEGE OF THEIR CHOICE MOST AWARDS ARE MULTI-YEAR AWARDS	263	390,000			

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
· · · · · · · - <b>/</b> · · -	ALL GRANTS AWARDED TO INDIVIDUALS ARE SCHOLARSHIPS THROUGH THE SCHOLARSHIP PROGRAM THE CHECK IS WRITTEN ON THE UNIVERSIY/COLLEGE NAME WITH INFORMATION ON THE MEMO SO THEY CAN IDENTIFY THE STUDENT AND IT IS AWARDED TO COVER TUITION

#### Software ID: Software Version:

**EIN:** 74-2853972

Name: LOS ALAMOS NATIONAL LABORATORY FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (c) IRC Code (e) A mount of (f) Method of (a) Name and address of **(b)** EIN (d) Amount of (g) Description of (h) Purpose of grant cash grant valuation non-cash orassistance organization section non-cash or government ıf applıcable assistance (book, FMV, assistance appraisal, other) PENASCO 85-6000427 NM PUBLIC 29,217 PROVIDE A HANDS-SCHOOLS INDEPENDENT ON SCIENCE SCHOOLS INSTRUCTION AND PO BOX 520 SUPPORT TO PENASCO, NM 87553 ELEMENTARY SCHOOL STUDENTS IN THEIR CLASSROOM THIS PROJECT WILL CREATE AND ESTABLISH A BUSINESS/MARKETING/TECHNOLOGY/ENGINEERING PROGRAM THAT WILL HELP THE PENASCO SCHOOL DISTRICT ADDRESS CRITICAL PUBLIC EDUCATION NEEDS FOLLOWING THE STEM (SCIENCE TECHNOLOGY ENGINEERING MATH) GUIDELINES THE PROGRAM WILL BE DESIGNED TO OFFER RELEVANT CLASS OFFERINGS IN THE CONTENT AREAS OF BUSINESS/MARKETING/TECHNOLOGY/ENGINEERING THAT WILL PROPERLY ADDRESS THE NEEDS FOR IMPLEMENTING THE STEM GUIDELINES ALL STUDENTS (9TH, 10TH, 11TH AND 12TH GRADES) AT PENASCO HIGH SCHOOL WILL BE GIVEN THE OPPORTUNITY TO ENROLL IN THESE STEM BASED CONTENT AREA CLASSES THE

COMING SCHOOL
YEAR IN OFFERING
THESE STEM BASED
COURSES, THE
SCHOOL DISTRICT IS
LOOKING INTO
HIRING AN
ADDITIONAL

INSTRUCTOR THAT IS
HIGHLY EFFECTIVE
AND QUALIFIED TO
IMPLEMENT AND
PROVIDE THE
NECESSARY
INSTRUCTION TO

HELP

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
POJOAQUE VALLEY SCHOOLS 1574 STATE ROAD 502 SANTA FE,NM 87506	85-0166355	NM PUBLIC SCHOOLS	235,565				PVS WANTS TO CONTINUE TO EXPAND THE INQUIRY BASE SCIENCE PROGRAM INTO OUR MIDDLE SCHOOL CURRICULUM FURTHERMORE, WE WANT TO EXPAND ON GETTING SMART PROJECTORS WITH MOBILE IPADS FOR ALL GRADE LEVELS 1-5 WE WOULD LIKE TWO TEACHERS TO BECOME SMART TECH CERTIFIED SO THAT OTHER TEACHERS CAN LEARN FROM THEM ON HOW TO INTEGRATE TECHNOLOGY WITH THE CURRICULUM THE PROJECT IS 3 FOLD FIRST WE WILL CONTRACT FOR DR TIM KANOLD (FORMER SUPERINTENDENT AND DIRECTOR OF MATHEMATICS AT ADLAI E STEVENSON HSD 125) OF SOLUTIONTREE TO WORK WITH SECONDARY MATH TEACHERS TO DEVELOP COMMON ASSESSMENTS LINKED TO THE COMMON CORE STATE STANDARDS AND PARCC ASSESSMENTS, CREATE PERFORMANCE TASKS, CHECKLISTS, AND RUBRICS AND USE FORMAL AND INFORMAL ASSESSMENT TOOLS TO IMPROVE INSTRUCTION AND EVALUATE MASTERY OF THE CCSS			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
JEMEZ MOUNTAIN SCHOOLS PO BOX 230 GALINA,NM 87017	85-0170973	NM PUBLIC SCHOOLS	21,913				THE STUDENTS AT JEMEZ ARE ENTERING INTO A HIGH/TECH PROGRAM THE DISTRICT IS GOING TEXTLESS ALL CURRICULUM, LESSON PLANS, ASSIGNMENTS ETC WILL BE ONLINE STUDENTS WILL HAVE ACCESS TO A LAPTOP, WILL BE ABLE TO DOWNLOAD INFORMATION FROM THE CLOUD IN MATH, SCIENCE, LANGUAGE ARTS ETC TEACHERS WILL BE ABLE TO USE RESOURCES THAT WOULD OTHERWISE BE UNAVAILABLE				

Form 990,Schedule I, Par	t II, Grants an	d Other Assistance	to Governments	and Organization	s in the United Sta	ites	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MESA VISTA CONSOLIDATED SCHOOLS PO BOX 6 EL RITO,NM 87530	85-0198946	NM PUBLIC SCHOOLS	42,000				MESA VISTA CONSOLIDATED SCHOOLS WILL BEGIN ITS FOURTH YEAR WITH THE ISEC INQUIRY BASED SCIENCE PROGRAM, WHICH UTILIZES SCIENCE KITS DESIGNED AROUND THEMATIC UNITS THE PURPOSE OF THE KITS IS TO PROVIDE HANDS-ON LEARNING OPPORTUNITIES AND CURRICULUM CONCEPTS/SKILLS IN THE AREAS OF SCIENCE AND LITERACY AS A DISTRICT, MESA VISTA HAS A VERY TIGHT BUDGET THIS MAKES IT DIFFICULT TO PROVIDE SUPPLIES AND MATERIALS FOR HANDS-ON LEARNING, ESPECIALLY SCIENCE MATERIALS, WHICH CAN BE COSTLY OUR STUDENTS NEED OPPORTUNITIES TO SEE HOW SCIENCE APPLIES TO "REAL WORLD" SITUATIONS, AND LITERACY IS CRITICAL TO THE ACADEMIC SUCCESS OF ALL STUDENTS WE HOPE TO SEE IMPROVEMENTS IN OUR ACHIEVEMENT TESTS THE KITS WILL BE TAUGHT BY ALL TEACHES TO ALL K-8 STUDENTS AT OJO CALIENTE AND EL RITO ELEMENTARY AND MESA VISTA MIDDLE SCHOOL WE ARE HOPING TO BE ABLE TO PROVIDE SOME ADDITIONAL ENRICHMENT EXPERIENCES IN 2013-2014

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
RIO RANCHO PUBLIC SCHOOLS 500 LASER ROAD NE RIO RANCHO,NM 87124	85-0414272	NM PUBLIC SCHOOLS	60,261				THIS PROJECT ADDRESSES THREE SPECIFIC DISTRICT NEEDS FIRST, THE SCIENCE RESEARCH EXPO WHICH IS FOUNDED ON RESEARCH AND INQUIRY ARE CRITICAL TO THE SUCCESS TO OF THE SCIENCE PROGRAMS AT RRPS THIS PROJECT SEEKS TO PROVIDE EDUCATIONAL MATERIALS, CALSSROOM RESOURCES, STUDENT RECOGNITION AWARDS, AND STIPENDS FOR TEACHER SUPPORT OF EXPO, AND TRANSPORTATION AND LODGING COSTS FOR STUDENTS COMPETING SECONDLY, THE IMPLEMENTATION OF COMMON CORE STATE STANDARDS PROVIDES US WITH AN OPPORTUNITY AND A CHALLANCE TEACHERS NEED TRAINING IN DESIGNING ASSESSMENTS THAT MEASURE TH ENEW STANDARDS PROVIDES US WITH AN OPPORTUNITY AND A CHALLANCE TEACHERS NEED TRAINING IN DESIGNING ASSESSMENTS THAT MEASURE TH ENEW STANDARDS PROVIDES US WITH AN OPPORTUNITY AND A CHALLANCE TEACHERS NEED TRAINING IN DESIGNING ASSESSMENTS THAT MEASURE TH ENEW STANDARDS PROVECESS OF THE IMPLEMENTATION FINALLY, MIDDLE SCHOOL SCIENCE PROGRAM HAVE RECURRING MATERIAL AND SUPPLIES COST THAT NEED SUPPORT AND THE NEW CCSS DEMAND STUDENTS UNDERSTAND HOW TO USE GRAPHING CALCULATORS WE DO NOT HAVE ENOUGH CALCULATORS FOR REGULAR USE BY HIGH SCHOOL MATH CLASSES	

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
CHAMA VALLEY INDEPENDENT SCHOOLS PO DRAWER 10 TIERRA AMARILLA, NM 87575	85-0194573	NM PUBLIC SCHOOLS					CHAMA VALLEY SCHOOLS REQUESTS \$6,391 00 TO PROVIDE IDEAL NEW MEXICO ONLINE COURSES TO EXPAND EDUCATIONAL OPPORTUNITIES, CLOSE ACHIEVEMENT GAPS, SUPPORT COLLEGE AND CAREER GOALS, PREPARE STUDENTS FOR A GLOBAL ECONOMY, AND INCREASE DIGITAL LITERACY THROUGH ONLINE CLASSES DUE TO THE RURAL ASPECT OF THE SCHOOL DISTRICT AND THE LIMITED ENROLLMENT, THE DISTRICT DOES NOT HAVE THE NECESSARY STAFFING AND RESOURCES TO PROVIDE ALL THE COURSE WORK TO PREPARE STUDENTS FOR POST- SECONDARY EDUCATION AND CAREERS	

Form 990,Schedule I, Part	II, Grants an	d Other Assistance	e to Governments	and Organizations	s in the United Sta	ites	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BERNALILLO PUBLIC SCHOOLS 224 N CAMINO DEL PUEBLO BERNALILLO,NM 87004	85-6000791	NM PUBLIC SCHOOLS	15,522				THE LANL FOUNDATION HAS BEEN INSTRUMENTAL IN THE DEVELOPMENT OF OUR STEM SISTERS PROGRAM SEVERAL STUDIES HAVE REVEALED THAT FEMALE MINORITY STUDENTS ARE CHOOSING NOT TO TAKE STEM COURSES AND PURSUE STEM CAREERS OUR PROGRAM TARGETS 7TH AND 8TH GRADE FEMALE STUDENTS TRANSITIONING TO OUR LOCAL HIGH SCHOOL THIS YEAR, WE EXPANDED THE PROGRAM TO INCLUDE PREVIOUS STEM SISTER PARTICIPANTS WHO ARE NOW IN 9TH AND 10TH GRADE THESE HIGH SCHOOL STEM SISTERS RECEIVE ACADEMIC COUNSELING AND SERVE AS MENTORS TO OUR CURRENT 8TH GRADE COHORT ONE OF THE GOALS OF STEM SISTERS IS TO BUILD KEY PRE- REQUISITE MATH AND SCIENCE SKILLS NECESSARY TO BE SUCCESSEUL IN STEM BASED COURSES PARTICIPANTS ALSO BESUCCESSEUL AND EXPOSE STEM SISTERS TO ACTIVITIES THAT PREPARE THEM FOR THE FUTURE

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANTA FE PUBLIC SCHOOLS 610 ALTA VISTA SANTA FE,NM 87505	85-6000169	NM PUBLIC SCHOOLS					THE ISEC HANDS-ON SCIENCE BASED INQUIRY INITIATIVE WILL ENTER ITS FOURTH YEAR WITH COHORT IV SCHOOLS SFPS WOULD LIKE TO ADD RAMIREZ THOMAS, EL DORADO, CAPSHAW MIDDLE SCHOOL, ORTIZ MIDDLE SCHOOL, AND DE VARGAS MIDDLE SCHOOL FUNDS WILL SUPPORT AN SLC AT THE ADDITIONAL ELEMENTARY SCHOOLS ALONG WITH TRAINING AND PROFESSIONAL DEVELOPMENT THIS WILL BRING THE TOTAL NUMBER OF STUDENTS SERVED BY THIS INITIATIVE TO APPROXIMATELY 5,200 AND SUPPORT ABOUT 130 TEACHERS THE DESIRED OUTCOME IS TO INCREASE STUDENT ACHIEVEMENT IN SCIENCE, MATH, LITERACY AND WRITING

Form 990,Schedule I, Pa	irt II, Grants a	nd Other Assistanc	e to Governments	s and Organization	ns in the United St	ates	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable		(e) A mount of non- cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEMEZ VALLEY PUBLIC SCHOOLS 8501 HIGHWAY 4 JEMEZ PUEBLO, NM 87024	85-6003713	NM PUBLIC SCHOOLS	1 ' 1				JEMEZ VALLEY PUBLIC SCHOOLS REQUESTS \$84,913 TO FUND A PARTIAL FTE FOR A SYSTEMS MANAGER TO OVERSEE THE USE OF TECHNOLOGY FOR INSTRUCTION AND ASSESSMENT K-12, EMPLOYEE TRAINING, AND SUPPLIES/MATERIALS TO SUPPORT MATH, SCIENCE AND TECHNOLOGY PROGRAMS FUNDING WOULD BENEFIT 350 STUDENTS AND PROFESSIONAL DEVELOPMENT FOR 34 TEACHERS AND 4 ADMINISTRATORS

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DLN: 93493316017784

OMB No 1545-0047

#### Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

**Compensation Information** For certain Officers, Directors, Trustees, Key Employees, and Highest

**Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Name of the organization LOS ALAMOS NATIONAL LABORATORY FOUNDATION

**Employer identification number** 

74-2853972

Pa	rt I	Questions Regarding Compensation					
						Yes	No
La				ny of the following to or for a person listed in Form vide any relevant information regarding these items			
		First-class or charter travel	$\Gamma$	Housing allowance or residence for personal use			
	Γ.	Travel for companions	$\sqcap$	Payments for business use of personal residence			
	Γ.	Tax idemnification and gross-up payments	$\vdash$	Health or social club dues or initiation fees			
		Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b		y of the boxes in line 1a are checked, did the orga bursement or provision of all of the expenses desc			1b		
2		the organization require substantiation prior to reinctors, trustees, officers, including the CEO/Execut			2		
3	orga	cate which, if any, of the following the filing organiz nization's CEO/Executive Director Check all that I by a related organization to establish compensati	appl	•			
	<u>~</u>	Compensation committee	$\sqcap$	Written employment contract			
	Γ.	Independent compensation consultant	굣	Compensation survey or study			
	<b>▽</b>	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4		ng the year, did any person listed in Form 990, Pai related organization	rt VII	I, Section A, line 1a with respect to the filing organization			
а	Rece	eive a severance payment or change-of-control pa	ymer	nt?	4a		Νo
b	Part	icipate in, or receive payment from, a supplementa	Inon	nqualified retirement plan?	4b		No
С		icipate in, or receive payment from, an equity-base			4c		No
		es" to any of lines 4a-c, list the persons and provi		•			
	Only	501(c)(3) and 501(c)(4) organizations only must	com	plete lines 5-9.			
5		persons listed in Form 990, Part VII, Section A, lin pensation contingent on the revenues of	ne 1 a	a, did the organization pay or accrue any			
а	The	organization?			5a		No
b	Any	related organization?			5b		No
	If"Y	es," to line 5a or 5b, describe in Part III					
5		persons listed in Form 990, Part VII, Section A, lin pensation contingent on the net earnings of	ne 1a	a, did the organization pay or accrue any			
а	The	organization?			6a		No
b	Any	related organization?			6b		No
	If"Y	es," to line 6a or 6b, describe in Part III					
7		persons listed in Form 990, Part VII, Section A, lir nents not described in lines 5 and 6? If "Yes," des			7		No
3	subje	•		accured pursuant to a contract that was ations section 53 4958-4(a)(3)? If "Yes," describe			
		art III			8		Νo
9		es" to line 8, did the organization also follow the re	ebutt	able presumption procedure described in Regulations			

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)SUSAN HERRERA CEO	(i) (ii)	129,798 0	1,015 0	0 0	6,751 0	17,042 0	154,606 0	o 0

Schedule J (Form 990) 2013

#### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Return Reference Explanation

Schedule J (Form 990) 2013

DLN: 93493316017784

OMB No 1545-0047

**SCHEDULE M** (Form 990)

## **Noncash Contributions**

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

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

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

Inspection **Employer identification number** 

LOS A	ALAMOS NATIONAL LABORATORY FOUNDAT							
Ds	rt I Types of Property				74-2853972			
		(a) Check ıf applıcable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	( <b>d</b> Method of d noncash contrib	- etermı		ts
	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
-	goods							
7								
7 8	Boats and planes  Intellectual property							
9	Securities—Publicly traded .	×	2	25,018	EM\/			
10	Securities—Closely held stock .	<del>-</del>		23,010				
	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
	Qualified conservation							
	contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxıdermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	O ther ▶ ()							
26	O ther ▶()							
27	O ther ▶()							
28	O ther ► ()				<u> </u>			
29	Number of Forms 8283 received for which the organization comple				29			
				'	-		Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	erty reported in Part I, lines	1 through 28, that			
	ıt must hold for at least three ye	ars from th	e date of the initial contribu	ition, and which is not requi	red to be used			
	for exempt purposes for the enti	re holding p	period?			30a		No
ь	If "Yes," describe the arrangeme	ent in Part 1	II					
31	Does the organization have a gif			review of any non-standard	contributions?	31		No
32a	Does the organization hire or us		ies or related organizations	to solicit, process, or sell	noncash 	22-		NI =
p.	If "Yes," describe in Part II				-	32a		No
33		an amount	: ın column (c) for a type of	property for which column (	a) is checked,			
	describe in Part II					1		

**Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

named of items i.e.	served, or a combination of both. Also complete this part for any additional information.
Return Reference	Explanation
PART I. COLUMN (B)	THE NUMBER OF CONTRIBUTORS IS LISTED

Schedule M (Form 990) (2013)

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DLN: 93493316017784

OMB No 1545-0047

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#### **SCHEDULE 0** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

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

Name of the organization LOS ALAMOS NATIONAL LABORATORY FOUNDATION **Employer identification number** 

74-2853972

#### 990 Schedule O. Supplemental Information

990 Schedule O, Supplemental Information										
Return Reference	Explanation									
FORM 990, PART III, LINE 2										
FORM 990, PART VI, SECTION B, LINE 11	A DRAFT IS SENT BY EMAIL TO ALL BOARD MEMBERS FOR THEIR INFORMATION AND OPTIONAL REVIEW B ASED ON RECOMMENDATIONS FROM THE FINANCE COMMITTEE AND ANY INPUT FROM OTHER BOARD MEMBERS, THE BOARD APPROVES THE FORM 990 AND THE TREASURER IS AUTHORIZED TO SIGN IT ON BEHALF OF T HE BOARD									
FORM 990, PART VI, SECTION B, LINE 12C	AN ANNUAL REVIEW IS MADE BY THE BOARD OF THE CONFLICT OF INTEREST POLICY AND MEMBERS ARE R EQUIRED TO DISCLOSE ANY CONFLICTS OF INTEREST IF THEY ARISE DURING THE YEAR									
FORM 990, PART VI, SECTION B, LINE 15	IN CONSULTATION WITH THE CEO, THE EXECUTIVE COMMITTEE WILL ESTABLISH ANNUAL PERFORMANCE GO ALS FOR THE CEO THE EXECUTIVE COMMITTEE WILL EVALUATE THE ANNUAL PERFORMANCE OF THE CEO THE EXECUTIVE COMMITTEE WILL REVIEW THE CEO'S PERFORMANCE SELF ASSESSMENT AND PROVIDE INPU T TO THE PRESIDENT WHO WILL DEVELOP THE ANNUAL PERFORMANCE EVALUATION RESULTS OF THE PERF ORMANCE EVALUATION WILL BE USED BY THE EXECUTIVE COMMITTEE TO SET ANNUAL COMPENSATION, INC LUDING SALARY AND BONUS CONSIDERATIONS IN A GIVEN YEAR, WHEN THE BOARD APPROVES A CEO INC ENTIVE BONUS POOL, IT WILL BE PERFORMANCE BASED THE ORGANIZATION COMPLETES AN ANNUAL SURV EY OF REGIONAL FOUNDATIONS' STAFF SALARIES AND COMPARES IT WITH COF ANNUAL SURVEY ON COMPE NSATION, WHEN DETERMINING STAFF'S COMPENSATION EXECUTIVE COMMITTEE MEMBERS ALL REVIEWED A ND DETERMINED COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES OF THE ORGANIZATION DATA WA S DRAWN FROM COMPARABLE ORGANIZATIONS									
FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSI TE. THE CONFLICT OF INTEREST POLICY IS AVAILABLE UPON REQUEST									
FORM 990, PART VI, SECTION A, 1A	DELEGATION OF BROAD AUTHORITY THERE ARE A NUMBER OF COMMITTEES THAT ARE GIVEN BROAD AUTHO RITY UNDER THE FOUNDATION'S BY LAWS THE EXECUTIVE COMMITTEE INCLUDES ALL OFFICERS - PRESID ENT, VICE-PRESIDENT, TREASURER, SECRETARY AND PAST-PRESIDENT OTHER COMMITTEES PROVIDED AR E THE FINANCE COMMITTEE, THE AUDIT COMMITTEE AND THE NOMINATION COMMITTEE ALL MEMBERS OF THESE COMMITTEES ARE VOTING BOARD MEMBERS EXCEPT FOR THE FINANCE COMMITTEE THAT HAS A VOTI NG MEMBER THAT IS NOT A BOARD MEMBER									
FORM 990, PART XII, LINE 2C	SELECTION OF INDEPENDENT ACCOUNTANT THE PROCESS FOR SELECTION AND OVERSIGHT OF THE INDEPE NDENT ACCOUNTANT HAS NOT CHANGED DURING THE TAX YEAR									

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Open to Public Inspection

# **Related Organizations and Unrelated Partnerships**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. 

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

Department of the Treasury Internal Revenue Service

(Form 990)

**SCHEDULE R** 

Name of the organization LOS ALAMOS NATIONAL LABORATORY FOUNDATION

**Employer identification number** 

74-2853972

(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets		<b>(f)</b> Direct controlling entity		
.) BUILDING EQUITY LLC 112 PLAZA DEL NORTE SPANOLA, NM 87532 0-8699677	OPERATE BUILDING OCCUPIED BY FOUNDATION & ONE OTHER TENANT	NM	124,669	1,290,687	LANL FOUN	NDATION		
Part II Identification of Related Tax-Exempt Organior more related tax-exempt organizations during	izations Complete if the tax year.	he organization ai	nswered "Yes"	on Form 990, Pa	rt IV, lır	ne 34 because it	had o	ne
<b>(a)</b> Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sec	(e) tion Public charity s (if section 501(	status c)(3))	<b>(f)</b> Direct controlling entity	Section (13) c	
							Yes	No
For Panerwork Reduction Act Notice see the Instructions for Form 990		Cat No. 501	2EV			Schedule R (Form	2000)	2013

Part III	<b>Identification of Related Org</b> because it had one or more rela						ation ansv	vered "Ye	es" on	Form	990, Part	IV, lu	ne 34	ļ
	<b>(a)</b> Name, address, and EIN of related organization		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	entity -	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	<b>(f)</b> Share of total income		<b>(h</b> Disprop r allocat	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana parti	ral or	<b>(k)</b> Percentage ownership
						,			Yes	No		Yes	No	
												igspace		
												$\vdash$		
Part IV	<b>Identification of Related Org</b> line 34 because it had one or mo	ore related organız							wered	d "Yes				IV,
Na	( <b>a)</b> ame, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)		<b>(d)</b> Direct controllin entity	(e) Type of entit (C corp, S corp, or trust)	y Share of income	total Share	(g) e of end- -year ssets		(h) ercentage wnership	Section (b) (continue)	i) on 512 (13) rolled city?	No.
							1			-	ĺ	Yes	•	No
												l		

Part	Transactions With Related Organizations Complete if the organization answer	red "Yes" on Form	n 990, Part IV, line	34, 35b, or 36.							
N <sub>1</sub>	ote. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Y	es	No				
<b>1</b> Duri	ng the tax year, did the orgranization engage in any of the following transactions with one or more rel	ated organizations li	sted in Parts II-IV?								
a R	eceipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a						
<b>b</b> G	ıft, grant, or capıtal contribution to related organization(s)				1b						
<b>c</b> G	ift, grant, or capital contribution from related organization(s)				1c						
<b>d</b> L	pans or loan guarantees to or for related organization(s)				1d						
e L	pans or loan guarantees by related organization(s)				1e						
<b>f</b> D	f Dividends from related organization(s)										
<b>g</b> S	· · · · · · · · · · · · · · · · · · ·										
<b>h</b> P	h Purchase of assets from related organization(s)										
i E>	i Exchange of assets with related organization(s)										
j Lease of facilities, equipment, or other assets to related organization(s)											
k Lease of facilities, equipment, or other assets from related organization(s)											
l Performance of services or membership or fundraising solicitations for related organization(s)											
<b>m</b> Pe	<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)										
n Sh	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)										
<b>o</b> S	haring of paid employees with related organization(s)				10						
<b>p</b> R	eımbursement paıd to related organızatıon(s) for expenses				1p						
<b>q</b> R	eımbursement paıd by related organızatıon(s) for expenses				1q						
r 0	ther transfer of cash or property to related organization(s)				1r						
<b>s</b> 0	ther transfer of cash or property from related organization(s)				1s						
<b>2</b> If	the answer to any of the above is "Yes," see the instructions for information on who must complete  (a)										
	Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	<b>(d)</b> Method of determining amou	unt invo	olved					
-											

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

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	( <b>h)</b> Disproprtiona allocations <sup>7</sup>	_	(i) Code V <sup>2</sup> UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
													_
			<u> </u>				l					<u> </u>	

Schedule R (Form 990) 2013

### Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013