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Department of the Tieasury 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)

OMB No 1545-0047

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

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

Open to Public Inspection

| <u> </u> | or the | 2013 calendar year, or tax year beginning JUL 1, 2013 and | ending J | UN 30, 2014 | |
|--------------------------------|-----------------------------|--|----------------|------------------------------|-----------------------------------|
| Во | heck if oplicable | C Name of organization | | D Employer identific | cation number |
| | Addres change | NEW MEXICO BOYS AND GIRLS RANCHES, INC | C | | |
| 느 | Name change Initial | | | | 125610 |
| <u> </u> | _return | , | Room/suite | E Telephone number | |
| ⊨ | Termin- ated Amend | 0209 RENDRIA NE | | 1 | 881-3363 |
| \vdash | Jreturn Applica | City or town, state or province, country, and ZIP or toreign postal code | | G Gross receipts \$ | 3,059,374. |
| <u> </u> | _tion pending | ALBOQUERQUE, NM 8/110 | | H(a) Is this a group re | |
| | | F Name and address of principal officer ROBERT WALLACE | | for subordinates | |
| | | SAME AS C ABOVE mpt status | or 527 | H(b) Are all subordinates in | |
| | | mpt status X 501(c)(3) 501(c) () ((insert no.) 4947(a)(1) c e: ► WWW.THERANCHES.ORG | 01 [] 327 | H(c) Group exemption | list (see instructions) |
| | | organization: X Corporation Trust Association Other | I Vear | | State of legal domicile: NM |
| _ | | Summary | [L Icai | Orionnation. 1944 W | 1 State of legal doffficile, 1414 |
| | | Briefly describe the organization's mission or most significant activities: SEE | SCHEDU | ILE O | |
| Governance | | billy describe the organization of most organization is | 0 | | |
| rna | 2 | Check this box 🕨 🔲 if the organization discontinued its operations or dispos | sed of more | than 25% of its net as | sets. |
| ove | 3 1 | Number of voting members of the governing body (Part VI, line 1a) | | 3 | 8 |
| Ğ | 4 1 | Number of independent voting members of the governing body (Part VI, line 1b) | | 4 | 7 |
| Activities & | 5 7 | Total number of individuals employed in calendar year 2013 (Part V, line 2a) | | 5 | 63 |
| Σį | 6 | Fotal number of volunteers (estimate if necessary) | | 6 | 20 |
| Act | 7 a 🤊 | Fotal unrelated business revenue from Part VIII, column (C), line 12 | | 7a | 0. |
| _ | <u>b</u> ! | Net unrelated business taxable income from Form 990-T, line 34 | | 7b | 0. |
| | | ם הכרוינה | า | Prior Year | Current Year |
| Revenue | | Contributions and grants (Part VIII, line 1h) RECEIVED | | 2,662,325. | 2,959,301. |
| | 9 F | Program service revenue (Part VIII, line 2g) nvestment income (Part VIII, column (A), lines 3 and 70 B 1 2 7 115 | 55,450. | 58,652. | |
| Re | 10 | nvestment income (Part VIII, column (A), lines 3 3 4 and Feb 1 2 2015 | ` | 48,939. | 4,950. |
| | 11 (| | | 574,170. | 36,471. 3,059,374. |
| | 12 | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 79) | | 3,340,884. | 3,039,374. |
| | L | Benefits paid to or for members (Part IX, column (A), line 4) | | 0. | 0. |
| w | | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | | 1,859,350. | 1,873,506. |
| Expenses | l | Professional fundraising fees (Part IX, column (A), line 11e) | | 0. | 0. |
| ē. | l | Fotal fundraising expenses (Part IX, column (D), line 25) | 0. | | |
| ũ | l | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 1,780,857. | 1,643,712. |
| | 18 | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | | 3,640,207. | 3,517,218. |
| | 19 1 | Revenue less expenses. Subtract line 18 from line 12 | | <299,323. | > <457,844.> |
| Net Assets or Fund Balances | | | Ве | ginning of Current Year | End of Year |
| Sset | 20 | Total assets (Part X, line 16) | | 5,923,430. | 5,478,461. |
| et A | 21 | Total liabilities (Part X, line 26) | | 71,561. | 84,436. |
| | | Net assets or fund balances Subtract line 21 from line 20 | <u> </u> | 5,851,869. | 5,394,025. |
| | art II | Signature Block | | | |
| | | lties of perjury, I declare that I have examined this return, including accompanying schedule t, and complete Declaration of prepared other than officer) is based on all information of wi | | | y knowleage and belief, it is |
| uue, | Correc | t, and complete degraration of prepares other than officer) is based on an information of wi | ilich preparei | | 7/1/ |
| Ci- | _ | Signature of officer | | | 1/15 |
| Sig: | 1 | ROBERT WALLACE, TREASURER | | | |
| 1101 | ۱ ا | Type or print name and title | | | |
| | | Print/Type preparer's name Preparer's signature | -+- | Date Check | PTIN |
| Paid | ı | STEPHANIE J CATASCA, CPA | 11. | -1/20/20 Sett-employ | P00003026 |
| | arer | Firm's name ATKINSON & CO., LTD. | ,,, | Firm's EIN | 85-0211867 |
| | Only | Firm's address P.O. BOX 25246 | | | (|
| | | ALBUQUERQUE, NM 87125 | | Phone no. 50 | 5-843-6492 |
| May | the IF | S discuss this return with the preparer shown above? (see instructions) | | • | X Yes No |
| 3320 | 01 10-29 | 2-13 LHA For Paperwork Reduction Act Notice, see the separate instruction | ons. | | Form 990 (2013) |

| | 1990 (2013) NEW MEXICO BOYS AND GIRLS RANCHES, INC. 85-0125610 Page 2 |
|-----|--|
| Pa | rt III Statement of Program Service Accomplishments |
| | Check if Schedule O contains a response or note to any line in this Part III |
| 1 | Briefly describe the organization's mission |
| | A NON-PROFIT ORGANIZATION THAT OPERATES MULTI-DENOMINATIONAL CHRISTIAN |
| | HOMES FOR CHILDREN FROM TROUBLED BACKGROUNDS, AND PROVIDES SERVICES |
| | · · · · · · · · · · · · · · · · · · · |
| | FOR STRUGGLING CHILDREN. SEE ATTACHMENT REGARDING PROGRAM INFORMATION. |
| | |
| 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 |
| 4 - | |
| 4a | (Code) (Expenses \$2, 380, 267. including grants of \$) (Revenue \$) |
| | CARE OF CHILDREN, HOUSING, RECREATION, WORK THERAPY, AND EDUCATION WERE |
| | PROVIDED BY NEW MEXICO BOYS AND GIRLS RANCHES, INC. |
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| 4b | (Code) (Expenses \$224,858. including grants of \$) (Revenue \$36,904.) |
| | FOSTER CARE, ADOPTION SERVICES AND COUNSELING FOR FAMILIES, CHILDREN |
| | AND UNWED MOTHERS WERE PROVIDED BY FAMILIES FOR CHILDREN. |
| | THE CHINE HOLLING WELL THOUSED BY THE THE TON CHILDREN. |
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| 4c | (Code) (Expenses \$ |
| | ADMINISTRATION OF PROGRAMS, RESIDENTIAL CARE, COMMUNITY PROGRAMS, |
| | COMMUNITY EDUCATION AND AGRICULTURE. |
| | |
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| | |
| | Other program services (Describe in Schedule O.) |
| | Other program services (Describe in Schedule O) |
| | (Expenses \$ including grants of \$) (Revenue \$) |
| | |

| | | | 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_ | Х | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | Х | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | | | |
| | public office? If "Yes," complete Schedule C, Part I | 3 | | X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect | | | |
| _ | during the tax year? If "Yes," complete Schedule C, Part II | 4 | | X |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | _ | | ٠,, |
| _ | similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | X |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | | | v |
| - | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | Х |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | - | | v |
| 0 | | 7 | | Х |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | | | Х |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for | 8_ | | |
| 9 | amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? | | | |
| | If "Yes," complete Schedule D, Part IV | 9 | | х |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent | - | _ | |
| | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | х | |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X | F.?" | | 1 33 |
| | as applicable | 12 | Property, y | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | 15.28h U* | 4 4 | |
| | Part VI | 11a | х | |
| b | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | Х |
| С | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | Х |
| đ | 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 | Х | |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | | X |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | Х | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | | |
| | Schedule D, Parts XI and XII | 12a | | Х |
| þ | Was the organization included in consolidated, independent audited financial statements for the tax year? If "You " and if the organization appropriate and the language of the propriate of the organization appropriate of the language of the organization appropriate of the language of the language of the organization appropriate of the language of | 40: | _v | |
| 40 | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | X | v |
| 13 14a | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States? | 13 14a | | X |
| b | | 144 | | |
| | 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 | | х |
| 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 | | | <u></u> - |
| | foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | х |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | | | |
| | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | Х |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | | | |
| | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | | X |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | | | |
| | 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | ļ | Х |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | | | |
| | complete Schedule G, Part III | 19 | | X |
| | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | Х |
| <u>b</u> | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | <u> </u> |
| | | C 0 | മരവ | 100401 |

| | • | | Yes | No |
|-----|---|------|---|-----------|
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | | | |
| | government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | | X |
| 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 | | X |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current | İ | | |
| | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | | | |
| | Schedule J | 23 | | X |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the | | | İ |
| | 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 | | _X_ |
| 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 | <u></u> | X |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and | | | |
| | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete | | | |
| | Schedule L, Part I | 25b | | X |
| 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 | | _X_ |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial | | | |
| | contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member | | | |
| | of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | _X_ |
| 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): | " | 61 | ** |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | _X_ |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | <u>X</u> |
| . C | An entity_of which a current_or former officer, director, trustee, or key employee (or a family member thereof) was an officer, | | - | |
| | director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | X |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | | | |
| | contributions? If "Yes," complete Schedule M | 30 | | <u> X</u> |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? | | | |
| | If "Yes," complete Schedule N, Part I | 31 | | <u>X</u> |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | | |
| | Schedule N, Part II | 32 | | _X_ |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | |
| | sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I | 33 | | _X_ |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | | | |
| 0.5 | Part V, line 1 | 34 | _X_ | |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | <u>X</u> |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | | | |
| 26 | 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? | | | 37 |
| 27 | If "Yes," complete Schedule R, Part V, line 2 | 36_ | | <u> X</u> |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | 77 |
| 20 | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | <u> </u> |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O | | v | |
| | Note: Air our 330 mais are required to complete Scriedule O | 38 | S S S S S S S S S S S S S S S S S S S | 2013) |
| | | LOIM | 33U (| ZU 13) |

| Second Comparison Seco | | Check if Schedule O contains a response or note to any line in this Part V | | | |
|---|----------|---|----------|-----|--------------|
| 1s Enter the number reported in Box 3 of Form 1056 Enter 0- In not applicable by Enter the number of Forms W202 included in init in a Enter 0- in it not applicable by Enter the number of Forms W202 included in init in a Enter 0- in it not applicable payments to vendors and reportable garming (garmhing) within your within the year covered by this return (garmhing) within your within it is not the calendar year ending within or within the year covered by this return (field for the calendar year ending within or within the year covered by this return (field for the calendar year ending within or within the year covered by this return (field for the calendar year ending within or within the year covered by this return (field for the calendar year ending within or within the year covered by this return (field for the calendar year ending within or within the year covered by this return (field for the calendar year ending within or within the year covered by this return (field for the calendar year ending within or within the year covered by this return (field for the calendar year ending within or within the year of the organization field in the year of the year | | | | Yes | No |
| b Enter the number of Forms W23 included in line 1a. Enter 0-fi not applicable | 1a | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable | l | | |
| a Enter the number of employees inported on Form W3. Transmittal of Wage and Tax Statements. **Refed for the calendar year ending with or within the year covered by this return **Refed for the calendar year ending with or within the year covered by this return **Note. If the sum or lines 1 and 2 is greater than 250, you may be required to e-fife (see instructions) **3a Dot the organization have unrelated business gross income of \$1,000 or more during the year? **3a I A Tarny time during the calendar year, did the organization in 17%, to fine 98, power/dea energination in Schedule O **1a** 14** 14** 14** 14** 14** 14** 14* | _ | | 1 | | |
| 2a Earlet the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, led for the calendar year ending with or within the year covered by this return. b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If 'Yes,' has it filed a Form 990 f1 or this year? If 'No, ' to line 3b, provide an explanation in Schedule 0 at A1 any time during the calendar year, did the organization have an interest in, or a signature or their authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If 'Yes,' there the name of the foreign country (such as a bank account, securities account, or other financial account)? b If 'Yes,' to line 5a or 5b, did the organization that it was or is a party to a prohibited than shelter transaction? c If 'Yes,' to line 5a or 5b, did the organization that it was or is a party to a prohibited that shelter transaction? c If 'Yes,' to line 5a or 5b, did the organization that it was or is a party to a prohibited that where not tax deductible as charitable contributions? b If 'Yes,' to line 5a or 5b, did the organization that it was or is a party to a prohibited that where not tax deductible as charitable contributions under section 170(c). a bid the organization include with every solicitation an appress attainment that such contributions or gifts were not tax deductible? b If 'Yes,' to line 5a or 5b, did the organization include with every solicitation and party to goods and services provided to the payor? b If 'Yes,' to line 828? d If 'Yes,' indicate the number of Forms 8288 ted dumng the year b If 'Yes,' thindcate the number of Forms 8288 ted dumng the year b If the organization received and contribution of cars, boats, applicat | С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | 1 | | |
| 2a Earlet the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, led for the calendar year ending with or within the year covered by this return. b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If 'Yes,' has it filed a Form 990 f1 or this year? If 'No, ' to line 3b, provide an explanation in Schedule 0 at A1 any time during the calendar year, did the organization have an interest in, or a signature or their authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If 'Yes,' there the name of the foreign country (such as a bank account, securities account, or other financial account)? b If 'Yes,' to line 5a or 5b, did the organization that it was or is a party to a prohibited than shelter transaction? c If 'Yes,' to line 5a or 5b, did the organization that it was or is a party to a prohibited that shelter transaction? c If 'Yes,' to line 5a or 5b, did the organization that it was or is a party to a prohibited that where not tax deductible as charitable contributions? b If 'Yes,' to line 5a or 5b, did the organization that it was or is a party to a prohibited that where not tax deductible as charitable contributions under section 170(c). a bid the organization include with every solicitation an appress attainment that such contributions or gifts were not tax deductible? b If 'Yes,' to line 5a or 5b, did the organization include with every solicitation and party to goods and services provided to the payor? b If 'Yes,' to line 828? d If 'Yes,' indicate the number of Forms 8288 ted dumng the year b If 'Yes,' thindcate the number of Forms 8288 ted dumng the year b If the organization received and contribution of cars, boats, applicat | | (gambling) winnings to prize winners? | 1c | Х | |
| filed for the calendary year endring with or within the year covered by this return Note. If the sum of lanes 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Dot the organization have unrelated business gross in come of \$1,000 or more during the year? 3b If 1'Yes, 1's at filed a Form 950 F1 or this year? I'Ne, 1's time 8, provide an explanation on Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly? 4b If 1'Yes, 1're the thin and of the foreign country, level as a bank account, so cribe, provide an explanation on Schedule O 5b Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charatable contributions? 6c Was If Yes, 1'did the organization include with every solicitation an express statement that such contributions or grits were not tax deductible as charatable contributions? 6c Was If Yes, 1'did the organization receive a payment in excess of \$75 made partly as a contribution of ordinary to goods and services provided to the payor? 7c Organizations that may receive deductible contributions under section 170(c). 8d If Yes, 1'did the organization receive a symmetria received to the Form 8282? 9d If Yes, 1'did the organization received a contribution of great years and partly for goods and services provided to the payor? 7c Visc, 1'did the organization received and payment in excess of \$75 made partly as a centribution and partly for goods and services provided to the | 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, | | | |
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| b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | | | 44= | | v |
| | | | | | <u> </u> |
| | <u> </u> | ii res, has it lieu a ronn 720 to report these payments? Il ivo, provide an explanation in Schedule U | • | 990 | (2012) |

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

| | Check if Schedule O contains a response or note to any line in this Part VI | | | X | | | | | | | |
|------------|--|---------|----------|----------|--|--|--|--|--|--|--|
| Sec | tion A. Governing Body and Management | | | | | | | | | | |
| | | | Yes | No | | | | | | | |
| 1a | Enter the number of voting members of the governing body at the end of the tax year 1a 8 | | | | | | | | | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing | | | 6 | | | | | | | |
| | body delegated broad authority to an executive committee or similar committee, explain in Schedule 0. | | | * | | | | | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent . 1b 7 | | | | | | | | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other | | | | | | | | | | |
| | officer, director, trustee, or key employee? | | | | | | | | | | |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision | | | | | | | | | | |
| | of officers, directors, or trustees, or key employees to a management company or other person? | 3 | | X | | | | | | | |
| 4 | | | | | | | | | | | |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | <u> </u> | | | | | | | |
| 6 | Did the organization have members or stockholders? | 6 | | X | | | | | | | |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or | | | | | | | | | | |
| | more members of the governing body? | 7a | | <u>X</u> | | | | | | | |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or | | | | | | | | | | |
| | persons other than the governing body? | 7b | | X | | | | | | | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | 2 | | | | | | | | | |
| а | The governing body? | 8a | _X_ | | | | | | | | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | <u> </u> | | | | | | | | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the | | | | | | | | | | |
| | organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | i | _X_ | | | | | | | |
| <u>Sec</u> | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) | | . , | | | | | | | | |
| | | | Yes | No | | | | | | | |
| | Did the organization have local chapters, branches, or affiliates? | 10a | | <u> </u> | | | | | | | |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, | | | | | | | | | | |
| | and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | | | | | | | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | Х | | | | | | | | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | ** | | | | | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | X | | | | | | | | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Х | | | | | | | | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe | | ٠, | | | | | | | | |
| 40 | In Schedule O how this was done | 12c | X | | | | | | | | |
| 13 | Did the organization have a written whistleblower policy? | 13 | Х | 37 | | | | | | | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | | <u>X</u> | | | | | | | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent | | | | | | | | | | |
| _ | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | - | V | | | | | | | |
| | The organization's CEO, Executive Director, or top management official | 15a | | X | | | | | | | |
| b | Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | 15b | | <u>X</u> | | | | | | | |
| 16- | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a | | | | | | | | | | |
| ·va | taxable entity during the year? | 160 | ľ | v | | | | | | | |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation | 16a | | _X | | | | | | | |
| _ | In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's | | | | | | | | | | |
| | exempt status with respect to such arrangements? | 16b | İ | | | | | | | | |
| Sec | tion C. Disclosure | ion | | | | | | | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed ►NM | | | | | | | | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a | vailah | Α. | | | | | | | | |
| | for public inspection. Indicate how you made these available. Check all that apply | - unau | | | | | | | | | |
| | Own website Another's website X Upon request Other (explain in Schedule O) | | | | | | | | | | |
| 19 | Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and | i finan | cıal | | | | | | | | |
| | statements available to the public during the tax year. | (4) | | | | | | | | | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organizat | ion 🕨 | | | | | | | | | |
| | ROBERT WALLACE - 505-881-3363 | | | | | | | | | | |
| | 6209 HENDRIX NE, ALBUQUERQUE, NM 87110 | | | | | | | | | | |
| 332006 | 10-29-13 | Form | 990 | 2013) | | | | | | | |

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

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

| (A) Name and Title | (B) Average hours per | (do | (C) Position (do not check more box, unless person officer and a director | | | | one han | (D) Reportable compensation | (E) Reportable compensation | (F) Estimated amount of |
|--------------------------|--|------------------|---|---------|--------------|---------------------------------|------------|--|--|--|
| | week (list any hours for related organizations below line) | stee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | | from the organization (W-2/1099-MISC) | from related organizations (W-2/1099-MISC) | other compensation from the organization and related organizations |
| (1) MICHAEL A ROMERO | 2.00 | | | | | | | | _ | _ |
| CHAIRMAN | | X | | Х | | _ | | 0. | 0. | 0. |
| (2) WARREN BAUR | 2.00 | | | | | | | _ | | |
| VICE CHAIRMAN | | X | | X | ļ | <u> </u> | | 0. | 0. | 0. |
| (3) WYNONA DAVIS | 2.00 | | | | | | | _ | _ | |
| SECRETARY | | X | | X | _ | <u> </u> | | 0. | 0. | 0. |
| (4) MICHAEL H KULL | 30.00 | | | | | | | | | |
| PRESIDENT | | X | | -X | | _ | | 51,078. | 19;847. | <u>- 2,106.</u> |
| (5) LEO MENDOZA | 2.00 | | | | | | | ; | | |
| DIRECTOR | | X | | | | <u>L</u> . | | 0. | 0. | 0. |
| (6) JON BARELA | 2.00 | | | | | | | | | |
| DIRECTOR | | X | <u> </u> | | | | | 0. | 0. | 0. |
| (7) LINDA YATES | 2.00 | | | | | | | | | |
| DIRECTOR | | X | | | <u> </u> | <u> </u> | | 0. | 0. | 0. |
| (8) DR JACOB MOBERLY | 2.00 | | | | | | | | | |
| DIRECTOR | | X | | | | <u> </u> | | 0. | 0. | |
| (9) ROBERT WALLACE | 30.00 | | | | | | | | | |
| TREAS/PRES OF FOUNDATION | | | | Х | | <u> </u> | | 66,524. | 28,510. | 11,173. |
| (10) NIKKI KULL | 40.00 | | | | | | | | | |
| EXEC VICE PRESIDENT/COO | | | | X | ļ | L. | | 87,893. | 0. | 2,626. |
| (11) HEATH KULL | 40.00 | | | | | | | | | |
| VICE PRESIDENT | | | | X | | | | 77,242. | 0. | 5,167. |
| (12) MICHELLE KULL | 40.00 | | | | | | | _ | | |
| VICE PRESIDENT | | <u> </u> | | X | | <u> </u> | | 64,630. | 0. | <u>5,101.</u> |
| (13) GARY WHITE | 40.00 | l | | | | | | | | |
| ASSOCIATE VICE PRESIDENT | | | | X | | | | 63,846. | 0. | 12,674. |
| | | | | | | | | | | |
| | | | | | | <u> </u> | <u> </u> | | | - |
| | | | | | | | | | | |
| | | <u> </u> | <u> </u> | | _ | <u> </u> | _ | | | |
| | | | | | | | | | | |
| | | | <u> </u> | | <u> </u> | <u> </u> | _ | | | |
| | | | | | | | | | | |
| | | | L | | L | <u>L_</u> | L | | | |
| 222007 10 20 12 | | | | | | | | | | Form 990 (2013) |

332007 10-29-13

Form 990 (2013)

| | | | ' Check if Schedule O conta | ains a response | or note to any lir | ne in this Pa | art VIII | | | <u> </u> |
|--|----------|---|---|--|---|----------------|---|--|---|--|
| 13 | • | | | | | (A Total re |) | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
| nts | 1 | а | Federated campaigns | 1a | | | ٧. | , | | |
| irar our | | b | Membership dues | 1b | | , | | | | |
| Đ, Đ | | С | Fundraising events | 1c | | 1 | | | | |
| ar / | - | | Related organizations | | 949,981. | 1 | | | | |
| S,E | | | Government grants (contributi | | . <u>. </u> | Ì | * | | | |
| <u> </u> | | | All other contributions, gifts, grant | | | 1 | لا م | ` | | |
| Per E | | | similar amounts not included above | 1 1 | 9,320. | | | | | |
| <u>o</u> | | a | Noncash contributions included in lines | | 2 ,020 | <u> </u> | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | | - | Total. Add lines 1a-1f | | | 2,959 | ,301. | | | |
| | | | | | Business Code | | | £: £ | | |
| ĕ | 2 | а | CHILD CARE/ADOP | | 110000 | | ,904. | 36,904. | | |
| ž. | | | AGRICULTURAL PR | | 624100 | 21 | ,748. | 21,748. | | |
| Series | | С | | | | | | | _ | |
| am | | d | | | | | | | | |
| Program Service Revenue | | e | | | | | | | | |
| | | f | All other program service reve | nue | | | | | | |
| | | g | Total. Add lines 2a-2f | | | 58 | ,652. | * * * * * ** | ii i | |
| | 3 | | Investment income (including | dividends, intere | est, and | | | | | |
| | | | other similar amounts) | | > | 1 | ,930. | | | 1,930. |
| | 4 | | Income from investment of tax | k-exempt bond p | roceeds | | | | | |
| | 5 | | Royalties | | | | | | | |
| | | | | (ı) Real | (II) Personal | | | | | |
| | 6 | а | Gross rents | 14,831. | | 2.46 | | | *** | |
| | | þ | Less: rental expenses | 0. | | 244 | i si | A P | د وهي | |
| | | С | Rental income or (loss) | 14,831. | | | Zo . | | % | |
| | | d | Net rental income or (loss) | | | 14 | <u>,831.</u> | | | 14,831. |
| | - 7 | а | Gross amount from sales of | (i) Securities | (ii)-Other - | | 2-14- <u>14-14-</u> | | - | |
| | | | assets other than inventory | | 3,020. | | | | | ** |
| | | b | Less cost or other basis | | | | · . | 1 | | |
| | | | and sales expenses | | 0. | S. 1 : | (6) k | * |) | , |
| | | С | Gain or (loss) | | 3,020. | Ryju: | | i ša ledža. | | . W II |
| | | d | Net gain or (loss) | | | 3 | <u>,020.</u> | | | 3,020. |
| ē | 8 | а | Gross income from fundraising | g events (not | | | | | | |
| en. | | | ıncludıng \$ | of | | | | | | |
| Re | | | contributions reported on line | 1c) See | | 37 33 1 | . 5 8.8 . | | , | |
| Other Revenu | | | Part IV, line 18 | а | | | | | * \$2 | |
| ₹ | | | Less: direct expenses | b | | | Ned??. | | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| | | | Net income or (loss) from fund | - | <u> </u> | | | * | | |
| | 9 | а | Gross income from gaming ac | tivities See | | | | | | |
| | | | Part IV, line 19 | . a | | ł | | | | |
| | | | Less direct expenses | b | L | | i. | | - | |
| | | | Net income or (loss) from gam | _ | | <u> </u> | | - | | |
| | 10 | а | Gross sales of inventory, less | | | | | | | |
| | | | and allowances | а. | | - | | | | |
| | | | Less cost of goods sold | b | | { | | | | 1 |
| | \vdash | C | Net income or (loss) from sale | | Business Code | <u> </u> | | - | | |
| | 44 | _ | Miscellaneous Revenu OTHER REVENUE | <u>e </u> | Business Code 900099 | | ,640. | | | 21 640 |
| | ' ' | | OTHER REVENUE | | 300033 | <u> </u> | , 040. | | | 21,640. |
| | | b | | | | | | - | | - |
| | | d | All other revenue | | | | | | | |
| | | - | Total. Add lines 11a-11d | | | 21 | ,640. | | | |
| | 12 | _ | Total revenue See instructions. | • | | 3,059 | | | 0. | 41,421. |
| 33200 | | | . S.M. 1010 Coo mondonolis. | | | ,,,,,,, | , , , , , , , , , , , , , , , , , , , | | | |

| Sect | ιοη 501(c)(3) and 501(c)(4) organizations must com | olete all columns All oth | er organizations must co | omplete column (A) | |
|----------|--|---------------------------|--|-------------------------------------|--------------------------------|
| | Check if Schedule O contains a respon | | | | |
| | not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to governments and | | | | <u> </u> |
| | organizations in the United States. See Part IV, line 21 | | | | |
| 2 | Grants and other assistance to individuals in | _ | | | |
| | the United States See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to governments, | | | | |
| | organizations, and individuals outside the | | | | |
| | United States See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | 446,119. | 384,441. | 61,678. | |
| 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 | 1,102,274. | 1,041,891. | 60,383. | |
| 8 | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions) | | | 33 | |
| 9 | Other employee benefits | 207,587. | 187,482. | 20,105. | |
| 10 | Payroll taxes | 117,526. | 108,250. | 9,276. | |
| 11 | Fees for services (non-employees) | | | | |
| а | Management | | | | |
| b | Legal | 37,052. | 37,052. | | |
| | Accounting | 14,311. | 14,311. | | |
| d | Lobbying | | *^* ** · · · · · · · · · · · · · · · · · | 483.332 | -,. |
| e | Professional fundraising services. See Part IV, line 17 | | (2) 関係を表するとなった。 | | |
| f | Investment management fees | | | | |
| g | , , , | 27 605 | 26 560 | 1 125 | |
| 40 | column (A) amount, list line 11g expenses on Sch O.) | 37-,695. 3,154. | 36,560. | 1,135 530. | |
| 12 | Advertising and promotion | 100,044. | 2,624. 89,682. | 10,362. | |
| 13 | Office expenses Information technology | 100,044. | 09,002. | 10,362. | |
| 14 | Royalties | . = | | | |
| 15 | Occupancy | 438,671. | 422,179. | 16,492. | |
| 16 17 | Travel | 85,609. | 80,878. | 4,731. | |
| 18 | Payments of travel or entertainment expenses | 05,005. | 00,070. | <u> </u> | |
| 10 | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | | | | · . |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 444,212. | 427,940. | 16,272. | |
| 23 | Insurance | 210,673. | 209,184. | 1,489. | |
| 24 | Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) | , | , | | |
| а | GROCERIES/HOUSEHOLD | 150,045. | 150,045. | | |
| b | TRAINING/RECRUITMENT | 59,308. | 36,054. | 23,254. | |
| c | RECREATION | 30,849. | 30,849. | | |
| d | PROGRAM ACTIVITIES | 29,581. | 29,581. | | · |
| | All other expenses | 2,508. | 2,508. | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 3,517,218. | 3,291,511. | 225,707. | 0 |
| 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) | | | | |

| art / | ^ | Balance Sneet | | | |
|--|----|---|--------------------------|--------------|--------------------|
| | | Check if Schedule O contains a response or note to any line in this Part X | | | |
| | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | 214,027. | 1_ | 353,275 |
| | 2 | Savings and temporary cash investments | | 2 | 10,000 |
| ; | 3 | Pledges and grants receivable, net | | 3 | |
| | 4 | Accounts receivable, net | | -4 | |
| | 5 | Loans and other receivables from current and former officers, directors, | | | |
| | | trustees, key employees, and highest compensated employees. Complete | , | | |
| | | Part II of Schedule L | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined under | | | |
| ŀ | | section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing | * | | |
| | | employers and sponsoring organizations of section 501(c)(9) voluntary | 2 | | |
| 2 | | employees' beneficiary organizations (see instr). Complete Part II of Sch L | | 6 | |
| Assets | 7 | Notes and loans receivable, net | 2,650. | 7 | 3,450 |
| ž į | 8 | Inventories for sale or use | | 8 | |
| | 9 | Prepaid expenses and deferred charges | 14,708. | 9 | 17,696 |
| 10 | 0a | Land, buildings, and equipment: cost or other | | (%) (| 1 € K € K |
| | | basis. Complete Part VI of Schedule D 10a 7,633,477. | | 3,7 2,4,1 | \$ ₅ |
| | b | Less: accumulated depreciation 10b 5,602,958. | 2,344,219. | 10c | 2,030,519 |
| 11 | 1 | Investments - publicly traded securities | 284,305. | 11 | |
| 1: | 2 | Investments · other securities. See Part IV, line 11 | | 12 | |
| 1: | | Investments - program-related See Part IV, line 11 | | 13 | |
| 14 | 4 | Intangible assets | | 14 | |
| 15 | | Other assets. See Part IV, line 11 | 3,063,521. | 15 | 3,063,521 |
| 10 | 6 | Total assets. Add lines 1 through 15 (must equal line 34) | 5,923,430. | 16 | 5,478,461 |
| 1 | 7 | Accounts payable and accrued expenses | 71,561. | 17 | 84,436 |
| 11 | 8 | Grants payable | | 18 | |
| 19 | 9 | Deferred revenue | | 19 | == |
| 20 | 0 | Tax-exempt bond liabilities | | 20 | |
| . 2 | 1 | Escrow or custodial account liability Complete Part IV of Schedule D | | 21 | |
| ဂ္ဂ 2 | 2 | Loans and other payables to current and former officers, directors, trustees, | | | |
| | | key employees, highest compensated employees, and disqualified persons. | | 334 | \$. x \$ |
| | | Complete Part II of Schedule L | | 22 | _ |
| ت ₂ ; | 3 | Secured mortgages and notes payable to unrelated third parties | | 23 | |
| 24 | 4 | Unsecured notes and loans payable to unrelated third parties | | 24 | |
| 2 | 5 | Other liabilities (including federal income tax, payables to related third | | | |
| | | parties, and other liabilities not included on lines 17-24). Complete Part X of | | | |
| | | Schedule D | | 25 | |
| 20 | 6 | Total liabilities. Add lines 17 through 25 | 71,561. | 26 | 84,436 |
| | | Organizations that follow SFAS 117 (ASC 958), check here ▶ X and | | | |
| 2 | | complete lines 27 through 29, and lines 33 and 34. | | ` | ` |
| ž 2 | 7 | Unrestricted net assets | 4,190,869. | 27 | 3,733,025 |
| B 2 | | Temporarily restricted net assets | 1,661,000. | 28 | 1,661,000 |
| 9 2 | 9 | Permanently restricted net assets | | 29 | |
| 5 | | Organizations that do not follow SFAS 117 (ASC 958), check here | | | |
| 5 | | and complete lines 30 through 34. | | | |
| Section of the parameters of t | 0 | Capital stock or trust principal, or current funds | | 30 | |
| 3 | | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| 3: | | Retained earnings, endowment, accumulated income, or other funds | _ | 32 | |
| | 3 | Total net assets or fund balances | 5,851,869. | 33 | 5,394,025 |
| 1.30 | | | 5,923,430. | | 5,478,461 |

Form **990** (2013)

| Form | 1990 (2013) NEW MEXICO BOYS AND GIRLS RANCHES, INC. 85-012 | 5610 | Page 12 | | | | |
|--------------------------------------|--|-------------------------------------|--------------|--|--|--|--|
| Pa | rt XI Reconciliation of Net Assets | | | | | | |
| | . Check if Schedule O contains a response or note to any line in this Part XI | | | | | | |
| 1 2 3 4 5 6 7 8 | Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 3 | 3,059, 3,517, <457, 5,851, | 218. 844. | | | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | | 0. | | | | |
| 10 Pai | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) rt XII Financial Statements and Reporting | 5,394, | 025. | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | \mathbf{x} | | | | |
| | Officer if Confedere Contains a response of note to any line in this fart Air | Ye | | | | | |
| 1 | Accounting method used to prepare the Form 990 Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. | | 1 - 1 | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | 2a | X | | | | |
| b | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? | | | | | | |
| С | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Separate basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, | | | | | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | 2c X | | | | | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | | | | | | |
| За | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit | 2 | A | | | | |
| | Act and OMB-Circular A-133? | 3a | X | | | | |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit | | | | | | |
| | or audits, explain why in Schedule O and describe any steps taken to undergo such audits | 3b | | | | | |

332012 10-29-13 Form **990** (2013)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Inspection

Name of the organization

Employer identification number

| | · | NEW MEX | LICO BOYS AND | GIRL | S RAN | CHES, | INC. | | <u>8</u> | <u>5-0125</u> | <u>610</u> | |
|----------|---|------------------------------|---|--|--------------|-------------|--------------|--------------------------|-----------------------------|---------------|--------------|---------|
| Part I | Reason | for Public Char | r ity Status (All organiz | ations mu | st complet | e this part | :.) See inst | ructions | | | | |
| he organ | iization is not a | a private foundation | because it is: (For lines 1 | 1 through | 11, check | only one.b | ox.) | | | | - | |
| 1 | A church, co | nvention of churche | s, or association of churc | ches desc | ribed in se | ction 170 | (b)(1)(A)(i) |). | | | | |
| 2 | A school des | cribed in section 17 | 70(b)(1)(A)(ii). (Attach Sc | hedule E.) | | | | | | | | |
| з 🔲 | A hospital or | a cooperative hosp | ital service organization o | described | ın section | 170(b)(1) | (A)(iii). | | | | | |
| 4 | A medical res | search organization | operated in conjunction | with a hos | pital desci | nbed in se | ction 170 | (b)(1)(A)(ii | ii). Enter | the hospita | l's nam | ne, |
| | city, and stat | | | | | | | | • | · | | |
| 5 🗌 | An organizati | on operated for the | benefit of a college or ur | niversity ov | wned or op | perated by | a governi | mental uni | t describ | ed in | | |
| | section 170 | (b)(1)(A)(iv). (Compl | ete Part II) | | | | | | | | | |
| 6 | | | ent or governmental unit | | | | | | | | | |
| 7 X | An organizati | on that normally rec | ceives a substantial part o | of its supp | ort from a | governme | ntal unit c | r from the | general | public desc | rıbed ı | n |
| | • | b)(1)(A)(vi). (Comple | <u>-</u> | | | | | | | | | |
| 8 | | | section 170(b)(1)(A)(vi). (| | | | | | | | | |
| 9 📖 | | | ceives (1) more than 33 1 | | | | | | | - | | |
| | | | nctions - subject to certa | | | | | | | - | | |
| | | | axable income (less sect | tion 511 ta | x) from bu | sinesses a | cquired b | y the orga | ınızatıon | after June 3 | 30, 197 | '5. |
| | | 509(a)(2). (Complete | • | | | | | | | | | |
| 10 H | = | = | perated exclusively to tes | - | • | | | • | | | _ | |
| 11 📖 | | = - | perated exclusively for th | | - | | | | • | | | or |
| | | | ations described in section | | | |). See sec | tion 509(| a)(3). Cn | eck the box | tnat | |
| | | | organization and comple | | • | | | | - III - NI- | - £ 4 1 | | |
| _ | a Type I | | | ype III - Fui | • | - | | • | | n-functional | | • |
| e | _ | | at the organization is not than one or more publicly | | - | • | • | | • | • | | n |
| f | | - | | | • | | | | 3(a)(1) Of | section 50s | (a)(2) | |
| ' | | | tten determination from t | ille ino illa | atitis atiy | pe i, Type | ii, oi Type | # 111 | _ | | _ | |
| | - | rganization, check tl | organization accepted ar | w aift or co | ontribution | from any | of the follo | owing nor | cono? | | | |
| g | _ | | directly controls, either al | | | • | | • • | | • | Yes | NI |
| | | - | upported organization? | one or tog | eulei wiii | persons c | iescribeu i | iii (ii) aiiu (| iii) Delow | , 11g(i) | 165 | No |
| | | - • | n described in (i) above? | | | | | | | 11g(ii) | | |
| | | · | person described in (i) o | | | | | | | 11g(iii) | | |
| h | , , | • | about the supported org | . , | | | | | | [119(11) | | |
| •• | , | one wing intermedien | about the supported of | gamzanom | (3). | | | | | | | |
| (i) Name | of supported | (ii) EIN | (iii) Type of organization | (iv) Is the c | rganization | (v) Did you | notify the | (vi) Is | the | (vii) Amoun | of mor | netany |
| | anization | (, | (described on lines 1-9 | in col. (i) lis | sted in your | organizat | ion in col. | organization (i) organiz | on in col. : ed in the ! | 1 | port | iciai y |
| _ | | | | governing | document? | (i) of you | support? | U.S | .? | , | • | |
| | | | (see instructions)) | Yes | No | Yes | No | Yes | No | <u></u> | | |
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| otal | | <u>L</u> | <u> </u> | |] | L | | <u></u> | | | | |

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

Schedule A (Form 990 or 990-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013 NEW MEXICO BOYS AND GIRLS RANCHES, INC. 85-0125610 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III.)

| Sec | tion A. Public Support | | | | | | |
|--------------|---|---------------------------------------|---|------------------------|----------------------|---------------------|-----------|
| Calen | dar year (or fiscal year beginning in) | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
| 1 (| Gifts, grants, contributions, and | | | | • | | |
| ı | membership fees received (Do not | | | | | | |
| ı | nclude any "unusual grants ") | 3329477. | 3013707. | 2351634. | 2662325. | 2959301. | 14316444. |
| 2 | Tax revenues levied for the organ- | | | | | | |
| 1 | zation's benefit and either paid to | | | | | | |
| (| or expended on its behalf | | | | | | |
| 3 | The value of services or facilities | | | | | | |
| f | furnished by a governmental unit to | | | | | | |
| t | the organization without charge | | | | | | |
| 4 . | Total. Add lines 1 through 3 | 3329477. | 3013707. | 2351634. | 2662325. | 2959301. | 14316444. |
| 5 | The portion of total contributions | | | | <u>-</u> | | |
| 1 | by each person (other than a | | | | | | |
| , | governmental unit or publicly | | | | ₹¥ {. | * 2 | |
| : | supported organization) included | • | | | | | |
| (| on line 1 that exceeds 2% of the | • | | | * | | |
| 1 | amount shown on line 11, | | *** | | * | | |
| (| column (f) | 2, 20 | · · | | | • % a | |
| <u>6</u> [| Public support. Subtract line 5 from line 4 | 4 4 2 2 4 | 2 3 M2 | **** | SSEC: | 10. | 14316444. |
| Sec | tion B. Total Support | | | | | | |
| Calen | dar year (or fiscal year beginning in) 📂 | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
| 7 / | Amounts from line 4 | 3329477. | 3013707. | 2351634. | 2662325. | 2959301. | 14316444. |
| 8 (| Gross income from interest, | | | | | | |
| (| dividends, payments received on | | | | : | | |
| : | securities loans, rents, royalties | | | | ļ , | | |
| 7 | and income from similar sources | 471,407. | 410,447. | 642,011. | 563,715. | 16,761. | 2104341. |
| 9 1 | Net income from unrelated business | | | | | | |
| 7 | activities, whether or not the | | | · | | - | |
| ı | business is regularly carried on | | | | | | |
| 10 | Other income Do not include gain | | | | | | |
| (| or loss from the sale of capital | | | | | | |
| 7 | assets (Explain in Part IV) | | X / X.X | | 20 | | |
| 11 | Total support. Add lines 7 through 10 | ' } · } · * : | * ((((((((((| · , · | ** * ** | **** | 16420785. |
| | Gross receipts from related activities, | • | • | | | 12 | |
| 13 | First five years. If the Form 990 is for | r the organization's | s first, second, thir | d, fourth, or fifth ta | ax year as a section | n 501(c)(3) | |
| 500 | organization, check this box and stor | here | roontono | | | <u> </u> | |
| | tion C. Computation of Publ | | | | | · · | 0.7.4.0 |
| | Public support percentage for 2013 (l | | • | column (f)) | | 14 | 87.18 % |
| | Public support percentage from 2012 | | | | | 15 | 85.81 % |
| | 33 1/3% support test - 2013. If the c | = | | | 14 is 33 1/3% or m | nore, check this bo | |
| | stop here. The organization qualifies | | • | • | bar 45 - 00 4/00/ | | ►X |
| | 33 1/3% support test - 2012. If the c | - | | • | line 15 is 33 1/3% | or more, check th | nis box |
| | and stop here. The organization qual | · · · · · · · · · · · · · · · · · · · | · · · · · · · · | | | | |
| | 10% -facts-and-circumstances tes | _ | | | | | |
| | and if the organization meets the "fac- | | | • | · | t iv now the organ | nization |
| | meets the "facts-and-circumstances" | _ | | | • | 170 004 60 45 | 100/ 05 |
| | 10% -facts-and-circumstances tes | - | | | | • | |
| | more, and if the organization meets the | | | | - | | * |
| | organization meets the "facts-and-circ Private foundation. If the organization | | | | | | |
| <u> 10 </u> | rivate iounuation. Il the organizatio | m did not check a | DOX OF THE 13, 10 | a, 100, 17a, 01 17t | | dule A (Form 990 | |

Schedule A (Form 990 or 990 EZ) 2013 NEW MEXICO BOYS AND GIRLS RANCHES, INC. 85-0125610 Page 3 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.)

| Called year year (or fiscal year beginning in) ► (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total membership fees received (IDs not included any Turusual grants?) | Se | ction A. Public Support | | | | | | |
|---|------|--|----------------------|---------------------|---------------------|---------------------|-----------------------|---------------------------------------|
| membership fees recoved (Do not include any nursus) grants ? 2. Gross recopits from admissions, merchandless sold or services performed, or facilities furnished in any activity that is related to the origination's tax exempt purpose of Gross recopits from admissions that are not an unrelated rade or business under section 513 4. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5. The value of services or facilities furnished by a governmental unit to the origination's benefit and either paid to or expended on its behalf 6. Total. Add lines 1 through 5. 7. A mounts included on lines 1.2, and 3 received from disqualified persons by a formation without charge 6. Total. Add lines 1 through 5. 8. A mounts included on lines 1.2, and 3 received from disqualified persons by a formation of the secret from disqualified persons by a for | Cale | ndar year (or fiscal year beginning in) | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
| include any 'unusual grants') 2 Gross receipts from admissions, merchandies sold is services performed, or facilities furnished in any activity that is related to the organization's takevering truphose of a Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues leved for the organization's benefit and either paid to or expended on its behalf or or expended on its behalf or or expended on its behalf or or expended on this behalf or or expended on the behalf or or expended on the behalf or or expended on the behalf or or expended on the behalf or or expended on the behalf or expend | 1 | Gifts, grants, contributions, and | | | | | | |
| 2. Gross receipts from admissions, merchandles sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose of Gross receipts from activities that are not an unrelated trade or business under section 513 4. Tax revenues levied for the organization's behalf 5. The value of services or facilities furnished by a governmental unit to the organization without charge to or expended on its behalf 5. The value of services or facilities furnished by a governmental unit to the organization without charge to the organization without charge to Total. Add lines 1 through 5 7. a Amounts included on lines 1, 2, and 3 received from disqualified persons by monitorial sequence of the organization without charge to the organization without on lines 3 and 3 received from disqualified persons by monitorial sequence of the organization without on lines 3 and 3 received from disqualified persons by monitorial sequence of the organization of the 15 feb year of the organization of the 15 feb year of the organization of the 15 feb year of the organization of the 15 feb year of the organization of the 15 feb year of the organization of the 15 feb year of the organization of the 15 feb year of the 15 feb ye | | membership fees received (Do not | | | i | | | |
| merchandise sold or services performed, or facilities furnished in any activity that is related to the organization of stavewing purpose and activities that are not an unrelated trade or business under section 513 4 Tax reviews leved for the organization's benefit and either paid to or expended on its behalf or expended on its behalf or expended on the behalf or expended on the behalf or expended on the behalf or expended on the behalf or expended on the behalf of the organization without charge 6 Total. Add lines 1 through 5 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 5 The value of services or facilities or the organization without charge 6 Total. Add lines 1 through 5 6 Total. Add lines 1 through 5 7 A Amounts included on lines 1, 2, and 3 received home distributed on lines 1, 2, and 3 received home distributed on lines 1, 2, and 3 received home distributed on lines 2 to 5, 200 or the organization with the disqualified persons by a secretary or the first lives of 5, 200 or the organization of the first lives beginning in 1) and 10 through 5 7 Add lines 1 through 5 8 Public support isstensive lytical through 5 8 Amounts from line 6 10a Gross income from interest, dividendis, payments received on sand income from, payments received on sand income from, payments received on sand income from unrelated business as acquired after June 30, 1975 Add lines 10 and 10b 1 Net income Do not include gain or loss from the sale of capital assets (Epplan in Part IV) 1 Total support (yes lines), 98, 11, and 12; 1 Houstenmone Do not include gain or loss from the sale of capital assets (Epplan in Part IV) 1 Total support percentage for 2013 (line 8, 2, column (f) wided by line 13, column (f) 17 9, 98 1 Houstment income percentage for 2013 fine 16, column fig divided by line 13, column (fig) 17 9, 98 | | include any "unusual grants ") | | | | | | |
| merchandise sold or services performed, or facilities furnished in any activity that is related to the organization of stavewing purpose and activities that are not an unrelated trade or business under section 513 4 Tax reviews leved for the organization's benefit and either paid to or expended on its behalf or expended on its behalf or expended on the behalf or expended on the behalf or expended on the behalf or expended on the behalf or expended on the behalf of the organization without charge 6 Total. Add lines 1 through 5 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 5 The value of services or facilities or the organization without charge 6 Total. Add lines 1 through 5 6 Total. Add lines 1 through 5 7 A Amounts included on lines 1, 2, and 3 received home distributed on lines 1, 2, and 3 received home distributed on lines 1, 2, and 3 received home distributed on lines 2 to 5, 200 or the organization with the disqualified persons by a secretary or the first lives of 5, 200 or the organization of the first lives beginning in 1) and 10 through 5 7 Add lines 1 through 5 8 Public support isstensive lytical through 5 8 Amounts from line 6 10a Gross income from interest, dividendis, payments received on sand income from, payments received on sand income from, payments received on sand income from unrelated business as acquired after June 30, 1975 Add lines 10 and 10b 1 Net income Do not include gain or loss from the sale of capital assets (Epplan in Part IV) 1 Total support (yes lines), 98, 11, and 12; 1 Houstenmone Do not include gain or loss from the sale of capital assets (Epplan in Part IV) 1 Total support percentage for 2013 (line 8, 2, column (f) wided by line 13, column (f) 17 9, 98 1 Houstment income percentage for 2013 fine 16, column fig divided by line 13, column (fig) 17 9, 98 | 2 | Gross receipts from admissions, | | | | | | |
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| Tax revenues levied for the organization benefit and either paid to or expended on its behalf 5. The value of services or facilities furnished by a governmental unit to the organization without charge 6. Total. Add lines 1 through 5. 7a. Amounts included on lines 1, 2, and 3 received from disqualified persons be form disqualified persons. The value of the organization without charge is a second to the organization without charge. 6. Total. Add lines 2 and 3 received from disqualified persons that is associated person of the man disqualified person that is associated person of the man disqualified person that is associated by greate of \$6,000 m to 0 the control of the | 3 | • | | | | | | |
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| 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from disqualified persons but in amount on limit 15 or they are or had amount on limit 15 or they are or had amount on limit 15 or they are or had amount on limit 15 or they are or had amount on limit 15 or they are or had amount on limit 15 or they are or had amount on limit 15 or they are or had amount on limit 15 or they are or had amount on limit 15 or they are or had a security of the security of | | · | | | | | | |
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| line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | | | • | - | | | | |
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| 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions | | | | | | | ~ | ▶ <u></u> |
| | 20 | Private foundation. If the organization | n did not check a | box on line 14, 19 | a, or 19b, check t | this box and see in | structions | ▶ □ |

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| rt IV | Supplemen | ital Infor | mation. | Provide t | the explana | ations requ | GIRLS red by Par | rt II, line 10 | ; Part II, In | ne 17a or | 17b, and F | art III, line 1 | 12 |
|-------|---------------------------------------|--------------|--------------|--------------|---------------|-------------|---------------------|----------------|---------------|-----------|-------------|-----------------|----|
| | Alsò complete | this part fo | r any add | itional info | ormation (| See instruc | tions). | , | ,, | | ., | | |
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SCHEDULE D

Department of the Treasury Internal Revenue Service

Name of the organization

(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

Open to Public

OMB No 1545-0047

Inspection

| Nam | e of the organization | | Em | ployer identification number |
|-----|--|--|-------------|--|
| Da | NEW MEXICO BOYS AN | | | <u>85-0125610</u> |
| Pa | | | r Accol | Jnts. Complete if the |
| | organization answered "Yes" to Form 990, Part IV, lin | | | |
| | - <u>-</u> | (a) Donor advised funds | (b) Fur | nds and other accounts - |
| 1 | Total number at end of year | | | |
| 2 | Aggregate contributions to (during year) | | | |
| 3 | Aggregate grants from (during year) | | | |
| 4 | Aggregate value at end of year | | | |
| 5 | Did the organization inform all donors and donor advisors in | | tunds | |
| _ | are the organization's property, subject to the organization's | | | L Yes No |
| 6 | Did the organization inform all grantees, donors, and donor a | | - | |
| | for charitable purposes and not for the benefit of the donor of impermissible private benefit? | or donor advisor, or for any other purpose cor | nemng | |
| Pa | rt II. Conservation Easements. Complete if the ord | nanization answered "Ves" to Form 990. Part | IV line 7 | Yes No |
| 1 | Purpose(s) of conservation easements held by the organizat | | 14, 1116 7 | |
| • | Preservation of land for public use (e.g., recreation or e | | ically imp | ortant land area |
| | Protection of natural habitat | Preservation of a certified | | |
| | Preservation of open space | Treservation of a certified | a Historic | Structure |
| 2 | Complete lines 2a through 2d if the organization held a quali | fied conservation contribution in the form of a | consen | ation easement on the last |
| _ | day of the tax year | | 2 0011301 ¥ | ation easement on the last |
| | | | 1 | Held at the End of the Tax Year |
| а | Total number of conservation easements | | 2a | 7,000 00 000 000 000 000 000 000 000 000 |
| b | Total acreage restricted by conservation easements | | 2b | |
| С | Number of conservation easements on a certified historic sti | ructure included in (a) | 2c | |
| d | Number of conservation easements included in (c) acquired | after 8/17/06, and not on a historic structure | | |
| | listed in the National Register | | 2d | |
| 3 | Number of conservation easements modified, transferred, re | leased, extinguished, or terminated by the or | ganizatioi | n during the tax |
| | year ▶ | | | |
| 4 | Number of states where property subject to conservation ea | sement is located > | | |
| 5 | Does the organization have a written policy regarding the pe | riodic monitoring, inspection, handling of | | |
| | violations, and enforcement of the conservation easements | t holds? | | Yes No |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, | | - • | |
| 7 | Amount of expenses incurred in monitoring, inspecting, and | - | • | \$ |
| 8 | Does each conservation easement reported on line 2(d) about | ve satisfy the requirements of section 170(h)(| 4)(B)(ı) | |
| | and section 170(h)(4)(B)(ii)? | | | L Yes L No |
| 9 | In Part XIII, describe how the organization reports conservat | | | |
| | include, if applicable, the text of the footnote to the organiza | tion's financial statements that describes the | organiza | tion's accounting for |
| Par | conservation easements rt III Organizations Maintaining Collections o | f Art Historical Traccuras or Othe | or Cimil | or Assets |
| Га | Complete if the organization answered "Yes" to Form | | | ar Assets. |
| 12 | If the organization elected, as permitted under SFAS 116 (AS | | t and half | anno about works of ort |
| ıa | historical treasures, or other similar assets held for public ex | | | |
| | the text of the footnote to its financial statements that descr | | or public | service, provide, in Part Alli, |
| h | If the organization elected, as permitted under SFAS 116 (AS | | d halance | s sheet works of art, bistorical |
| - | treasures, or other similar assets held for public exhibition, e | | | |
| | relating to these items | accention, or recountry in relation of public | 0011100, 1 | storide the fellowing amounts |
| | (i) Revenues included in Form 990, Part VIII, line 1 | | • | \$ |
| | (ii) Assets included in Form 990, Part X | • | • | \$ \$ |
| 2 | If the organization received or held works of art, historical tre | asures, or other similar assets for financial oa | un, provid | ' |
| | the following amounts required to be reported under SFAS 1 | • | | |
| а | Revenues included in Form 990, Part VIII, line 1 | · · · · · · · · · · · · · · · · · · · | > | \$ |
| b | Assets included in Form 990, Part X | | > | \$ |
| | | | | _ |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13

Schedule D (Form 990) 2013

| Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets; connucted | Sche | | ICO BOYS A | | | | | 12561 | | age 2 | |
|---|----------|---|---|--|------------------|---------------|------------------|-----------------------------|--|-------------------|--|
| Check all that apply a Public exhibition d Loan or exchange programs b Scholarly research c Other | Ь | | | | | | | | | | |
| a Public exhabition | 3 | | on, and other record | s, check any of the | ionowing that a | are a sign | mcant use of i | is collectio | n item | 5 | |
| b Scholarly research c | • | ` | | Loop or ove | hanaa nraaran | 20 | | | | | |
| c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year, did the organization solicit or receive donations of air, historical treasures, or other similar assets. 5 During the year, did the organization solicit or receive donations of air, historical treasures, or other similar assets. 5 During the year did the organization solicit or receive donations of air, historical treasures, or other similar assets. 1 During the year did the organization solicit or receive donations of air, historical treasures, or other similar assets. 1 During the year did the organization answered "Yes" to Form 990, Part XI, line 21 2 During the year did the organization and the organization answered "Yes" to Form 990, Part XI did did did did did did did did did di | _ | | | | nange program | 15 | | | | | |
| 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5 Dump the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets. 10 be sold to raise funds rather than to be maintained as part of the organization's collection? 12 In Secrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X. line 21 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X. line 21 1b If "Yes," explain the arrangement in Part XIII and complete the following table 1c | | | е | Ciriei | | | | | | | |
| So During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets. to be solid to arise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV. line 9, or reported an amount on Form 990, Part X, line 21 1a is the organization an agent, incisee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? It is the organization and part X! line 21 1b if "Yes" explain the arrangement in Part XIII and complete the following table 1 | | _ | alloctions and avalou | a how thou further th | ho organization | 'a ayamn | t nurnasa in G | art VIII | | | |
| Dots | _ | | | | | | | ait Aiii | | | |
| Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 1a is the organization an agent, fustee, custodian or other infermediary for contributions or other assets not included on Form 990, Part X? | _3 | | | • | | Sillillar as | ssers. | | |] _{NI} _ | |
| Teported an amount on Form 990, Part X, line 21 1a is the organization an agent, frustese, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Illiand complete the following table C Beginning balance d Additions during the year 1 Ending balance 2a Dot the organization include an amount on Form 990, Part X, line 21? 1b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part X, line 10. [a] Current year (b) From year (c | Par | | | | | on" to En | rm 000 Port IV | | | <u> </u> | |
| 1s is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? | <u> </u> | ·············· | | ite ii tile Organizatio | ii alisweled T | 65 1010 | iiii 990, Fait i | 7, III I C 3, UI | | | |
| on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Distributions during the year f Ending balance 2 Distributions during the year f Ending balance 2 Distributions during the year f Ending balance 2 Distributions during the year f Ending balance 2 Distributions during the year f Ending balance 2 Distributions during the year f Ending balance b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. [a] Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (e) Contributions (for the years back (e) Four years back (for the years back (for | 12 | | | liany for contribution | e or other asse | ate not inc | cluded | | | | |
| b If "Yes," explain the arrangement in Part XIII and complete the following table c Beginning balance d Additions during the year e Distributions during the year 1 | ıa | _ | an or other intermed | nary for contribution | is of other asse | 213 1101 1110 | Jiudea [| | | ا ا | |
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| C Beginning balance 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 | D | it ies, explain the arrangement in Part Air | and complete the to | llowing table | | | | Amoun | | | |
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| Ending balance Find Fin | | | | • | • | • | | | | | |
| Ending balance | | | | | • | | | | | | |
| 2a Did the organization include an amount on Form 990, Part X, line 21? b if "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (d) Three years back (e) Four years back (d) Three years back (d) Three years back (e) Four years back (e) Four years back (e) Four years back (d) Three years back (d) Three years back (e) Four years back (e) Four years back (d) Three years back (d) Three years back (e) Four ye | | | | | | | | | | | |
| Description Part XIII Check here if the explanation has been provided in Part XIII Part XI Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IX, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (b) Three years back (d) Three years back (e) Four years back (d) Three years back (e) Four years ba | 20 | _ | orm 000 Part Y line | 212 | | • • | | Voc | \neg | No | |
| Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (d) Four years back (d) Three years back | | _ | | | provided in De | v+ VIII | · | res | \vdash | 3 NO | |
| (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years (e) Four y | | | | | | | | • | ' | | |
| 1a Beginning of year balance b. Contributions 1,645,867, 6,622,305, 6,720,687, 5,870,243, 5,546,382, 1,661,643, 365,149, 42,325, 672,005, 172,400. 172,400, 172,400, 173,400, 174,400, | | Endownione Lando: Complete | | | | | Three years had | k (a) Four | r voore | hack | |
| b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment ▶ | 40 | Paginning of year halance | | | | | | | | | |
| C Net investment earnings, gains, and losses different earnings, gains, and losses different earnings (a) and programs and programs 1,725,619, 1,551,104, 4,636, 126,513, 45,530, 1,619, 1,725,619, 1,551,104, 1,636, 1,0862, 1,619, 1,619, 1,725,619, 1,551,104, 1,636, 1,0862, 1,619, 1,619, 1,725,619, 1,551,104, 1,636, 1,0862, 1,619, | la L | | | | | | | | | | |
| d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses 9 077, 14,258, 15,506, 10,862, 1,619, g End of year balance 9 077, 14,258, 15,506, 10,862, 1,619, g End of year balance 9 077, 14,258, 15,506, 10,862, 1,619, g End of year balance 9 077, 14,258, 15,506, 10,862, 1,619, g End of year balance 100,000 % 100,0 | D | | | | | | • • • • • | | | | |
| e Other expenditures for facilities and programs f. Administrative expenses g. End of year balance 9,077, 14,258, 15,506, 10,862, 1,619, 9,077, 14,258, 15,506, 10,862, 1,619, 9,077, 14,258, 15,506, 10,862, 1,619, 14,724,406, 4,645,867, 6,622,305, 6,720,687, 5,870,243, 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ 100.00 % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (investment) basis (other) depreciation 1a Land 623,134. 623,134. b Buildings 4,177,092. 3,100,868. 1,076,224. c Leasehold improvements d Equipment 2,823,046. 2,502,090. 320,956. e Other 10,205. 10,205. | C | | 151,592. | 10,225.</td <td>> <120,</td> <td>565.></td> <td>315,81</td> <td>4.</td> <td colspan="3">198,610.</td> | > <120, | 565.> | 315,81 | 4. | 198,610. | | |
| and programs f Administrative expenses g End of year balance 9,077, 14,258, 15,506, 10,862, 1,619, g End of year balance 4,724,406, 4,645,867, 6,622,305, 6,720,687, 5,870,243. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ | a | • | | | | | | _ | | | |
| f Administrative expenses 9,077, 14,258, 15,506, 10,862, 1,619, g End of year balance 4,724,406, 4,645,867, 6,622,305, 6,720,687, 5,870,243, Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ b Permanent endowment ▶ t The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations | е | | | | | | | | | | |
| g End of year balance | _ | | | | | | - | | | | |
| Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ 100.00 % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (ii) related organizations (iii) related organizations (iversition in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land (d) Book value 4, 1777, 092. 3, 100, 868. 1, 076, 224. b Buildings c Leasehold improvements d Equipment 2,823,046. 2,502,090. 320,956. e Other 10,205. | Т | · · · · · · · · · · · · · · · · · · · | | • | | | | | - | | |
| a Board designated or quasi-endowment ► | 9 | • | • | • | • | 305. | 6,720,68 | 7. 5 | <u>.870</u> | 243. | |
| b Permanent endowment ▶ 100.00 % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (investment) basis (investment) 1a Land b Buildings c Leasehold improvements d Equipment 2,823,046.2,502,090.320,956. e Other 10,205. | -2 | | rent year end balanc | | a)) neid as: | - | - | - | - | | |
| Temporarily restricted endowment ► | a | | | _% | | | | | | | |
| The percentages in lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (other) basis (other) 1a Land 623,134. 623,134. 623,134. b Buildings 4,177,092. 3,100,868. 1,076,224. c Leasehold improvements d Equipment 2,823,046. 2,502,090. 320,956. e Other | ь | | | | | | | | | | |
| Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land (d) Book value basis (investment) b Buildings (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 2 (2 (3 (3 (3 (4 (4 (3 (3 (3 (4 (3 (4 (3 (4 (3 (4 (3 (4 (3 (4 (3 (4 (3 (4 (3 (4 (3 (4 (3 (4 (3 (4 (4 (3 (4 (4 (4 (3 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 | С | | | | | | | | | | |
| Yes No (i) unrelated organizations 3a(i) | _ | · · · · · · · · · · · · · · · · · · · | | | | | | | | | |
| (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land (d) Book value 1a Land (d) Book value 623,134. | За | | ssion of the organiza | ation that are held a | nd administere | ed for the | organization | ĺ | · · · · · · | | |
| (ii) related organizations b f "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 | | • | | | | | | [| Yes | | |
| b If "Yes" to 3a(II), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. | | | | | | | | | 77 | <u> </u> | |
| Part VI Land, Buildings, and Equipment. | | • • | | | - | | | | | | |
| Part VI | b | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | | • | | | _3b | _X_ | | |
| Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10 Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation | 4 | | | wment funds. | | | | | | | |
| Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation | Par | | | 0 . 11 . 11 . 0 | | | 40 | | | | |
| basis (investment) basis (other) depreciation 1a Land 623,134. 623,134. b Buildings 4,177,092. 3,100,868. 1,076,224. c Leasehold improvements 2,823,046. 2,502,090. 320,956. e Other 10,205. 10,205. | | | | | | | | | | | |
| 1a Land 623,134. 623,134. b Buildings 4,177,092. 3,100,868. 1,076,224. c Leasehold improvements 2,823,046. 2,502,090. 320,956. e Other 10,205. 10,205. | | Description of property | 1 | 1 | | | 1 | (d) Boo | k value | е | |
| b Buildings 4,177,092. 3,100,868. 1,076,224. c Leasehold improvements 2,823,046. 2,502,090. 320,956. e Other 10,205. 10,205. | | · | pasis (investr | | | aepre | ciation | | | 2.4 | |
| c Leasehold improvements 2,823,046. 2,502,090. 320,956. e Other 10,205. 10,205. | | • | | | | 2 4 2 | 0.050 | | | | |
| d Equipment 2,823,046. 2,502,090. 320,956. e Other 10,205. 10,205. | | _ | | 4,17 | 7,092. | 3,10 | 00,868. | 1,07 | 6,2 | <u> </u> | |
| e Other 10,205. 10,205. | | | | | 2 046 | 2 - 2 | 12 000 | | | | |
| | | · · | | | | ∠,50 | 14,090. | | | | |
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Schedule D (Form 990) 2013

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Schedule D (Form 990) 2013

| Schedule D (Form 990) 2013 NEW MEXICO BOYS AND GIRLS Part XI Reconciliation of Revenue per Audited Financial States | | 85-(Return |)125610 Page 4 |
|--|---------------------------------------|----------------|---------------------------------|
| Complete if the organization answered "Yes" to Form 990, Part IV, line 12 | 2a | | |
| 1 Total revenue, gains, and other support per audited financial statements | | 1 | 2,108,288. |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | | |
| a Net unrealized gains on investments | 2a | + + | |
| b Donated services and use of facilities | 2b | 7 | |
| c Recoveries of prior year grants | 2c | 1 | |
| d Other (Describe in Part XIII.) | 2d 1,998,895 | 1 | |
| e Add lines 2a through 2d | | 2e | 1,998,895. |
| 3 Subtract line 2e from line 1 | | 3 | 109,393. |
| 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 | | 3 | 107,333. |
| | 4- | . * | |
| a Investment expenses not included on Form 990, Part VIII, line 7b | 4a | - 1 | |
| b Other (Describe in Part XIII) | 4b 2,949,981 | – "'' | 0 040 001 |
| c Add lines 4a and 4b | • | 4c | 2,949,981. |
| 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | A 14711 F | 5 | 3,059,374. |
| Part XII Reconciliation of Expenses per Audited Financial State | · · · · · · · · · · · · · · · · · · · | r Retui | 'n. |
| Complete if the organization answered "Yes" to Form 990, Part IV, line 12 | 2a. | | · |
| 1 Total expenses and losses per audited financial statements | | 1 | 4,216,008. |
| 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | |
| a Donated services and use of facilities | 2a | | |
| b Prior year adjustments | 2b |] | |
| c Other losses | 2c | | |
| d Other (Describe in Part XIII.) | 2d 698,790 | | |
| e Add lines 2a through 2d | - | 2e | 698,790. |
| 3 Subtract line 2e from line 1 | • • • | 3 | 3,517,218. |
| 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 | | | 0/02//210 |
| a Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b Other (Describe in Part XIII.) | 4b | | |
| c Add lines 4a and 4b | | - " | 0. |
| 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | | 4c | 3,517,218. |
| Part XIII Supplemental Information. | · · · · · · · · · · · · · · · · · · · | 1 3 1 | 3,311,410. |
| Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, P | lost IV lines 1h and 0h Dest V line | 4 Dark 1 | / lune O. Doub VI |
| lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a | | | A, iiile 2,-Fait Ai, A |
| PART V, LINE 4: | | | |
| THE ENDOWMENT FUNDS ARE HELD BY THEIR RELAT | TED ORGANIZATION | | |
| THE NEW MEXICO BOYS & GIRLS RANCH FOUNDATION | ON, 85-0328251. T | HE EN | IDOWMENT |
| | | | |
| FUNDS ARE USED TO PROVIDE SCHOLARSHIPS TO C | CHILDREN TO ENABLE | E THE | TO TO |
| ATTEND THE RANCHES AND TO SUPPORT THE PROGR | RAM ACTIVITIES OF | THE | RANCHES. |
| THIS YEAR, \$2,800,000 OF THE ENDOWMENTS WEE | RE ALLOCATED FOR | SCHOI | ARSHIPS. |
| | | | |
| PART X, LINE 2: | | | |
| THE ORGANIZATION APPLIES THE PROVISIONS OF | FINANCIAL | | |
| ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTIN | NG STANDARDS CODI | FICAT | CION (ASC) |
| 740, INCOME TAXES. FASB ASC 740 PROVIDES I | DETAILED GUIDANCE | FOR | THE |
| | | _ | |
| FINANCIAL STATEMENT RECOGNITION, MEASUREMEN 332054 09-25-13 | NT, AND DISCLOSUR | | UNCERTAIN ule D (Form 990) 2013 |

| Schedule D (Form 990) 2013 NEW MEXICO BOYS AND GIRLS RANCHES, INC. 85-0125610 Page 5 Part XIII Supplemental Information (continued) |
|--|
| TAX POSITIONS IN AN ENTERPRISE'S FINANCIAL STATEMENTS. INCOME TAX |
| POSITIONS MUST MEET A MORE-LIKELY-THAN-NOT RECOGNITION THRESHOLD TO BE |
| RECOGNIZED. THE ORGANIZATION'S POLICY IS TO CLASSIFY INCOME TAX PENALTIES |
| AND INTEREST AS MISCELLANEOUS EXPENSE. DURING THE YEARS ENDED JUNE 30, |
| 2014 AND 2013, THE ORGANIZATION RECOGNIZED NO INCOME TAX PENALTIES. AS OF |
| JUNE 30, 2014 AND 2013, MANAGEMENT DOES NOT BELIEVE THE ORGANIZATION HAS |
| ANY UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT |
| RECOGNITION, MEASUREMENT, OR DISCLOSURE UNDER FASB ASC 740. |
| |
| PART XI, LINE 2D - OTHER ADJUSTMENTS: |
| NEW MEXICO BOYS AND GIRLS RANCH FOUNDATION 1,998,895. |
| |
| PART XI, LINE 4B - OTHER ADJUSTMENTS: |
| DONATION FROM NEW MEXICO BOYS AND GIRLS RANCH FOUNDATION 2,949,981. |
| |
| PART XII, LINE 2D - OTHER ADJUSTMENTS: |
| NEW MEXICO BOYS AND GIRLS RANCH FOUNDATION 698,790. |
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information. ➤ Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public

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

Name of the organization **Employer identification number** NEW MEXICO BOYS AND GIRLS RANCHES, INC 85-0125610 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: A NON-PROFIT ORGANIZATION THAT OPERATES MULTI-DENOMINATIONAL CHRISTIAN HOMES FOR CHILDREN FROM TROUBLED BACKGROUNDS, AND PROVIDES SERVICES FOR STRUGGLING CHILDREN. SEE ATTACHMENT REGARDING PROGRAM INFORMATION. FORM 990, PART VI, SECTION A, LINE 2: CERTAIN BOARD MEMBERS/KEY EMPLOYEES ARE MARRIED TO OTHER BOARD MEMBERS/KEY EMPLOYEES AND HAVE CHILDREN WHO ARE EMPLOYEES. FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS REVIEWED BY THE TREASURER. AFTER HIS REVIEW HE FORWARDS THE FORM 990 TO THE BOARD OF DIRECTORS TO REVIEW. THE BOARD OF DIRECTORS HAVE THE ABILITY TO COMMENT. IF NO COMMENTS ARE MADE, THE TREASURER FILES THE FORM 990. FORM 990, PART VI, SECTION B, LINE 12C: ANY ISSUES RELATED TO CONFLICTS OF INTEREST COME BEFORE THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATIONS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART XII, LINE 2C THE FINANCE COMMITTEE ASSUMES RESPONSIBILITY FOR OVERSIGHT

OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND THE SELECTION OF AN

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

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

| Schedule O (Form 990 | | - | | | | | | | | | Page 2 |
|------------------------|--------------|-------------|---------------------------------------|---------------------------------------|--------------|---------------------------------------|--------------|-----|----------------------|------------------------|-------------|
| Name of the organizati | | XICO 1 | BOYS AND | GIR | LS R | ANCHES, | INC. | | Employer id 85-03 | entification 125610 | number |
| INDEPENDENT | AUDITOR. | THIS | PROCESS | HAS | NOT | CHANGED | FROM | THI | PRIOR | YEAR. | <u>.</u> |
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Employer identification number 85-01256102013 Open to Public Inspection ▶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. Related Organizations and Unrelated Partnerships ▶ See separate instructions. INC NEW MEXICO BOYS AND GIRLS RANCHES ▶ Attach to Form 990. Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Direct controlling entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax exempt organizations during the tax year. End-of-year assets e Total income <u>ত</u> Legal domicile (state or Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33 foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity Part I

| (a) | (q) | (0) | (b) | (e) | (£) | (6) | |
|---|---------------------------|--------------------------|---------------------|----------------|--------------------|-------------------------------|-----------|
| Name, address, and EIN of related organization | Primary activity | Legal domicile (state or | Exempt Code section | Public charity | Direct controlling | Section 512(b)(controlled | (2(b)(13) |
| | | (6) | | 501(c)(3)) | | Yes | 2 |
| NEW MEXICO BOYS AND GIRLS RANCH FOUNDATION - FUNDRAISING & | FUNDRAISING & INVESTMENT | | | | | | |
| 85-0328251, 6209 HENDRIX NE, ALBUQUERQUE, NM MANAGEMENT FOR | MANAGEMENT FOR NEW MEXICO | | | | | | |
| 87110 | BOYS AND GIRLS RANCHES | NEW MEXICO | 501(C)(3) | 509(A)(3) | | | × |
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Schedule R (Form 990) 2013

Page 2 85-0125610 Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year INC. Schedule R (Form 990) 2013 NEW MEXICO BOYS AND GIRLS RANCHES,

General or Percentage managing ownership Schedule R (Form 990) 2013 (i) Section 512(b)(13) controlled entity? Yes No Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year 3 managing (Percentage ownership Yes No 3 Code V-UBI amount in box " 20 of Schedule — K-1 (Form 1065) y Share of end-of-year assets Ξ **6** Disproportionate Yes No allocations? Ξ Share of total income Share of end-of-year assets 6 Type of entity (C corp, S corp, or trust) Share of total income (d)
| Direct controlling | entity Predominant income (related, unrelated, excluded from tax under sections 512-514) **e** Legal domicile (state or foreign country) 29 (d)
Direct controlling entity Primary activity (c)
Legal
domicile
(state or
foreign Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization 332162 09-12-13 Part III Part IV

Schedule R (Form 990) 2013

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

| 3 | Percentage ownership | | | | | | | | | | | | | | | | | | | | ! | | |
|--|---|--------------------------|------|---|------|---|---|---|------|--|------|---|---|---|--|---|---|---|------|---|---|------|---|
| 9 | eneral or nanaging partner? | Yes No | | | | | + | | | | | | | | | | | - | | | _ | | |
| (3) | Dispropor-Code V-UBI General or Percentage tonate amount in box 20 managing ownership allocations? of Schedule K-1 partner? | (Form 1065) Y | - | _ | | - | | | | | | - | | | | | | | | - | | | - |
| Ξ | spropor- tionate ocations? | Yes No | | | | | 1 | | | | | | | | | | | | | | | | |
| (b) | ar ar | assets | | | | | | - | | | | | | | | | | | | | | | |
| (3) | | ıncome | | | | | | | | | | | | | | | | | | | | | |
| (e) | Are all 501(c)(3) 010s 7 | es No | | | | | 7 | | | | | | | - | | | | | | | _ | | |
| (c) (d) | t income related, om tax | under section 512-514) y | | | - | | | | - | | | | , | | | - | - | | _ | | | | |
| | 흜盲 | country) | | | | | | | | | | | | | | | | | | | | | |
| (a) | Primary activity | | | | | | | | | | | | | | | | | | | | | | |
| that was not a relative organization. Oce instructions regarding exclusion for | Name, address, and EIN of entity | | | | | | | | | | | | | | | | | | | | | | |

332164 09-12-13

| Schedule R | (Form 990) 2013 | NEW_ | MEXICO | BOYS | AND | GIRLS | RANCHES, | INC. | <u>85-0125610</u> | Page 5 |
|--------------|---------------------------------------|---------------------------------------|-------------|-----------|---------|-------------|---|--------------|-------------------|-------------|
| Part VII | (Form 990) 2013 Supplementa | l Information | 1 | | | | | | | |
| | Provide additional | information for r | esponses to | questions | on Sche | dule R (see | instructions) | | | |
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2013-14 Service Statistics

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

| Boys & Girls Ranch | |
|--|------|
| Number of Residents | 44 |
| Female Residents | 17 |
| Male Residents | 27 |
| Residents in On-Campus School | 44 |
| Average Age | 16 |
| Average Time in Program (days) | 323 |
| Number of Inquiries for Placement | 568 |
| Mountain Vista Ranch | |
| Number of Residents | 16 |
| Average Age | 23 |
| Average Time in Program (days) | 182 |
| Number of Inquiries for Placement | 90 |
| Families For Children | |
| Children Placed | 1 |
| Number of Placements | 1 |
| Average Age | 10 |
| Adoptions | 0 |
| Licensed Foster Families | 1 |
| Newly Licensed Foster Families | 0 |
| Foster/Adopt Parent Inquiries | 5 |
| Developing Capable Young People Attendance | 31 |
| Children Impacted Thru DCYP | 44 |
| Getting It Together | 0 |
| ChildSHARE Anchor Churches | 10 |
| New Mexico Family Connect | ion |
| Counselors | 1.66 |
| Residents Counseled | 44 |
| Resident Families Counseled | 32 |
| Resident family members counseled | 55 |
| Non-resident families counseled | 10 |
| Non-resident family members counseled | 12 |
| Placements prevented | 1 |

| Ethnicity | | | | | | |
|------------------|-----|-----|-----|----|-----|-----------|
| Ethnicity | BGR | MVR | FFC | | TTL | % |
| African American | 3 | 1 | | | 4 | 6 5574% |
| Asian | 1 | | | | 1 | 1 6393% |
| Caucasian | 19 | 5 | 1 | | 25 | 40 9836% |
| Hispanic | 17 | 4 | | | 21 | 34.4262% |
| Mixed | 4 | 1 | | | 5 | 000 |
| Native American | | 5 | | | 5 | 8 1967% |
| Totals | 44 | 16 | 1 | 61 | 61 | 100.0000% |

| Residents by County | | | | | |
|---------------------|-----|-----|-----|-----|-----------|
| | | | | | |
| COUNTY | BGR | MVR | FFC | TTL | % |
| Bernalillo | 20 | 10 | 1 | 31 | 50.8197% |
| Chavez | | | | 0 | 0 0000% |
| Cibola | | | | 0 | 0 0000% |
| Gurry— — — — | —1 | | | | 1-6393% |
| Dona Ana | | | | 0 | 0.0000% |
| Eddy | | | | 0 | |
| Guadalupe | | | | 0 | |
| Grant | 2 | | | 2 | |
| Lea | | | | 0 | |
| Lincoln | 1 | | | 1 | |
| Los Alamos | | | | 0 | |
| Luna | | | | 0 | |
| McKinley | 1 | 2 | | 3 | |
| Otero | 1 | | | 1 | |
| Out of State | 7 | | | 7 | 11.4754% |
| Quay | | | | 0 | |
| Rio Arriba | | | | 0 | |
| Roosevelt | | | | 0 | |
| San Juan | 2 | | | 2 | |
| San Miguel | 2 | | | 2 | |
| Sandoval | 3 | 1 | | 4 | |
| Santa Fe | 2 | 1 | | 3 | |
| Sierra | | | | 0 | |
| Socorro | | | | 0 | |
| Taos | | | | 0 | |
| Torrance | | _ 1 | _ | 1 | |
| Valencia | 2 | 1 | | 3 | 4.9180% |
| Totals | 44 | 16 | 1 | 61 | 100.0000% |

Form **8868**

(Rev January 2014)

partment of the Treasury ernal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

Form 8868 (Rev 1-2014)

| If you are filing for an Automatic 3-Month Extension, complete | e only Pa | rt I and check this box | | | X | |
|--|--|--|-------------|-------------------|-------------|--|
| If you are filing for an Additional (Not Automatic) 3-Month Ext | - | | this form) | | | |
| Do not complete Part II unless you have already been granted a | | | | m 8868. | | |
| Electronic filing (e-file). You can electronically file Form 8868 if yo | | | | | ooration | |
| required to file Form 990-T), or an additional (not automatic) 3-mon | | | | | | |
| of time to file any of the forms listed in Part I or Part II with the exc | | | | | | |
| Personal Benefit Contracts, which must be sent to the IRS in paper | | | | | | |
| visit www.irs.gov/efile and click on e-file for Chanties & Nonprofits. | | , | | _ | | |
| Part I Automatic 3-Month Extension of Time | | ubmit original (no copies ne | eded). | | | |
| A corporation required to file Form 990-T and requesting an autom | natic 6-mo | nth extension - check this box and o | complete | | | |
| Part I only | | | | • | ▶ ∐ | |
| All other corporations (including 1120-C filers), partnerships, REMI | Cs, and tr | usts must use Form 7004 to reques | t an exten | sion of time | | |
| to file income tax returns | Enter file | Enter filer's identifying number | | | | |
| Type or Name of exempt organization or other filer, see instruc | ype or Name of exempt organization or other filer, see instructions | | | | | |
| print | | 85-0125610 | | | | |
| File by the NEW MEXICO BOYS AND GIRLS R | NEW MEXICO BOYS AND GIRLS RANCHES, INC. | | | | | |
| due date for Number, street, and room or suite no. If a P.O. box, se | date for Number, street, and room or suite no. If a P.O. box, see instructions | | | | | |
| filing your 6209 HENDRIX NE | | | | | | |
| Instructions City, town or post office, state, and ZIP code For a fo | reign add | ress, see instructions | | | | |
| ALBUQUERQUE, NM 87110 | | | | * | | |
| | | | | | | |
| Enter the Return code for the return that this application is for (file | a separat | e application for each return) | | | 0 1 | |
| | | | | | | |
| Application | Return | Application | | Return | | |
| For | Code | Is For | | Code | | |
| Form 990 or Form 990-EZ | 01 | Form 990-T (corporation) | | 07 | | |
| Form 990-BL | | Form 1041-A | | 08 | | |
| Form 4720 (individual) | 03 | Form 4720 (other than individual) | 09 | | | |
| Form 990-PF | | Form 5227 | | 10 | | |
| Form 990-T (sec 401(a) or 408(a) trust) | 05 | Form 6069 | | 11 | | |
| Form 990-T (trust other than above) | 06 | Form 8870 | | | | |
| ROBERT WALLACE | | | | | | |
| The books are in the care of ► 6209 HENDRIX NE | <u> </u> | LBUQUERQUE, NM 871 | 10 | | | |
| Telephone No ► <u>505-881-3363</u> | | Fax No. | | | | |
| If the organization does not have an office or place of business | | | | • | - L | |
| If this is for a Group Return, enter the organization's four digit (| | | | the whole group, | | |
| box 🕨 🔲 If it is for part of the group, check this box 🕨 🔛 | | chartst with the names and EINs o | | ers the extension | is for | |
| 1 I request an automatic 3-month (6 months for a corporation | | | | | | |
| FEBRUARY 15, 2015, to file the exemple | organiza | tion return for the organization name | ed above. | The extension | | |
| is for the organization's return for | OCT 28 | 3 2014 👂 | | | | |
| calendar year or | | // | | | | |
| ► X tax year beginning <u>JUL 1, 2013</u> | , an | d ending $\sqrt{\mathrm{JUN} \ 30}$, $\ 2014$ | | _ | | |
| | ATKINICO | | | | | |
| 2 If the tax year entered in line 1 is for less than 12 months, cl | heck reas | Initial return | Final retur | n | | |
| Change in accounting period | or 6060 | enter the tentative tax less any | | | | |
| 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any poprefundable credits. See instructions. | | | | | | |
| nonrefundable credits See instructions. b If this application is for Forms 990-PF, 990-T, 4720, or 6069 | enter an | v refundable credits and | Ja | | 0. | |
| estimated tax payments made Include any prior year overp | | | 3b | \$ | 0. | |
| | | | | | | |
| c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$ | | | | s | 0. | |
| Caution. If you are going to make an electronic funds withdrawal | (direct de | bit) with this Form 8868, see Form 8 | | nd Form 8879-EO | | |
| instructions | | · | | | | |

LHA 323841 12-31-13

For Privacy Act and Paperwork Reduction Act Notice, see instructions.