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Form **990**
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

2013

Open to Public Inspection

Do not enter Social Security numbers on this form as it may be made public. By law, the IRS generally cannot redact the information on the form.
 Information about Form 990 and its instructions is at www.irs.gov/form990

A For the 2013 calendar year, or tax year beginning 10-01-2013, 2013, and ending 09-30-2014

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE SANTA FE OPERA Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite PO BOX 2408 City or town, state or province, country, and ZIP or foreign postal code SANTA FE, NM 87504	D Employer identification number 85-0131810 E Telephone number (505) 986-5955 G Gross receipts \$ 85,847,625
F Name and address of principal officer SUSAN G MARINEAU PO BOX 2408 SANTA FE, NM 87504		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		L Year of formation 1957 M State of legal domicile NM
J Website: ▶ WWW.SANTAFEOPERA.ORG		
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		

Part I Summary

1	Briefly describe the organization's mission or most significant activities TO FOSTER AND ENRICH AN UNDERSTANDING AND APPRECIATION OF THE OPERATIC ART FORM				
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets				
3	Number of voting members of the governing body (Part VI, line 1a)	3		43	
4	Number of independent voting members of the governing body (Part VI, line 1b)	4		43	
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5		610	
6	Total number of volunteers (estimate if necessary)	6		1,315	
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a		568,157	
b	Net unrelated business taxable income from Form 990-T, line 34	7b		139,988	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year		Current Year	
	9 Program service revenue (Part VIII, line 2g)	6,717,921		29,854,154	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10,355,440		9,889,404	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,030,463		7,093,676	
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	941,778		1,003,994	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	20,045,602		47,841,228	
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0		0	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0		0	
	16a Professional fundraising fees (Part IX, column (A), line 11e)	9,871,669		10,554,120	
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,061,438	0		0	
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	11,044,851		11,755,537	
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	20,916,520		22,309,657		
19 Revenue less expenses Subtract line 18 from line 12	-870,918		25,531,571		
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year		End of Year	
	21 Total liabilities (Part X, line 26)	95,191,958		117,852,305	
	22 Net assets or fund balances Subtract line 21 from line 20	2,509,728		3,400,527	
		92,682,230		114,451,778	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	***** Signature of officer	2015-08-13 Date	
	HEATHER KEMP DIRECTOR OF ACCTG & FINANCE Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name PAMELA ALEXANDERSON	Preparer's signature	Date
	Firm's name ▶ MOSS ADAMS LLP	Check <input type="checkbox"/> if self-employed PTIN P01218925	
	Firm's address ▶ 6565 AMERICAS PARKWAY NE STE 600 ALBUQUERQUE, NM 87110	Firm's EIN ▶ 91-0189318 Phone no (505) 878-7200	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part 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
 TO FURTHER THE OPERATIC ART FORM BY PRESENTING ENSEMBLE PERFORMANCES OF THE HIGHEST QUALITY IN A VARIED REPERTOIRE OF NEW AS WELL AS RARELY PERFORMED AND STANDARD WORKS, TO ENSURE EXCELLENCE OF OPERA'S FUTURE THROUGH ITS APPRENTICE PROGRAMS FOR ARTISTS, TECHNICIANS AND ARTS ADMINISTRATORS, AND TO FOSTER AND ENRICH AN UNDERSTANDING AND APPRECIATION FOR OPERA IN THE COMMUNITY BY OUTREACH TO A DIVERSE PUBLIC

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
 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? Yes No
 If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 14,806,099 including grants of \$) (Revenue \$ 9,635,666)
 ONE OF THE NATION'S MOST IMPORTANT SUMMER FESTIVALS, THE SANTA FE OPERA IS PRAISED FOR ITS INNOVATIVE REPERTORY AND HIGH STANDARDS OF EXCELLENCE IN THE 2014 FESTIVAL SEASON, 38 PERFORMANCES OF FIVE OPERAS WERE PERFORMED CARMEN BY GEORGES BIZET, DON PASQUALE BY GAETANO DONIZETTI, FIDELIO BY LUDWIG VAN BEETHOVEN, A DOUBLE BILL CONSISTING OF THE IMPRESARIO BY WOLFGANG AMADEUS MOZART AND LE ROSSIGNOL BY IGOR STRAVINKSY, AND THE AMERICAN PREMIERE OF DR SUN YAT-SEN BY HUANG RUO TWO PERFORMANCES OF APPRENTICE SCENES SHOWCASED MEMBERS OF THE COMPANY'S APPRENTICE PROGRAM FOR SINGERS AND TECHNICIANS THE TOTAL AUDIENCE WAS 78,058 THE OPERA'S FAMED APPRENTICE PROGRAM OF SINGERS, ONE OF THE NATION'S MOST DISTINGUISHED TRAINING PROGRAMS, ALLOWS 43 ASPIRING YOUNG SINGERS, CHOSEN FROM SOME 800 APPLICANTS, TO DEVELOP THEIR SKILLS BY WORKING WITH PRINCIPAL ARTISTS, MUSIC TEACHERS, AND COACHES THE APPRENTICE PROGRAM FOR TECHNICIANS PROVIDES EXPERIENCE AND TRAINING FOR SOME 76 YOUNG PEOPLE IN THE ART OF STAGECRAFT

4b (Code) (Expenses \$ 1,189,797 including grants of \$) (Revenue \$ 499,930)
 THE SANTA FE OPERA'S EDUCATION AND COMMUNITY OUTREACH PROGRAMS OFFER A WIDE SELECTION TO BOTH STUDENTS AND ADULTS IN 2014, 47,186 INDIVIDUALS WERE SERVED, 33,599 ADULTS AND 13,587 YOUTHS EDUCATION AND OUTREACH PROGRAMS INCLUDE THE FOLLOWING THE PUEBLO OPERA PROGRAM BRINGS STUDENTS, ELDERS, AND CHAPERONES TO A FINAL DRESS REHEARSAL FOR AN OPERA IN THE CURRENT SEASON BEGUN IN 1973, 19 PUEBLOS AND 3 RESERVATIONS ATTEND THESE FULLY STAGED PRODUCTIONS PARTICIPANTS IN THE YOUTH NIGHT PROGRAM ATTENDED A FINAL FULL DRESS REHEARSAL STUDENTS IN ELEMENTARY AND MIDDLE SCHOOL WHO PARTICIPATE IN THE ACTIVE LEARNING THROUGH OPERA PROGRAM WORK WITH ARTISTS-IN-RESIDENCE TO EXPLORE LEARNING THROUGH THE PERFORMING ARTS, OFTEN WRITING, PRODUCING, AND PERFORMING THEIR OWN OPERAS BOTH IN-SCHOOL AND AFTER SCHOOL SPRING OPERA TOURS PRESENT A FREE INTRODUCTION TO OPERA IN SCHOOLS AND COMMUNITIES IN NEW MEXICO AND WESTERN TEXAS BACKSTAGE TOURS IN THE OPERA'S THEATER ARE OFFERED DURING THE WEEK THROUGHOUT THE SUMMER FESTIVAL SEASON COMMUNITY CONCERTS ARE FREE EVENTS FEATURING APPRENTICE SINGERS DURING THE SUMMER AND CHRISTMAS HOLIDAY SEASON IN DIFFERENT VENUES OPERA MAKES SENSE IS A SPECIAL INTRODUCTION FOR THREE TO FIVE YEAR OLDS EXPLORING MUSIC THROUGH THEIR FIVE SENSES ADULT EDUCATION OFFERS A VARIETY OF SYMPOSIUMS AND PROGRAMS FOR BOTH THE OPERA AFICIONADO AND NOVICE THROUGHOUT THE YEAR, INCLUDING A WEEK-LONG INTENSIVE SEMINAR, PRELUDE TALKS PRIOR TO EACH OPERA, AND PREVIEW DINNERS FEATURING A SPEAKER WHO PROVIDES CONTEXT AND SYNOPSIS FOR EACH OPERA

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
 (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 15,995,896

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
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	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 355		
1b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 610		
2b	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) 2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a	Yes	
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a	Yes	
b	If "Yes," enter the name of the foreign country CJ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a	Yes	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b	Yes	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966? 9a		
9b	Did the organization make a distribution to a donor, donor advisor, or related person? 9b		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12 10a		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders 11a		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O 13a		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b		
13c	Enter the amount of reserves on hand 13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year? 14a		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b		

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
1b	Enter the number of voting members included in line 1a, above, who are independent		
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?		No
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?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
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?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
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		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		No
11b	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	Yes	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
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?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed <input checked="" type="checkbox"/> NM, NY
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> 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 financial statements available to the public during the tax year
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization <input checked="" type="checkbox"/> THE ORGANIZATION 301 OPERA DRIVE SANTA FE, NM 87506 (505) 986-5955

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a					
	b	Membership dues 1b					
	c	Fundraising events 1c	419,370				
	d	Related organizations 1d					
	e	Government grants (contributions) 1e	140,600				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	29,294,184				
	g	Noncash contributions included in lines 1a-1f \$	2,378,372				
	h	Total. Add lines 1a-1f	29,854,154				
Program Service Revenue	2a	PERFORMANCE ADMISSIONS	711110	8,656,616	8,656,616		
	b	AUXILIARY OPERATIONS	711110	1,232,788	1,209,768	23,020	
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		9,889,404			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		745,854		745,854	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6a	Gross rents	(i) Real	422,490			
			(ii) Personal	68,695			
			b Less rental expenses	310,377			
			c Rental income or (loss)	112,113			
	d	Net rental income or (loss)		177,306		177,306	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	43,567,356			
			(ii) Other	70,758			
			b Less cost or other basis and sales expenses	37,290,292			
			c Gain or (loss)	6,277,064			
	d	Net gain or (loss)		6,347,822		6,347,822	
	8a	Gross income from fundraising events (not including \$ 419,370 of contributions reported on line 1c) See Part IV, line 18					
	a		125,101				
b	Less direct expenses b	112,762					
c	Net income or (loss) from fundraising events		12,339		12,339		
9a	Gross income from gaming activities See Part IV, line 19						
a							
b	Less direct expenses b						
c	Net income or (loss) from gaming activities						
10a	Gross sales of inventory, less returns and allowances	a	319,101				
		b Less cost of goods sold b	289,464				
		c Net income or (loss) from sales of inventory		29,637	8,967	20,670	
Miscellaneous Revenue		Business Code					
11a	ADVERTISING REVENUE	511120	317,537		317,537		
b	BOX OFFICE SERVICE CHA	711110	244,221	244,221			
c	SPONSORSHIP REVENUE	611710	143,669		143,669		
d	All other revenue		79,285	16,024	63,261		
e	Total. Add lines 11a-11d		784,712				
12	Total revenue. See Instructions		47,841,228	10,135,596	568,157	7,283,321	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

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

Do not include amounts reported on lines 6b, 7b, 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 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.	638,419	163,537	311,345	163,537
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.	8,095,834	5,988,214	1,216,220	891,400
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	126,605	62,796	60,260	3,549
9	Other employee benefits.	1,013,148	694,186	199,274	119,688
10	Payroll taxes.	680,114	501,453	106,055	72,606
11	Fees for services (non-employees)				
a	Management.				
b	Legal.	23,545		23,545	
c	Accounting.	86,698		86,698	
d	Lobbying.	15,624			15,624
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.	84,017		84,017	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	2,282,100	2,136,349	125,109	20,642
12	Advertising and promotion.	528,135	443,620	58,694	25,821
13	Office expenses.	883,708	558,889	111,731	213,088
14	Information technology.	216,572	130,043	73,774	12,755
15	Royalties.	159,077	159,077		
16	Occupancy.	1,086,151	678,241	407,910	
17	Travel.	2,169,490	2,009,458	116,102	43,930
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	56,635	23,155	33,480	
20	Interest.				
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	1,598,272	582,529	1,015,743	
23	Insurance.	120,613	24,021	96,592	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	INCOME TAX	59,761		59,761	
b	COSTUMES, SCENERY, PROP	1,123,035	1,123,035		
c	ENTERTAINMENT AND CULTI	566,868	88,115	14,021	464,732
d	AUXILIARY EXPENSE	373,074	373,074		
e	All other expenses	322,162	256,104	51,992	14,066
25	Total functional expenses. Add lines 1 through 24e.	22,309,657	15,995,896	4,252,323	2,061,438
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing		1	
	2 Savings and temporary cash investments	3,897,313	2	9,425,336
	3 Pledges and grants receivable, net	9,451,347	3	18,856,611
	4 Accounts receivable, net	910,938	4	366,571
	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 section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	65,139	8	60,585
	9 Prepaid expenses and deferred charges	549,286	9	977,380
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 57,317,443		
	b Less accumulated depreciation	10b 20,919,462	34,643,966	10c 36,397,981
	11 Investments—publicly traded securities	36,512,157	11	43,393,429
	12 Investments—other securities See Part IV, line 11	7,587,048	12	7,919,648
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	1,574,764	15	454,764
16 Total assets. Add lines 1 through 15 (must equal line 34)	95,191,958	16	117,852,305	
Liabilities	17 Accounts payable and accrued expenses	1,145,930	17	1,815,561
	18 Grants payable		18	
	19 Deferred revenue	1,031,390	19	1,280,685
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 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	332,408	25	304,281
	26 Total liabilities. Add lines 17 through 25	2,509,728	26	3,400,527
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	39,190,229	27	48,632,093
	28 Temporarily restricted net assets	12,288,160	28	24,206,529
	29 Permanently restricted net assets	41,203,841	29	41,613,156
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	92,682,230	33	114,451,778	
34 Total liabilities and net assets/fund balances	95,191,958	34	117,852,305	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	47,841,228
2	Total expenses (must equal Part IX, column (A), line 25)	2	22,309,657
3	Revenue less expenses Subtract line 2 from line 1	3	25,531,571
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	92,682,230
5	Net unrealized gains (losses) on investments	5	-3,765,422
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	3,399
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	114,451,778

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b Were the organization's financial statements audited by an independent accountant? 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 <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
3b 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		

Additional Data

Software ID:
Software Version:
EIN: 85-0131810
Name: THE SANTA FE OPERA

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SUSAN GRAF MARINEAU PRESIDENT (AS OF 8/9/2014)	5 00	X		X				0	0	0
PETER FRANK VICE PRESIDENT	5 00	X		X				0	0	0
ROBERTA COOPER RAMO VICE PRESIDENT	5 00	X		X				0	0	0
JOSEPH BRYAN JR FIRST VICE PRESIDENT (CHAIRMAN THROUGH 8/8/14)	5 00	X		X				0	0	0
T PETER TOWNSEND TREASURER	5 00	X		X				0	0	0
DAN PERRY SECRETARY (AS OF 8/9/2014)	5 00	X		X				0	0	0
DR ROBERT ZONE SECRETARY (THROUGH 8/8/14)	5 00	X		X				0	0	0
SUSAN MORRIS CHAIRMAN (PRESIDENT THROUGH 8/8/2014)	5 00	X		X				0	0	0
THE HONORABLE PATIRICA MCFATE VICE-CHAIRMAN	5 00	X		X				0	0	0
JAMES SEITZ JR VICE-CHAIRMAN	5 00	X						0	0	0
SARAH BILLINGHURST SOLOMON DIRECTOR	1 00	X						0	0	0
WILLIAM A BROSIUS DIRECTOR	1 00	X						0	0	0
J BRUCE BUGG JR DIRECTOR	1 00	X						0	0	0
BRUCE CHEMEL DIRECTOR	1 00	X						0	0	0
EH CORRIGAN DIRECTOR	1 00	X						0	0	0
PAULINE CUNCANNAN DIRECTOR	1 00	X						0	0	0
RICHARD DAVIS DIRECTOR	1 00	X						0	0	0
NANCIE DOMINIC DIRECTOR	1 00	X						0	0	0
KRISTINA FLANAGAN DIRECTOR	1 00	X						0	0	0
JOSEPHINE GILMORE DIRECTOR	1 00	X						0	0	0
FREDERICK HAAS DIRECTOR	1 00	X						0	0	0
ANN SHILLING HARRISON DIRECTOR	1 00	X						0	0	0
RICHARD HIGGINS DIRECTOR	1 00	X						0	0	0
DAVID INGALLS DIRECTOR	1 00	X						0	0	0
PHILIP JELLEY DIRECTOR	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PLATO KARAYANIS DIRECTOR	1 00	X						0	0	0
DONNA KENDALL DIRECTOR	1 00	X						0	0	0
DR WALTER KIRCHNER DIRECTOR	1 00	X						0	0	0
DAVID KLEINFELD DIRECTOR	1 00	X						0	0	0
MARYON DAVIES LEWIS DIRECTOR	1 00	X						0	0	0
DIANNE LOOMIS DIRECTOR	1 00	X						0	0	0
DR RAYMOND LUTZ DIRECTOR	1 00	X						0	0	0
NEDRA MATTEUCCI DIRECTOR	1 00	X						0	0	0
MARILYN MCCONNELL DIRECTOR	1 00	X						0	0	0
DAVID ELLIS MCNEEL DIRECTOR	1 00	X						0	0	0
CHARLES MOORE DIRECTOR	1 00	X						0	0	0
DAN NAMINGHA DIRECTOR	1 00	X						0	0	0
DAVID PADILLA DIRECTOR	1 00	X						0	0	0
ESTEVAN RAEL-GALVEZ DIRECTOR	1 00	X						0	0	0
CAREY RAMOS DIRECTOR	1 00	X						0	0	0
ANN ROLLEY DIRECTOR	1 00	X						0	0	0
GEORGE SHIRLEY DIRECTOR	1 00	X						0	0	0
FREDERICK SIMON DIRECTOR	1 00	X						0	0	0
EUGENE STARK JR DIRECTOR	1 00	X						0	0	0
IRWIN SUGARMAN DIRECTOR	1 00	X						0	0	0
C WILLIAM TANZI DIRECTOR	1 00	X						0	0	0
ROBERT TURNER DIRECTOR	1 00	X						0	0	0
DANNEHL TWOMEY DIRECTOR	1 00	X						0	0	0
ROBERT WEISS DIRECTOR	1 00	X						0	0	0
ROBERT VLADAM DIRECTOR	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHARLES MACKAY GENERAL DIRECTOR	40 00			X				443,196	0	53,921
HEATHER KEMP DIRECTOR OF ACCOUNTING AND FINANCE	40 00			X				125,330	0	11,340
CAROLE ELY DIRECTOR OF DEVELOPMENT	40 00					X		129,546	0	9,348
PAUL HORPEDAHL PRODUCTION AND FACILITIES DIRECTOR	40 00					X		137,449	0	28,531
BRADLEY WOOLBRIGHT DIRECTOR OF ARTISTIC ADMINISTRATION	40 00					X		148,986	0	11,831
ROBERT MEYA DIRECTOR OF EXTERNAL AFFAIRS	40 00					X		201,295	0	8,821
TOM MORRIS DIRECTOR OF ADMINISTRATION	40 00					X		107,180	0	19,756

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

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

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

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
THE SANTA FE OPERA

Employer identification number
85-0131810

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h
 - a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	11,969,165	9,603,478	13,652,924	6,717,921	29,854,154	71,797,642
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	11,969,165	9,603,478	13,652,924	6,717,921	29,854,154	71,797,642
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						21,785,512
6 Public support. Subtract line 5 from line 4						50,012,130

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	11,969,165	9,603,478	13,652,924	6,717,921	29,854,154	71,797,642
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,400,570	1,201,163	1,312,863	1,286,082	1,237,039	6,437,717
9 Net income from unrelated business activities, whether or not the business is regularly carried on	31,106	29,215	44,093	110,203	140,988	355,605
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support (Add lines 7 through 10)						78,590,964
12 Gross receipts from related activities, etc. (see instructions)					12	48,277,068

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	63.640%
15 Public support percentage for 2012 Schedule A, Part II, line 14	15	

- 16a 33 1/3% support test—2013.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% support test—2012.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a 10%-facts-and-circumstances test—2013.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- b 10%-facts-and-circumstances test—2012.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- 18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or 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 organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	74.530 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	6.400 %

- 19a 33 1/3% support tests—2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- b 33 1/3% support tests—2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference

Explanation

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
See separate instructions. Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
Section 527 organizations Complete Part I-A only

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

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

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

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization THE SANTA FE OPERA

Employer identification number

85-0131810

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
2 Political expenditures
3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955
2 Enter the amount of any excise tax incurred by organization managers under section 4955
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
4a Was a correction made?
b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities
3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
4 Did the filing organization file Form 1120-POL for this year?
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's funds, (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.

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

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B** Check if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?		No	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c Media advertisements?		No	
d Mailings to members, legislators, or the public?		No	
e Publications, or published or broadcast statements?		No	
f Grants to other organizations for lobbying purposes?		No	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		15,624
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i Other activities?		No	
j Total Add lines 1c through 1i			15,624
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
PART II-B, LINE 1	THE OPERA HOSTED SPOUSES OF STATE AND LOCAL LEGISLATORS AT A LUNCHEON ON THE OPERA GROUNDS THE PURPOSE OF THE EVENT WAS TO INTRODUCE LEGISLATORS AND THEIR FAMILIES, PARTICULARLY THOSE FROM OTHER AREAS OF THE STATE, TO THE OPERA AND ITS MISSION AND PROGRAMS THE OPERA ALSO HOSTED LEGISLATORS AT A BUFFET DINNER PRIOR TO A DRESS REHEARSAL OF CARMEN A STUDENT PARTICIPATING IN THE OPERA'S YOUNG VOICES PROGRAM PERFORMED AND MADE A PRESENTATION TO THE GROUP ON HER EXPERIENCE WITH THE OPERA THE LEGISLATORS ALSO ATTENDED THE DRESS REHEARSAL THE PURPOSE OF THE EVENT WAS TO INTRODUCE LEGISLATORS TO THE OPERA AND ITS MISSIONS AND PROGRAMS LEGISLATORS ARE ALSO INVITED TO COMMUNITY ENGAGEMENT PROGRAMS, SUCH AS CONCERTS AND THE SPRING OPERA TOUR, HELD IN THEIR RESPECTIVE DISTRICTS

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization THE SANTA FE OPERA

Employer identification number 85-0131810

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for total number, aggregate contributions, aggregate grants, and aggregate value.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply): Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of an historically important land area, Preservation of a certified historic structure.

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

Table with 2 columns: Description (2a-2d) and Held at the End of the Year. Rows for total number of easements, total acreage, and number of easements on historic structures.

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1
b Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

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 art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

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
1a Beginning of year balance	51,483,646	47,926,524	43,425,684	44,743,815	38,213,883
b Contributions	486,167	615,209	1,386,307	1,639,451	1,588,987
c Net investment earnings, gains, and losses	3,160,754	4,616,205	4,731,223	-986,696	2,804,763
d Grants or scholarships					
e Other expenditures for facilities and programs	1,952,205	1,674,292	1,616,690	1,970,886	2,308,655
f Administrative expenses					
g End of year balance	53,178,362	51,483,646	47,926,524	43,425,684	40,298,978

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a** Board designated or quasi-endowment 10 900 %
 - b** Permanent endowment 76 200 %
 - c** Temporarily restricted endowment 12 900 %
- 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

	Yes	No
(i) unrelated organizations	3a(i)	No
(ii) related organizations	3a(ii)	No

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? **3b**

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)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		5,348,930		5,348,930
b Buildings		47,101,340	17,648,818	29,452,522
c Leasehold improvements				
d Equipment		4,867,173	3,270,644	1,596,529
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				36,397,981

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	44,624,833
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-3,765,422
b	Donated services and use of facilities	2b	43,364
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	603,240
e	Add lines 2a through 2d	2e	-3,118,818
3	Subtract line 2e from line 1	3	47,743,651
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	97,577
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	97,577
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	47,841,228

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	22,855,285
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	43,364
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	599,841
e	Add lines 2a through 2d	2e	643,205
3	Subtract line 2e from line 1	3	22,212,080
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	97,577
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	97,577
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	22,309,657

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
PART V, LINE 4	TO PRODUCE A RELATIVELY PREDICTABLE AND STABLE INCOME STREAM TO GROW AND TO SUPPORT PRESENT AND FUTURE PROGRAMS
PART X, LINE 2	THE OPERA HAS ADOPTED THE PROVISIONS OF ASC 740-10, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, ON JANUARY 1, 2009, WHICH HAD NO FINANCIAL STATEMENT IMPACT TO THE OPERA. THE OPERA RECOGNIZES THE TAX BENEFIT FROM UNCERTAIN TAX POSITIONS ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITIONS WILL BE SUSTAINED ON EXAMINATION BY THE TAX AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. ANY SUCH TAX BENEFIT IS MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THE OPERA HAD NO UNRECOGNIZED TAX BENEFITS WHICH WOULD REQUIRE AN ADJUSTMENT TO THE OCTOBER 1, 2010, BEGINNING BALANCE OF NET ASSETS AND HAD NO UNRECOGNIZED TAX BENEFITS AT SEPTEMBER 30, 2014 OR 2013. THE OPERA FILES AN EXEMPT ORGANIZATION RETURN WITH THE INTERNAL REVENUE SERVICE (IRS). IT IS NOT A "PRIVATE FOUNDATION" FOR TAX PURPOSES. THE OPERA HAD MINIMAL TAXABLE UNRELATED BUSINESS INCOME FOR THE YEARS ENDED SEPTEMBER 30, 2014 AND 2013. ACCORDINGLY, A PROVISION FOR INCOME TAXES HAS NOT BEEN ESTABLISHED IN THE ACCOMPANYING FINANCIAL STATEMENTS. THE OPERA IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE IRS FOR TAX YEARS THROUGH SEPTEMBER 30, 2010.
PART XI, LINE 2D - OTHER ADJUSTMENTS	CHANGE IN VALUE OF SPLIT INTEREST 3,399 RENTAL EXPENSE 310,377 COST OF GOODS SOLD INVENTORY 289,464
PART XII, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSE 310,377 COST OF GOODS SOLD INVENTORY 289,464

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

2013

Open to Public Inspection

Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990. See separate instructions.

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

Department of the Treasury Internal Revenue Service

Name of the organization THE SANTA FE OPERA

Employer identification number

85-0131810

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

Table with 6 columns: (a) Region, (b) Number of offices in the region, (c) Number of employees, agents, and independent contractors in region, (d) Activities conducted in region (by type), (e) If activity listed in (d) is a program service, describe specific type of service(s) in region, (f) Total expenditures for and investments in region. Includes rows for Central America and Caribbean, and sub-totals.

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____
- 3 Enter total number of other organizations or entities ▶ _____

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).* Yes No

Additional Data

Software ID:

Software Version:

EIN: 85-0131810

Name: THE SANTA FE OPERA

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2013

Open to Public Inspection

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

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

Department of the Treasury Internal Revenue Service

Name of the organization THE SANTA FE OPERA

Employer identification number

85-0131810

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations, b Internet and email solicitations, c Phone solicitations, d In-person solicitations, e Solicitation of non-government grants, f Solicitation of government grants, g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

Table with 6 columns: (i) Name and address of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col (i), (vi) Amount paid to (or retained by) organization. Includes rows 1-10 and a Total row.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>GALA</u> (event type)	<u>HOLIDAY PARTY</u> (event type)	<u>2</u> (total number)	(add col (a) through col (c))
Revenue	1 Gross receipts	332,314	84,175	127,982	544,471
	2 Less Contributions	291,064	67,015	61,291	419,370
	3 Gross income (line 1 minus line 2)	41,250	17,160	66,691	125,101
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	11,286	20,524	45,199	77,009
	8 Entertainment	15,455	7,771		23,226
	9 Other direct expenses	3,955	2,242	6,330	12,527
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(112,762)
11 Net income summary Subtract line 10 from line 3, column (d) ▶				12,339	

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
7 Direct expense summary Add lines 2 through 5 in column (d) ▶					
8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶					

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? Yes No

b If "No," explain _____

.....

.....

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain _____

.....

.....

Does the organization operate gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
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Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2013

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
THE SANTA FE OPERA

Employer identification number

85-0131810

Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input checked="" type="checkbox"/> Tax idemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

- b** If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain
- 2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?

- 3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.
- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

- 4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:
- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.

- 5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:
- a** The organization?
- b** Any related organization?
- If "Yes," to line 5a or 5b, describe in Part III.
- 6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:
- a** The organization?
- b** Any related organization?
- If "Yes," to line 6a or 6b, describe in Part III.

- 7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.
- 8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.
- 9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	Yes	
2	Yes	
4a		No
4b	Yes	
4c		No
5a		No
5b		No
6a		No
6b		No
7	Yes	
8		No
9		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) CHARLES MACKAY GENERAL DIRECTOR	(i)	322,802	50,000	70,394	45,100	8,821	497,117	0
	(ii)	0	0	0	0	0	0	0
(2) PAUL HORPEDAHL PRODUCTION AND FACILITIES DIRECTOR	(i)	137,000	0	449	2,950	25,581	165,980	0
	(ii)	0	0	0	0	0	0	0
(3) BRADLEY WOOLBRIGHT DIRECTOR OF ARTISTIC ADMINISTRATION	(i)	148,485	0	501	3,010	8,821	160,817	0
	(ii)	0	0	0	0	0	0	0
(4) ROBERT MEYA DIRECTOR OF EXTERNAL AFFAIRS	(i)	179,785	0	21,510	0	8,821	210,116	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 1A	THE SANTA FE OPERA OWNS A RESIDENCE IMMEDIATELY ADJACENT TO THE OPERA'S FACILITIES. THE CLOSE PROXIMITY OF THE RESIDENCE AND THE GENERAL DIRECTOR'S LIVING THEREIN HAVE IMPORTANT BENEFITS FOR THE OPERA. THE GENERAL DIRECTOR IS THEREBY AVAILABLE ON SHORT NOTICE FOR IMPORTANT BUSINESS ON THE OPERA GROUNDS AS WELL AS IS ABLE TO ENTERTAIN AND MEET WITH THE OPERA'S GUESTS, ARTISTIC PARTNERS AND STAFF. THE GENERAL DIRECTOR, AS A CONDITION OF EMPLOYMENT, IS REQUIRED BY THE OPERA TO RESIDE IN THE GENERAL DIRECTOR'S RESIDENCE. THE SANTA FE OPERA REPORTS TO THE INTERNAL REVENUE SERVICE AS COMPENSATION TO THE GENERAL DIRECTOR ADDITIONAL TAXABLE INCOME FOR THE FAIR MARKET RENTAL VALUE AND UTILITY COSTS OF THE PREMISES. THE OPERA HAS AGREED TO REIMBURSE THE GENERAL DIRECTOR FOR ANY OUT-OF-POCKET COSTS INCURRED DURING THE USE OF THE GENERAL DIRECTOR'S RESIDENCE FOR OPERA BUSINESS. DETAILED RECORDS ARE REQUIRED TO BE MAINTAINED OF THE OPERA'S OFFICIAL USE OF THE RESIDENCE AND SUBMITTED TO THE PRESIDENT AND THE DIRECTOR OF FINANCE AND ACCOUNTING. THE TAX INDEMNIFICATION AND GROSS UP PAYMENTS REPRESENT THE TAX PAID BY THE OPERA, AND INCLUDED IN CHARLES MACKAY'S W-2, TO COVER THE TAX ON THE HOUSING ALLOWANCE.
PART I, LINE 4B	CHARLES MACKAY- THE OPERA CONTRIBUTED \$16,000 TO A 457(B) PLAN AND \$40,000 TO A 457(F) PLAN FOR THE BENEFIT OF THE GENERAL DIRECTOR DURING 2013. THE 457(F) PLAN VESTS ONLY IF THE GENERAL DIRECTOR REMAINS EMPLOYED BY THE OPERA IN JANUARY 2016.
PART I, LINE 7	\$50,000 BONUS TO GENERAL DIRECTOR CHARLES MCKAY FOR MEETING ORGANIZATIONAL GOALS.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

2013

Open to Public Inspection

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

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service

Name of the organization THE SANTA FE OPERA

Employer identification number

85-0131810

Part I Types of Property

Table with 4 columns: (a) Check if applicable, (b) Number of contributions or items contributed, (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g, (d) Method of determining noncash contribution amounts. Rows include Art, Books, Cars, Boats, Securities, Real estate, etc.

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

1

Table with 3 columns: Question (30a, 31, 32a, 33), Yes, No. Contains questions about property holding periods and gift acceptance policies.

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

Return Reference	Explanation
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Schedule M (Form 990) (2013)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
THE SANTA FE OPERA

Employer identification number

85-0131810

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	ALL REGULAR MEMBERS OF THE BOARD (EXCLUDING HONORARY MEMBERS, DIRECTORS EMERITUS, AND EX-OFFICIO MEMBERS WHO HAVE NO VOTING RIGHTS) HAVE THE SAME VOTING RIGHTS. IN BETWEEN QUARTERLY BOARD MEETINGS, THE EXECUTIVE COMMITTEE OF THE BOARD IS VESTED WITH THE POWER OF THE BOARD OF DIRECTORS WITH THE FOLLOWING EXCEPTIONS: THE POWER TO DISSOLVE OR MERGE THE OPERA WITH ANOTHER ORGANIZATION, THE POWER TO CHANGE THE NAME OF THE OPERA, THE POWER TO CHANGE THE BYLAWS OF THE OPERA, THE POWER TO DELEGATE ITS AUTHORITY, THE POWER TO REMOVE THE GENERAL DIRECTOR OR ANY OTHER DIRECTOR, AND THE POWER TO SELL REAL PROPERTY VALUED OVER \$1 MILLION.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE BOARD OF DIRECTORS OF THE SANTA FE OPERA HAS APPROVED A RESOLUTION APPROVING A PROCESS BY WHICH THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS THE FULL VERSION OF THE FORM 990 INCLUDING ALL SCHEDULES AS PREPARED BY AN OUTSIDE ACCOUNTING FIRM AFTER REVIEW AND ANY CHANGES BY THE AUDIT COMMITTEE, THE DRAFT PUBLIC DISCLOSURE VERSION OF THE FORM 990, EXCLUDING SCHEDULE B (SCHEDULE OF CONTRIBUTORS), IS SENT ELECTRONICALLY OR BY PRIORITY MAIL TO ALL MEMBERS OF THE BOARD OF DIRECTORS FOR THEIR REVIEW AND COMMENT BEFORE IT IS FILED WITH THE IRS THE SCHEDULE B TO THE FORM 990 IS NOT REVIEWED BY THE BOARD DUE TO THE CONFIDENTIAL AND PRIVATE NATURE OF ITS DONOR LIST

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	MEMBERS OF THE BOARD OF DIRECTORS OF THE SANTA FE OPERA ARE ASKED EACH YEAR TO SIGN CONFLICT OF INTEREST DISCLOSURE STATEMENTS AND TO SUBMIT THESE SIGNED STATEMENTS TO THE SECRETARY OF THE BOARD OF DIRECTORS BY SIGNING THE ANNUAL DISCLOSURE STATEMENTS, EACH DIRECTOR UNDERTAKES TO NOTIFY THE PRESIDENT OF THE OPERA OF ANY MATERIAL CHANGES THAT MIGHT RESULT IN A CONFLICT OF INTEREST THE PRESIDENT REVIEWS THE SIGNED DISCLOSURE STATEMENTS FOR CONFLICTS AND, WITH THE ASSISTANCE OF COMMITTEE CHAIRS, MONITORS COMPLIANCE WITH THE POLICY AT MEETINGS OF THE BOARD AND COMMITTEES CONSIDERING TRANSACTIONS OR ARRANGEMENTS THAT MIGHT GIVE RISE TO A CONFLICT OF INTEREST THE SIGNED CONFLICT OF INTEREST DISCLOSURE STATEMENTS ARE MAINTAINED AT THE OFFICES OF THE SANTA FE OPERA COMPLIANCE WITH THIS POLICY IS MONITORED BY THE AUDIT COMMITTEE IF A CONFLICT ARISES, THE PERSON WITH SUCH CONFLICT IS NOT ALLOWED TO VOTE ON THE TRANSACTION THERE HAVE BEEN NO INCIDENCES OF CONFLICT DURING THE REPORTING PERIOD

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS, COMPOSED OF THE PRESIDENT, CHAIRMAN, TREASURER AND TWO ADDITIONAL BOARD MEMBERS APPOINTED BY THE PRESIDENT, ALL OF WHOM ARE UNRELATED TO THE GENERAL DIRECTOR, REVIEWS AND APPROVES COMPENSATION AND OTHER TERMS OF EMPLOYMENT FOR THE GENERAL DIRECTOR. IN CONSIDERING APPROPRIATE COMPENSATION FOR THIS POSITION, THE COMPENSATION COMMITTEE REVIEWS SALARY DATA FOR COMPARABLE POSITIONS AT SIMILAR OPERA COMPANIES. THE COMPENSATION COMMITTEE ALSO CONDUCTS ANNUAL REVIEWS OF THE PERFORMANCE OF THE GENERAL DIRECTOR. MINUTES OF THE COMPENSATION COMMITTEE'S MEETINGS ARE RECORDED AND MAINTAINED AT THE OFFICES OF THE SANTA FE OPERA. COMPENSATION FOR THE DIRECTOR OF ACCOUNTING AND FINANCE IS DETERMINED BY THE GENERAL DIRECTOR. THE GENERAL DIRECTOR TAKES JOB PERFORMANCE AND SALARY DATA FOR COMPARABLE POSITIONS AT OTHER OPERA COMPANIES INTO ACCOUNT WHEN SETTING THE ANNUAL SALARY FOR THE DIRECTOR OF ACCOUNTING AND FINANCE. THE COMPENSATION COMMITTEE REVIEWS THE SALARIES FOR ALL SENIOR EMPLOYEES, COMPARING THE SALARIES TO COMPENSATION FOR SIMILAR POSITIONS AT OTHER OPERA COMPANIES. THIS PROCESS WAS LAST COMPLETED IN 2014.

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICIES, AND FINANCIAL STATEMENTS ARE MAINTAINED IN THE OFFICES OF THE SANTA FE OPERA. THEY ARE MADE AVAILABLE TO MEMBERS OF THE PUBLIC WHO MAKE WRITTEN REQUESTS FOR THE INFORMATION.

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	ARTIST FEES PROGRAM SERVICE EXPENSES 1,617,145 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,617,145 TEACHING/TEACHING ARTIST FEES PROGRAM SERVICE EXPENSES 215,426 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 215,426 OTHER CONTRACT LABOR PROGRAM SERVICE EXPENSES 303,778 MANAGEMENT AND GENERAL EXPENSES 125,109 FUNDRAISING EXPENSES 20,642 TOTAL EXPENSES 449,529

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT 3,399