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Form 990-EZ

Short Form

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-1150

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A For the 2014 calendar year, or tax year beginning 01-01-2014, and ending 12-31-2014

- B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending

C Name of organization: NEW MEXICO BREWERS GUILD
Number and street (or P O box, if mail is not delivered to street address): 1607 PASEO DE PERALTA SUITE 10
Room/suite:
City or town, state or province, country, and ZIP or foreign postal code: SANTA FE, NM 87501

D Employer identification number: 45-4563116
E Telephone number: (505) 660-2951
F Group Exemption Number:

G Accounting Method: [X] Cash [ ] Accrual Other (specify):

H Check [X] if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: WWW.NMBEER.ORG

J Tax-exempt status (check only one): [ ] 501(c)(3) [X] 501(c)(6) (insert no ) [ ] 4947(a)(1) or [ ] 527

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. \$ 115,750

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I [X]

Table with 21 rows and 3 columns. Rows include Revenue (1-9), Expenses (10-17), and Net Assets (18-21). Values include 25,447, 90,297, 6, 115,750, 2,701, 106,806, 8,944, 5,608, 14,552.



Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the

instructions for Part V ) Check if the organization used Schedule O to respond to any question in this Part V

Form 990-EZ (2014) Part V Other Information. Questions 33-45b regarding significant activities, changes, income, and organizational structure. Includes fields for Form 990-T, Form 1120-POL, and foreign account information.

Yes No

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI

Yes No

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If "Yes," was the related organization a section 527 organization?

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

Table with 5 columns: (a) Name and title of each employee, (b) Average hours per week devoted to position, (c) Reportable compensation (Forms W-2/1099-MISC), (d) Health benefits, contributions to employee benefit plans, and deferred compensation, (e) Estimated amount of other compensation

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

Table with 3 columns: (a) Name and business address of each independent contractor, (b) Type of service, (c) Compensation

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? NOTE: All Section 501(c)(3) organizations must attach a completed Schedule A

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 (ROD TWEET TREASURER) and Date (2015-11-05)

Paid Preparer Use Only: Print/Type preparer's name (MARY K SILVER), Preparer's signature, Date (2015-11-06), Check self-employed, PTIN (P00454555), Firm's name (MARY K SILVER CPA PC), Firm's EIN (85-0482633), Firm's address (1450 S SAINT FRANCIS DR, SANTA FE, NM 875054038), Phone no (505) 982-9050

May the IRS discuss this return with the preparer shown above? See instructions

**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 990-EZ 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](http://www.irs.gov/form990).

OMB No 1545-0047

**2014**

**Open to Public  
Inspection**

Name of the organization  
NEW MEXICO BREWERS GUILD

Employer identification number

45-4563116

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990-EZ, PART I, LINE 16	
FORM 990-EZ, PART III	PROMOTE AND PROTECT, IN EVERY LAWFUL MANNER, THE COMMON INTERESTS OF THE MEMBERS AND THE LICENSED CRAFT BREWING INDUSTRY IN NEW MEXICO
FORM 990-EZ, PART III, LINE 28	COLLECT INFORMATION OF VALUE TO MEMBERS REGARDING LAWS, PROVISIONS, DIRECTIVES, AND ORDERS AS MAY BE MADE BY THE UNITED STATES GOVERNMENT, THE STATE OF NEW MEXICO, AND THE POLITICAL SUBDIVISIONS THEREOF SERVING THE ASSOCIATION, AND TO CIRCULATE SUCH INFORMATION TO THE MEMBERS AND GENERAL PUBLIC