



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

► Do not enter social security numbers on this form as it may be made public.
► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

2016

Open to Public Inspection

For calendar year 2016 or tax year beginning , 2016, and ending

Name of foundation CHAMIZA FOUNDATION		A Employer identification number 85-0373197
Number and street (or P O box number if mail is not delivered to street address) 1919 FIFTH ST	Room/suite C	B Telephone number (see instructions) (505) 216-2140
City or town, state or province, country, and ZIP or foreign postal code SANTA FE NM 87505		C If exemption application is pending, check here. <input type="checkbox"/>
G Check all that apply	<input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change	<input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, column (c), line 16) \$ 2,951,025.	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses

(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
REVENUE				
1 Contributions, gifts, grants, etc., received (attach schedule) . . .	401,800.			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments	43.	43.		
4 Dividends and interest from securities	48,421.	48,421.		
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	-12,324.	L-6a Stmt		
b Gross sales price for all assets on line 6a	421,445.			
7 Capital gain net income (from Part IV, line 2)		0.		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11.	437,940.	48,464.	0.	
ADMINISTRATIVE AND OPERATING EXPENSES				
13 Compensation of officers, directors, trustees, etc.	93,000.			93,000.
14 Other employee salaries and wages				
15 Pension plans, employee benefits.	8,331.			8,331.
16a Legal fees (attach schedule).	718.			718.
b Accounting fees (attach sch).	5,091.			5,091.
c Other professional fees (attach sch) L-16c Stmt	26,901.	25,332.		1,569.
17 Interest				
18 Taxes (attach schedule)(see Instrs) See Line 18 Stmt	17,811.	277.		7,534.
19 Depreciation (attach schedule) and depletion				
20 Occupancy	9,257.			9,257.
21 Travel, conferences, and meetings	4,987.			4,987.
22 Printing and publications	121.			121.
23 Other expenses (attach schedule) See Line 23 Stmt	6,988.			6,988.
24 Total operating and administrative expenses. Add lines 13 through 23	173,205.	25,609.		137,596.
25 Contributions, gifts, grants paid	118,669.			118,669.
26 Total expenses and disbursements Add lines 24 and 25	291,874.	25,609.		256,265.
27 Subtract line 26 from line 12.				
a Excess of revenue over expenses and disbursements	146,066.			
b Net Investment Income (if negative, enter -0-).		22,855.		
c Adjusted net Income (if negative, enter -0-).			0.	

20

Part II Balance Sheets		Beginning of year (a) Book Value	End of year	
			(b) Book Value	(c) Fair Market Value
ASSETS	1 Cash — non-interest-bearing	14,029.	20,307.	20,307.
	2 Savings and temporary cash investments	167,383.	292,052.	292,052.
	3 Accounts receivable			
	Less allowance for doubtful accounts			
	4 Pledges receivable			
	Less allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach sch)			
	Less allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments — U S and state government obligations (attach schedule)	72,982.		
	b Investments — corporate stock (attach schedule) L-10b Stmt	1,669,379.	1,709,621.	2,187,196.
	c Investments — corporate bonds (attach schedule) L-10c Stmt	300,080.	300,080.	300,134.
LIABILITIES	11 Investments — land, buildings, and equipment basis			
	Less accumulated depreciation (attach schedule)			
	12 Investments — mortgage loans			
	13 Investments — other (attach schedule) L-13 Stmt	85,447.	133,891.	150,836.
	14 Land, buildings, and equipment basis			
	Less accumulated depreciation (attach schedule)			
	15 Other assets (describe L-15 Stmt)	500.	500.	500.
	16 Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I)	2,309,800.	2,456,451.	2,951,025.
	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
FUND ASSETS	20 Loans from officers, directors, trustees, & other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe L-22 Stmt)	2,453.	3,038.	
	23 Total liabilities (add lines 17 through 22)	2,453.	3,038.	
	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input type="checkbox"/>			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input checked="" type="checkbox"/>			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
FUND BALANCES	29 Retained earnings, accumulated income, endowment, or other funds	2,307,347.	2,453,413.	
	30 Total net assets or fund balances (see instructions)	2,307,347.	2,453,413.	
	31 Total liabilities and net assets/fund balances (see instructions)	2,309,800.	2,456,451.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	2,307,347.
2 Enter amount from Part I, line 27a	2	146,066.
3 Other increases not included in line 2 (itemize)	3	
4 Add lines 1, 2, and 3	4	2,453,413.
5 Decreases not included in line 2 (itemize)	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30	6	2,453,413.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a PUBLIC TRADED SECURITIES		P	Various	Various
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 421,445.		433,769.	-12,324.
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			-12,324.
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) . . .	[If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7] . . .	2	-12,324.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)			
If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	[] . . .	3	-12,324.

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes☐ No

If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015			
2014			
2013			
2012			
2011			

2 Total of line 1, column (d)	2	
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5.	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6.	7	
8 Enter qualifying distributions from Part XII, line 4	8	

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 — see instructions)

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1			
Date of ruling or determination letter _____ (attach copy of letter if necessary — see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	457.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2		3	457.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	457.
6 Credits/Payments			
a 2016 estimated tax pmts and 2015 overpayment credited to 2016	6 a		639.
b Exempt foreign organizations — tax withheld at source	6 b		
c Tax paid with application for extension of time to file (Form 8868)	6 c		0.
d Backup withholding erroneously withheld	6 d		
7 Total credits and payments. Add lines 6a through 6d		7	639.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached		8	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	182.
11 Enter the amount of line 10 to be Credited to 2017 estimated tax		11	182. Refunded

Part VII-A Statements Regarding Activities

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1 b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		
1 c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ (2) On foundation managers <input type="checkbox"/> \$		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If 'Yes,' attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
4 b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and Part XV	X	
8 a Enter the states to which the foundation reports or with which it is registered (see instructions) See States Registered In		
8 b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		X

BAA

Form 990-PF (2016)

Part VII-A Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule (see instructions)	11	X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X
Website address CHAMIZA.ORG		
14 The books are in care of ▶ DONNA VOGEL Telephone no ▶ (505) 795-4214		
Located at ▶ 1919 FIFTH ST, STE C SANTA FE NM ZIP + 4 ▶ 87505		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		
and enter the amount of tax-exempt interest received or accrued during the year 15		
16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country ▶		

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.

	Yes	No
1 a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	X No
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes	X No
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes	X No
b If any answer is 'Yes' to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b	X
Organizations relying on a current notice regarding disaster assistance check here		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?	1 c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?	Yes	X No
If 'Yes,' list the years ▶ 20 __ , 20 __ , 20 __ , 20 __		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions)	2 b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20 __ , 20 __ , 20 __ , 20 __		
3 a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No
b If 'Yes,' did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016)	3 b	
4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4 b	X

BAA

Form 990-PF (2016)

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5 a** During the year did the foundation pay or incur any amount to

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions) ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is 'Yes' to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?**5 b**Organizations relying on a current notice regarding disaster assistance check here ☐**c** If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?☐ Yes ☐ No

If 'Yes,' attach the statement required by Regulations section 53.4945–5(d)

6 a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?**6 b**

If 'Yes' to 6b, file Form 8870

7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction?**7 b****Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
DONNA VOGEL 1919 FIFTH ST SUITE C SANTA FE NM 87505	EXEC DIRECTOR 40.00	93,000.	6,000.	0.
MARJORIE PHILLIPS ELLIOTT 1919 FIFTH ST SUITE C SANTA FE NM 87505	CHAIRMAN 3.00	0.	0.	0.
ALICE PHILLIPS SWISTEL 1919 FIFTH ST SUITE C SANTA FE NM 87505	VICE CHAIRMAN 2.00	0.	0.	0.
See Information about Officers, Directors, Trustees, Etc		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.'

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

None

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		None

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	

BAA

Form 990-PF (2016)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1 a	2,555,177.
b Average of monthly cash balances	1 b	423,061.
c Fair market value of all other assets (see instructions)	1 c	500.
d Total (add lines 1a, b, and c)	1 d	2,978,738.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1 e	
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	2,978,738.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	44,681.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	2,934,057.
6 Minimum investment return. Enter 5% of line 5	6	146,703.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1 Minimum investment return from Part X, line 6	1	146,703.
2 a Tax on investment income for 2016 from Part VI, line 5	2 a	457.
b Income tax for 2016 (This does not include the tax from Part VI)	2 b	
c Add lines 2a and 2b	2 c	457.
3 Distributable amount before adjustments. Subtract line 2c from line 1.	3	146,246.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4.	5	146,246.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	146,246.

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	256,265.
b Program-related investments — total from Part IX-B.	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3 a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	256,265.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	256,265.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				146,246.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only				
b Total for prior years 20 __, 20 __, 20 __				
3 Excess distributions carryover, if any, to 2016				
a From 2011	138,545.			
b From 2012	131,749.			
c From 2013	113,510.			
d From 2014	134,982.			
e From 2015	157,477.			
f Total of lines 3a through e	676,263.			
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 256,265.				
a Applied to 2015, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2016 distributable amount				146,246.
e Remaining amount distributed out of corpus	110,019.			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	786,282.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount — see instructions		0.		
e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)				
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)	138,545.			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	647,737.			
10 Analysis of line 9				
a Excess from 2012	131,749.			
b Excess from 2013	113,510.			
c Excess from 2014	134,982.			
d Excess from 2015	157,477.			
e Excess from 2016	110,019.			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling.

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Tax year	Prior 3 years			(e) Total
(a) 2016	(b) 2015	(c) 2014	(d) 2013	
b 85% of line 2a				
c Qualifying distributions from Part XII, line 4 for each year listed				
d Amounts included in line 2c not used directly for active conduct of exempt activities				
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c				
3 Complete 3a, b, or c for the alternative test relied upon				
a 'Assets' alternative test — enter				
(1) Value of all assets				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed				
c 'Support' alternative test — enter.				
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)				
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)				
(3) Largest amount of support from an exempt organization				
(4) Gross investment income				

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year — see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

THE CHAMIZA FOUNDATION C/O DONNA VOGEL
1919 FIFTH STREET, SUITE C
SANTA FE NM 87505 (505) 795-4214

b The form in which applications should be submitted and information and materials they should include

APPLICATIONS-LETTER FORMAT WITH DESCRIPTIONS OF PROJECT, ETC.

c Any submission deadlines:

VARIES FROM YEAR TO YEAR; LATE MARCH AND JUNE; SEPTEMBER SITE VISITS

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

CULTURAL PRESERVATION AMONG THE NATIVE AMERICAN INDIAN POPULATION IN NM

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
BOSQUE SCHOOL 4000 LEARNING RD NW ALBUQUERQUE NM 87120		PUBLIC	RIVER SOURCE YOUTH PROJECT	9,998.
COMMON SENSE CHILDBIRTH, INC. 1150 E. PLANT ST WINTER GARDEN FL 34787		PUBLIC	CHANGING WOMEN INITIATIVE	2,300.
EARTH LIVING SKILLS SCHOOL P.O. BOX 187 JEMEZ SPRINGS NM 87025		PUBLIC	YOUTH NATURE IMMERSION PROJECT	4,500.
EIGHT NORTHERN INDIAN PUEBLOS COUNCIL, INC 327 EAGLE DRIVE OHKAY OWINGEH NM 87566		PUBLIC	BACK TO MOTHER EARTH PROJECTS	5,000.
FLOWERING TREE PERMACULTURE P.O. BOX 4154 ESPANOLA NM 87533		PUBLIC	PERMACULTURE PROJECT	5,000.
HEART MOUNTAIN PRISON PROJECT 124 LA CUEVA RD GLORIETA NM 87535		PUBLIC	NATIVE AMERICAN TRADITIONAL ARTS PROGRAM	6,000.
INSTITUTE OF AMERICAN INDIAN ARTS 83 AVAN NU PO RD SANTA FE NM 87508		PUBLIC	LAND GRANT PROGRAMS	3,000.
KERES CHILDRENS LEARNING CENTER P.O. BOX 113 COCHITI PUEBLO NM 87072		PUBLIC	COSMIC EDUCATION KCLC	4,000.
LAGUNA COMMUNITY FOUNDATION P.O. BOX 62 LAGUNA NM 87026		PUBLIC	YAKANAI:YOUTH CULTURAL EXCHANGE	3,850.
See Line 3a statement				75,021.
Total			3 a	118,669.
b Approved for future payment				
SANTA ANA PUEBLO 02 DOVE RD BERNALILLO NM 87004		PUBLIC	DEPT OF EDUCATION	2,500.
ZIA PUEBLO 135 CAPITOL SQUARE DRIVE SAN YSIDRO NM 87053		PUBLIC	LANGUAGE PROGRAM	2,000.
Total			3 b	4,500.

Part XVI-A	Analysis of Income-Producing Activities
------------	---

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount		
1	Program service revenue					
a						
b						
c						
d						
e						
f						
g	Fees and contracts from government agencies . .					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments			14	43.	
4	Dividends and interest from securities			14	48,421.	
5	Net rental income or (loss) from real estate					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory . . .			18	-12,324.	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue					
a						
b						
c						
d						
e						
12	Subtotal. Add columns (b), (d), and (e)				36,140.	
13	Total. Add line 12, columns (b), (d), and (e)					36,140.

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B	Relationship of Activities to the Accomplishment of Exempt Purposes
------------	---

[illegible]

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

► **Attach to Form 990, Form 990-EZ, or Form 990-PF.**

► **Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.**

OMB No 1545-0047

2016

Name of the organization

CHAMIZA FOUNDATION

Employer identification number

85-0373197

Organization type (check one)

Filers of:

Form 990 or 990-EZ

Section:

☐ 501(c)() (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ► \$ _____

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer 'No' on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

CHAMIZA FOUNDATION

85-0373197

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOANN K. PHILLIPS 3101 OLD PECOS TRAIL #678 SANTA FE NM 87505	\$ 400,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

**Form 990-PF
Part I, Line 6a**

Net Gain or Loss From Sale of Assets

2016

Name

Employer Identification Number

CHAMIZA FOUNDATION

85-0373197

Asset Information:

Description of Property SALE OF SECURITIES

Date Acquired . Various How Acquired . . . Purchased

Date Sold . . . Various

Name of Buyer . . . _____

Sales Price . . . 421,445.

Cost or other basis (do not reduce by depreciation) . . . 433,769.

Sales Expense . . . _____ Valuation Method _____

Total Gain (Loss) . . . -12,324. Accumulation Depreciation . . . _____

Description of Property _____

Date Acquired . . . _____ How Acquired . . . _____

Date Sold . . . _____ Name of Buyer . . . _____

Sales Price . . . _____ Cost or other basis (do not reduce by depreciation) . . . _____

Sales Expense . . . _____ Valuation Method _____

Total Gain (Loss) . . . _____ Accumulation Depreciation . . . _____

Description of Property _____

Date Acquired . . . _____ How Acquired . . . _____

Date Sold . . . _____ Name of Buyer . . . _____

Sales Price . . . _____ Cost or other basis (do not reduce by depreciation) . . . _____

Sales Expense . . . _____ Valuation Method _____

Total Gain (Loss) . . . _____ Accumulation Depreciation . . . _____

Description of Property _____

Date Acquired . . . _____ How Acquired . . . _____

Date Sold . . . _____ Name of Buyer . . . _____

Sales Price . . . _____ Cost or other basis (do not reduce by depreciation) . . . _____

Sales Expense . . . _____ Valuation Method _____

Total Gain (Loss) . . . _____ Accumulation Depreciation . . . _____

Description of Property _____

Date Acquired . . . _____ How Acquired . . . _____

Date Sold . . . _____ Name of Buyer . . . _____

Sales Price . . . _____ Cost or other basis (do not reduce by depreciation) . . . _____

Sales Expense . . . _____ Valuation Method _____

Total Gain (Loss) . . . _____ Accumulation Depreciation . . . _____

Description of Property _____

Date Acquired . . . _____ How Acquired . . . _____

Date Sold . . . _____ Name of Buyer . . . _____

Sales Price . . . _____ Cost or other basis (do not reduce by depreciation) . . . _____

Sales Expense . . . _____ Valuation Method _____

Total Gain (Loss) . . . _____ Accumulation Depreciation . . . _____

Description of Property _____

Date Acquired . . . _____ How Acquired . . . _____

Date Sold . . . _____ Name of Buyer . . . _____

Sales Price . . . _____ Cost or other basis (do not reduce by depreciation) . . . _____

Sales Expense . . . _____ Valuation Method _____

Total Gain (Loss) . . . _____ Accumulation Depreciation . . . _____

Description of Property _____

Date Acquired . . . _____ How Acquired . . . _____

Date Sold . . . _____ Name of Buyer . . . _____

Sales Price . . . _____ Cost or other basis (do not reduce by depreciation) . . . _____

Sales Expense . . . _____ Valuation Method _____

Total Gain (Loss) . . . _____ Accumulation Depreciation . . . _____

Form 990-PF, Page 1, Part I, Line 18
Line 18 Stmt

Taxes	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
EXCISE	10,000.			
PAYROLL	7,534.			7,534.
INVESTMENT	277.	277.		
Total	17,811.	277.		7,534.

Form 990-PF, Page 1, Part I, Line 23
Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
INSURANCE	1,806.			1,806.
LICENSES/PERMITS	278.			278.
OFFICE EXPENSES	3,404.			3,404.
DUES/SUBSCRIPTIONS	1,500.			1,500.
Total	6,988.			6,988.

Form 990-PF, Page 4, Part VII-A, Line 8a
States Registered In

NEW MEXICO
DELAWARE

Form 990-PF, Page 6, Part VIII, Line 1
Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person. <input checked="" type="checkbox"/> Business <input type="checkbox"/> DIANE REYNA 1919 FIFTH ST SUITE C SANTA FE NM 87505	PRESIDENT 2.00	0.	0.	0.
Person. <input checked="" type="checkbox"/> Business <input type="checkbox"/> BEVERLY SINGER 1919 FIFTH ST SUITE C SANTA FE NM 87501	VICE PRESIDENT 1.00	0.	0.	0.
Person. <input checked="" type="checkbox"/> Business <input type="checkbox"/> HAYES LEWIS 1919 FIFTH ST SUITE C SANTA FE NM 87501	TREASURER 1.00	0.	0.	0.
Person. <input checked="" type="checkbox"/> Business <input type="checkbox"/> JOANN PHILLIPS 1919 FIFTH ST SUITE C SANTA FE NM 87505	DIRECTOR 1.00	0.	0.	0.

Form 990-PF, Page 6, Part VIII, Line 1

Continued

Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person. <input checked="" type="checkbox"/> Business <input type="checkbox"/> BRIAN VALLO 1919 FIFTH ST SUITE C SANTA FE NM 87505	SECRETARY 1.00	0.	0.	0.
Person. <input checked="" type="checkbox"/> Business <input type="checkbox"/> CARNELL CHOSA 1919 FIFTH ST SUITE C SANTA FE NM 87505	DIRECTOR 1.00	0.	0.	0.
Person. <input checked="" type="checkbox"/> Business <input type="checkbox"/> TED JOJOLA 1919 FIFTH ST SUITE C SANTA FE NM 87505	DIRECTOR 1.00	0.	0.	0.
Person. <input checked="" type="checkbox"/> Business <input type="checkbox"/> VERNON LUJAN 1919 FIFTH ST SUITE C SANTA FE NM 87505	DIRECTOR 1.00	0.	0.	0.
Person. <input checked="" type="checkbox"/> Business <input type="checkbox"/> TRISHA MOQUINO 1919 FIFTH ST SUITE C SANTA FE NM 87505	DIRECTOR 1.00	0.	0.	0.
Person. <input checked="" type="checkbox"/> Business <input type="checkbox"/> JAMES PHILLIPS 1919 FIFTH STREET SUITE C SANTA FE NM 87505	DIRECTOR 1.00	0.	0.	0.
Person. <input checked="" type="checkbox"/> Business <input type="checkbox"/> DEBORAH FLYNN POST 1919 FIFTH ST SUITE C SANTA FE NM 87505	DIRECTOR 1.00	0.	0.	0.
Person. <input checked="" type="checkbox"/> Business <input type="checkbox"/> MAXINE TOYA 1919 FIFTH ST SUITE C SANTA FE NM 87505	DIRECTOR 1.00	0.	0.	0.
Person. <input checked="" type="checkbox"/> Business <input type="checkbox"/>				

Total

0. 0. 0.

Form 990-PF, Page 11, Part XV, line 3a

Line 3a statement

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox
Name and address (home or business)				Amount
a Paid during the year				
NAMBE PUEBLO RT 1 BOX 117-BB SANTA FE NM 87506		PUBLIC	EXPRESSION THROUGH ART	Person or Business <input checked="" type="checkbox"/> 7,398.
NAMBE PUEBLO RT 1 BOX 117-BB SANTA FE NM 87506		PUBLIC	SEED BANK PROJECT	Person or Business <input checked="" type="checkbox"/> 8,700.
OHKAY OWINGEH BOARD OF EDUCATION P.O. BOX 1269 OHKAY OWINGEH NM 87566		PUBLIC	TEWA LANGUAGE PROGRAM	Person or Business <input checked="" type="checkbox"/> 10,875.
OO-OONAH ART CENTER P.O. BOX 1853 TAOS NM 87571		PUBLIC	HERITAGE PROJECT	Person or Business <input checked="" type="checkbox"/> 6,000.
PATRICIA MAESTAS/NATIVE ARTS GALLERY 160 PO'PAY AVE OHKAY OWINGEH NM 87566		PUBLIC	NATIVE ARTS GALLERY ARTS PROGRAM	Person or Business <input checked="" type="checkbox"/> 8,000.
POJOAQUE PUEBLO 78 CITIES OF GOLD RD SANTA FE NM 87506		PUBLIC	YOUTH CULTURAL REVITALIZATION PROJ	Person or Business <input checked="" type="checkbox"/> 3,500.
SAN ILDEFONSO PUEBLO 02 TUNYO PO SANTA FE NM 87506		PUBLIC	TEWA REVITALIZATION PROJECT	Person or Business <input checked="" type="checkbox"/> 10,000.
SANTA ANA PUEBLO 02 DOVE RD BERNALILLO NM 87004		PUBLIC	YOUTH HANDS-ON HYDROLOGY PROJECT	Person or Business <input checked="" type="checkbox"/> 5,722.
SANTA ANA PUEBLO 02 DOVE RD BERNALILLO NM 87004		PUBLIC	DEPT OF EDUCATION	Person or Business <input checked="" type="checkbox"/> 2,500.
SANTO DOMINGO PUEBLO P.O. BOX 99 SANTO DOMINGO PUEBLO NM 87052		PUBLIC	AFTER SCHOOL PROGRAM	Person or Business <input checked="" type="checkbox"/> 2,000.
TEWA WOMEN UNITED P.O. BOX 397 SANTA CRUZ NM 87567		PUBLIC	HEART'S BREATH	Person or Business <input checked="" type="checkbox"/> 4,000.
ZIA PUEBLO 135 CAPITOL SQUARE DRIVE SAN YSIDRO NM 87053		PUBLIC	LANGUAGE PROGRAM	Person or Business <input checked="" type="checkbox"/> 2,000.
ZUNI PUBLIC SCHOOL DISTRICT P.O. DRAWER A ZUNI NM 87327		PUBLIC	CREATIVITY WORKSHOPS	Person or Business <input checked="" type="checkbox"/> 4,326.

Total

75,021.

Form 990-PF, Page 1, Part I

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CT CORPORATION	LEGAL	718.			718.
Total		<u>718.</u>			<u>718.</u>

Form 990-PF, Page 1, Part I

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CAROLYN H GONZALES	CONSULTING/TAX/ACCTG	5,091.			5,091.
Total		<u>5,091.</u>			<u>5,091.</u>

Form 990-PF, Page 1, Part I

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
AVALON TRUST	CUSTODIAL FEES	25,332.	25,332.		
MARIA HERNANDEZ	OFFICE SUPPORT	50.			50.
TANABE SYSTEMS	WEBSITE	1,519.			1,519.
Total		<u>26,901.</u>	<u>25,332.</u>		<u>1,569.</u>

Form 990-PF, Page 2, Part II, Line 10b
L-10b Stmt

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
SEE STATEMENT II	1,709,621.	2,187,196.
Total	<u>1,709,621.</u>	<u>2,187,196.</u>

Form 990-PF, Page 2, Part II, Line 10c
L-10c Stmt

Line 10c - Investments - Corporate Bonds:	End of Year	
	Book Value	Fair Market Value
SEE STATEMENT II	300,080.	300,134.

Form 990-PF, Page 2, Part II, Line 10c

Continued

L- 10c Stmt

Line 10c - Investments - Corporate Bonds:	End of Year	
	Book Value	Fair Market Value
Total	<u>300,080.</u>	<u>300,134.</u>

Form 990-PF, Page 2, Part II, Line 13

L-13 Stmt

Line 13 - Investments - Other:	End of Year	
	Book Value	Fair Market Value
SEE STATEMENT II	133,891.	150,836.
Total	<u>133,891.</u>	<u>150,836.</u>

Form 990-PF, Page 2, Part II, Line 15

Other Assets Stmt

Line 15 - Other Assets:	Beginning Year Book Value	End of Year	
		Book Value	Fair Market Value
SECURITY DEPOSIT	500.	500.	500.
Total	<u>500.</u>	<u>500.</u>	<u>500.</u>

Form 990-PF, Page 2, Part II, Line 22

Other Liab Stmt

Line 22 - Other Liabilities:	Beginning Year Book Value	Ending Year Book Value
PAYROLL	2,453.	3,038.
Total	<u>2,453.</u>	<u>3,038.</u>

Chamiza Foundation
 EIN: 85-0373197
 Form 990-PF 2016

Statement II

	Shares	Book Value	Market Value
Form 990-PF, Part II, Line 10b			
Investments Corporate Stock			
Adobe Systems	300	24,233	30,885
Alphabet Inc. Google	180	52,298	140,785
Amazon	75	56,820	56,240
American Water	400	20,716	28,944
Apple	800	84,764	92,656
Berkshire	1000	66,326	162,980
Bristol Myers	500	10,791	29,220
Brookfield	1950	54,822	65,267
Checkpoint	500	39,711	42,230
Cigna Corp	400	53,122	53,356
Comcast Corp	1500	30,993	103,575
Costco	400	45,768	64,044
CVS Health	700	66,167	55,237
Danaher Corp	700	49,239	54,488
Disney Walt	500	45,665	52,110
Ecolab	500	51,012	58,610
Essex PPTY Tr	297	23,862	69,052
Facebook	400	29,998	46,020
Fidelity National	650	43,183	49,166
Fidelity Overseas	4241	170,000	167,689
First Rep	1300	62,764	119,782
Fortive Corp Com	250	10,102	13,408
Gilead Sciences	500	49,444	35,805
Ingersoll Rand	600	40,458	45,024
Ishares	110	29,266	29,192
Kar Auction	1500	50,992	63,930
Kroger Co	1500	55,080	51,765
LKQ Corp	2400	60,576	73,560
Lowes Cos Inc	700	51,404	49,784
Mondelez Intl	1600	58,952	70,928
Pfizer	1800	58,743	58,464
Sprouts	1200	29,450	22,704
Thermo Fischer	350	45,365	49,385
Uniliver	1300	56,856	53,378
VWR Corp	1100	30,679	27,533
		<u>1,709,621</u>	<u>2,187,196</u>

Form 990-PF, Part II, Line 10c
Investments Corporate Bonds

Oppenheimer	18587.361	150,030	151,115
Vanguard	14018.692	150,050	149,019
		<u>300,080</u>	<u>300,134</u>

Form 990-PF, Part II, Line 13
Investments - Other

Fed Home Ln Bk 8/15/19	25,000	23,415	27,346
Welltower Inc	800	48,444	53,544
American Tower Corp	600	57,990	63,408
Washington	200	4,042	6,538
		<u>133,891</u>	<u>150,836</u>