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. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

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		ter social security numbers or ww.irs.gov/Form990PF for inst			Open to Public Inspection
	calendar year 2017 or tax year beginning	William Control of the Control of th	, and ending		open to I done appear
Nar	ame of foundation		<del></del>	A Employer identification	n number
ηı	THE GUADALUPE INSTITUTE			85-036700	6
	imber and street (or P O box number if mail is not delivered to s	street address)	Room/suite	B Telephone number	
1	1400 MORNINGSIDE DR NE	,		(505) 346	-9130
	ty or town, state or province, country, and ZIP or forei ALBUQUERQUE, NM 87110	gn postal code	<del></del>	C If exemption application is	pending, check here
G C	Check all that apply: Initial return Final return Address change	Amended return Name change	ormer public charity	D 1. Foreign organization  2. Foreign organizations n check here and attach or	neeting the 85% test, computation
"-	Check type of organization: LX Section 501(c)( Section 4947(a)(1) nonexempt charitable trust	3) exempt private foundation  Other taxable private founds	O Y	E If private foundation st under section 507(b)(	
(fr	air market value of all assets at end of year J According Part II, col. (c), line 16)	nunting method: X Cash Other (specify) olumn (d) must be on cash basi	Accrual '	F If the foundation is in a under section 507(b)(	60-month termination_
	art   Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may in necessarily equal the amounts in column (a)	(a) Payanya and	(b) Net investment income	(c) Adjusted net	(d) Disbursements
	1 Contributions, gifts, grants, etc., received	9,000.		N/A	(cash basis only)
	2 Check I if the foundation is not required to attach Sch				<del>                                     </del>
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	2,888.	2,888.		STATEMENT
	5a Gross rents	· · · · · · · · · · · · · · · · · · ·			
	b Net rental income or (loss)	<u> </u>	<u> </u>		ļ
ne	6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 12,492	5,699.			<del>- </del>
Revenue	D assets on line 6a 12,492 7 Capital gain net income (from Part IV, line 2)	•	5,699.	RECEIVED	<del>-                                      </del>
Ŗ	8 Net short-term capital gain	<del></del>			ipi
	9 Income modifications	<del></del>	18	APR 1 0 2018	12
	10a Gross sales less returns				<del>#-                                     </del>
	b Less Cost of goods sold			OGDEN, UT	
	c Gross profit or (loss)				
	11 Other income	15 505	<u> </u>	<u> </u>	<u> </u>
	12 Total. Add lines 1 through 11	17,587.	8,587.		<u></u>
	<ul><li>13 Compensation of officers, directors, trustees, etc</li><li>14 Other employee salaries and wages</li></ul>	·	0.	<del></del>	<del> </del>
	15 Pension plans, employee benefits		<del>-</del>	<del>                                     </del>	<del>                                     </del>
şes	16 16a Legal fees STMT 2	288.	0.	,	<del></del>
ens	b Accounting fees STMT 3		923.		
Εχ	c Other professional fees STMT 4		2,058.		
and Administrative Expenses	17 Interest				
itra	18 Taxes STMT 5	1,384.	1,384.	<del></del>	ļ
inis	19 Depreciation and depletion	7 500			<del> </del>
/dm	20 Occupancy 21 Travel, conferences, and meetings	7,500.	0.	·	<del> </del>
7 pu	21 Travel, conferences, and meetings 22 Printing and publications	968.	0.	1	<del> </del>
g	22 Other expenses STMT 6		0.	,	<del>                                     </del>
Operating	24 Total operating and administrative				<del>                                     </del>
per	expenses. Add lines 13 through 23	15,410.	4,365.	,[	
0	25 Contributions, gifts, grants paid	5,380.			5,38
	26 Total expenses and disbursements.				
	Add lines 24 and 25	20,790.	4,365.	·	5,38
	27 Subtract line 26 from line 12	-2 202	Ĺ		
	a Excess of revenue over expenses and disbursements	<3,203.	4,222.	<del> </del>	<del></del>
	b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)		4,444	N/A	+
	1501 01-03-18 LHA For Paperwork Reduction Act 8	lotica, and instructions	<u> </u>		Eprm <b>990-PF</b> (2

Parl	Part II Balance Sheets Attached schedules and amounts in the description	Beginning of year		End of year			
	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
1	Cash - non-interest-bearing	<555.>	<261.				
2	Savings and temporary cash investments	298.	82.	82.			
] 3	Accounts receivable ▶						
	Less: allowance for doubtful accounts ▶						
4	Pledges receivable ►						
	Less: allowance for doubtful accounts						
5							
6		<del></del>					
١٠	disqualified persons						
,							
7		10	(				
	Less: allowance for doubtful accounts						
Assets							
88   9	Prepaid expenses and deferred charges						
יין י	a Investments - U.S. and state government obligations						
1	b Investments - corporate stock	1_					
i	c Investments - corporate bonds						
	Investments - land, buildings, and equipment basis						
	Less accumulated depreciation						
12	Investments - mortgage loans						
13	Investments - other STMT 7	131,403.	128,122.	167,549.			
14	Land, buildings, and equipment: basis			,			
	Less accumulated depreciation						
15	Other assets (describe ► ARTWORK	2,800.	2,800.	2,800.			
- 1	Total assets (to be completed by all filers - see the						
"	instructions. Also, see page 1, item I)	133,946.	130,743.	170,170.			
17	Accounts payable and accrued expenses						
18							
. 140	· · ·	<del></del>					
ij li	F-	<del></del>					
Liabilities 51		<del></del>					
를   21	· · ·	<del></del>					
22	Other liabilities (describe						
	- I I I I I I I I I I I I I I I I I I I		0.				
- 23	Total liabilities (add lines 17 through 22)	0.					
	Foundations that follow SFAS 117, check here						
g .	and complete lines 24 through 26, and lines 30 and 31						
ဦ  24	Unrestricted						
ᇣ   25	· · ·			1			
<u>m</u>   26							
Ĭ	Foundations that do not follow SFAS 117, check here						
<u>"</u>	and complete lines 27 through 31.			a no more experience of the first			
g 27	Capital stock, trust principal, or current funds	0.	0.				
g 28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	~ '			
Net Assets or Fund Balance	Retained earnings, accumulated income, endowment, or other funds	133,946.	130,743.	- , - ^ !			
₹ 30	Total net assets or fund balances	133,946.	130,743.	1			
_ l							
31	Total liabilities and net assets/fund balances	133,946.	130,743.				
Par	Analysis of Changes in Net Assets or Fund Ba	alances	-				
			<del></del>				
	al net assets or fund balances at beginning of year - Part II, column (a), line 3	30		122 046			
,	ust agree with end-of-year figure reported on prior year's return)		11	133,946.			
	er amount from Part I, line 27a		2	<3,203.			
	er increases not included in line 2 (itemize)		3	0.			
	1 lines 1, 2, and 3		4	130,743.			
	creases not included in line 2 (itemize)			0.			
6 Tot	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	130,743.			
				Form <b>990-PF</b> (2017)			

Part IV   Capital Gains	and Losses for Tax on In	vestment	Income					
	the kind(s) of property sold (for example kind(s) of property sold (for example kind(s)) of prop		te,	( <b>b)</b> Ho P - F D - (	w acquired Purchase Donation	(c) Date a (mo., d		(d) Date sold (mo., day, yr.)
1a 391.198 SHARES	DFA US CORE EQU	ITY FUI	ND		P	11/2	9/07	05/19/17
b 17 SHARES SPDR	S&P 500 ETF TRU	ST			P	11/2	9/07	01/18/17
c CAPITAL GAINS	DIVIDENDS							
d								
е								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				ain or (loss) s (f) minus (	(g))
a 7,975.			3,701.					
ь 3,839. 2,519.								1,320.
c 678.								678.
_d	<u> </u>							
e			<u>-</u>					
Complete only for assets showing	ng gain in column (h) and owned by	the foundation	on 12/31/69.		_	(I) Gains (C	ol (h) gain	minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col. (j), if any		C	oi. (k), but i Losses 	not less that (from col. (	(h))
a								3,701.
b								1,320.
С								678.
d								
e		<u> </u>						
2 Capital gain net income or (net ca	apital loss) { If gain, also enter If (loss), enter -0	n Part I, line in Part I, line	7 7	}	2			5,699
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) an							
If gain, also enter in Part I, line 8,		ia (0)		λl				
If (loss), enter -0- in Part I, line 8				1	3		N/A	
Part V   Qualification U	Inder Section 4940(e) for	Reduced	Tax on Net	Inve	stment Ir	come		
(For optional use by domestic private	e foundations subject to the section 4	4940(a) tax on	net investment in	icome.)				
If section 4940(d)(2) applies, leave to	his nart hlank							
11 3000011 4040(a)(2) applies, leave to	nio part biank							(=====================================
	tion 4942 tax on the distributable arr		•	rıod?				Yes X No
	fy under section 4940(e). Do not con			-4				
1 Enter the appropriate amount in	each column for each year; see the I	nstructions bet	ore making any e					(d)
Base period years	ng in) Adjusted qualifying dis	tributions	Net value of no	(c)	iblo-uco acco	to		butión ratio
Calendar year (or tax year beginni	('9''')	1	Net value of 110			. 1	(col (b) div	vided by col. (c))
2016		6,850.			154,68			.044282
2015		6,790.			157,09			.043222
2014		3,398.			168,97			.020110
2013		6,249.			159,23			.039243
2012		5,551.			148,40	5.		.037404
O Water of the discount (d)							ļ	10126
2 Total of line 1, column (d)						2	<b></b>	.18426
•	5-year base period - divide the total	on line 2 by 5.0	), or by the numb	er of yea	ars			026051
the foundation has been in existe	nce if less than 5 years					3	<u> </u>	.03685
4 Enter the net value of noncharitat	ole-use assets for 2017 from Part X,	line 5				4		162,362
5 Multiply line 4 by line 3						5		5,983
6 Enter 1% of net investment incor	ne (1% of Part I, line 27b)					6		42
								<del></del>
7 Add lines 5 and 6						7		6,025
8 Enter qualifying distributions from	n Part XII line 4					8		5,380
· · · · · ·	n line 7, check the box in Part VI, line	th and come	lete that nart year	nn a 1%	tay rate		<del></del>	
See the Part VI instructions	T, once the box in t art vi, inte	, and comp	mat part usii	.g u 1/0	an rate			

orm	990-PF (2017) THE GUADALUPE INSTITUTE	35-6	0367	006	1	age 4	
_	rt VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49						
1a	Exempt operating foundations described in section 4940(d)(2), check here \( \bigcup \) and enter "N/A" on line 1.	$\neg \tau$					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	- 1					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1				84.	
	of Part I, line 27b						
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				84.	
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				84.	
	Credits/Payments:	ł					
	2017 estimated tax payments and 2016 overpayment credited to 2017	1					
	Exempt foreign organizations - tax withheld at source						
C	Tax paid with application for extension of time to file (Form 8868) 6c 0.	1					
	Backup withholding erroneously withheld 6d 0.					_	
	Total credits and payments. Add lines 6a through 6d	7				0.	
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				0.	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				84.	
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10					
	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶	11					
	rt VII-A Statements Regarding Activities			- 7	· · ·		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	n			Yes		
	any political campaign?			1a		X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition of the definitio	lion		1b		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					v	
	Did the foundation file Form 1120-POL for this year?			1c		<u>X</u>	
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation.   \$\infty\$ \$ 0 \cdot (2) On foundation managers \$\infty\$ \$ 0 \cdot\$						
_							
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 0 •						
				,		х	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2			
•	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	-					
3	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes					х	
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			3 4a		X	
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b			
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	7.1	, 11	5		X	
J	If "Yes," attach the statement required by General Instruction T.					<del></del>	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
Ů	By language in the governing instrument, or					l	
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state</li> </ul>	law		- /		-	
	remain in the governing instrument?	1411		6	Х		
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			7	X		
•	on the foundation have at least \$6,000 in account at any time during the year. If 100, completely art in, our (0), and that the time					<del> </del>	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.					i	
-	NM						
h	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			8b	Х		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar			<del></del>	<del>                                     </del>	_
-	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes," complete Part XIV			9		Х	
10				10		$\frac{1}{x}$	
			For		1		

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P	art VII-A J 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 WWW.GUADALUPE-INSTITUTE.COM			
14	The books are in care of ► MICHAEL L. KELEHER Telephone no ► (505)		-91	<u> 30</u>
	Located at ► 1400 MORNINGSIDE DR NE, ALBUQUERQUE, NM ZIP+4 ►8	110		
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	N	/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	L	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
<u> </u>	foreign country	<u> </u>		
	art 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.	<b></b>	Yes	No
1	a During the year, did the foundation (either directly or indirectly):	1		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)  a disqualified person?  Yes X No	}	}	}
				l .
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No	Ì		1
	(4) Fay compensation to, or pay of reimburse the expenses of, a disqualified person?  (5) Transfer any income or assets to a disqualified person (or make any of either available	ł		i
	for the benefit or use of a disqualified person)?	1	1	)
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			İ
	if the foundation agreed to make a grant to or to employ the official for a period after		1	
	termination of government service, if terminating within 90 days.)  Yes X No			Į
	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  N/A	1b	1	
	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	1	ļ	<b>!</b>
	before the first day of the tax year beginning in 2017?	1c		$\bar{\mathbf{x}}$
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)):	İ		
	a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	1	1	
	before 2017? X Yes No			
	If "Yes," list the years $\triangleright$ 2016 , 2015 , 2014 , 2013	1	Ì	1
	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 )	2b	X	ļ
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		1	
	<u> </u>	l	Į.	1
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?		l	l
	b If "Yes," did it have excess business holdings in 2017 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		1	1
	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 2017.)  N/A	3b	₩-	X
	<ul> <li>a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?</li> <li>b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that</li> </ul>	4a	┼	<u> </u>
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	1	x
		rm <b>99</b>	0-PF	
	!!		<b>-</b>	(-011)

Compensation of five highest-paid employees (other than those		, enter NONE."	1 (d) Constitution of a	/ \ [vannan
(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				
	<del>                                     </del>	<del> </del>		
		<del></del>		
<del></del>	$\dashv$			!
Total number of other employees paid over \$50,000			<u> </u>	

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All other program-related investments. See instructions

Total. Add lines 1 through 3

Part X Minimum Investment Return (All domestic foundations	must complete this part. Foreign fou	ndations, see	: instructions.)
1 Fair market value of assets not used (or held for use) directly in carrying out charital	ole, etc., purposes:		
a Average monthly fair market value of securities		1a	160,586.
b Average of monthly cash balances		1b	160,586.
c Fair market value of all other assets		1c	
d Total (add lines 1a, b, and c)		1d	164,835.
e Reduction claimed for blockage or other factors reported on lines 1a and			
1c (attach detailed explanation)	1e 0.		
2 Acquisition indebtedness applicable to line 1 assets		1 2	0.
3 Subtract line 2 from line 1d		3	164,835.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount	t, see instructions)	4	2,473.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and o		5	162,362.
6 Minimum investment return. Enter 5% of line 5		6	8,118.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) a foreign organizations, check here		nd certain	
1 Minimum investment return from Part X, line 6		1	8,118.
2a Tax on investment income for 2017 from Part VI, line 5	2a   84.		
b Income tax for 2017. (This does not include the tax from Part VI.)	2b	1	
c Add lines 2a and 2b		2c	84.
3 Distributable amount before adjustments Subtract line 2c from line 1		3	8,034.
4 Recoveries of amounts treated as qualifying distributions		4	0.
5 Add lines 3 and 4		5	8,034.
6 Deduction from distributable amount (see instructions)		6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pai	t XIII, line 1	7	8,034.
Part XII Qualifying Distributions (see instructions)			
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	rposes:		
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	5,380.
<b>b</b> Program-related investments - total from Part IX-B		1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charita	able, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:			
a Suitability test (prior IRS approval required)		3a	
b Cash distribution test (attach the required schedule)		3b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8;	and Part XIII, line 4	4	5,380.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net inv	estment		
income Enter 1% of Part I, line 27b		5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4		6	5,380.
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	e section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,		round prior to 20 to		
line 7				8,034.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			7,709.	
b Total for prior years:	<del></del>	<del></del>	<del></del>	<del></del>
2015, 2014, 2013		4,371.		i
3 Excess distributions carryover, if any, to 2017:	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
a From 2012				
b From 2013				
c From 2014				
d From 2015				
e From 2016				
f Total of lines 3a through e	0.	Pro	Are the transfer of the second	e magazithere out o
4 Qualifying distributions for 2017 from			<del></del>	
Part XII, line 4. ►\$ 5,380.				
a Applied to 2016, but not more than line 2a			5,380.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a) )	0.			0.
6 Enter the net total of each column as indicated below:				
Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract				<del></del>
line 4b from line 2b		4,371.		
c Enter the amount of prior years'	<del></del>	1/0/20		<u></u>
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable	-			
amount - see instructions		4,371.		
e Undistributed income for 2016. Subtract line	<del></del>	<del></del>	····	
4a from line 2a Taxable amount - see instr.			2,329.	
f Undistributed income for 2017. Subtract	and the second second	Sept of the Confession of the		
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				8,03 <u>4</u> .
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	_		ļ	ļ
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012	<u> </u>	1		
not applied on line 5 or line 7	0.	<u> </u>		
9 Excess distributions carryover to 2018.				ļ
Subtract lines 7 and 8 from line 6a	0.		ļ	
10 Analysis of line 9:				
a Excess from 2013				
b Excess from 2014				
c Excess from 2015				
d Excess from 2016		}		
e Excess from 2017	<u> </u>	<u> </u>	L	Form 000 DE (2017)

	DALUPE INST			85-036	57006 Page 1
Part XIV Private Operating Fo	oundations (see in:	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for	·	_	. ▶	· · · · · · · · · · · · · · · · · · ·	
b Check box to indicate whether the found		ig foundation described		4942(j)(3) or 494	12(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		/ <del>.</del>
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a			T		
c Qualifying distributions from Part XII,			T		
line 4 for each year listed			]	1 / 1	
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities			1 /	4 1	
e Qualifying distributions made directly				<del>                                     </del>	
for active conduct of exempt activities.					
Subtract line 2d from line 2c	l	<b>,</b>			
3 Complete 3a, b, or c for the			<del>                                     </del>		
alternative test relied upon:		1			
a "Assets" alternative test - enter: (1) Value of all assets					
` '	<del></del>	<del> </del>	<del>/</del>	<del> </del>	<del></del>
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	l	/			
b "Endowment" alternative test - enter		<u> </u>	<del>-</del>	<del> </del>	
2/3 of minimum investment return			Ì	1	
shown in Part X, line 6 for each year					
fisted	<u> </u>		<del> </del>	<del> </del>	
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)			<u> </u>		
(2) Support from general public		•			
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)		l		<u> </u>	
(3) Largest amount of support from					· · · · · · · · · · · · · · · · · · ·
an exempt organization		<u> </u>	i		
(4) Gross investment income					
Part XV   Supplementary Info			/ if the foundatio	n had \$5,000 or mo	re in assets
at any time during the	he year-see insti	ructions.)			
1 Information Regarding Foundation	n Managers:			<del></del>	<del></del> -
a List any managers of the foundation who		than 2% of the total co	ntributions received by th	e foundation before the clos	e of any tax
year (but only if they have contributed m			•		•
MICHAEL L. KELEHER					
b List any managers of the foundation who	o own 10% or more of th	e stock of a corporation	i (or an equally large por	tion of the ownership of a pa	rtnership or
other entity) of which the foundation has			,	• •	·
NONE					
2 Information Regarding Contributi	on. Grant. Gift. Loan	. Scholarship, etc., I	Programs:	<del></del>	
Check here ► X if the foundation of				not accept unsolicited requi	ests for funds. If
the foundation makes gifts, grants, etc.,					
a The name, address, and telephone numb	per or email address of the	ne person to whom ann	lications should be addre	ssed:	
, , , , , , , , , , , , , , , , , , , ,		разова на пост врр			
b The form in which applications should b	e submitted and informa	tion and materials they	should include:		
,,					
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable field	s, kınds of institutions, o	r other factors:	

Part XVI-A	Analysis of Income-Producing Activities	5
. 41. 7. 7. 7.	Analysis of moonic i roddomg Activities	•

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	Allount	
a	<b></b>				<del></del>
b	<del></del>	<del></del>	_		<del></del>
·	<b>-</b>	·			<del></del>
<u> </u>	ļ		ļ		
e			<del> </del>		<del></del>
a Food and contracts from any aromant agencies		<del></del>			<del></del>
g Fees and contracts from government agencies		<del></del>	<b>⊢</b>	<del></del>	<del></del>
Membership dues and assessments					
4 Dividends and interest from securities			14	2,888.	
5 Net rental income or (loss) from real estate:		w *** ·			* *yer
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	5,699.	 
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					<u></u>
12 Subtotal. Add columns (b), (d), and (e)		0.	L	8,587.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	8,587.
(See worksheet in line 13 instructions to verify calculations.)					
Dowl VVI D. Dolodiomobin of Auticidian A.				4 D	

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

e No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
_	
_	
_	
-+	

Form **990-PF** (2017)

Part XVII	, .	egarding Transfers to a	nd Transactions a	nd Relationsh	ips With Nonchar		
1 Did the or	Exempt Organi	rectly engage in any of the followin	a with any other organization	n decembed in section	nn 501(c)	Ves	No
	•	nizations) or in section 527, relating	<del>-</del>	ni described in Secui	) ii 50 i(c)	1 1 1 6 3	110
-		ation to a noncharitable exempt or	•			1	{
(1) Cash	nom are reporting tourida	auon to a noncharnable exempt of	gamzadon oi.			1a(1)	x
(2) Other	accete					1a(1)	X
b Other tran						14(2)	<del>  ^</del>
	of assets to a noncharital	hle exempt organization				1b(1)	X
• •		ncharitable exempt organization				1b(1)	X
• •	il of facilities, equipment, (	' •				<del></del>	X
• •	bursement arrangements	• •				1b(3) 1b(4)	X
• •	s or loan guarantees					1b(5)	X
		mbership or fundraising solicitatio	,,			1b(6)	X
		iling lists, other assets, or paid em		••••		10(0)	$\frac{n}{x}$
		"Yes," complete the following sche		wave chow the fair m	arket value of the goods		1
		oundation. If the foundation receive	• •	•			
		other assets, or services received.	o icoo man ian market vall	io in any transaction	or anathiy attanyethetil, S	HOW III	
	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description	of transfers, transactions, and	sharing arrangem	ents
(4)2	(b)/unount involved	N/A		(d) Description	or transfers, transactions, and	Sharing arangem	
		N/A		<del></del>			
		<del> </del>		<del> </del> -	<del></del>		
		<del></del>		<del></del>	<del></del>		
		<del></del>		<del> </del>	<del></del>		
		<del></del>	<del></del>	<del> </del>	,		
		<del></del>		<del> </del>			
		<del></del>		<del></del> -			
		<del> </del>		<del></del>			
<del></del>	<del></del>	<del> </del>		<del> </del>			
		<del></del>			<del></del>		
<del></del>	<del></del>						
		<u> </u>					
		tly affiliated with, or related to, one	or more tax-exempt organi	zations described	۲		<del>,</del>
		n 501(c)(3)) or in section 527?			L	Yes2	No
b If "Yes," co	omplete the following sche		Last				
	(a) Name of org	janization	(b) Type of organization	<u> </u>	(c) Description of relations	пір	
	N/A						
	<del></del>		ļ				
			ļ	<del></del>			
	<del></del>		<u> </u>				
	and the state of t	ALL The second of the second o	<u> </u>	<u> </u>			
l and be		that I have examined this return, includir implete. Declaration of preparer (other tha			Ma Ma	y the IRS discus	s this
Sign   L	11.1 00%	201	11/2/.		sho	urn with the prepared below? See	nstr
Here	munal +1	eleper	<u> </u>	PRESID	ENT	X Yes	_ No
Sigr	nature of officer or trustee		Date	Title			
	Print/Type preparer's na	ame Preparer's s	ignature	Date	Check if PTIN		
				1	self- employed		
Paid		HILLER IVRUSSEL	D. HILLER	03/25/18		028871	3
Preparer	Firm's name ▶ PUL	AKOS CPAS, PC			Firm's EIN ► 85-0	219147	
Use Only							
		21 JEFFERSON ST					
	AL	BUQUERQUE, NM 8	7109		Phone no. (505)	338-15	00
					F	orm <b>990-P</b>	(2017)

3 Grants and Contributions Paid During the Y	ear (Continuation)		<del></del>	T
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
				İ
QUEEN OF THE AMERICAS'S GUILD		PC	CHARITABLE	
345 KAUTZ RD ST. CHARLES, IL 60174				30
ST. CHARLES, IL 00174			<del></del>	30
				ĺ
		İ		
		}		1
				l
				1
	<del> </del>	<del> </del>	<del> </del>	<del>                                     </del>
		1		
		1		ĺ
		<del> </del>	<del>                                     </del>	<u> </u>
	<del> </del>	<del> </del>	<del>                                     </del>	<del> </del>
	<del> </del>	<del> </del>	<del> </del>	<del>                                     </del>
<del></del>	<del> </del> -	<del>                                     </del>	<del>                                     </del>	<del> </del>
	<del> </del>	<del> </del>	<del> </del>	
	<del>                                     </del>	<del> </del>	<del> </del>	<del> </del>
	1			
Total from continuation sheets		<del></del>		30

#### 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.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

**Employer identification number** Name of the organization 85-0367006 THE GUADALUPE INSTITUTE Organization type (check one). Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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),

LHA 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) (2017)

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)

Name of organization

Employer identification number

## THE GUADALUPE INSTITUTE

85-0367006

Part I	Contributors (see instructions). Use duplicate copies of Part I	ıf addıtıonal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MICHAEL L KELEHER  1400 MORNINGSIDE DR NE  ALBUQUERQUE, NM 87110	\$\$,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
723452 11-0		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

### THE GUADALUPE INSTITUTE

85-0367006

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.				
(a)		(c)			

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\ \ \\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	990, 990-EZ, or 990-PF) (201

Name of organization **Employer identification number** THE GUADALUPE INSTITUTE 85-0367006 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF DIVIDENT	OS AND INTER	EST FROM SECUR	ITIES ST	PATEMENT 1
GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
FIDELITY BROKERAGE SERVICES LLC 3,566	5. 67	8. 2,888.	2,888.	
TO PART I, LINE 4 3,566	67	2,888.	2,888.	
FORM 990-PF	LEGAL	FEES	Sī	PATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ATTORNEY FEES	288.	0.		0.
TO FM 990-PF, PG 1, LN 16A	288.	0.		0.
FORM 990-PF	ACCOUNTI	NG FEES	នា	PATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	1,846.	923.		0.
TO FORM 990-PF, PG 1, LN 16B	1,846.	923.		0.
FORM 990-PF (	OTHER PROFES	SIONAL FEES	SI	PATEMENT 4
	(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DESCRIPTION	PER BOOKS	MENT INCOME	NET INCOME	PURPUSES
DESCRIPTION  INVESTMENT MANAGEMENT FEES WEBSITE EXPENSES	2,058. 126.	2,058. 0.	————	0. 0.

FORM 990-PF	TAXES			STATEMENT		5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM				
EXCISE TAXES FOREIGN TAXES PAID ON INVESTMENTS INCOME TAX	1,311. 48. 25.	4	8.			0.
TO FORM 990-PF, PG 1, LN 18 =	1,384.	1,38	4.			0.
FORM 990-PF	OTHER E	XPENSES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM				
INSURANCE EXPENSE COMPUTER EXPENSES OTHER ADMINISTRATIVE	400. 139.		0.			0.
EXPENSES	701.		0.			0.
TO FORM 990-PF, PG 1, LN 23	1,240.		0.			0.
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	7
DESCRIPTION		LUATION ETHOD	воо	K VALUE	FAIR MARKI VALUE	ET
FIDELITY INVESTMENTS BROKERAC ACCOUNT	 GE	COST		128,122.	167,	549.
TOTAL TO FORM 990-PF, PART II	I, LINE 13			128,122.	167,	549

	ST OF OFFICERS, DI	STAT	EMENT 8	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
MICHAEL L. KELEHER 1400 MORNINGSIDE NE ALBUQUERQUE, NM 87110	PRESIDENT 1.00	0.	0.	0.
GILBERT SCHNEIDER, OFM PO BOX 680 ST. MICHAELS, AZ 86511	VICE PRESIDENT 1.00	0.	0.	0.
JOHN CONDON 107 ROME LANE CORRALES, NM 87048	DIRECTOR 1.00	0.	0.	0.
SISTER BERNICE GARCIA 2025 FULTON EAST GRAND RAPIDS, MI 49503	DIRECTOR 1.00	0.	0.	0.
EDUARO GOMEZ 6701 BAKER NE ALBUQUERQUE, NM 87109	DIRECTOR 1.00	0.	0.	0.
DAVID HOLTBY 408 WASHINGTON NE ALBUQUERQUE, NM 87109	DIRECTOR 1.00	0.	0.	0.
EDWARD O'LEARY 10000-2 COUNTRY CLUB LANE NW ALBUQUERQUE, NM 87048	DIRECTOR 1.00	0.	0.	0.
KERRY N. KEARNY 7448 MARILYN AVE NE ALBUQUERQUE, NM 87109	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.