

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

► Do not enter social security numbers on this form as it may be made public.

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

OMB No 1545-0047

Open to Public

Inspection

X Yes

TEEA0113L 08/08/17

419

Form 990 (2017)

A	For the 2	017 calend	dar year, or tax year begin	ning	, 2017, a	and ending		,	
В	Check if app	olicable	С				D Employ	er identification nu	umber
	Addres	s change	New Mexico Wine	& Grape Growers	3		85-0	0393236	
	Name		Association				E Telepho		
	Initial r	eturn	P.O. Box 1373						
	Final retu	urn/terminated	Las Cruces, NM 8	8004					
	Amend	ed return					G Gross re	eceipts \$	883,428.
	Applica	ation pending	F Name and address of principal	l officer		H(a)	Is this a group return	n for subordinates?	
	٠٠ ب	· - i	Same As C Above			Н (р)	Are all subordinates If No,' attach a list	included?	Yes No
ī	Tax-exen	npt status	501(c)(3) X 501(c) (e	5)◀ (insert no)	4947(a)(1) or	52 f)	ii No, attacii a iist	(see instructions)	
J	Websit	e: ► N/				H(c)	Group exemption nu	ımber 🕨	
ĸ	Form of o	rganization	Corporation Trust	Association Other ►	/ L Ye	ear of formation	M s	State of legal domic	ile
Pa	rt I	Summar	y						
	1 Bri	efly descri	be the organization's missi	on or most significant a	ctivities Proj	mote the	wine indus	stry of N	ew
a			hrough all the st			retail,	_through_m	<u>narketing</u> ,	<u>'</u>
auc	<u>e</u> d	<u>lucatio</u>	<u>n, legislation, a</u>	and community o	utreach.				
Activities & Governance		 -		, ,	-,				
Š		eck this bo	ox • I if the organization of the gover	n discontinued its opera		sea of more t	nan 25% of its i	net assets.	c
~જ			dependent voting members			(lb)		4	<u>6</u>
ies	1		of individuals employed in		,			5	0
Ĕ			of volunteers (estimate if			160		6	0
Act			ed business revenue from f			1360 is in		7a	0.
	b Net	t unrelated	business taxable income	from Form 990-T, line 3	34,	8 > /	<u>></u>	7b	0.
	_				"CY/ "		/ Prior Year		rent Year
Revenue			and grants (Part VIII, line	•			179,9		81,930.
			rice revenue (Part VIII, line		131	1/2/ L	633,7		801,427.
ě			icome (Part VIII, column (A e (Part VIII, column (A), Iir		nd 1180//			22.	71.
			e — add lines 8 through 11			31/s H	813,7	29	883,428.
			milar amounts paid (Part I			/	013,7	25.	003,420.
			to or for members (Part I)		" \ _ /	<i>'</i>			
			er compensation, employee	57,8	23	66,789.			
es			fundraising fees (Part IX, o			00,703.			
Expenses			sing expenses (Part IX, col			<u> </u>			1
Ä			es (Part IX, column (A), lir	· · · · · · · · · · · · · · · · · · ·	-		741 5		005 701
		•			A) line 25)		741,5		825,721.
	[es. Add lines 13-17 (must e expenses Subtract line 18		A), IIIIe 25)		799,3		892,510.
+ 2		venue less	expenses Subtract line to	6 IIOIII IIIIE 12		D.	14,3 eginning of Curren		-9,082. d of Year
ance o	20 Tot	al assets ((Part X, line 16)				294,9		321,047.
Assets or	21 Tot		s (Part X, line 26)			<u> </u>		327.	9,244.
Net Tage	1		fund balances Subtract In	ne 21 from line 20		<u> </u>	283,6		311,803.
	<u> </u>	Signatur					203,0		311,003.
		_	eclare that I have examined this retu	irn, including accompanying sci	hedules and statem	ents, and to the be	est of my knowledge	and belief, it is tru-	e, correct, and
com	plete Declar	ation of prepa	rer (other than officer) is based on a	all information of which prepare	er has any knowled	ge 			
		.	/eg	////			10/	/31/18	
Sig	gn 💮	Signatu	re of officer				Date 1		
He	re	·	spere Rioddle			P	<u>resident</u>		
			print name and title	Brongrar's suggestives		I Data	1	T. Torin	
_		1	reparer's name	Preparer's signature		Date	Check	If PTIN	
Pa			a Johnson	Juanita Johnso		<u> </u>	self-employe	ed P0142	8333
Pro	eparer e Only	Firm's name		Tax Advisors LI	بار			. 48 0555	
US	Ulliy	Firm s addre	<u> </u>				Firm's EfN		
		i	Albuquerque,	NM 87121-5203			Phone no	(505) 873	3 - 3156

May the IRS discuss this return with the preparer shown above? (see instructions)

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Par	t III	Statement of Program Service Accomplishments					
	- ·	Check if Schedule O contains a response or note to any line in this Part	<u> </u>				
1.		ly describe the organization's mission.	11				
		omote the wine industry of New Mexico through a					
	rec	tail, through marketing, education, legislation	, and community outle	<u>acn.</u>			
2	Did th	he organization undertake any significant program services during the year which	were not listed on the prior				
		n 990 or 990-EZ?		П	Yes	X	No
		es,' describe these new services on Schedule O.		_		_	
3		the organization cease conducting, or make significant changes in how it co	onducts, any program services?		Yes	X	No
		es,' describe these changes on Schedule O					
4	Descr	cribe the organization's program service accomplishments for each of its thr ion 501(c)(3) and 501(c)(4) organizations are required to report the amount	ree largest program services, as n t of grants and allocations to other	neasure	ed by e total e	expen	ses es
	and r	revenue, if any, for each program service reported	to grants and anosations to other	J, 11.0	.0.0.		,00,
4 a	(Code	le:) (Expenses \$ including grants of \$) (Revenue	\$)
	Win	ne		_			
							-
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			_ _				
		-					
			-				
4 t	(Code	le:) (Expenses \$ including grants of \$) (Revenue	\$)
					- - -		
							
	(Code	le:) (Expenses \$ including grants of \$) (Revenue	Ś			
40	, (Coue	(Expenses φ moraling grants of φ	, (10101100	'			—′
							 -
	1.0+5-	v program convince (Doceribe in Cabadilla O.)		-			
40		er program services (Describe in Schedule O) senses \$ including grants of \$) (Revenue \$			`	
4 -		I program service expenses 0.) (ivevenue 3			<u>) </u>	
BAA		TEEA0102L 12/05/17			Forn	990	(2017)

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85-0393236

Form 990 (2017) New Mexico Wine & Grape Growers



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

Form 990 (2017) New Mexico Wine & Grape Growers Part IV | Checklist of Required Schedules (continued)

<u> </u>			Yes	No
20à	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No, 'go to line 25a	24a		Х
ŧ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	: Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b	_	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38		Х
BAA		Form	990 ((2017)

Check if Schedule O contains a response or note to any line in this Part V				
•			Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1 a	0	,	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1 b	_이	` •	, -
c Did the organization comply with backup withholding rules for reportable payments to vendors and	d reportable gamıng			
(gambling) winnings to prize winners?	. 1 1	1 c	, ,	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State ments, filed for the calendar year ending with or within the year covered by this return	2 a	0 .	,	
b If at least one is reported on line 2a, did the organization file all required federal employm		2 b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see				
3 a Did the organization have unrelated business gross income of \$1,000 or more during the y		3 a		X
b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O		3 b		
4 a At any time during the calendar year, did the organization have an interest in, or a signature or o	ther authority over, a	4 a		X
financial account in a foreign country (such as a bank account, securities account, or othe b If 'Yes,' enter the name of the foreign country	r illianciai account)	4 a		Λ.
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Finance	ial Accounts (FBAR).	\dashv		1
5a Was the organization a party to a prohibited tax shelter transaction at any time during the		5 a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax sh		5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000	and did the organization			
solicit any contributions that were not tax deductible as charitable contributions?		6 a		X
b if 'Yes,' did the organization include with every solicitation an express statement that such contrib not tax deductible?	outions or gifts were	6 ь		
7 Organizations that may receive deductible contributions under section 170(c).				1
a Did the organization receive a payment in excess of \$75 made partly as a contribution and	d partly for goods and	 		
services provided to the payor?	47	7 a 7 b		
 b If 'Yes,' did the organization notify the donor of the value of the goods or services provide c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which 		7 5		-
Form 8282?	it was required to me	7с		
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a person		7 e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal b		7 f		ļ
g If the organization received a contribution of qualified intellectual property, did the organization fil as required?		7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did form 1098-C?	the organization file a	7 h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintain	ed by the sponsoring			
organization have excess business holdings at any time during the year?		8	_	
9 Sponsoring organizations maintaining donor advised funds.				
a Did the sponsoring organization make any taxable distributions under section 4966?		9 a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related p	person?	9 b		L
10 Section 501(c)(7) organizations. Enter	lan I			
a Initiation fees and capital contributions included on Part VIII, line 12	10a	_		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	106			
11 Section 501(c)(12) organizations. Enter	11 a			
a Gross income from members or shareholders	11 a	!		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11 b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu		12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		12-	<u> </u>	-
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Scheen	dule O	,13a		
·	uuis U		•	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13 Ь	'		,
c Enter the amount of reserves on hand	13c			<u></u>
14a Did the organization receive any payments for indoor tanning services during the tax year		14a		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation	ın Schedule O	14b		
BAA TEEA0105L 08/08/17		Form	990	(2017)

1 0111	1 990 (2017) New Mexico Wille & Glape Glowers 03 0393230	<u>, </u>		age e								
Par	t VI described Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b be a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chase Schedule O. See instructions.	elow, nges i	and n									
	Check if Schedule O contains a response or note to any line in this Part VI			X								
Sec	tion A. Governing Body and Management			Y								
• •	Established a comban of values are the appearance body at the end of the toy year.	_	Yes	No								
ıa	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	<u>6</u>										
t	Enter the number of voting members included in line 1a, above, who are independent 1 b			1								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X								
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		х								
4	Did the organization make any significant changes to its governing documents			x								
	since the prior Form 990 was filed?											
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders?	5 6		X								
7 a	7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?											
t	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?											
8	3 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:											
	The governing body?	8 a		X								
b	b Each committee with authority to act on behalf of the governing body?											
9	9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O											
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	<u>cevent</u>	<i>le Co</i> Yes	No								
10 =	Did the organization have local chapters, branches, or affiliates?	10 a	res	X								
	of 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b										
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a		X								
	Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O											
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a		X								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b										
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c										
13	Did the organization have a written whistleblower policy?	13		Х								
14	Did the organization have a written document retention and destruction policy?	14		X								
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	• •										
-	The organization's CEO, Executive Director, or top management official	15a		X								
b	Other officers or key employees of the organization	15 b		X								
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)	١.										
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X								
b	If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16 b										
	tion C. Disclosure											
17 18	List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)))s only)	avaıl	 able								
	for public inspection. Indicate how you made these available. Check all that apply. Own website. Another's website. Upon request. Other (explain in Schedule O)											
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available the public during the tax year. See Schedule O	lable to										
20												
	Albuquerque Tax Advisors 3231 Coors Blvd SW Ste 21 Albuquerque NM 87121 5											
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Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

1 a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0 in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

		(C)									
(A) Name and Title	(B) Average hours per	l is	both dire	an d ector	fficer truste		١	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation	
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations	
(1) Beth Maier	1										
Director	0	Х			<u>.</u>			0.	0.	0.	
_(2) Theresa Fisher	1	х						0.	0.	0	
(3) Sam Aragon	1										
President	0			Х	_	<u> </u>		0.	0.	0.	
_(4) Jasper Riddle	1		1	.,					0	0	
Treasurer Co. T. a. D. db and	0		_	X	 			0.	0.	0.	
	0		1	Х				0.	0.	0.	
(6) Raymond Vigil	_1_										
Secretary	0			Х	L		_	0.	0.	0.	
	-										
(8)											
(10)											
(11)							ĺ				
(12)											
(13)											
(14)											

Part VII Section A. Officers, Directors, Tru	istees, l	Key	En	plo	ye	es, a	anc	Highest Con	pensated Emp	oloyees	(continued)
	(B)			(()						
(A) Name and title	Average hours per week	offic	cer a	nd a d	direct	than is both or/trus	tee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	Esti amour comp	(F) imated it of other ensation
	(list any hours for related organiza tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	ormer	(₩-2/1099-MISC)	(W-2/1099-MISC)	fro orgai and	m the nization related nizations
(15)											
(16)									_		
(17)							i	-			
(18)											
(19)											
(20)											
(21)											
(22)											
(23)											_
(24)											
(25)											
1 b Sub-total	4						► ►	0.	0.		0.
c Total from continuation sheets to Part VII, Secti d Total (add lines 1b and 1c)	on A			•			-	0.	0.		0.
2 Total number of individuals (including but not limited from the organization ▶ 0	to those I	isted	abo	ve) v	who	recei	ved	more than \$100,00	00 of reportable com	ipensation	
3 Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for suc	tor, or tru h ındıvıdu	stee, ial	, ke	, en	nplo	yee,	or h	nghest compensa	ted employee	3	Yes No
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	reportab er than \$1	le co 50,0	mpe 00?	ensa If '\	ition ⁄es,	and ' <i>com</i>	oth <i>ple</i>	er compensation te Schedule J for	from	4	X
5 Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Yes	e comper s,' comple	satio	n fr	om dule	any <i>J fo</i>	unre r suc	late ch p	d organization or erson	ındıvıdual	5	X
1 Complete this table for your five highest compen compensation from the organization Report compensation from the organization report compensation report r	sated indisation for	epen the c	den alen	t co	ntra year	ctors	tha	t received more t	han \$100,000 of ganization's tax yea	ar	
(A) Name and business add	ress							Description	of services	(C) Compen) Isation
				_							
2 Total number of independent contractors (including t		ited to	o the	ose I	ısted	d abo	ve)	 who received more	than		
\$100,000 of compensation from the organization	P 0										φ'

Par	t VIII Statement of Revenue				
	Check if Schedule O contains a response or note to	any line in this Part VII	<u> </u>		<u> </u>
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts	1 a Federated campaigns 1 a				
iran	b Membership dues 1b 15,563	3.			
S, G	c Fundraising events 1 c		ļ		
ar E	d Related organizations 1 d		İ		
E .	e Government grants (contributions) 1 e 66, 36	7.			-
Contributions, Gifts, Grants and Other Similar Amounts	f All other contributions, gifts, grants, and similar amounts not included above 1 f				
i di	g Noncash contributions included in lines 1a-1f: \$				
a Ç	h Total. Add lines 1a-1f	► 81,930.			
	Business Code				_
Program Service Revenue	2a Festivals 722410	767,629.	767,629.		
	b General Sponsorships 722410	19,795.	19,795.		
	c Merchandise 722410	9,699.	9,699.		
Ŗ	d Registrations 722410	2,384.	2,384.		
an	e Miscellaneous 722410	1,920.	1,920.		
ъ	f All other program service revenue				
<u>~</u>	g Total. Add lines 2a-2f	► 801,427.			ļ -
	Investment income (including dividends, interest and other similar amounts).	71.	71.		
	4 Income from investment of tax-exempt bond proceeds.			-	
	5 Royalties	•			-
	(i) Real (ii) Personal	-			
	6a Gross rents				
	b Less. rental expenses				
	c Rental income or (loss)		_		<u> </u>
	d Net rental income or (loss)	•			
	7 a Gross amount from sales of (i) Securities (ii) Other				
	assets other than inventory		,		
	b Less cost or other basis				
	and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)	•			
ā	8 a Gross income from fundraising events		İ		
Ę	(not including \$				
Other Revenue	1				,
7	See Part IV, line 18 a b Less direct expenses b		; ;		
톭	c Net income or (loss) from fundraising events.	<u> </u>	ľ		
O	9 a Gross income from gaming activities				
	See Part IV, line 19 b Less direct expenses b	 			
	c Net income or (loss) from gaming activities	<u> </u>			-
	10a Gross sales of inventory, less returns and allowances a				
	b Less: cost of goods sold b				
	c Net income or (loss) from sales of inventory	P			
	Miscellaneous Revenue Business Code				
	11a			· —	
	b				
	c				
	d All other revenue				
	e Total. Add lines 11a-11d	•			
	12 Total revenue. See instructions	883,428.	801,498.	0	0.

Page 10 Form 990 (2017) New Mexico Wine & Grape Growers 85-0393236 Part IX: Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) (A) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Program service Fundráising Total expenses Management and general expenses expenses expenses TOREST TOREST Grants and other assistance to domestic organizations and domestic governments والمالمة المسالات See Part IV, line 21 Grants and other assistance to domestic 2 individuals See Part IV, line 22 ALTERNATION FORES Grants and other assistance to foreign organizations, foreign governments, and for-eign individuals. See Part IV, lines 15 and 16 ni I 4 Benefits paid to or for members Compensation of current officers, directors, 0 0 0. trustees, and key employees 0 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 0. 0 0 66,789 66,789 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 10 Pavroll taxes Fees for services (non-employees) 75,225 16,116 a Management 91,341 **b** Legal 10,966 10,966 c Accounting 16,111 16,111 d Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) 1,337 80,136 12 Advertising and promotion 81,473 13 Office expenses Information technology 14 15 Royalties 16 Occupancy 2,795 15,737 12,942 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 501 43 458 3,077 3,077. Conferences, conventions, and meetings 19 115 115 20 Interest 21 Payments to affiliates Depreciation, depletion, and amortization 6,413. 22 4,373. 20,448. 23 Insurance 24,821. Other expenses Itemize expenses not covered above (List miscellaneous expenses 471 in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O). 1 33,769 121,126 154,895 a Marketing - Events _ _ _ 111,956 b Rental - Tents 111,956 c Staffing - Events __ 54,312 54,312 d Wine_Glasses_ 41,686 41,686 e All other expenses See Sch. O 37,923 212,317 174,394. 587,247. 298,850 25 Total functional expenses. Add lines 1 through 24e 892,510. 0.

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation SOP 98-2 (ASC 958-720)

Form 990 (2017)

Balance Sheet

Part X

BAA

Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 101,200 119,062. Cash - non-interest-bearing 2 Savings and temporary cash investments 118,990 2 180,602. 3 Pledges and grants receivable, net 58,663 4 11,716. Accounts receivable, net Loans and other receivables from current and former officers, directors trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 Notes and loans receivable, net 4ssets 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 32,066 10b 22,399 10 c **b** Less accumulated depreciation 16,080 9,667. Investments - publicly traded securities 11 11 12 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 13 14 14 Intangible assets 15 Other assets See Part IV, line 11 15 294,933. 16 321,047 Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses 8,827. 17 7,358 17 18 Grants pavable 18 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Liabilitie Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 2,500 25 1,886. 26 11,327 9,244. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ and complete or Fund Balances lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 29 Permanently restricted net assets X Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Net Assets Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 283,606. 311,803. 32 283,606. 33 Total net assets or fund balances 311,803. 33 321,047. 34 Total liabilities and net assets/fund balances 294,933. 34

3 b

Form 990 (2017)

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

BAA

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection Employer identification number

Department of the Treasury Internal Revenue Service Attach to Form 990. Open to Pulsernal Revenue Service Inspection									
	of the organization					Employer ide			
	New Mexic	co Wine & Grape Gro	owers						
	Associat					85-0393	3236		
Par	t Organiza	tions Maintaining Dono	or Advised Funds or Oth	ner Similar Fund	s or Acc	ounts.		-	
	Complete	if the organization answ	wered 'Yes' on Form 99	0, Part IV, line 6	Ď.				
			(a) Donor advised	funds	(b) F	unds and o	ther acco	ounts	
1	Total number at a								
2	00 0	ntributions to (during year)							
3	-	ants from (during year).							
4	Aggregate value	at end of year			_			 	
5	are the organizat	ion's property, subject to the	nor advisors in writing that the organization's exclusive lega	I control?			Yes	No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No								
Par	t II Conserva	tion Easements.							
			wered 'Yes' on Form 99		7.				
1	Purpose(s) of cor	nservation easements held by	y the organization (check all t						
	Preservation	of land for public use (e g, r	ecreation or education)	Preservation of				ea	
		natural habitat		Preservation of	a certified	historic stru	ucture		
		of open space					,		
2	Complete lines 2a last day of the ta	through 2d if the organization by year	neld a qualified conservation co	ntribution in the form				ne e Tax Year	
	Total number of	conservation easements			2 a	ielu at tile i	Liid Oi tii	ie iax ieai	
	-	stricted by conservation ease	ments		2 b				
	-		fied historic structure included	d in (a)	2 c		-		
			n (c) acquired after 7/25/06, a		 				
_	structure listed in	the National Register	nsferred, released, extinguished		[2 d	on during the			
3	tax year >	vation easements mounted, trai	isierreu, reieaseu, extiriguisrieu	, or terminated by the	, organizatio	in during the	•		
4		where property subject to conse	ervation easement is located >						
5	Does the organiz		garding the periodic monitori	ng, inspection, hand	dling of viol	ations,	Yes	∏No	
6			inspecting, handling of violation	is, and enforcing cons	servation ea	sements dur	ring the ye	ear	
7	Amount of expens ►\$	es incurred in monitoring, inspe	ecting, handling of violations, ar	nd enforcing conserva	ition easem	ents during t	he year		
8	Does each conse and section 170(n line 2(d) above satisfy the r	requirements of sec	tion 170(h)	(4)(B)(I)	Yes	No	
9	In Part XIII, descri include, if applica conservation eas	able, the text of the footnote	s conservation easements in its to the organization's financial	revenue and expense I statements that de	e statement scribes the	, and balanc organization	e sheet, a on's acco	and unting for	
Pai	rt III Organiza Complete	tions Maintaining Colle of the organization ans	ections of Art, Historica wered 'Yes' on Form 99	I Treasures, or 0 0, Part IV, line 8	Other Sin 3.	nilar Asso	ets.		
1 :	art, historical treas	sures, or other similar assets he	r SFAS 116 (ASC 958), not to eld for public exhibition, educati nicial statements that describe	on, or research in fur	ue stateme therance of	nt and bala public service	nce shee ce, provid	et works of e,	
	b If the organization historical treasure	on elected, as permitted unde	r SFAS 116 (ASC 958), to report public exhibition, education,	port in its revenue s	tatement a ance of pub	nd balance lic service, p	sheet wo provide the	orks of art, e	
	(i) Revenue incl	luded on Form 990, Part VIII,	line 1			► \$_			
	` '	ded in Form 990, Part X				► \$			
	amounts required	d to be reported under SFAS	historical treasures, or other sim 116 (ASC 958) relating to the	nilar assets for financ ese items	ial gain, pro	vide the follo	owing		
		d on Form 990, Part VIII, line	: 1			► \$_			
	b Assets included	ın Form 990, Part X				► \$			

Scriedule D (Form 990) 2017 New I				65-03		ge Z
Part III Organizations Mainta	ining Collec	ctions of Art, Histo	orical Treasures, o	r Other Similar As:	sets (continued	<u>) </u>
 Using the organization's acquisition items (check all that apply). 	i, accession, an	d other records, check a	any of the following that a	re a significant use of its	collection	
a Public exhibition		d Loan	or exchange programs			
b Scholarly research		e 💹 Other	·	. <u></u>		
c Preservation for future gener	rations					
4 Provide a description of the organiz Part XIII	zation's collection	ons and explain how the	y further the organization	's exempt purpose in		
5 During the year, did the organiza to be sold to raise funds rather to	han to be mair	ntained as part of the o	organization's collection	17		No
Part IV Escrow and Custodia line 9, or reported an	I Arrangem amount on	ents. Complete if Form 990, Part X,	the organization an line 21.	swered 'Yes' on Fo	orm 990, Part I\ 	√, —
1 a Is the organization an agent, true on Form 990, Part X?	stee, custodiar	or other intermediary	for contributions or oth	er assets not included	Yes	No.
b If 'Yes,' explain the arrangement	ın Part XIII ar	nd complete the follow	ıng table			
					Amount	
c Beginning balance				1 c		
d Additions during the year				1 d		
e Distributions during the year				1 e		
f Ending balance				1 f		
2 a Did the organization include an a	amount on For	m 990, Part X, line 21	, for escrow or custodia	l account liability?	Yes	οV
b If 'Yes,' explain the arrangement	in Part XIII C	Check here if the expla	nation has been provide	ed on Part XIII		
Part V Endowment Funds. C	omplete if t	he organization ai	nswered 'Yes' on Fo	orm 990, Part IV, li	ne 10.	
	(a) Current					ick
1 a Beginning of year balance						
b Contributions						
c Net investment earnings, gains, and losses						
d Grants or scholarships					-	
Other expenditures for facilities and programs						
f Administrative expenses						
g End of year balance.						
2 Provide the estimated percentage	e of the currer	nt vear end balance (lu	ne 1g. column (a)) held	as		
a Board designated or quasi-endowm		8	(-,,,			
b Permanent endowment ▶						
c Temporarily restricted endowmer		8				
The percentages on lines 2a, 2b, a		<u>.</u>				
3 a Are there endowment funds not in to organization by:	the possession	of the organization that	are held and administered	d for the	Yes	No
(i) unrelated organizations					3a(i)	
(ii) related organizations					3a(ii)	
b If 'Yes' on line 3a(ii), are the rela	ated organizati	ons listed as required	on Schedule R?		3b	
4 Describe in Part XIII the intended	d uses of the o	organization's endowm	ent funds			
Part VI Land, Buildings, and						
Complete if the organ	ization ansv	vered 'Yes' on For	m 990, Part IV, Ime	e 11a.See Form 99	30, Part X, line	10.
Description of property	-	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value)
1 a Land						
b Buildings	ļ					
c Leasehold improvements	ļ	-				
d Equipment	ļ					
e Other			32,066.	22,399.	9,6	<u>67</u> .

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c) BAA

Partivil Investments — Other Securities. Complete if the organization answered	L'Yes' on Form 990	N/A N/A Part IV line 11b. See Form 9	90 Part X line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end-o	
(1) Financial derivatives	(b) book value	(C) Michiga di Valuation. Cost di cha o	- Jean Market Value
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(c)			
(D)	<u> </u>		· -
(E)			
(F)			
(G)			<u>_</u> <u>_</u>
(H)			
(l)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)			
<u>Partivilli</u> Investments – Program Related.	L 134 L	N/A	00 Dowl V June 12
Complete if the organization answered	(b) Book value	(c) Method of valuation Cost or end	of year market value
(a) Description of investment	(b) Book value	(c) Wethou of Valuation Cost of end	-or-year market value
(1)			
(2)			
(3)			
(4)			
(5) (6)			
(7)			
(8)			
(9)			
(10)			
Total (Column (b) must equal Form 990, Part X, column (B) line 13) Part IIX Other Assets. Complete if the organization answered (a) De	N/A I 'Yes' on Form 990 scription	0, Part IV, line 11d. See Form 9	90, Part X, line 15.
(1)			
(2)			
(3)			
(4) (5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (l	B) line 15)	<u> </u>	
Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability	orm 990, Part IV, line 1		
(1) Federal income taxes	(b) Dook value		
(2) payroll Liabilities	1,88	36.	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) (10)			
(11)			
Total (Column (b) must equal Form 990, Part X, column (B) line 25)	▶ 1,88	36.	est le
2. Liability for uncertain tax positions. In Part XIII, provide the text of the fo			liability for uncertain
tax positions under FIN 48 (ASC 740) Check here if the text of the footnote			, U

Schedule D (Form 990) 2017 New Mexico Wine & Grape Growers		85-0393236	Page 4
Part XI Reconciliation of Revenue per Audited Financial Sta		ue per Return. N/A	
Complete if the organization answered 'Yes' on Form	990, Part IV, line 12	a.	
1. Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a Net unrealized gains (losses) on investments	2 a		
b Donated services and use of facilities	2 b		
c Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII)	2 d		
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
b Other (Describe in Part XIII)	4 b		
c Add lines 4a and 4b		4 c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, III	ne 12)	5	
Part XII Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered 'Yes' on Form			A
Total expenses and losses per audited financial statements	· · · · · · · · · · · · · · · · · · ·	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25			
a Donated services and use of facilities	2 a		
b Prior year adjustments	2 b		
c Other losses	2 c		

2d

4 b

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)
Part XIII Supplemental Information.

4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b

d Other (Describe in Part XIII.)

b Other (Describe in Part XIII) **c** Add lines **4a** and **4b**.

e Add lines 2a through 2d3 Subtract line 2e from line 1

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

Schedule **D** (Form 990) 2017

2 e

3

4 c

5

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

2017 Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number New Mexico Wine & Grape Growers 85-0393236

Form 990, Part VI, Line 11b - Form 990 Review Process

No review was or will be conducted.

<u>Association</u>

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No other documents available to the public.

Form 990, Part IX, Line 24e Other Expenses

	(A)	(B) Program	(C) Management	(D)
	Total	Services	<u>& General</u>	<u>Fundraising</u>
Automobile	2,339.	645.	1,694.	
Bank Charges	129.		129.	
Board Meeting Expenses	6,560.		6,560.	
Catering	6,359.		6,359.	
COGS - Event Direct Costs	800.	800.		
Door Prizes	544.	544.		
Dues & Subscriptions	852.		852.	
Electric	3,317.	3,317.		
Entertainment- Bands	26,479.	26,479.		
EV Production	459.	433.	26.	
Ice	8,061.	8,061.		
Licenses	3,961.	3,950.	11.	
Meals -PR	1,195.	751.	444.	
Media Tour - Expenses	6,405.		6,405.	
Medical	5,725.	5,650.	75.	
Office Supplies	4,524.	1,822.	2,702.	
Operations/General	15.		15.	
Photographer	2,503.	1,070.	1,433.	
Postage and Shipping	865.	685.	180.	
Printing and Publications	131.	89.	42.	
Rent - Öffice				
Rent - Storage Unit	1,193.		1,193.	
Rent Equipment	19,329.	19,329.		
Sanitation	10,043.	10,043.		
Security	31,103.	31,103.		
Shuttle	12,270.	12,270.		
Sound System	11,626.	11,626.		
Subcontractor - Events				
Supplies - Events	1,887.	1,787.	100.	
Telephone	1,566.		1,566.	
Tokens	10,597.	9,886.	711.	
Trade Show & Events	750.		750.	
Training & Education	35.		35.	
Venue rent	26,228.	23,648.	2,580.	
Wine Purchased from Members	4,467.	406.	4,061.	,
Total	\$ 212,317.	\$ 174,394.	\$ 37,923.	\$ 0.

Name of the organization New Mexico Wine & Grape Growers	Employer identification number
Association	85-0393236

Form 990, Part XI, Line 9 Other Changes In Net Assets Or Fund Balances

Other Increase

\$ 37,279. Total \$ 37,279.