

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

Name of foundation PNM RESOURCES FOUNDATION		A Employer identification number 85-0309005	
Number and street (or P O box number if mail is not delivered to street address) 414 SILVER SW		Room/suite	B Telephone number (see instructions) (505) 241-2209
City or town, state or province, country, and ZIP or foreign postal code ALBUQUERQUE, NM 871021115		C If exemption application is pending, check here ▶ <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here ▶ <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation ▶ <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 17,510,596	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	500,000			
	2 Check ▶ <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	176			
	4 Dividends and interest from securities . . .	379,442	379,442		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	653,208			
	b Gross sales price for all assets on line 6a 3,243,256				
	7 Capital gain net income (from Part IV, line 2) . . .		653,208		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	15,316	15,316		
	12 Total. Add lines 1 through 11	1,548,142	1,047,966		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	35,586	24,911		10,675
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	9,935	0		0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	18,128	18,128		0
	24 Total operating and administrative expenses. Add lines 13 through 23	63,649	43,039		10,675
	25 Contributions, gifts, grants paid	1,656,375			1,656,375
	26 Total expenses and disbursements. Add lines 24 and 25	1,720,024	43,039		1,667,050
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-171,882			
	b Net investment income (if negative, enter -0-)		1,004,927		
c Adjusted net income (if negative, enter -0-) . . .					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	19,785	18,602	18,602
	2 Savings and temporary cash investments	265,836	14,722	14,722
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ 500,000 Less allowance for doubtful accounts ▶ _____	1,000,000	500,000	500,000
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)	15,546,890	15,629,065	16,977,272
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	16,832,511	16,162,389	17,510,596	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable	500	505,825	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)	4,394	1,829	
	23 Total liabilities (add lines 17 through 22)	4,894	507,654	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	15,827,617	15,154,735	
	25 Temporarily restricted	1,000,000	500,000	
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 Total net assets or fund balances (see instructions)	16,827,617	15,654,735	
31 Total liabilities and net assets/fund balances (see instructions) .	16,832,511	16,162,389		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	16,827,617
2 Enter amount from Part I, line 27a	2	-171,882
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	16,655,735
5 Decreases not included in line 2 (itemize) ▶ _____	5	1,001,000
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	15,654,735

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a See Additional Data Table				
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	2	653,208
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

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

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

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

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



Yes



No

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

1 Enter the appropriate amount in each column for each year, see instructions before making any entries


(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	1,208,049	18,420,137	0 065583
2016	1,037,063	17,219,418	0 060226
2015	1,096,802	18,117,357	0 060539
2014	1,103,859	18,496,354	0 059680
2013	841,688	14,244,825	0 059087
2 Total of line 1, column (d)			2 0 305115
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years			3 0 061023
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5			4 18,640,647
5 Multiply line 4 by line 3			5 1,137,508
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 10,049
7 Add lines 5 and 6			7 1,147,557
8 Enter qualifying distributions from Part XII, line 4			8 1,667,050

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	10,049
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	10,049
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	10,049
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	12,998
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	12,998
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	102
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	2,847
11	Enter the amount of line 10 to be Credited to 2019 estimated tax <input type="checkbox"/> 2,847 Refunded <input type="checkbox"/>	11	0

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). 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	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
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	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> NM		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV	9	No
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 	10	Yes

Part VII-A Statements Regarding Activities (continued)

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WWW.PNM.COM/FOUNDATION</u>	13	Yes	
14	The books are in care of ► <u>TIMOTHY REYNOLDS</u> Telephone no ► <u>(505) 241-2209</u>			

Located at ► 1430 TIERRA VERDE PL SW ALBUQUERQUE NMZIP+4 ► 87105

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here	<input type="checkbox"/>		
	and enter the amount of tax-exempt interest received or accrued during the year	► 15		
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions.	1b		
	Organizations relying on a current notice regarding disaster assistance check here.			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	If "Yes," list the years ► 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		No

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

5a	During the year did the foundation pay or incur any amount to		Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services.		0

Part IX-A Summary of Direct Charitable Activities

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

	Expenses
1	
2	
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	18,872,131
b	Average of monthly cash balances.	1b	52,384
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	18,924,515
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.	2	0
3	Subtract line 2 from line 1d.	3	18,924,515
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	283,868
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	18,640,647
6	Minimum investment return. Enter 5% of line 5.	6	932,032

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

1	Minimum investment return from Part X, line 6.	1	932,032
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	10,049
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	10,049
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	921,983
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	921,983
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	921,983

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	1,667,050
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 charitable, 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	1,667,050
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	10,049
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,657,001

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				921,983
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2018				
a From 2013.	139,971			
b From 2014.	195,823			
c From 2015.	214,372			
d From 2016.	194,842			
e From 2017.	315,578			
f Total of lines 3a through e.	1,060,586			
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ <u>1,667,050</u>				
a Applied to 2017, but not more than line 2a			0	
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 2018 distributable amount.				921,983
e Remaining amount distributed out of corpus	745,067			
5 Excess distributions carryover applied to 2018 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,805,653			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).	139,971			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	1,665,682			
10 Analysis of line 9				
a Excess from 2014.	195,823			
b Excess from 2015.	214,372			
c Excess from 2016.	194,842			
d Excess from 2017.	315,578			
e Excess from 2018.	745,067			

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. ▶

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

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:

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

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

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

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

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

See Additional Data Table

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

See Additional Data Table

c Any submission deadlines

See Additional Data Table

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

See Additional Data Table

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	
b <i>Approved for future payment</i>				
Total			3b	

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments. . . .						
3 Interest on savings and temporary cash investments				14	176	
4 Dividends and interest from securities. . . .				14	379,442	
5 Net rental income or (loss) from real estate						
a Debt-financed property.						
b Not debt-financed property.						
6 Net rental income or (loss) from personal property						
7 Other investment income.				14	15,316	
8 Gain or (loss) from sales of assets other than inventory				18	653,208	
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue a _____						
b _____						
c _____						
d _____						
e _____						
12 Subtotal Add columns (b), (d), and (e). . .			0		1,048,142	0
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations)				13		1,048,142

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

[illegible]

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- | | | | |
|--|--|--------------|-----------|
| 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)(3) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | Yes | No |
| a Transfers from the reporting foundation to a noncharitable exempt organization of | | | |
| (1) Cash. | | 1a(1) | No |
| (2) Other assets. | | 1a(2) | No |
| b Other transactions | | | |
| (1) Sales of assets to a noncharitable exempt organization. | | 1b(1) | No |
| (2) Purchases of assets from a noncharitable exempt organization. | | 1b(2) | No |
| (3) Rental of facilities, equipment, or other assets. | | 1b(3) | No |
| (4) Reimbursement arrangements. | | 1b(4) | No |
| (5) Loans or loan guarantees. | | 1b(5) | No |
| (6) Performance of services or membership or fundraising solicitations. | | 1b(6) | No |
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. | | 1c | No |
| d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received | | | |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

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

* * * * *

2019-11-11

May the IRS discuss this
return
with the preparer shown
below

(see instr)? ☒ Yes ☐ No

Print/Type preparer's name TIMOTHY R REYNOLDS	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P00535985
Firm's name ▶ RICCI & COMPANY LLC				Firm's EIN ▶ 20-5949532
Firm's address ▶ 6200 UPTOWN BLVD NE STE 400 ALBUQUERQUE, NM 87110				Phone no (505) 338-0800

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 JPMORGAN VALUE ADVANTAGE	P		2018-01-18
1 VULCAN VALUE PARTNERS FUND	P		2018-01-18
VANGUARD 500 INDEX FD	P		2018-02-12
VANGUARD 500 INDEX FD	P		2018-03-07
VANGUARD 500 INDEX FD	P		2018-04-30
VANGUARD 500 INDEX FD	P		2018-05-14
MFS GOLBAL EQUITY FUND I	P		2018-06-08
MFS GOLBAL EQUITY FUND I	P		2018-07-09
VANGUARD 500 INDEX FD	P		2018-07-18
DODGE & COX INCOME FD	P		2018-08-14

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
170,000		137,623	32,377
100,000		77,206	22,794
6,000		3,009	2,991
22,000		10,729	11,271
33,000		16,405	16,595
19,000		9,306	9,694
15,000		12,568	2,432
13,000		10,933	2,067
10,000		4,778	5,222
10,000		9,852	148

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			32,377
			22,794
			2,991
			11,271
			16,595
			9,694
			2,432
			2,067
			5,222
			148

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
DODGE & COX INCOME FD		P		2018-09-17
1	JPMORGAN VALUE ADVANTAGE	P		2018-09-17
	MFS GOLBAL EQUITY FUND I	P		2018-09-17
	NATIXIS LOOMIS SAY C/P BND-Y	P		2018-09-17
	PIMCO INV GRD CRD BND	P		2018-09-17
	PRIMECAP ODYSSEY GROWTH	P		2018-09-17
	VANGUARD 500 INDEX FD	P		2018-09-17
	VULCAN VALUE PARTNERS FUND	P		2018-09-17
	DODGE & COX INCOME FD	P		2018-10-31
	VANGUARD 500 INDEX FD	P		2018-10-31

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
180,000		177,334	2,666
20,000		16,058	3,942
150,000		123,444	26,556
50,000		51,261	-1,261
50,000		52,210	-2,210
100,000		87,376	12,624
150,000		69,607	80,393
100,000		76,209	23,791
30,000		29,782	218
65,000		30,488	34,512

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			2,666
			3,942
			26,556
			-1,261
			-2,210
			12,624
			80,393
			23,791
			218
			34,512

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
DODGE & COX INCOME FD		P		2018-11-13
1	NATIXIS LOOMIS SAY C/P BND-Y	P		2018-11-13
	PIMCO INV GRD CRD BND	P		2018-11-13
	DODGE & COX INCOME FD	P		2018-12-06
	MFS GOLBAL EQUITY FUND I	P		2018-12-20
	CAPITAL GAINS DIVIDENDS	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
10,000		9,993	7
5,000		5,208	-208
5,000		5,309	-309
155,000		154,663	337
1,412,324		1,408,697	3,627
362,932			362,932

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			7
			-208
			-309
			337
			3,627
			362,932

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
MAUREEN GANNON	TRUSTEE 1 00	0	0	0
PNM CORPORATE HEADQUARTERS ALBUQUERQUE, NM 87158				
LISA GOODMAN	TRUSTEE 1 00	0	0	0
PNM CORPORATE HEADQUARTERS ALBUQUERQUE, NM 87158				
SAYURI YAMADA	TRUSTEE 1 00	0	0	0
PNM CORPORATE HEADQUARTERS ALBUQUERQUE, NM 87158				
PATRICK APODACA	TRUSTEE 1 00	0	0	0
PNM CORPORATE HEADQUARTERS ALBUQUERQUE, NM 87158				
MARY PARRA	TRUSTEE 1 00	0	0	0
PNM CORPORATE HEADQUARTERS ALBUQUERQUE, NM 87158				
WAYNE FRYE	VICE PRESIDENT 1 00	0	0	0
PNM CORPORATE HEADQUARTERS ALBUQUERQUE, NM 87158				
BECKY TEAGUE	PRESIDENT 1 00	0	0	0
PNM CORPORATE HEADQUARTERS ALBUQUERQUE, NM 87158				
STACEY GOODWIN	TRUSTEE 1 00	0	0	0
PNM CORPORATE HEADQUARTERS ALBUQUERQUE, NM 87158				
KATHLEEN LARESE	EXECUTIVE DIRECTOR 15 00	0	0	0
PNM CORPORATE HEADQUARTERS ALBUQUERQUE, NM 87158				
KEITH NIX	SECRETARY/TREASURER 1 00	0	0	0
PNM CORPORATE HEADQUARTERS ALBUQUERQUE, NM 87158				

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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

LAURIE ROACH
414 SILVER SW
ALBUQUERQUE, NM 871021115
(505) 241-0717

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

AVAILABLE ONLINE THE PNM RESOURCES FOUNDATION OFFERS REGULAR EMPLOYEES, RETIREES AND MEMBERS OF THE BOARD OF DIRECTORS OF PNM RESOURCES, INC THE OPPORTUNITY TO PARTICIPATE IN BOTH THE MATCHING GRANT AND VOLUNTEER GRANT PROGRAMS THE MATCHING GRANT PROGRAM PROVIDES A WAY TO DOUBLE AN INDIVIDUAL'S CONTRIBUTION TO A QUALIFYING ORGANIZATION THE VOLUNTEER GRANT PROGRAM PROVIDES A DONATION ON BEHALF OF THE PARTICIPANT BASED ON VOLUNTEER HOURS WORKED VOLUNTEER GRANTS ARE ISSUED AS FOLLOWS 12 TO 24 HOURS OF SERVICES - ORGANIZATION WILL RECEIVE \$100, 25 OR MORE HOURS OF SERVICE - ORGANIZATION WILL RECEIVE \$200, IF VOLUNTEER ALSO SERVES ON THE BOARD OF THE ORGANIZATION - ORGANIZATION WILL RECEIVE \$500

- c** Any submission deadlines

SEE APPLICATION

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

THE PNM RESOURCES FOUNDATION MATCHING GRANT AND VOLUNTEER GRANT PROGRAMS ARE AVAILABLE TO ANY NON-PROFIT ORGANIZATION THAT MEETS THE ELIGIBILITY REQUIREMENTS OUTLINED BELOW CONTRIBUTIONS MAY BE MADE TO ANY INSTITUTION OR ORGANIZATION SUBJECT TO THE MINIMUM AND MAXIMUM AMOUNTS LISTED BELOW CONTRIBUTIONS MAY BE DESIGNATED TO A CERTAIN PROGRAM AND/OR ACTIVITY, AND IF SUCH ACTIVITY QUALIFIES, THE PNM RESOURCES FOUNDATION'S GRANT WILL BE DIRECTED TO THE SAME PROGRAM CONTRIBUTIONS MUST BE IN THE FORM OF CASH OR MARKETABLE SECURITIES GIFTS IN-KIND, DUES, MEMBERSHIP FEES AND PLEDGES WILL NOT BE MATCHED ONLY WHOLE DOLLAR AMOUNTS WILL BE MATCHED

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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

LAURIE ROACH
414 SILVER SW
ALBUQUERQUE, NM 871021115
(505) 241-0717

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

DIRECTOR GRANT REQUEST ALL MEMBERS OF THE PNM RESOURCES FOUNDATION'S BOARD OF DIRECTORS ARE ABLE TO CONTRIBUTE A MAXIMUM OF \$1,000 PER YEAR TO A QUALIFYING ORGANIZATION OF THEIR CHOICE IN ADDITION, UPON APPROVAL OF THE BOARD, OTHER DICTIONARY BOARD GRANTS ARE MADE TO VARIOUS COMMUNITY ORGANIZATIONS OTHER DICTIONARY BOARD GRANTS ARE GIVEN TO COMMUNITY ORGANIZATIONS IN AREAS OF GREATEST NEED RECIPIENTS ARE BASED ON THE KNOWLEDGE OF THE RESPECTIVE COMMUNITY'S NEEDS AND ARE SELECTED AND APPROVED BY THE BOARD

- c** Any submission deadlines

DURING DIRECTOR TERM

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

SEE DESCRIPTION

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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

LAURIE ROACH
414 SILVER SW
ALBUQUERQUE, NM 871021115
(505) 241-0717

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

PNM POWER UP GRANTS AIM TO STRENGTHEN NEW MEXICO BY INVESTING IN OUR COMMUNITIES THE GRANTS SEEK INNOVATIVE AND CREATIVE PROPOSALS THAT SUPPORT THE COMMUNITIES PNM SERVES AND WHERE IT HAS BUSINESS INTERESTS PROPOSALS SHOULD FOSTER COMMUNITY ENGAGEMENT, THE IDENTITY OF A PLACE AND HELP TO TRANSFORM A COMMUNITY GRANTS MAY BE SUBMITTED FOR UP TO \$20,000 A TOTAL OF \$500,000 IN FUNDING IS AVAILABLE GRANTS SHOULD CLEARLY DEMONSTRATE PLAN TO CREATE AWARENESS OF PNM WITHIN THE COMMUNITY AND, WHERE POSSIBLE, ENGAGE PNM EMPLOYEES APPLICATIONS MAY ONLY BE SUBMITTED BY 501(C)(3) NON-PROFIT ORGANIZATIONS NON-PROFITS MAY ONLY APPLY ONCE, UNLESS ACTING AS A FISCAL AGENT

- c** Any submission deadlines

GRANT CYCLE IS APRIL 6TH THROUGH MAY 8TH

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

THE ORGANIZATIONS MUST MEET THE BASIC REQUIREMENTS LISTED ABOVE TO QUALIFY FOR NOMINATION AND APPROVAL BY THE BOARD

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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

LAURIE ROACH
414 SILVER SW
ALBUQUERQUE, NM 871021115
(505) 241-0717

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

PNM IS COMMITTED TO BUILDING A BETTER FUTURE FOR NEW MEXICO CREATING ECONOMIC OPPORTUNITY AND ENSURING THAT OUR CHILDREN GET A GOOD EDUCATION ARE CRITICAL TO ACHIEVING SUCCESS AND IMPROVING THE QUALITY OF LIFE FOR ALL A NEW CENTURY OF SERVICE GRANTS WILL SUPPORT ORGANIZATIONS THAT INNOVATE NEW PRODUCTS AND SERVICES TO GROW AND DEVELOP BUSINESSES, CREATE COLLABORATIVE COMMUNITY SPACES FOR PUBLIC USE, PROVIDE EDUCATIONAL OPPORTUNITIES SUPPORTING ECONOMIC DEVELOPMENT GRANTS ARE AWARDED IN THE AMOUNTS OF \$100,000, \$50,000, AND \$10,000 A TOTAL OF \$750,000 IS AVAILABLE GRANTS SHOULD CLEARLY DEMONSTRATE A PLAN TO CREATE AWARENESS OF PNM WITHIN THE COMMUNITY AND, WHERE POSSIBLE, ENGAGE PNM EMPLOYEES APPLICATIONS MAY ONLY BE SUBMITTED BY 501(C)(3) NON-PROFIT ORGANIZATIONS

- c** Any submission deadlines

GRANT CYCLE IS MARCH 1ST THROUGH MAY 9TH

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

THE ORGANIZATIONS MUST MEET THE BASIC REQUIREMENTS LISTED ABOVE TO QUALIFY FOR NOMINATION AND APPROVAL BY THE BOARD

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE NAT'L CENTER FOR FRONTIER COMMUNITIES 902 SANTA RITA ST SILVER CITY, NM 88061	NONE	EXEMPT	CENTENNIAL GRANT-ARTS & CULTURE	10,000
COOKING WITH KIDS INC 1400 MACLOVIA ST SANTA FE, NM 87505	NONE	EXEMPT	CENTENNIAL GRANT-ARTS & CULTURE	10,000
FORT BAYARD HIST PRESERVATION SOCIETY PO BOX 14 SILVER CITY, NM 88062	NONE	EXEMPT	CENTENNIAL GRANT-ARTS & CULTURE	10,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DOWNTOWNABQ MAINSTREET INITIATIVE 100 GOLD AVE SW STE 204 ALBUQUERQUE, NM 87102	NONE	EXEMPT	CENTENNIAL GRANT-ECONOMIC VITALITY	25,000
ALAMOGORDO MAINSTREET 919 1/2 N NEW YORK AVE ALAMOGORDO, NM 88310	NONE	EXEMPT	CENTENNIAL GRANT-ECONOMIC VITALITY	10,000
RUIDOSO MIDTOWN ASSOCIATION 720 SUDDERTH DR RUIDOSO, NM 88345	NONE	EXEMPT	CENTENNIAL GRANT-ECONOMIC VITALITY	10,000
Total ► 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
INNOVATE-EDUCATE 422 OLD SANTA FE TRAIL SANTA FE, NM 87501	NONE	EXEMPT	CENTENNIAL GRANT-EDUCATION	25,000
SANTA FE COUNCIL ON INTL RELATIONS 413 GRANT AVE D SANTA FE, NM 87501	NONE	EXEMPT	CENTENNIAL GRANT-EDUCATION	10,000
ASOMBRO INSTITUTE FOR SCIENCE EDUCATION PO BOX 891 LAS CRUCES, NM 88004	NONE	EXEMPT	CENTENNIAL GRANT-EDUCATION	25,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NEW MEXICO STATE UNIVERSITY FOUNDATION PO BOX 3590 LAS CRUCES, NM 88003	NONE	EXEMPT	CENTENNIAL GRANT-EDUCATION	10,000
NM MUSEUM OF NATURAL HISTORY FOUNDATION PO BOX 25446 ALBUQUERQUE, NM 87125	NONE	EXEMPT	CENTENNIAL GRANT-EDUCATION	10,000
UNIVERSITY OF NEW MEXICO FOUNDATION 700 LOMAS NE SUITE 108 ALBUQUERQUE, NM 87102	NONE	EXEMPT	CENTENNIAL GRANT-EDUCATION	10,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GIRL SCOUTS OF NEW MEXICO TRAILS 4000 JEFFERSON PLAZA NE ALBUQUERQUE, NM 87109	NONE	EXEMPT	CENTENNIAL GRANT- EDUCATION	25,000
COMMUNITY LEARNING NETWORK PO BOX 33423 SANTA FE, NM 87594	NONE	EXEMPT	CENTENNIAL GRANT- EDUCATION	10,000
CULTIVATING CODERS INC 219 CENTRAL AVE NW SUITE 200 ALBUQUERQUE, NM 87102	NONE	EXEMPT	CENTENNIAL GRANT- EDUCATION	50,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AAUW TECH TREK NEW MEXICO PO BOX 62 SOCORRO, NM 87801	NONE	EXEMPT	CENTENNIAL GRANT-EDUCATION	10,000
BELEN CONSOLIDATED SCHOOLS 520 N MAIN BELEN, NM 87002	NONE	EXEMPT	CENTENNIAL GRANT-EDUCATION	20,000
CNM FOUNDATION 525 BUENA VISTA DR SE ALBUQUERQUE, NM 87106	NONE	EXEMPT	CENTENNIAL GRANT-EDUCATION	25,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GIRL SCOUTS OF THE DESERT SW 9700 GIRL SCOUT WAY EL PASO, TX 79924	NONE	EXEMPT	CENTENNIAL GRANT- EDUCATION/FITNESS	10,000
ST FELIX PANTRY 4020 BARBARA LOOP SE RIO RANCHO, NM 87124	NONE	EXEMPT	CENTENNIAL GRANT- ENVIRONMENT	25,000
EXPLORA SCIENCE CENTER & CHILDREN'S MUSEU 1701 MOUNTAIN RD NW ALBUQUERQUE, NM 87104	NONE	EXEMPT	CENTENNIAL GRANT- ENVIRONMENT	25,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NEW MEXICO LAND CONSERVANCY PO BOX 6759 SANTA FE, NM 87502	NONE	EXEMPT	CENTENNIAL GRANT-ENVIRONMENT	10,000
THE WILDLIFE CENTER INC PO BOX 246 ESPANOLA, NM 87532	NONE	EXEMPT	CENTENNIAL GRANT-ENVIRONMENT	10,000
ADELANTE DEVELOPMENT CENTER INC 3900 OSUNA ROAD NE ALBUQUERQUE, NM 87109	NONE	EXEMPT	CENTENNIAL GRANT-HUMAN & HEALTH SERVICES	25,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BIG BROTHERS-BIG SISTERS OF CENTRAL NM 2500 LOUISIANA BLVD STE 200 ALBUQUERQUE, NM 87110	NONE	EXEMPT	CENTENNIAL GRANT-HUMAN & HEALTH SERVICES	10,000
NEW DAY YOUTH & FAMILY SERVICES 1330 SAN PEDRO NE SUITE 201-B ALBUQUERQUE, NM 87110	NONE	EXEMPT	CENTENNIAL GRANT-HUMAN & HEALTH SERVICES	10,000
RIO GRANDE COMMUNITY DEVELOPMENT CORP 318 ISLETA BLVD SW ALBUQUERQUE, NM 87105	NONE	EXEMPT	CENTENNIAL GRANT-HUMAN & HEALTH SERVICES	25,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FATHERS BUILDING FUTURES 4301 4TH ST NW ALBUQUERQUE, NM 87107	NONE	EXEMPT	CENTENNIAL GRANT-HUMAN & HEALTH SERVICES	50,000
GALLOPING GRACE YOUTH RANCH 3001 CIVIC CENTER CIR NE RIO RANCHO, NM 87144	NONE	EXEMPT	CENTENNIAL GRANT-HUMAN & HEALTH SERVICES	50,000
ARCA11300 LOMAS BLVD NE ALBUQUERQUE, NM 87112	NONE	EXEMPT	CENTENNIAL GRANT-HUMAN & HEALTH SERVICES	10,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ST MARTIN'S HOSPITALITY CENTER PO BOX 27258 ALBUQUERQUE, NM 87125	NONE	EXEMPT	CENTENNIAL GRANT-HUMAN & HEALTH SERVICES	50,000
CAPACITY BUILDERS INC 414 W BROADWAY FARMINGTON, NM 87401	NONE	EXEMPT	CENTENNIAL GRANT-HUMAN & HEALTH SERVICES	10,000
GIRLS INCORPORATED OF SANTA FE 301 HILLSIDE AVENUE SANTA FE, NM 87501	NONE	EXEMPT	CENTENNIAL GRANT-HUMAN & HEALTH SERVICES	10,000
Total ► 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SITE SANTA FE1606 PASEO DE PERALTA SANTA FE, NM 87501	NONE	EXEMPT	CENTENNIAL GRANT-HUMAN & HEALTH SERVICES	10,000
TENDERLOVE COMMUNITY CENTER INC 1518 GIRARD BLVD NE ALBUQUERQUE, NM 87106	NONE	EXEMPT	CENTENNIAL GRANT-HUMAN & HEALTH SERVICES	10,000
THE GRANTS COLLABORATIVE 5180 62ND AVENUE NORTH PINELLAS PARK, FL 33781	NONE	EXEMPT	CENTENNIAL GRANT-HUMAN & HEALTH SERVICES	25,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE SAMARITAN HOUSE INC PO BOX 1687 LAS VEGAS, NM 87701	NONE	EXEMPT	CENTENNIAL GRANT-HUMAN & HEALTH SERVICES	10,000
MIX SANTA FEPO BOX 909 SANTA FE, NM 87504	NONE	EXEMPT	CENTENNIAL GRANT-OTHER	10,000
REUNITY RESOURCES 1829 SAN YSIDRO CROSSING SANTA FE, NM 87507	NONE	EXEMPT	CENTENNIAL GRANT-OTHER	50,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
NEW MEXICO STATE UNIVERSITY FOUNDATION PO BOX 3590 LAS CRUCES, NM 88003	NONE	EXEMPT	DISCRETIONARY GRANT-EDUCATION	500
UNIVERSITY OF NEW MEXICO FOUNDATION 700 LOMAS NE SUITE 108 ALBUQUERQUE, NM 87102	NONE	EXEMPT	DISCRETIONARY GRANT-EDUCATION	750
GIRL SCOUTS OF NEW MEXICO TRAILS 4000 JEFFERSON PLAZA NE ALBUQUERQUE, NM 87109	NONE	EXEMPT	DISCRETIONARY GRANT-EDUCATION	1,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BUENA VISTA PTO2600 19TH AVE ALAMOGORDO, NM 88310	NONE	EXEMPT	DISCRETIONARY GRANT- EDUCATION	1,000
WESTERN WASHINGTON UNIVERSITY FOUNDATION 516 HIGH STREET BELLINGHAM, WA 98225	NONE	EXEMPT	DISCRETIONARY GRANT- EDUCATION	1,000
ST FELIX PANTRY 4020 BARBARA LOOP SE RIO RANCHO, NM 87124	NONE	EXEMPT	DISCRETIONARY GRANT- ENVIRONMENT	500
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CATHOLIC CHARITIES OF NEW MEXICO 2010 BRIDGE BLVD SW ALBUQUERQUE, NM 87105	NONE	EXEMPT	DISCRETIONARY GRANT-HUMAN & HEALTH SERVICES	1,000
ALBUQUERQUE COMMUNITY FOUNDATION 624 TIJERAS AVE NW ALBUQUERQUE, NM 87102	NONE	EXEMPT	DISCRETIONARY GRANT-HUMAN & HEALTH SERVICES	1,000
THE STOREHOUSE 106 BROADWAY BLVD SE ALBUQUERQUE, NM 87102	NONE	EXEMPT	DISCRETIONARY GRANT-HUMAN & HEALTH SERVICES	500
Total ► 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
EL RANCHITO DE LOS NINOS PO BOX 2400 LOS LUNAS, NM 87031	NONE	EXEMPT	DISCRETIONARY GRANT-HUMAN & HEALTH SERVICES	500
EQUAL ACCESS TO JUSTICE FUND PO BOX 92860 ALBUQUERQUE, NM 87199	NONE	EXEMPT	DISCRETIONARY GRANT-HUMAN & HEALTH SERVICES	250
NEW MEXICO PARKINSON'S COALITION 7739 E BROADWAY BLVD 352 TUCSON, AZ 85710	NONE	EXEMPT	DISCRETIONARY GRANT-HUMAN & HEALTH SERVICES	1,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SANTA FE MOUNTAIN CENTER INC 1524 BISHOPS LODGE RD B SANTA FE, NM 87506	NONE	EXEMPT	DISCRETIONARY GRANT-OTHER	1,000
ALBUQUERQUE COMMUNITY FOUNDATION 624 TIJERAS AVE NW ALBUQUERQUE, NM 87102	NONE	EXEMPT	EMPLOYEE CRISIS FUND GRANT-HUMAN & HEALTH SERVICES	100,000
ALBUQUERQUE HISPANO CHAMBER OF COMMERCE 1309 4TH STREET SW ALBUQUERQUE, NM 87102	NONE	EXEMPT	FOUNDATION GRANT-ECONOMIC VITALITY	100,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WOMEN'S ECONOMIC SELF-SUFFICIENCY TEAM 609 BROADWAY BLVD NE ALBUQUERQUE, NM 87102	NONE	EXEMPT	FOUNDATION GRANT-ECONOMIC VITALITY	100,000
NEW MEXICO STATE UNIVERSITY FOUNDATION PO BOX 3590 LAS CRUCES, NM 88003	NONE	EXEMPT	FOUNDATION GRANT-EDUCATION	100,000
CNM INGENUITY INC 900 UNIVERSITY BLVD SE ALBUQUERQUE, NM 87106	NONE	EXEMPT	FOUNDATION GRANT-EDUCATION	200,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ELKINS BAND BOOSTER CLUB 6140 HIGHWAY 6 94 MISSOURI CITY, TX 77459	NONE	EXEMPT	MATCHING GRANT-ARTS & CULTURE	1,000
MISSOURI UNIV OF SCIENCE & TECHNOLOGY 300 W 13TH STREET ROLLA, MO 65409	NONE	EXEMPT	MATCHING GRANT-EDUCATION	1,000
PECOS JR EAGLES1302 S PARK ST PECOS, TX 79772	NONE	EXEMPT	MATCHING GRANT-EDUCATION	1,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TEEN CHALLENGE OF NEW MEXICO 5605 BATAAN MEMORIAL LAS CRUCES, NM 88012	NONE	EXEMPT	MATCHING GRANT-EDUCATION	2,000
TEXAS LUTHERAN UNIVERSITY 1000 W COURT STREET SEGUIN, TX 78155	NONE	EXEMPT	MATCHING GRANT-EDUCATION	1,000
NEW MEXICO STATE UNIVERSITY FOUNDATION PO BOX 3590 LAS CRUCES, NM 88003	NONE	EXEMPT	MATCHING GRANT-EDUCATION	4,200
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
UNIVERSITY OF NEW MEXICO FOUNDATION 700 LOMAS NE SUITE 108 ALBUQUERQUE, NM 87102	NONE	EXEMPT	MATCHING GRANT-EDUCATION	2,875
SANTA FE PREPARATORY SCHOOL 1101 CAMINO CRUZ BLANCA SANTA FE, NM 87501	NONE	EXEMPT	MATCHING GRANT-EDUCATION	1,000
SILVER HIGH SCHOOL 3200 N SILVER STREET SILVER CITY, NM 88061	NONE	EXEMPT	MATCHING GRANT-EDUCATION	1,500
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ST MICHAEL'S HIGH SCHOOL FOUNDATION PO BOX 22563 SANTA FE, NM 87505	NONE	EXEMPT	MATCHING GRANT-EDUCATION	1,000
UNIVERSITY OF COLORADO FOUNDATION 4740 WALNUT STREET BOULDER, CO 80301	NONE	EXEMPT	MATCHING GRANT-EDUCATION	1,000
WESTLAKE ACADEMY FOUNDATION 2600 JT OTTINGER RD WESTLAKE, TX 76262	NONE	EXEMPT	MATCHING GRANT-EDUCATION	1,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ALBUQUERQUE MUSEUM FOUNDATION INC PO BOX 7006 ALBUQUERQUE, NM 87194	NONE	EXEMPT	MATCHING GRANT-EDUCATION	2,000
EAST MOUNTAIN HIGH SCHOOL FOUNDATION PO BOX 340 SANDIA PARK, NM 87047	NONE	EXEMPT	MATCHING GRANT-EDUCATION	1,000
KAREN ORTIZ SNOWBALL COTILLION 1030 STAGECOACH ROAD SANTA FE, NM 87501	NONE	EXEMPT	MATCHING GRANT-EDUCATION	1,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AADUSSSAPO BOX 67275 ALBUQUERQUE, NM 87193	NONE	EXEMPT	MATCHING GRANT- EDUCATION/FITNESS	1,000
ZIA SOCCER CLUB INC 2701 WISCONSIN STREET NE ALBUQUERQUE, NM 87110	NONE	EXEMPT	MATCHING GRANT- EDUCATION/FITNESS	1,000
AZTEC BASEBALL ASSOCIATION PO BOX 1388 AZTEC, NM 87410	NONE	EXEMPT	MATCHING GRANT- EDUCATION/FITNESS	1,000
Total ► 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
VALLEY ELKS YOUTH BASKETBALL 1574 STATE ROAD 502 WEST SANTA FE, NM 87506	NONE	EXEMPT	MATCHING GRANT- EDUCATION/FITNESS	1,000
WESST CORPORATION 609 BROADWAY BLVD NE ALBUQUERQUE, NM 87102	NONE	EXEMPT	MATCHING GRANT- ENVIRONMENT	1,000
SEED2NEEDPO BOX 874 CORRALES, NM 87048	NONE	EXEMPT	MATCHING GRANT- ENVIRONMENT	1,100
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NEW MEXICO WATER COLLABORATIVE 1751 BELLAMAH AVE NW 1101 ALBUQUERQUE, NM 87104	NONE	EXEMPT	MATCHING GRANT-ENVIRONMENT	1,000
ALBUQUERQUE CHRISTIAN CHILDREN'S HOME 5700 WINTER HAVEN ROAD NW ALBUQUERQUE, NM 87120	NONE	EXEMPT	MATCHING GRANT-HUMAN & HEALTH SERVICES	1,000
CARRIE TINGLEY HOSPITAL FOUNDATION 700 LOMAS BLVD NE 2-200 ALBUQUERQUE, NM 87102	NONE	EXEMPT	MATCHING GRANT-HUMAN & HEALTH SERVICES	2,050
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JEMEZ HELPING HANDS 1038 HIGHWAY 485 JEMEZ PUEBLO, NM 87024	NONE	EXEMPT	MATCHING GRANT-HUMAN & HEALTH SERVICES	1,000
ROADRUNNER FOOD BANK 5840 OFFICE BLVD NE ALBUQUERQUE, NM 87109	NONE	EXEMPT	MATCHING GRANT-HUMAN & HEALTH SERVICES	1,650
RONALD MCDONALD HOUSE CHARITIES OF NM 1011 YALE BLVD NE ALBUQUERQUE, NM 87106	NONE	EXEMPT	MATCHING GRANT-HUMAN & HEALTH SERVICES	1,355
Total ► 3a				1,656,375

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SPECIAL OLYMPICS NEW MEXICO 6600 PALOMAS NE SUITE 207 ALBUQUERQUE, NM 87109	NONE	EXEMPT	MATCHING GRANT-HUMAN & HEALTH SERVICES	3,800
CATHOLIC CHARITIES OF NEW MEXICO 2010 BRIDGE BLVD SW ALBUQUERQUE, NM 87105	NONE	EXEMPT	MATCHING GRANT-HUMAN & HEALTH SERVICES	1,000
ALBUQUERQUE COMMUNITY FOUNDATION 624 TIJERAS AVE NW ALBUQUERQUE, NM 87102	NONE	EXEMPT	MATCHING GRANT-HUMAN & HEALTH SERVICES	1,100
Total ► 3a				1,656,375

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LITTLE SISTERS OF THE POOR 1900 MARK AVE GALLUP, NM 87301	NONE	EXEMPT	MATCHING GRANT-HUMAN & HEALTH SERVICES	1,000
NORTH TEXAS FOOD BANK 3677 MAPLESHADE LN PLANO, TX 75075	NONE	EXEMPT	MATCHING GRANT-HUMAN & HEALTH SERVICES	1,000
HEADING HOME215 3RD ST SW ALBUQUERQUE, NM 87102	NONE	EXEMPT	MATCHING GRANT-HUMAN & HEALTH SERVICES	1,150
Total ▶ 3a				1,656,375

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PB & J FAMILY SERVICES INC 1101 LOPEZ RD SW ALBUQUERQUE, NM 87105	NONE	EXEMPT	MATCHING GRANT-HUMAN & HEALTH SERVICES	1,000
SOCIETY OF ST VINCENT DE PAUL 4120 MENAUL BLVD NE ALBUQUERQUE, NM 87110	NONE	EXEMPT	MATCHING GRANT-HUMAN & HEALTH SERVICES	1,750
CHILDHAVEN INC807 W APACHE ST FARMINGTON, NM 87401	NONE	EXEMPT	MATCHING GRANT-HUMAN & HEALTH SERVICES	1,100
Total ▶ 3a				1,656,375

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ANIMAL HUMANE ASSOCIATION OF NEW MEXICO 615 VIRGINIA STREET SE ALBUQUERQUE, NM 87108	NONE	EXEMPT	MATCHING GRANT-OTHER	17,845
PUPPY DOG RANCH RESCUE & SANCTUARY 27 TWIN SISTERS CREEK ROAD ARENAS VALLEY, NM 88022	NONE	EXEMPT	MATCHING GRANT-OTHER	1,300
ROTARY CLUB OF ALBUQUERQUE - SANDIA PO BOX 21456 ALBUQUERQUE, NM 87154	NONE	EXEMPT	MATCHING GRANT-OTHER	1,000
Total			▶ 3a	1,656,375

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SANTA FE DOWNTOWN KIWANIS FOUNDATION PO BOX 622 SANTA FE, NM 87504	NONE	EXEMPT	MATCHING GRANT-OTHER	1,000
SILVER CITY USSSA INC 61 TRUCK BYPASS ROAD SILVER CITY, NM 88061	NONE	EXEMPT	MATCHING GRANT-OTHER	1,000
JUNE'S SENIOR CAT RESCUE PO BOX 16521 ALBUQUERQUE, NM 87191	NONE	EXEMPT	MATCHING GRANT-OTHER	2,205
Total ▶ 3a				1,656,375

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RIO LIGHTNING INC 3319 FLAT IRON ROAD NE RIO RANCHO, NM 87144	NONE	EXEMPT	MATCHING GRANT-OTHER	1,000
USSSA SUMMER LEAGUEPO BOX 631 ALBUQUERQUE, NM 87102	NONE	EXEMPT	MATCHING GRANT-OTHER	1,000
MATCHING GRANTS LESS THAN 1000 VARIOUS ALBUQUERQUE, NM 87102	NONE	EXEMPT	MATCHING GRANT-OTHER	32,845
Total ▶ 3a				1,656,375

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ALBUQUERQUE COMMUNITY FOUNDATION 624 TIJERAS AVE NW ALBUQUERQUE, NM 87102	NONE	EXEMPT	OTHER GRANTS-HUMAN & HEALTH SERVICES	5,000
CHRISTIAN COMMUNITY ACTION 200 S MILL STREET LEWISVILLE, TX 75057	NONE	EXEMPT	TNMP POWER UP GRANT-ARTS & CULTURE	10,000
WEST SHORE CIVIC ASSOCIATION 560 FM-3118 LAGUNA PARK, TX 76644	NONE	EXEMPT	TNMP POWER UP GRANT-ECONOMIC VITALITY	2,588
Total ▶ 3a				1,656,375

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ALVIN COMMUNITY COLLEGE FOUNDATION 3110 MUSTANG ROAD ALVIN, TX 77511	NONE	EXEMPT	TNMP POWER UP GRANT-EDUCATION	9,750
ANGLETON ISD EDUCATION FOUNDATION 1900 N DOWNING ROAD ANGLETON, TX 77515	NONE	EXEMPT	TNMP POWER UP GRANT-EDUCATION	9,079
COLLEGE OF MAINLAND 1200 N AMBURN RD TEXAS CITY, TX 77591	NONE	EXEMPT	TNMP POWER UP GRANT-EDUCATION	10,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COMMUNITIES IN SCHOOLS BAY AREA 303 E MAIN ST 120 LEAGUE CITY, TX 77573	NONE	EXEMPT	TNMP POWER UP GRANT-EDUCATION	5,000
FORT STOCKTON MIDDLE SCHOOL PROJECT 2400 W 5TH STREET FORT STOCKTON, TX 79735	NONE	EXEMPT	TNMP POWER UP GRANT-EDUCATION	4,726
LEWISVILLE EDUCATION FOUNDATION INC 400 WEST MAIN STREET LEWISVILLE, TX 75057	NONE	EXEMPT	TNMP POWER UP GRANT-EDUCATION	7,500
Total ▶ 3a				1,656,375

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TCISD FOUNDATION FOR THE FUTURE 1401 NINTH AVENUE NORTH TEXAS CITY, TX 77590	NONE	EXEMPT	TNMP POWER UP GRANT-EDUCATION	8,500
VALLEY MILLS LIBRARY ASSOCIATION INC PO BOX 25 VALLEY MILLS, TX 76689	NONE	EXEMPT	TNMP POWER UP GRANT-EDUCATION	3,700
HOPE ACTIVE1801 FM 528 RD WEBSTER, TX 77598	NONE	EXEMPT	TNMP POWER UP GRANT-HUMAN & HEALTH SERVICES	4,314
Total ▶ 3a				1,656,375

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WINKLER COUNTY HOSPITAL DISTRICT 821 JEFFEE DR KERMIT, TX 79745	NONE	EXEMPT	TNMP POWER UP GRANT-HUMAN & HEALTH SERVICES	4,500
BRAZORIA COUNTY ALLIANCE FOR CHILDREN 139 E MYRTLE ST ANGLETON, NM 77515	NONE	EXEMPT	TNMP POWER UP GRANT-HUMMAN & HEALTH SERVICES	4,018
CITY OF PRINCETON POLICE DEPT 306 MAIN STREET PRINCETON, TX 75407	NONE	EXEMPT	TNMP POWER UP GRANT-HUMMAN & HEALTH SERVICES	7,870
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CITY OF TOM BEAN201 S BRITTON TOM BEAN, TX 75489	NONE	EXEMPT	TNMP POWER UP GRANT-HUMMAN & HEALTH SERVICES	2,155
CITY OF VALLEY MILLS TX 401 5TH STREET VALLEY MILLS, TX 76689	NONE	EXEMPT	TNMP POWER UP GRANT-HUMMAN & HEALTH SERVICES	10,000
VALENCIA COUNTY AMATEUR RADIO ASSOC INC PO BOX 268 PERALTA, NM 87042	NONE	EXEMPT	VOLUNTEER GRANT-ARTS & CULTURE	1,100
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JUNIOR ACHIEVEMENT 4700 LINCOLN RD NE ALBUQUERQUE, NM 87109	NONE	EXEMPT	VOLUNTEER GRANT-ECONOMIC VITALITY	1,200
UNIVERSITY OF NEW MEXICO FOUNDATION 700 LOMAS NE SUITE 108 ALBUQUERQUE, NM 87102	NONE	EXEMPT	VOLUNTEER GRANT-EDUCATION	2,200
GIRL SCOUTS OF NEW MEXICO TRAILS 4000 JEFFERSON PLAZA NE ALBUQUERQUE, NM 87109	NONE	EXEMPT	VOLUNTEER GRANT-EDUCATION	1,300
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SEED2NEEDPO BOX 874 CORRALES, NM 87048	NONE	EXEMPT	VOLUNTEER GRANT- ENVIRONMENT	1,900
HAWKS ALOFT INC 6715 EAGLE ROCK AVE NE ALBUQUERQUE, NM 87113	NONE	EXEMPT	VOLUNTEER GRANT- ENVIRONMENT	1,100
KEEP LEWISVILLE BEAUTIFUL 101 W MAIN ST STE 102 LEWISVILLE, TX 75057	NONE	EXEMPT	VOLUNTEER GRANT- ENVIRONMENT	2,600
Total ► 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
EL REFUGIO INC 800 SOUTH ROBERT STREET SILVER CITY, NM 88061	NONE	EXEMPT	VOLUNTEER GRANT-ENVIRONMENT	1,600
TAI CHI CHIH ASSOCIATION 3107 EUBANK NE SUITE 19 ALBUQUERQUE, NM 87111	NONE	EXEMPT	VOLUNTEER GRANT-HUMAN & HEALTH SERVICES	1,100
BPOE ELKS FARMINGTON LODGE #1747 801 MUNICIPAL DR FARMINGTON, NM 87401	NONE	EXEMPT	VOLUNTEER GRANT-HUMAN & HEALTH SERVICES	1,000
Total ► 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BIG BROTHERS-BIG SISTERS OF OTERO COUNTY 1211 EAST 1ST STREET SUITE 10 ALAMOGORDO, NM 88310	NONE	EXEMPT	VOLUNTEER GRANT-HUMAN & HEALTH SERVICES	1,000
CLOUD DANCERS THERAPEUTIC HORSEMANSHIP PO BOX 14058 ALBUQUERQUE, NM 87191	NONE	EXEMPT	VOLUNTEER GRANT-HUMAN & HEALTH SERVICES	1,000
RIO GRANDE DOWN SYNDROME NETWORK PO BOX 6759 ALBUQUERQUE, NM 87197	NONE	EXEMPT	VOLUNTEER GRANT-HUMAN & HEALTH SERVICES	1,100
Total			▶ 3a	1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SOCIETY OF ST VINCENT DE PAUL 4120 MENAUL BLVD NE ALBUQUERQUE, NM 87110	NONE	EXEMPT	VOLUNTEER GRANT-HUMAN & HEALTH SERVICES	1,400
SPECIAL OLYMPICS NEW MEXICO 6600 PALOMAS NE SUITE 207 ALBUQUERQUE, NM 87109	NONE	EXEMPT	VOLUNTEER GRANT-HUMAN & HEALTH SERVICES	1,400
ANIMAL HUMANE ASSOCIATION OF NEW MEXICO 615 VIRGINIA STREET SE ALBUQUERQUE, NM 87108	NONE	EXEMPT	VOLUNTEER GRANT-OTHER	1,800
Total ► 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SILVER CITY USSSA INC 61 TRUCK BYPASS ROAD SILVER CITY, NM 88061	NONE	EXEMPT	VOLUNTEER GRANT-OTHER	1,500
AMERICAN LEGION POST #69 900 4TH ST NW ALBUQUERQUE, NM 87114	NONE	EXEMPT	VOLUNTEER GRANT-OTHER	1,000
PUPPY DOG RANCH RESCUE & SANCTUARY 27 TWIN SISTERS CREEK ROAD ARENAS VALLEY, NM 88022	NONE	EXEMPT	VOLUNTEER GRANT-OTHER	1,000
Total ▶ 3a				1,656,375

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
STARS UNITED GLOBAL OUTREACH 5429 SINGING HILLS DR DALLAS, TX 75241	NONE	EXEMPT	VOLUNTEER GRANT-OTHER	1,000
USSSA SUMMER LEAGUEPO BOX 631 ALBUQUERQUE, NM 87102	NONE	EXEMPT	VOLUNTEER GRANT-OTHER	1,500
VOLUNTEER GRANTS LESS THAN 1000 VARIOUS ALBUQUERQUE, NM 87102	NONE	EXEMPT	VOLUNTEER GRANT-OTHER	50,050
Total ▶ 3a				1,656,375

TY 2018 Accounting Fees Schedule**Name:** PNM RESOURCES FOUNDATION**EIN:** 85-0309005

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING/PROFESSIONAL FEES	35,586	24,911		10,675

TY 2018 Investments Corporate Bonds Schedule**Name:** PNM RESOURCES FOUNDATION**EIN:** 85-0309005**Investments Corporate Bonds Schedule**

Name of Bond	End of Year Book Value	End of Year Fair Market Value
VANGUARD 500 INDEX FUND ADMIRAL	1,820,589	3,355,776
DODGE & COX INCOME FD COM	3,080,553	3,080,314
NATIXIX LOOMIS SAYLES BOND FD	1,811,644	1,756,420
PIMCO INVESTMENT GRADE CORP BD	1,983,939	1,873,254
JPMORGAN VALUE ADVANTAGE FUND	2,593,913	2,610,933
VULCAN VALUE PARTNERS FUND	1,573,922	1,594,841
PRIMECAP ODYSSEY GROWTH	1,364,505	1,270,164
MORGAN STANLEY INSTITUTIONAL FUND	1,400,000	1,435,570

TY 2018 Other Decreases Schedule

Name: PNM RESOURCES FOUNDATION

EIN: 85-0309005

Description	Amount
PRIOR YEAR CANCELLED/RETURNED GRANTS	1,000
ACCRUAL/CASH ADJUSTMENTS	500,000
ACCRUAL/CASH ADJUSTMENTS	500,000

TY 2018 Other Expenses Schedule**Name:** PNM RESOURCES FOUNDATION**EIN:** 85-0309005**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	12,265	12,265		0
BANK CHARGES	1,062	1,062		0
INSURANCE	3,401	3,401		0
ADMINISTRATIVE EXPENSES	1,365	1,365		0
LICENSES AND FEES	35	35		0

TY 2018 Other Income Schedule

Name: PNM RESOURCES FOUNDATION

EIN: 85-0309005

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
INVESTMENT SETTLEMENTS	15,316	15,316	15,316

TY 2018 Other Liabilities Schedule**Name:** PNM RESOURCES FOUNDATION**EIN:** 85-0309005

Description	Beginning of Year - Book Value	End of Year - Book Value
EXCISE TAX PAYABLE	4,394	1,829

**TY 2018 Substantial Contributors
Schedule****Name:** PNM RESOURCES FOUNDATION**EIN:** 85-0309005**Name****Address**

PNM RESOURCES INC

CORPORATE HEADQUARTERS
ALBUQUERQUE, NM 871581275

TY 2018 Taxes Schedule**Name:** PNM RESOURCES FOUNDATION**EIN:** 85-0309005

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAXES	9,935	0		0

Schedule B (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Go to <u>www.irs.gov/Form990</u> for the latest information	OMB No 1545-0047
		2018
Name of the organization PNM RESOURCES FOUNDATION		Employer identification number 85-0309005

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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 other 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 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ _____

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, 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 PNM RESOURCES FOUNDATION	Employer identification number 85-0309005
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Part I **Contributors** (See instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PNM RESOURCES INC 414 SILVER SW ALBUQUERQUE, NM 87102	\$ 500,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Employer identification number

85-0309005

Part II	Noncash Property
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[illegible]

Name of organization PNM RESOURCES FOUNDATION	Employer identification number 85-0309005
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Part III	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 information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	