

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation BRINDLE FOUNDATION		A Employer identification number 03-0466957	
Number and street (or P.O. box number if mail is not delivered to street address) PO BOX 31696		Room/suite	B Telephone number (see instructions) (505) 986-3983
City or town, state or province, country, and ZIP or foreign postal code SANTE FE, NM 875941696		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) ▶ \$ 33,720,448	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)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	1,861	1,861		
	4 Dividends and interest from securities	682,056	682,056		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	439,745			
	b Gross sales price for all assets on line 6a				
		9,558,444			
	7 Capital gain net income (from Part IV, line 2)		439,745		
	8 Net short-term capital gain				
	9 Income modifications				
Operating and Administrative Expenses	10a Gross sales less returns and allowances				
	b Less: Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	109,559	109,559		
	12 Total. Add lines 1 through 11	1,233,221	1,233,221		
	13 Compensation of officers, directors, trustees, etc.	0	0		0
	14 Other employee salaries and wages	29,613	0		29,613
	15 Pension plans, employee benefits	1,875	0		1,875
	16a Legal fees (attach schedule)	1,821	1,821		0
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)	129,935	97,749		32,186
	17 Interest	847	847		0
	18 Taxes (attach schedule) (see instructions)	41,045	38,670		2,375
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	304	0		304
	24 Total operating and administrative expenses. Add lines 13 through 23	205,440	139,087		66,353
	25 Contributions, gifts, grants paid	1,443,500			1,443,500
	26 Total expenses and disbursements. Add lines 24 and 25	1,648,940	139,087		1,509,853
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	-415,719			
	b Net investment income (if negative, enter -0-)		1,094,134		
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	938,963	979,759	979,759
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach 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)	27,623,092	27,074,824	32,740,689
	c Investments—corporate bonds (attach schedule)			
	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)	28,562,055	28,054,583	33,720,448	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	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 ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	0	0	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	28,562,055	28,054,583	
	29 Total net assets or fund balances (see instructions)	28,562,055	28,054,583	
30 Total liabilities and net assets/fund balances (see instructions) .	28,562,055	28,054,583		

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 29 (must agree with end-of-year figure reported on prior year's return)	1	28,562,055
2 Enter amount from Part I, line 27a	2	-415,719
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	28,146,336
5 Decreases not included in line 2 (itemize) ▶ _____	5	91,753
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	28,054,583

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) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	439,745
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))
2018	1,658,229	32,378,644	0.051214
2017	1,473,831	32,686,722	0.045090
2016	1,303,768	30,728,839	0.042428
2015	1,368,215	31,617,864	0.043273
2014	606,575	22,198,087	0.027326

2 Total of line 1, column (d)	2	0.209331
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	0.041866
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	32,189,271
5 Multiply line 4 by line 3	5	1,347,636
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	10,941
7 Add lines 5 and 6	7	1,358,577
8 Enter qualifying distributions from Part XII, line 4 ,	8	1,509,853

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	10,941
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	10,941
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	10,941
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	19,697
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	19,697
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.	8	0
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	8,756
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 8,756 Refunded ▶	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). <i>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.</i>	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. ▶ \$ _____ (2) On foundation managers. ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	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? <i>If "Yes," attach a conformed copy of the changes</i>	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? <i>If "Yes," attach the statement required by General Instruction T.</i>	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	No
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ 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? <i>If "No," attach explanation .</i>	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 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	10	No

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.BRINDLEFOUNDATION.ORG</u>	13	Yes	
14	The books are in care of ► <u>FOUNDATION OFFICE</u> Telephone no. ► <u>(505) 986-3983</u>			

Located at ► PO BOX 31696 SANTE FE NMZIP+4 ► 87594

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 2019, 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.**

		Yes	No
1a	During the year did the foundation (either directly or indirectly):		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <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 <input type="checkbox"/>	1b	
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 2019?	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 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? <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 2019 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 2019.)	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 2019?	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?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>			
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?			
	<i>If "Yes" to 6b, file Form 8870.</i>			
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
NANCY H SCHWANFELDER PO BOX 31696 SANTE FE, NM 87594	PRESIDENT 5.00	0	0	0
KEVIN SCHWANFELDER PO BOX 31696 SANTE FE, NM 87594	VICE PRESIDENT 1.00	0	0	0
CRAIG SCHWANFELDER PO BOX 31696 SANTE FE, NM 87594	SECRETARY/TREASURER 1.00	0	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
KIM STRAUS PO BOX 31696 SANTE FE, NM 87594	MANAGER 40.00	29,613	1,875	0
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.

1	Expenses

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	31,372,766
b	Average of monthly cash balances.	1b	1,306,697
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	32,679,463
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	32,679,463
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	490,192
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	32,189,271
6	Minimum investment return. Enter 5% of line 5.	6	1,609,464

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	1,609,464
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	10,941
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	10,941
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	1,598,523
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	1,598,523
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	1,598,523

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	1,509,853
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	1,509,853
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	10,941
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,498,912

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 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				1,598,523
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			1,496,207	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014.				
b From 2015.				
c From 2016.				
d From 2017.				
e From 2018.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ <u>1,509,853</u>				
a Applied to 2018, but not more than line 2a			1,496,207	
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 2019 distributable amount.				13,646
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2019. (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	0			
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 2018. Subtract line 4a from line 2a. Taxable amount—see instructions.			0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				1,584,877
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 2014 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a.	0			
10 Analysis of line 9:				
a Excess from 2015.				
b Excess from 2016.				
c Excess from 2017.				
d Excess from 2018.				
e Excess from 2019.				

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 2019, 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)

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

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
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:

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

c Any submission deadlines:

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

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	1,443,500
b <i>Approved for future payment</i>				
Total			▶ 3b	0

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	1,861	
4 Dividends and interest from securities.			14	682,056	
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	109,559	
8 Gain or (loss) from sales of assets other than inventory			18	439,745	
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		1,233,221	0
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)			13		1,233,221

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

[illegible]

Part XVII

- | | | | |
|--|--|-----|----|
| | | Yes | No |
|--|--|-----|----|

--	--	--

- | | | |
|-------|--|----|
| 1a(1) | | No |
| 1a(2) | | No |

--	--	--

- | | | |
|--------------|--|-----------|
| 1b(1) | | No |
| 1b(2) | | No |
| 1b(3) | | No |
| 1b(4) | | No |
| 1b(5) | | No |
| 1b(6) | | No |

1c		No
----	--	----

value
ue

[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

<p>Sign Here</p> <p>*****</p> <hr/> <p>Signature of officer or trustee</p>	<p>2020-11-04</p> <hr/> <p>Date</p>	<p>*****</p> <hr/> <p>Title</p>
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May the IRS discuss this return with the preparer shown below

(see instr.) ☒ **Yes** ☐ **No**

Paid Preparer Use Only	KYLE M VINEYARD				
	Firm's name ► REALIZE CPA LLP				Firm's EIN ► 94-3145806
	Firm's address ► 50 CALIFORNIA STREET SUITE 3550 SAN FRANCISCO, CA 94111				Phone no. (415) 362-5990

May the IRS discuss this return with the preparer shown below

(see instr.) ☒ **Yes** ☐ **No**

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.)
ABBOT DOWNING - SEE ATTACHED	P		
ABBOT DOWNING - SEE ATTACHED	P		
ABBOT DOWNING - SEE ATTACHED	P		
ABBOT DOWNING - SEE ATTACHED	P		
INVESCO DB COMMODITY INDEX TRACKING FUND	P		
LYME FOREST	P		
CAPITAL GAINS DIVIDENDS	P		

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

(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)
1,622,505		1,630,578	-8,073
7,091,510		6,835,028	256,482
146,482		149,765	-3,283
506,983		500,000	6,983
			-3,083
			-245
190,964			190,964

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	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
			-8,073
			256,482
			-3,283
			6,983
			-3,083
			-245
			190,964

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 COMMUNITY FOUNDATION FOR NM COUNTS 624 TIJERAS AVE NW ALBUQUERQUE, NM 87102	NONE	501(C)3	SUPPORT 2020 CENSUS	15,000
AUDUBON NMPO BOX 9314 SANTA FE, NM 87504	NONE	501(C)3	FOR SUPPORT OF AUDUBON'S ENVIRONMENTAL EDUCATION PROGRAM INCLUDING FIELD TRIPS, TEACHER TRAINING, EARLY CHILDHOOD EDUCATION, AND COMMUNITY PROGRAMMING	25,000
BAY AREA EARLY CHILDHOOD FUNDERS PO BOX 2306 EL CERRITO, CA 94530	NONE	501(C)3	SUPPORT FUNDER COLLABORATE GROUP	1,000
Total ► 3a				1,443,500

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>				
BREATH OF MY HEART BIRTHPLACE PO BOX 157 ESPANOLA, NM 87516	NONE	501(C)3	WALK-IN MIDWIFERY CLINIC	20,000
CASA FIRST JUDICIAL DISTRICT 466 W SAN FRANCISCO STREET SANTA FE, NM 87501	NONE	501(C)3	GENERAL PROGRAM SUPPORT	20,000
CENTER FOR DEVELOPMENT AND DISABILITY 2300 MENAUL BLVD NE ALBUQUERQUE, NM 87107	NONE	501(C)3	TO STRENGTHEN CAPACITY OF RURAL CLINICAL SUPERVISORS THROUGH PROVISION OF BI-WEEKLY SUPPORT AND SUPERVISION ON INFANT MENTAL HEALTH	25,000
Total ▶ 3a				1,443,500

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>				
CENTRAL NM COMMUNITY COLLEGE 900 UNIVERSITY BLVD SE ALBUQUERQUE, NM 87106	NONE	501(C)3	EARLY CHILDHOOD EDUCATION PROGRAM	20,000
CHILD AND FAMILY DEVELOPMENT CENTER (FARMINGTON) 270 FARMINGTON AVE FARMINGTON, CT 06032	NONE	501(C)3	TOWARD STAFF PROFESSIONAL DEVELOPMENT AND UPDATE OF OUTDOOR CLASSROOM IN THE CHILD AND FAMILY DEVELOPMENT CENTER	40,000
DREAMTREE PROJECT INC 128 LA POSTA RD TAOS, NM 87571	NONE	501(C)3	TO SUPPORT DREAM TREE FAMILIES PROGRAM PROVIDING EMERGENCY SHELTER AND SERVICES TO YOUNG PEOPLE IN CRISIS	15,000
Total ▶ 3a				1,443,500

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>				
EMBUDO VALLEY LIBRARY AND COMMUNITY CENTER PO BOX 310 DIXON, NM 87527	NONE	501(C)3	EARLY LITERACY PROGRAMS	6,000
ESPERANZA SHELTER FOR BATTERED FAMILIES 3130 RUFINA STREET SANTA FE, NM 87507	NONE	501(C)3	INFANT MENTAL HEALTH SERVICES	15,000
FATHERS NEW MEXICOPO BOX 22254 SANTA FE, NM 87502	NONE	501(C)3	TOWARD EFFORTS IN SANTA FE COUNTY AND NORTHERN NEW MEXICO FOR SUPPORT TO FATHERS USING SYSTEM CHANGE STRATEGIES	25,000
Total ► 3a				1,443,500

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>				
FIRST BORN PROGRAM OF NORTHERN NEW MEXICO PO BOX 623 LAS VEGAS, NM 87701	NONE	501(C)3	GENERAL PROGRAM SUPPORT	20,000
FIRST CHOICE COMMUNITY HEALTHCARE 2001 N CENTRO FAMILIAR SW ALBUQUERQUE, NM 87105	NONE	501(C)3	EARLY CHILDHOOD HUB	26,000
FIRST STEPSCHILDREN'S TRUST FUND 413 SIPAPU ST TAOS, NM 87571	NONE	501(C)3	TOWARD STRENGTHENING OPPORTUNITIES FOR EARLY CHILDHOOD PROFESSIONAL DEVELOPMENT IN THE TAOS LOVES KIDS INITIATIVE	15,000
Total ▶ 3a				1,443,500

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>				
FOOD DEPOT1222 SILER RD A SANTA FE, NM 87507	NONE	501(C)3	FOR THE DIAPER DEPOT'S WORK (UNDER THE AUSPICES OF THE FOOD DEPOT) PROVIDING DIAPERS TO THOSE WHO NEED THEM IN NORTHERN NM	30,000
GERARD'S HOUSEPO BOX 28693 SANTA FE, NM 87592	NONE	501(C)3	GENERAL OPERATING SUPPORT	22,500
KIDS COUNSELING INC 2528 RIDGE RUNNER RD LAS VEGAS, NM 87701	NONE	501(C)3	TO SUPPORT TRAINING FOR PROVIDERS IN CIRCLE OF SECURITY FOR TRAUMA-INFORMED SERVICES IN SAN MIGUEL AND MORA COUNTIES	15,000
Total ► 3a				1,443,500

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				
LA FAMILIA MEDICAL CENTER PO BOX 5395 SANTA FE, NM 87502	NONE	501(C)3	PRE-NATAL CARE PROGRAM	100,000
LANL FOUNDATION 1112 PLAZA DEL NORTE ESPANOLA, NM 87532	NONE	501(C)3	TO WORK WITH A COHORT OF EARLY CHILDHOOD PROVIDERS FROM THE NORTHERN PUEBLOS INTERESTED IN OBTAINING ADDITIONAL EARLY CHILDHOOD EDUCATION AND TRAINING	40,000
LAS CUMBRES COMMUNITY SERVICES 404 HUNTER STREET ESPANOLA, NM 87532	NONE	501(C)3	COMMUNITY INFANT PROGRAM & OTHER EARLY CHILDHOOD SERVICES	65,000
Total ▶ 3a				1,443,500

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>				
MANY MOTHERSPO BOX 23222 SANTA FE, NM 87502	NONE	501(C)3	GENERAL OPERATING & PROGRAM SUPPORT	25,000
NATIONAL CENTER FOR FAMILY PHILANTHROPY 1101 CONNECTICUT AVE NW SUITE 220 WASHINGTON, DC 20036	NONE	501(C)3	GENERAL OPERATING SUPPORT	4,000
NEW MEXICO ALLIANCE FOR SCHOOL-BASED HEALTH CARE 3301-R COORS BLVD SUITE 288 ALBUQUERQUE, NM 87120	NONE	501(C)3	GENERAL SUPPORT	18,000
Total ► 3a				1,443,500

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 CENTER ON LAW & POVERTY 924 PARK AVE SW SUITE C ALBUQUERQUE, NM 87120	NONE	501(C)3	BENEFITS SAFETY NET EFFORTS	35,000
NEW MEXICO IMMIGRANT LAW CENTER 625 SILVER AVE SW SUITE 345 ALBUQUERQUE, NM 87102	NONE	501(C)3	TO SUPPORT WORK ADVANCING JUSTICE AND EQUITY BY EMPOWERING LOW-INCOME IMMIGRANT COMMUNITIES THROUGH COLLABORATIVE LEGAL SERVICE, ADVOCACY AND EDUCATION	10,000
NEW MEXICO KIDS MATTER INC 3523 2340 ALAMO AVE SE UNIT 112 ALBUQUERQUE, NM 87106	NONE	501(C)3	TO SUPPORT ADVOCACY WORK FOR NATIVE AMERICAN INFANTS AND TODDLERS IN THE FOSTER SYSTEM	15,000
Total ► 3a				1,443,500

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 VISTAS1205 PARKWAY SUITE A SANTA FE, NM 87102	NONE	501(C)3	GENERAL SUPPORT	20,000
NM APPLESEED (SANTA FE) 1300 LUISA ST 7 SANTA FE, NM 87505	NONE	501(C)3	TOWARD ADVOCACY THAT WILL CREATE A STATE RESEARCH AND EVALUATION LAB, USING DATA TO IDENTIFY RISK FACTORS, TO PREVENT POOR CHILD WELLBEING OUTCOMES	10,000
NM ASSOC FOR INFANT MENTAL HEALTH 2300 MENAUL BLVD NE ALBUQUERQUE, NM 87107	NONE	501(C)3	GENERAL OPERATING SUPPORT	10,000
Total ▶ 3a				1,443,500

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>				
NM ASSOC FOR THE EDUCATION OF YOUNG CHILDREN 1208 SAN PEDRO DR NE 258 ALBUQUERQUE, NM 87110	NONE	501(C)3	TOWARD WORK FOR EARLY CHILDHOOD ADVOCACY AND SUPPORT THROUGH REFUNDABLE TAX CREDITS TO BUILD A SKILLED AND WELL- COMPENSATED EARLY CHILDHOOD WORKFORCE	30,000
NM CHILD ADVOCACY NETWORKS 625 SILVER AVE SW SUITE 345 ALBUQUERQUE, NM 87102	NONE	501(C)3	TO SUPPORT YOUNG PARENTS, MATCHING THEM WITH CRITICAL SERVICES TO MEET THE NEEDS OF THEIR INFANTS AND TODDLERS THROUGH WORK THAT WILL ALSO INFORM POLICY	15,000
NM ENVIRONMENTAL LAW CENTER 1401 LUISA STREET SUITE 5 SANTA FE, NM 87505	NONE	501(C)3	GENERAL OPERATING SUPPORT	15,000
Total ► 3a				1,443,500

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>				
NM VOICES FOR CHILDREN 625 SILVER AVE SW SUITE 345 ALBUQUERQUE, NM 87102	NONE	501(C)3	TO BOLSTER ADVOCACY EFFORTS FOR INCREASED FUNDING FOR HIGH-QUALITY EARLY CHILDHOOD CARE AND EDUCATION PROGRAMS IN NEW MEXICO, AS WELL AS AN IMPROVED POLICY ENVIRONMENT	45,000
NM WILDERNESS ALLIANCE (ALBUQUERQUE) 317 COMMERCIAL ST NE 300 ALBUQUERQUE, NM 87102	NONE	501(C)3	TOWARD SUPPORTING THE HEALTH OF NM'S WILDERNESS, WILDLIFE AND WATER THROUGH PUBLIC LANDS STEWARDSHIP WITH YOUTH AND FAMILIES	5,000
PARENTS REACHING OUT TO HELP 1920 COLUMBIA DR SE SUITE B ALBUQUERQUE, NM 87106	NONE	501(C)3	FAMILY LEADERSHIP CONFERENCE	18,000
Total ► 3a				1,443,500

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>				
PLANNED PARENTHOOD OF NM 701 SAN MATEO NE ALBUQUERQUE, NM 87108	NONE	501(C)3	TO STRENGTHEN THE RESPONSIBLE SEX EDUCATION INSTITUTE PROGRAM IN SANTA FE, WORKING WITH HIGH-RISK YOUNG PEOPLE	20,000
PLAYSCHOOL OF THE ARTS FOR KIDS 3204 MERCANTILE CT AB SANTA FE, NM 87507	NONE	501(C)3	TO PURCHASE NEW MATERIALS AND UPDATE THE LEARNING ENVIRONMENT FOR A CENTER WORKING WITH PRIMARILY AT-RISK YOUNG CHILDREN	15,000
PRESBYTERIAN HEALTHCARE FOUNDATION PO BOX 26666 ALBUQUERQUE, NM 87125	NONE	501(C)3	COMMUNITY EARLY CHILDHOOD SERVICES, SOCORRO GENERAL HOSPITAL	10,000
Total ▶ 3a				1,443,500

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				
PRESBYTERIAN MEDICAL SERVICES FOUNDATION PO BOX 2267 SANTA FE, NM 87504	NONE	501(C)3	HEAD START & EARLY HEAD START PROGRAMS RECRUITMENT AND RETENTION IN SANTA FE COUNTY	25,000
PROSPERITY WORKS 909 COPPER AVENUE NW ALBUQUERQUE, NM 87102	NONE	501(C)3	LINKING PROSPERTIY KIDS WITH HOME VISITING PROGRAMS	25,000
RAILYARD PARK CONSERVANCY 805 EARLY ST SANTA FE, NM 87505	NONE	501(C)3	TO EXPAND RAILYARD PARK'S SAND PLAY SATURDAY PROGRAM	15,000
Total ▶ 3a				1,443,500

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>				
REACH OUT AND READ 56 ROLAND ST SUITE 100D BOSTON, MA 02129	NONE	501(C)3	SANTA FE INDIAN HOSPITAL & STATEWIDE PROGRAMS	20,000
REEL FATHERS6 TORNEO COURT SANTA FE, NM 87508	NONE	501(C)3	FATHER TALK PROGRAM	7,500
SAFETY AND SUCCESS COMMUNITY (ANNA AGE EIGHT) 805 EARLY ST SANTA FE, NM 87505	NONE	501(C)3	TO TRANSLATE THE BOOK ANNA, AGE EIGHT INTO SPANISH IN ORDER TO SERVE THE SPANISH-SPEAKING COMMUNITY	10,000
Total ▶ 3a				1,443,500

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 CHILDREN'S MUSEUM 1050 OLD PECOS TRAIL SANTA FE, NM 87505	NONE	501(C)3	SUPPORT OF EARLY CHILDHOOD SPECIALIST & PLANNING	20,000
SANTA FE COMMUNITY COLLEGE FOUNDATION 6401 RICHARDS AVE SANTA FE, NM 87508	NONE	501(C)3	SUPPORT FOR KIDS CAMPUS & EARLY CHILDHOOD PROGRAMS	27,000
SANTA FE COMMUNITY FOUNDATION PO BOX 1827 SANTA FE, NM 87504	NONE	501(C)3	UNM PEDIATRICS BETTER CHOICES PROGRAM	35,000
Total ► 3a				1,443,500

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 CONSERVATION TRUST PO BOX 23985 SANTA FE, NM 87502	NONE	501(C)3	GENERAL OPERATING SUPPORT	5,000
SANTA FE PUBLIC LIBRARY 145 WASHINGTON AVE SANTA FE, NM 87505	NONE	501(C)3	TO SUPPORT THE BOOKS AND BABIES PROGRAM IN SPANISH AND ENGLISH IN ALL THREE SANTA FE PUBLIC LIBRARY BRANCHES	39,000
SANTA FE WATERSHED ASSOCIATION 1413 SECOND STREET SUITE 3 SANTA FE, NM 87505	NONE	501(C)3	GENERAL SUPPORT & RIVER ADOPTION	2,000
Total ▶ 3a				1,443,500

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>				
SEARCHLIGHT NEW MEXICO PO BOX 29811 SANTA FE, NM 87592	NONE	501(C)3	NM CHILD WELL-BEING PROJECT	40,000
SOMOS UN PUEBLO UNIDO 1804 ESPINACITAS ST SANTA FE, NM 87505	NONE	501(C)3	GENERAL SUPPORT	10,000
SOUTHWEST WOMEN'S LAW CENTER 128 QUINCY ST NE ALBUQUERQUE, NM 87108	NONE	501(C)3	TO SUPPORT ADVOCACY FOR NEW MEXICO PREGNANT WORKER ACCOMMODATION AND PAID FAMILY MEDICAL LEAVE	15,000
Total ► 3a				1,443,500

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 ELIZABETH SHELTER 804 ALARID STREET SANTA FE, NM 87505	NONE	501(C)3	CASA FAMILIA FAMILY SHELTER	10,000
TEWA WOMEN UNITEDPO BOX 397 SANTA CRUZ, NM 87567	NONE	501(C)3	DOULA TRAINING PROGRAM	17,500
THINK NEW MEXICO 1227 PASEO DE PERALTA SANTA FE, NM 87501	NONE	501(C)3	GENERAL OPERATING SUPPORT	10,000
Total ▶ 3a				1,443,500

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i>				
TWIRL PLAY & DISCOVERY SPACE 225 CAMINO DE LA PLACITA TAOS, NM 87571	NONE	501(C)3	EARLY CHILDHOOD PROGRAMS	10,000
UNITED WAY OF SANTA FE COUNTY 440 CERRILLOS ROAD SUITE A SANTA FE, NM 87501	NONE	501(C)3	FAMILY, FRIENDS, & NEIGHBORS PROGRAM & KAUNE EARLY CHILDHOOD CENTER	25,000
UNM - ENVISION 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE, NM 87131	NONE	501(C)3	TO STRENGTHEN THE WORK OPTIMIZING CARE FOR BABIES EXPERIENCES NEONATAL OPIOID WITHDRAWAL SYNDROME (NOWS) BY EXPANDING WORK ON TRAINING, COACHING, AND OTHER FORMS OF SUPPORT TO CLINICAL PROVIDERS IN RURAL HOSPITALS	25,000
Total ► 3a				1,443,500

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>				
UNM - FAMILY DEVELOPMENT PROGRAM 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE, NM 87131	NONE	501(C)3	FOR ENHANCING LEADERSHIP TRAINING FOR EDUCATORS AND DIRECTORS PARTICIPATING IN CNM'S MENTOR AND DIRECTOR NETWORKS AND EXPANSION OF THE SUMMER LEADERSHIP INSTITUTE	34,000
UNM - NM EVALUATION LAB 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE, NM 87131	NONE	501(C)3	TO SUPPORT EARLY CHILDHOOD PROVIDERS IN DEVELOPING SUSTAINABLE EVALUATION SYSTEMS THAT LEAD TO CONTINUOUS PROGRAM IMPROVEMENT AND IMPROVED OUTCOMES FOR YOUNG CHILDREN AND THEIR FAMILIES	15,000
UNM - TAOS PASO A PASO NETWORK 1157 COUNTY ROAD 110 RANCHOS DE TAOS, NM 87557	NONE	501(C)3	TO SUPPORT THE TAOS EARLY CHILDHOOD ALLIANCE WORK WITH FAMILY, FRIENDS AND NEIGHBORS IN ORDER TO IMPROVE ACCESS TO SERVICES FOR FAMILIES WITH YOUNG CHILDREN	31,000
Total ► 3a				1,443,500

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>				
WESTERN NEW MEXICO UNIVERSITY FOUNDATION PO BOX 680 SILVER CITY, NM 88062	NONE	501(C)3	EARLY CHILDHOOD PROGRAMS	50,000
YOUTH HEARTLINEPO BOX 1664 TAOS, NM 87571	NONE	501(C)3	THERAPEUTIC EARLY CHILDHOOD SERVICES IN CASA PROGRAM	10,000
YOUTH SHELTERS AND FAMILY SERVICES PO BOX 28279 SANTA FE, NM 87592	NONE	501(C)3	PREGNANT & PARENTING TEENS PROGRAM	30,000
Total ▶ 3a				1,443,500

TY 2019 Investments Corporate Stock Schedule**Name:** BRINDLE FOUNDATION**EIN:** 03-0466957**Investments Corporation Stock Schedule**

Name of Stock	End of Year Book Value	End of Year Fair Market Value
WELLS FARGO	27,074,824	32,740,689

TY 2019 Legal Fees Schedule

Name: BRINDLE FOUNDATION

EIN: 03-0466957

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL	471	471		0
PROFESSIONAL FEES	1,350	1,350		0

TY 2019 Other Decreases Schedule

Name: BRINDLE FOUNDATION

EIN: 03-0466957

Description	Amount
FMV/BOOK DIFFERENCE OF GRANT DISTRIBUTIONS	91,753

TY 2019 Other Expenses Schedule**Name:** BRINDLE FOUNDATION**EIN:** 03-0466957**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SUPPLIES	304	0		304

TY 2019 Other Income Schedule

Name: BRINDLE FOUNDATION

EIN: 03-0466957

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
THE LYME FOREST FUND IV	-6,483	-6,483	-6,483
LHP ATLAS	37,405	37,405	37,405
ROSE GROVE OFFSHORE I	9,692	9,692	9,692
INVESCO DB COMMODITY INDEX TRACKING FUND	3,623	3,623	3,623
ARROWMARK GLOBAL OPP II CLASS A LTD	65,322	65,322	65,322

TY 2019 Other Professional Fees Schedule**Name:** BRINDLE FOUNDATION**EIN:** 03-0466957

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	0	0		0
MANAGMENT FEES	97,749	97,749		0
CONSULTING	32,186	0		32,186

TY 2019 Taxes Schedule**Name:** BRINDLE FOUNDATION**EIN:** 03-0466957

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	2,375	0		2,375
FOREIGN TAX	21,170	21,170		0
FEDERAL TAXES	17,500	17,500		0