Return of Private Foundation

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

OMB No. 1545-0047 ୭⋒4 ♠

	Dep	partment :	of the Treasury	► Do not enter	social security numb irs.gov/Form990PF (ers on this fo	m as	It may	be made pu	blic. A.A.		SUI	
	Inte	mai Reve	enue Service	► Go to www.	irs.gov/Form990PF (or Instructions	and	the late	st informati	on. \^(\\\\nu\	Open	to Public Ins	pection
				19 or tax year beginni	ng 1-1		, 201	9, and	ending	12-31		, 20	19
	Nar	me of for	undation		 :				A Employe	r Identification	numbe	1	
			N FAMILY FOL						1	20-171	6049		
	-Núr	mber and	d street (or P O, t	box number if mail is not deliv	ered to street address)		Room	n/sulte	B Telephor	ne number (see tr	structi	ons)	
	<u>P.C</u>	D. DRAI	WER 3337							(505) 560	-1992	2	
	City	or town	n, state or provinc	ce, country, and ZIP or foreign	n postal code				C If exemp	tion application b			ere ▶ □
	FA	RMING	TON, NM 8749	99]		•	•	_
	G	Check	k all that appl	ly: 🔲 Initial return	☐ Initial return	n of a former p	ublic	charity	D 1. Foreig	n organizations, o	zheck i	here	. ▶□
				☐ Final return	Amended	return			· -				
				Address chang	ge 🔲 Name cha	nge				n organizations n here and attach i			જા. · ▶ 🏻
	Н			anization: 🗸 Section					€ If private	foundation statu	s was 1	lerminated u	_
				nonexempt charitable	trust 🔲 Other tax	xable private	<u>found</u>	tation	section 5	i07(b)(1)(A), checl	here		. ▶□
3_	ı			of all assets at J	Accounting method	J: 🗷 Cash [ccrual	F If the four	ndation is in a 60	-monti	n termination	
				Part II, col. (c),	Other (specify)				under se	ction 507(b)(1)(B)	check	here .	'. ▶□
1			6) ▶ \$		t I, column (d), must b	e on cash basis.)							
•	P	art I		Revenue and Expens		(a) Revenue a	and					(d) Disburs	
				olumns (b), (c), and (d) may n		expenses p			t investment (c) Adjusted net Income		net	for charti pumpos	
			the amounts li	n column (a) (see instruction	s))	DOCKS						(cash basi	a only)
		1		s, gifts, grants, etc., recelv			300						
		2	Check ► 🗌	if the foundation is not req	uired to attach Sch. B								
		3		savings and temporary									
		4	Dividends a	and interest from secun	ties		3,361		3,013		3,361		
		5a	Gross rents	· • • • • • • • • • • • • • • • • • • •									
		Ь	Net rental in	ncome or (loss)									
	9	6a		(loss) from sale of asse									
	Ē	Ь	Gross sales p	price for all assets on line 6	a								
	Revenue	7		net income (from Part									$\overline{}$
		8	Net short-te	em capital gain									\neg
		9	Income mod	difications									
		10a		ess returns and allowarke									
		b	Less. Cost o	of goods sold	· L	· .							
		C		t or (loss) (attach sched	•								
		11		ne (attach schedule) .									
	_	12		lines 1 through 11			3,661	_	3,013	_	1,361		
	g	13		ion of officers, director									
	38	14		oyee salaries and wage					_REC	EIVED			
	ĕ	15		ns, employee benefits						3.00	اب		
22	<u>.</u>	16a		attach schedule)		-			L net	0 6 2020			
202	9			fees (attach schedule)					ULI	0 0 2020	J.J.		
5	.≧			ssional fees (attach sch	edule)			_	<u></u>		١٣		
23	Ţ	17							_QGD	EN UT			
	J.S	18		ch schedule) (see instru			35				\exists		35
APR	Ē	19		n (attach schedule) and									
\forall	P	20	Occupancy		· · · · ·								
\sim	g	21		erences, and meetings									
الساد الحال	Б	22		publications	• • • • • •								
SCANNED	Operating and Administrative Expenses	23		nses (attach schedule)									
Z	ati	24	Total oper	rating and administr	ative expenses.								
Α	Ē			3 through 23			35						35
တွ	Q	25		ns, gifts, grants paid .		87	,250						87,250
-	$\dot{-}$	26		ses and disbursements.	Add lines 24 and 25	87	,285						87,285
		27		e 26 from line 12:)
		а		venue over expenses a		(83,	624)						
		ь		nent income (if negative					3,013				}
		С	Adjusted ne	et income (if negative,	enter -0-}		1			3	361		1

For Paperwork Reduction Act Notice, see instructions.

Cet. No 11289X



Farm 990-PF (2019)

Page 2

Part II		Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	End of year			
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1	Cash—non-interest-bearing						
	2	Savings and temporary cash investments	168,373	84,749	84,749			
	ą	Accounts receivable ▶						
	Ι'	l ess: allowance for doubtful accounts ▶						
	4	Pledges receivable ▶	i					
		Less: allowance for doubtful accounts ▶						
	6	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)						
	l	Less: allowance for doubtful accounts ▶						
n	8	Inventories for sale or use						
Sel	9	Prepaid expenses and deferred charges						
Assets	10a	Investments—U.S. and state government obligations (attach schedule)						
•	ь	Investments—corporate stock (attach schedule)		-				
	c	Investments—corporate bonds (attach schedule) STMT#3	89,461	89,461	98,531			
	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	Other assets (describe) Total assets (to be completed by all filers—see the		•				
	'0	instructions. Also, see page 1, item I)	257,834	174,210	183,280			
	17	Accounts payable and accrued expenses	237,034	174,210	183,200			
	18	Grants payable						
ies	19	Deferred revenue						
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons						
ap	21	Mortgages and other notes payable (attach schedule)						
	22							
	23	Other liabilities (describe) Total liabilities (add lines 17 through 22)						
-5		Foundations that follow FASB ASC 958, check here ▶ □			}			
ce		and complete lines 24, 25, 29, and 30.		İ	}			
	24	Net assets without donor restrictions		i	Ì			
쪮	25	Net assets with donor restrictions						
P		Foundations that do not follow FASB ASC 958, check here ▶ □						
5		and complete lines 26 through 30.						
or Fund Balances	26	Capital stock, trust principal, or current funds]			
-	27	Paid-In or capital surplus, or land, bldg., and equipment fund			i			
ti e	28	Retained earnings, accumulated income, endowment, or other funds	257,834	174,210				
88	29	Total net assets or fund balances (see instructions)	257,834	174,210				
4	30	Total liabilities and net assets/fund balances (see	237,034	174,210				
Net Assets		instructions)	257,834	174,210				
	rt III	Analysis of Changes in Net Assets or Fund Balances	237,034]	174,210				
		I net assets or fund balances at beginning of year-Part II, colui	mn (a), line 29 (must	agree with				
'		of-year figure reported on prior year's return)			257,834			
2		ir amount from Part I, line 27a			(83,624)			
3					(03,024)			
4		lines 1, 2, and 3		4	174,210			
5	_			 	174,210			
6	Tota	reases not included in line 2 (itemize) I net assets or fund balances at end of year (line 4 minus line 5) I net assets or fund balances at end of year (line 4 minus line 5) I net assets or fund balances at end of year (line 4 minus line 5) I net assets or fund balances at end of year (line 4 minus line 5) I net assets or fund balances at end of year (line 4 minus line 5) I net assets or fund balances at end of year (line 4 minus line 5) I net assets or fund balances at end of year (line 4 minus line 5) I net assets or fund balances at end of year (line 4 minus line 5) I net assets or fund balances at end of year (line 4 minus line 5) I net assets or fund balances at end of year (line 4 minus line 5) I net assets or fund balances at end of year (line 4 minus line 5) I net assets or fund balances at end of year (line 4 minus line 5) I net assets or fund balances at end of year (line 4 minus line 5) I net assets or fund balances at end of year (line 4 minus line 5) I net assets or fund balances at end of year (line 4 minus line 5) I net assets or fund balances at end of year (line 4 minus line 5) I net asset or fund balances at end of year (line 4 minus line 5) I net asset or fund balances at end of year (line 4 minus line 5) I net asset or fund balances at end of year (line 4 minus line 5) I net asset or fund balances at end of year (line 4 minus line 5) I net asset or fund balances at end of year (line 4 minus line 5) I net asset or fund balances at end of year (line 4 minus line 5) I net asset or fund balances at end of year (line 4 minus line 5) I net asset or fund balances at end of year (line 4 minus line 5) I net asset or fund balances at end of year (line 4 minus line 5) I net asset or fund balances at end of year (line 4 minus line 5) I net asset or fund balances at end of year (line 4 minus line 5) I net asset or fund balances at end of year (line 5) I net asset or fund balances at end of year (line 5) I net asset or fund balances at end of yea	Part II, column (b). lin	e 29 6	174,210			
		<u> </u>			177,610			

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Pani	. 3

Part	IV Capital Gains and	Losses for Tax on Investment	Income					
	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (b) How acquired P—Purchase (mo. D—Donatton (mo. D—Donatton (mo. D)						(d) Date sold (mo., day, yr.)	
1a	NONE							
<u>b</u>								
<u>C</u>							 -	
<u>d</u>								
В								
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale			n or (loss) () minus (g))	
<u>a</u>					-			
<u>b</u>			•					
<u> </u>								
<u>a</u>			 -					
	Complete only for assets show	ving gain in column (h) and owned by th	e foundation	on 12/31/69.		m 0-1 (0-4	A111	
	(i) FMV as of 12/31/69	(i) Adjusted basis as of 12/31/69	(k) Exces	s of col. (i) (i), if any	1	cel. (k), but not	. (h) gain minus less than -0-) or rom col. (h))	
а		* * * * * * * * * * * * * * * * * * * *		-				
b								
С			•					
þ								
е								
2	Capital gain net income or	(net capital loss) { If gain, also If (loss), ent			2			
3	If gain, also enter in Part I,	or (loss) as defined in sections 122, line 8, column (c). See instruction	ns. If (loss),					
	Part I, line 8	3						
Part		r Section 4940(e) for Reduced						
	ion 4940(d)(2) applies, leave	ate foundations subject to the sect this part blank.	ion 4540(a)	tax on het invest	itieiit ii	ncome.,		
		ection 4942 tax on the distributable raify under section 4940(e). Do not			oase pe	eriod?	☐ Yes ☑ No	
1	Enter the appropriate amou	int in each column for each year; s	ee the instru	ictions before mi	aking a	ny entries		
Cale	(a) Base period years Index year beginning in)	(b) Adjusted qualifying distributions	Not value of	(c) I noncharitable-use as	ssats	(d) Distribution ratio (col. (b) divided by col. (c))		
	2018	343,97	343,977			.756634		
	2017	219,700 379,128				,128 .579488		
	2016	138,228 341,754				,754 .404467		
	2015	264,450 483,190 244,850 474,645					.547301	
	2014	4,645		.515859				
2	Total of line 1, column (d)		. ,		. [_	2	2.803749	
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		
4						4	220,225	
, 5	,					5	123,491	
	.,	income (194 of Port Line 27h)	· · ·		`	6		
6		t income (1% of Part I, line 27b)		• • • • •	·		30	
7	Add lines 5 and 6				· -	7	123,521	
8		s from Part XII, line 4			. L	8	87,285	
	If line 8 is equal to or greate Part VI instructions.	er than line 7, check the box in Par	rt VI, line 1b	, and complete t	that pa	rt using a 1	% tax rate. See the	
							Form 990-PF (2019)	

1	_	`	
ŧ-		_]	



Farm 890-PF (2019) 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 ▶☐ and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check 60 .here ▶ ☐ and enter 1% of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 2 3 60 Subtrtle 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 60 Credits/Payments: a 2019 estimated tax payments and 2018 overpayment credited to 2019 . . 6b ь 6c Tax paid with application for extension of time to file (Form 8868) C d 7 Total credits and payments. Add lines 6a through 6d 0 Enter any penalty for underpayment of estimated tax. Check here 🔲 if Form 2220 is attached 8 0 Q 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 60 10 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . 0 11 Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 0 Part VII-A Statements Regarding Activities Yes No During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it 1a 1 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the 1b 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. 1c / 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. ► \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 1 If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes. 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 1 4a 4b 1 Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . 5 1 If "Yes," attach the statement required by General Instruction T. 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 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 8a Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ NEW MEXICO If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General 1 8b (or designate) of each state as required by General Instruction G? If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942(I)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

_	•
_	7



BOD DE (2010)			
	 	-	

	an-s- (2018)			Page 5
Par	t VII-A Statements Regarding Activities (continued)			
		<u> </u>	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		1
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		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
	Website address ▶			
14	***************************************	5) 327	-0356	
	Located at ► 6540 E. MAIN STREET FARMINGTON, NM ZIP+4 ►	8740	2	
15	Section 4947(a)(1) nonexempt charitable trusts filling Form 990-PF in lieu of Form 1041—check here		•	▶ ∪
	and enter the amount of tax-exempt interest received or accrued during the year			Ala.
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority	40	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	٠	
	the foreign country	l		
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u>'</u>
	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? Yes No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			}
	disqualified person?			}
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes			j
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes . No. (5) Transfer any income or assets to a disqualified person (or make any of either available for			1
	the benefit or use of a disqualified person)?			Ì
	(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			i
	termination of government service, if terminating within 90 days.)			
Ь				
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	1Ь		
	Organizations relying on a current notice regarding disaster assistance, check here			
C				لب
2	were not corrected before the first day of the tax year beginning in 2019?	10		√
-	operating foundation defined in section 4942(I)(3) or 4942(I)(5)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			1
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			İ
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			i
	(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		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a	► 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			1
-	at any time during the year?	: I		1
ь		1 1		- 1
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the	1		j
	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 Form 4720, Schedule C, to determine if the	i 1		_
	foundation had excess business holdings in 2019.)	3b		<u> </u>
4a	The second secon	4a		<u> </u>
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		
	Fo	m 99	U-PF	(2019)



. 0///// 0/	50-77 (2018)									rage 🛡
Par	VII-B Statements Regarding Activitie	s for V	Which Form	4720	May Be F	leguired (c	ontinued)			
5a	During the year, did the foundation pay or incur	any an	nount to:						Yes	No
	(1) Carry on propaganda, or otherwise attempt(2) Influence the outcome of any specific publi	c elect					Yes 🗸 No	'		
	directly or indirectly, any voter registration di					_	Yes 🗹 No			ĺ
	 (3) Provide a grant to an individual for travel, stu (4) Provide a grant to an organization other that section 4945(d)(4)(A)? See instructions 	n a cha	aritable, etc.,	organiz	ation desc	nbed in _	Yes 🗸 No			
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to	, chard	table, scientif	ic, liter	ary, or edu	cational _	Yes ☑No Yes ☑No			
ь	If any answer is "Yes" to 5a(1)-(5), did any of the							1		1
_	in Regulations section 53.4945 or in a current no	tice re	garding disas	ster ass	istance? S	ee instructio	ns	5b	<u> </u>	
c	Organizations relying on a current notice regardiff the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility	ing disa the fou	aster assistan Indation clain	ce, che n exem	eck here ption from	the tax	▶ □ Yes [7] No			
6 a	If "Yes," attach the statement required by Regul Did the foundation, during the year, receive any on a personal benefit contract?	funds,	directly or in	directly		_	Yes ☑No			
b	Did the foundation, during the year, pay premiur				a personal	_		6b		<u> </u>
7 -	If "Yes" to 6b, file Form 8870.			- 4 4 -		m	w 🗖 🕶			
	At any time during the tax year, was the foundation If "Yes," did the foundation receive any proceed	•				_	_	7b		لــا
8	is the foundation subject to the section 4960 ta						action? .	10		
_	remuneration or excess parachute payment(s) de	uring th	ne year? .				Yes 🗸 No			1
Part	VIII Information About Officers, Direc	tors,	Trustees, F	ounda	tion Man	agers, Hig	hly Paid E	mploy	ees,	
	and Contractors	I		145						
	List all officers, directors, trustees, and found (a) Name and address	(b) Th	managers ar le, and average urs per week led to position	(c) Co	mpensation not paid, nter -0-)	(d) Contri	butions to enefit plans	(e) Expe	nse acc	
G. CH	RIS COLEMAN		· · · · · · · · · · · · · · · · · · ·		161 -0-1	and deleved	comparisation			
	URNHAM ROAD FARMINGTON, NM 87401	<1HR	TOR/PRES		0		0			0
	ARA M. COLEMAN		TOR/SEC							
195 MC	DONALD ROAD FARMINGTON, NM 87401	<1HR	·OIOSEO		0		0			0
JEFFR	EY E. COLEMAN	DIREC	TOR							
13185	CAROLINE COURT, ELM GROVE, WI 53122	<1HR			0		0	-		0
2	Compensation of five highest-paid employee	s (oth	er than tho	se incl	uded on li	ne 1—see	instruction	s). If no	nne e	nter
	"NONE."	,,,,,,						5, 1	, .	
((a) Name and address of each employee paid more than \$50,00	10	(b) Title, and a hours per v devoted to p	veek	(c) Comper	nsation emp	ontributions to loyee benefit and deferred impensation	(e) Expe	nse acc	
NONE									•	
•										
		•••••								
		•••••						ļ- 	-	
			<u> </u>		<u> </u>					
Total	number of other employees paid over \$50,000 .	<u>· · · </u>		• •	<u> </u>		▶ _	OO	O DE	
							,	Form 99		(2019)





Form 990-PF (2019)
Page 7

Par	t VIII Information About Officers, Directors, Trustees, Foundation for and Contractors (continued)	Managers, Highly Paid Em	ployees,
3	Five highest-paid independent contractors for professional services. See instr	ructions. If none, enter "NON!	E."
	(a) Name and address of each person pald more than \$50,000	(b) Type of service	(c) Compensation
NON	E		
•••••			
		_	
Par	t IX-A Summary of Direct Charitable Activities		
	it the foundation's four largest direct charitable activities during the tax year, include relevant statistical panizations and other beneficiaries served, conferences convened, research papers produced, etc.	information such as the number of	Expenses
1	NONE		
2	***************************************		
_			· · · · · · · · · · · · · · · · · · ·
3		•••••	
	······································		
	····		
4			

Pac	IX-B Summary of Program-Related Investments (see instructions)		
	scribe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2	Amount
	NONE	und E.	74.100.11
•			

2			
•			
All	other program-related investments. See instructions.		
3			
•			
Total	. Add lines 1 through 3	<i>.</i>	

	`
f	4



Form 990-PF (2019) Page 8 Minimum Investment Return (All domestic foundations must complete this part, Foreign foundations, Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 18 98.531 1b 125.048 c Fair market value of all other assets (see instructions) 1c 1d 223,579 Reduction claimed for blockage or other factors reported on lines 1a and 2 Acquisition Indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 223,579 Cash deemed held for chantable activities. Enter 11/2% of line 3 (for greater amount, see 3,354 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 220,225 Minimum investment return. Enter 5% of line 5 6 11,011 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here \(\subseteq \) and do not complete this part.) 1 11,011 Tax on investment income for 2019 from Part VI, line 5 2a 2a Income tax for 2019. (This does not include the tax from Part VI.) . . . 2b 60 3 Distributable amount before adjustments. Subtract line 2c from line 1 . . . 3 11,071 4 5 11,071 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, 11,071 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. --total from Part I, column (d), line 26 1a 1b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 3 Amounts set aside for specific charitable projects that satisfy the: 3a 3b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 4 87,285 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.

qualifies for the section 4940(e) reduction of tax in those years.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Form 990-PF (2019)

5

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	(-)		()		
	90-PF (2019)	-\		 -	Page 9
Part	VIII Undistributed Income (see instructions	(a)	(6)	(c)	(d)
		Corpus	Years prior to 2018	2018	2019
1	Distributable amount for 2019 from Part XI, fine 7				11,071
2	Undistributed income, if any, as of the end of 2019:				
	Enter amount for 2018 only			0	
3	Total for prior years: 20, 20, 20 Excess distributions carryover, If any, to 2019:		<u> </u>		
a a					
ь	From 2015				1
C	From 2016				ļ
d	From 2017				1
е	From 2018				
f	Total of lines 3a through e	1,104,726			
4	Qualifying distributions for 2019 from Part XII, line 4: ► \$ 87,285		1		ļ
a				0	
Ь	Applied to undistributed income of prior years (Election required—see instructions)		0		
C	Treated as distributions out of corpus (Election required—see instructions)	0			
	Applied to 2019 distributable amount				11,071
	Remaining amount distributed out of corpus	76,214			
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a),)				
6	Enter the net total of each column as indicated below:				<u>0</u>
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,180,940			į
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
С	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				j
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0		
е			<i>'</i>	0	
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be				

а	Enter amount for 2018 only		<u> </u>	O	
b	Total for prior years: 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2019:				
۵	From 2014				
b	From 2015 240,418				
c	From 2016 121,199				
d	From 2017 200,771				
e	From 2018				
1	Total of lines 3a through e	1,104,726			
4	Qualifying distributions for 2019 from Part XII,	7,007,00	-		
•	line 4: ▶ \$ 87,285	ł			
а	Applied to 2018, but not more than line 2a .			۸	
Ь				-	-
_	(Election required—see instructions)		0		
C	Treated as distributions out of corpus (Election				
	required—see instructions)	0			
đ	.,				11,07
e	Remaining amount distributed out of corpus	76,214			
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6	***	0			
0	Enter the net total of each column as indicated below:				
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,180,940			
b	Prior years' undistributed income. Subtract line 4b from line 2b		Q.	į	
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				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(Γ) or 4942(g)(3) (Election may be required—see instructions)	O			
8	Excess distributions carryover from 2014 not				
	applied on line 5 or line 7 (see instructions) .	221,057	j		
9	Excess distributions carryover to 2020.				· · · · · · · · · · · · · · · · · · ·
•	Subtract lines 7 and 8 from line 6a	959,883)
10	Analysis of line 9:				*
а	Excess from 2015				
	Excess from 2016 121,199				
c	Excess from 2017			-	
d	Excess from 2018 321,881		ł	1	
9	Excess from 2019		į		
<u> </u>				I	Form 990-PF (2019)

Form 9	90-PF (2019)					Page 10
Part)	
	If the foundation has received a ruling foundation, and the ruling is effective fo	ਲ 2019, enter the da	ite of the ruling .	•	_	
	Check box to indicate whether the four		operating founds		ection 🔲 4942(()(3) or 🔲 4942()(5
28	Enter the lesser of the adjusted net income from Part I or the minimum			Prior 3 years		(e) Total
	investment return from Part X for	(a) 2018	(b) 2018	(c) 2017	(d) 2016	
	each year listed	<u></u>				_
	85% of line 2a	\longrightarrow	-			
C	Qualifying distributions from Part XII, line 4, for each year listed					
4	Amounts included in line 2c not used directly					
u	for active conduct of exempt activities			Ì		
_		·	\	}	· · · · · · · · · · · · · · · · · · ·	
8	Qualifying distributions made directly for active conduct of exempt activities.					
	Subtract line 2d from line 2c	ſ		1 .		
3	Complete 3a, b, or c for the		\	-	<u>-</u>	
•	alternative test relied upon:		/			
a	"Assets" alternative test—enter:		·	1		
	(1) Value of all assets					
	(2) Value of assets qualifying under			 \ 	~	
	section 4942(j)(3)(B)(j)	l f				
ь	"Endowment" alternative test-enter 2/3		·		_	
	of minimum investment return shown in					
	Part X, line 6, for each year listed	' I				
С	"Support" alternative test-enter:			1		
	(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	1			i	
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization		-	ļ		
Part	(4) Gross investment income					
Part				ne toundation na	ad \$5,000 or mo	re in assets at
1	any time during the year— Information Regarding Foundation I		s. <u>j</u>			
a	List any managers of the foundation v		ad more than 29	K of the total contri	ihidiane rocowad l	ni tha fairndation
Ū	before the close of any tax year (but o	nly if they have co	ntributed more th	nan \$5 (100) (See se	ection 507(d)(2))	by the touridation
NONE	,	,,		iai, 40,000j. (000 50	JOHO!! JO! (G)(E).)	
	List any managers of the foundation	who own 10% or	more of the sto	ck of a corporation	for an equally lar	ge portion of the
	ownership of a partnership or other en	tity) of which the f	oundation has a	10% or greater inte	rest.	go portion or the
ONE		••		J		
2	Information Regarding Contribution	. Grant. Gift. Loar	. Scholarship.	tc Programs:		
	Check here ▶ ☐ if the foundation of				roanizations and	does not accept
	unsolicited requests for funds. If the fo	oundation makes of	ifts, grants, etc.,	to individuals or on	ganizations under	other conditions.
	complete items 2a, b, c, and d. See in:	structions.				
a	The name, address, and telephone nu	mber or email add	ress of the perso	n to whom applicat	ions should be ad	dressed:
	,		•			
. CHR	RIS COLEMAN, P.O. BOX 3337 FARMING	TON, NM 87499				
þ	The form in which applications should	be submitted and	information and	materials they shou	ıld include:	
_	EN REQUESTS					
	Any submission deadlines:					
d d	Any restrictions or limitations on aw	arde cuch so bi-	goographical c	roce obaritable fi-	lda kinda -4 kina	4.44
4	factors:	aius, such as Dy	AeoAtabutcat a	reas, chantable fle	ius, kinds of insti	iulions, or other
ONE						
					<u></u>	om 990-PF (2019)





m 990-PF (2019) Part XV Supplementary Information (co	ntinued			Pa
3 Grants and Contributions Paid During	the Year or Annrov	ed for Future	Payment	
Desistant	if recipient is an individual.	Foundation	r dymont	1
	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amous
Name and address (home or business)	or substantial contributor	reciplent	CONTROCTOR	
a Paid during the year			<u> </u>	
·				
E ATTACHED STATEMENT #4	İ	}		
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Total	<u> </u>		<u> ▶ 3</u>	la
b Approved for future payment				
NE				
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Ρa	irt X	VI-A Analysis of Income-Producing Ac	ctivities				
Ente	er gro	oss amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by sect	ion 512, 513, or 514	(e)
		•	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1	Pro	gram service revenue	ļ		ļ		(OCC III DIT CCITOTIS.)
	a				ļ		
	Ь						
	C			·			
	d		<u> </u>		 -		 _
	6		ļ				
	1	Fees and contracts from government agencies				-	
2	_	mbership dues and assessments	ļ				
3		erest on savings and temporary cash investments				240	
4		idends and interest from securities			14	348	
5		rental income or (loss) from real estate:			14 -	3,013	
٠		Debt-financed property				<u> </u>	
		Not debt-financed property					
6	Net	rental income or (loss) from personal property					
7		er investment income					
8		n or (loss) from sales of assets other than inventory			-		
9		income or (loss) from special events					
10		ass profit or (loss) from sales of inventory					-
11		er revenue: a					-
	b						
	C					-	
	d				f		
	e						·
12	Sut	ototal. Add columns (b), (d), and (e)				3,361	
13	Tot	al. Add line 12, columns (b), (d), and (e)					3,361
Sec	wor	ksheet in line 13 instructions to venfy calculation	ns.)				0,001
Pa	rt X	VI-B Relationship of Activities to the A	ccomplishm	ent of Exemp	t Purposes		
Lin	e No	 Explain below how each activity for which accomplishment of the foundation's exempt pur 	income is repo	rted in column	(e) of Part XVI	-A contributed in	portently to the
	▼	accomplishment of the foundation's exempt pur	poses (other thai	n by providing fun	ds for such purp	oses). (See instruc	tions.)
						_	
		<u></u>					
		<u> </u>	- · · · · · · · · · · · · · · · · · · ·				
		<u> </u>					
		<u> </u>					·
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		<u> </u>					
							
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Page 13

Part	XVII	Informatio Organizati		nsfers to and Trans	sactions and R	elationships '	With N	ionchai	itable	Exe	mpt
1	Did t	he organization of	directly or indirectly	engage in any of the	following with any	other organiza	tion de	scribed		Yes	No
		ection 501(c) (o nizations?	ther than section	501(c)(3) organization	ons) or in section	on 527, relation	g to	political			
а			porting foundation t	o a noncharitable exe	mpt organization	of:			Ĭ.,	٠	
		Cash			. •				1a(1)	•	\
	(2) C	Other assets .							1a(2)		1
ь	Othe	r transactions:									
			a noncharitable ex						16(1)		Ž
				able exempt organiza					1b(2)		1
				er assets					1b(3)		✓
							٠.		16(4)		✓
									1b(5)		1
_				hip or fundralsing soli			• •		1b(6)		-
C				sts, other assets, or p				٠.	1c		Ľ
đ	n int	e answer to any o	of the above is "Ye	s," complete the folio ices given by the repo	owing schedule. (iolumn (b) snoi	lid alw	ays show	v the i	lair m	arket
				gement, show in colum							
(a) Line		(b) Amount Involved		haritable exempt organization		ption of transfers, tr					
(-)	1	,_,,			10,000.	p		12,012	g ce	<u></u>	
	~+										
	$\neg \dagger$										
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				ffiliated with, or relat					_	_	
				ection 501(c)(3)) or in s	ection 52/7		• •		☐ Ye	s 🗌	No
ь	IT YE	<u> </u>	following schedule		· 1						
		(e) Name of organi	zetion	(b) Type of orga	anization	(e) D	escriptio	n of relation	iship		
					-						
											
				<u> </u>							
	Unde	r penalties of penury 1	declare that I have examin-	ed this return, including accord	hoc solubor and solubor and	ciatements, and in th	n host of	my knowled	no and I	whether h	io tour
Sign	corre	ct, and complete. Deck	ureton of preparer (other th	en taxpayer) is based on all in	iometion of which prepa	ver has any knowledo	iê.	 _	•	_	
Here	۔۔(ا	T_8 / C	o l	6-22	PRESIDENT			May the U with the p			
		ature of officer or trus	stee	Date	Title			See instruc	tions. []Yes[
<u></u>		Print/Type preparer		Preparer's signature		Date	\ a.		אוזי	===	
Paid								k it ' mployed			
Prepa		Firm's name				Pm	1's EIN	<u></u> -			
Use C	JUIA	Firm's address			-		ne no				
								— _	QQ	0-PE	2010

Form 990-PF (2019)







2019	·			PAGE 1 OF 1
FORM 990-PF			TAXES	STATEMENT 1
EXCISE TAXES FROM PRIOR YEAR				35
TOTAL TO FORM 990-PF, PART 1, LINE 18, COLUMN /	4			35
FORM 990-PF		OTHE	R EXPENSES	STATEMENT 2
LICENSES & FEES - NM STATE REGULATION COMMI NVESTMENT FEES - MORGAN STANLEY-SMITH BAR				•
TOTAL TO FORM 990-PF, PART 1, LINE 23, COLUMN A				
FORM 990-PF		INV	ESTMENTS	STATEMENT 3
514 PT 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		****	COST	F/M VALUE
SHARES BARCLAYS US AGGR BOND FO SHARES IBOXX \$ INVESTOP FD		480 SHARES 370 SHARES	\$50,126 39,335	
TOTAL TO FORM 990-PF, PART II, LINE 10, COLUMNS	B AND C		\$89,461	101,283
ORM 990-PF	PAR	T XV SUPPLE	MENTARY INFORMATION	STATEMENT 4
	If recipient is an individual, show any	Foundation	1	1
Recipient Name and Address	relationship to any foundation manager or substantial contributor	status of reciplent	Purpose of grant or contribution	Amount
ATHOLIC CHARITIES 19 W. BROADWAY ARMINGTON, NM 87401	HONE		GENERAL SERVICES	30,000
ACRED HEART CATHOLIC PARISH 14 N. ALLEN AVENUE ARMINGTON, NM 87401	NONE		NON-PROFIT CHURCH ORGANIZATION	1,500
T MARYS CATHOLIC CHURCH 100 E, 20TH STREET ARMINGTON, NM 87401	NONE		NON-PROFIT CHURCH ORGANIZATION	20,000
SYSTIC FIBROSIS FOUNDATION 00 S COLORADO BLVO, SUITE 840 DENVER, CO 80248	NONE		NONN-PROFIT MEDICAL FOUNDATION	250
EW MEXICO BOYS AND GIRLS RANCHES O. BOX 9 ELEN, NM 87002-0009	NONE		NON-PROFIT BOY AND GIRLS ASSISTANCE SERVICES	500
CHO FOOD BANK 821 E MURRAY DRIVE ARMINGTON, NM 87401	NONE		NON-PROFIT FOOD DISTRIBUTION SERVICES	25,000
ROSS INTERNATIONAL CATHOLIC SERVICES O. BOX 273908 OCA RATON, FL 33427-3908	NONE		NON-PROFIT CHURCH ORGANIZATION	5,000
HILDHAVEN, INC 07 W APACHE STREET ARMINGTON, NM 87401	NONE		NON-PROFIT BOY AND GIPLS ASSISTANCE SERVICES	5,000
OTAL TO FORM 990-PF, PART IX, LINE 38				87,250

Schedule of Contributors

OMB No. 1545-0047

2019

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Schedule B

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

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

Occapitation type (check one):

Employer Identification number 20-1716049

Organization type (check one):							
Filers of:		Section:					
Form 990 c	or 990-EZ	501(c)() (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation RECEIVED					
		□ 527 political organization					
Form 990-	PF	S01(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation OGDEN, UT					
		☐ 501(c)(3) taxable private foundation					
	a section 501(c)(7	covered by the General Rule or a Special Rule. , (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See					
General R	ule						
O	or an organization or r more (in money o ontributor's total co	illing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 r property) from any one contributor. Complete Parts I and II. See instructions for determining a intributions.					
Special R	ules						
re 1:	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.						
C	For an organization described in section 501(c)(7), (8), or (10) filling 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							
		and the second s					

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



Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization
COLEMAN FAMILY FOUNDATION

Employer identification number 20-1716049

Part I	Contributors (see instructions). Use duplicate copies o	f Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	TRINITY PETROLEUM MANAGEMENT LLC 1660 LINCOLN STREET SUITE 2100 DENVER, CO 80204	\$300	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person





Name of organization

Employer identification number

Part II	Noncash Property (see instructions). Use duplicate copies	instructions). Use duplicate copies of Part II if additional space is needed.				
(a) No. from . Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received			
		\$,			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See Instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given .	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See Instructions)	(d) Date received			
		\$				





Name of organization

Part III

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

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.					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
1	-					
	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4 Relat		Relation	onship of transferor to transferee		
İ						
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
ŀ						
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
ŀ	Transferee's name, address, and ZIP + 4 Relati		- Nelauoi	ising of dansferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
Farci						

	(e) Transfer of gift					
,	Transferee's name, address, and ZIP + 4 Relation		ship of transferor to transferee			
		••••••	***************************************			
(2) No						
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
Į		••••				
	(e) Transfer of gift					
}	Transferee's name, address, and ZIP + 4 Re		Neiauor	donship of transferor to transferee		