CHANGE OF ACCOUNTING PERIOD Return o

(Rev January 2020)

Department of the Treasury Internal Revenue Service Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www irs gov/Form990 for instructions and the latest information.

2019
Open to Public Inspection

<u>A</u>	For th	e 2019 calendar year, or tax year beginning $10/01/19$, and ending $12/31/2$	<u> 19 </u>	-	
В	Check of a	···		D Employer	dentification number
느	Address o	thange INDIAN PUEBLO CULTURAL CENTER Doing business as		05-0	222060
	Name cha	Number and street (or P.O box if mail is not delivered to street address)	Room/suite	E Telephone	232968 e number
	Initial retu	m 2401 12TH STREET NW	<u> </u>	505-	724-3513
	Final retur				
$\overline{}$	Amended	ALBUQUERQUE NM 87104		G Gross rec	eipts \$ 608,992
<u> </u>	1	r varie and address of principal officer	H(a) Is this a gr	oup return for s	ubordinates? Yes X No
	Application	pending MICHAEL CANFIELD			H., H.,
		2401 12TH STREET NW ALBUQUERQUE NM 87104	H(b) Are all sui		(see instructions)
_	_)	ollawi a list.	(see manucuoms)
÷	Website	· TIPTAINITING ONG	⊣		
<u> </u>			Year of formation 1	.976	M State of legal domicile NM
	Part I	Summary	real of tomaton		m State of legal conficie #44.2
<u> </u>		Briefly describe the organization's mission or most significant activities:	·		
æ		TO PRESERVE, PERPETUATE, AND PRESENT WITH DIGNITY THE	CULTURE .	HISTORY	. AND
Ž		TRADITIONS OF THE PUEBLO PEOPLE OF NEW MEXICO.			, ,
Governance					• • • • • • • • • • • • • • • • • • • •
Š	2 (Check this box ▶ If the organization discontinued its operations or disposed of more than 2	5% of its net as	sets.	• •
8		Number of voting members of the governing body (Part VI, line 1a)		3	5
		Number of independent voting members of the governing body (Part VI, line 1b)		4	5
Activities	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)		5	36
A	6 -	Total number of volunteers (estimate if necessary)		. 6	36
		Total unrelated business revenue from Part VIII, column (C), line 12		7a	0
_	l d	Net unrelated business taxable income from Form 990-T, line 39	n2V.	7b	. 0
	١	Contributions and grants (Part VIII, line 1h)	Prior Ye	5,963	Current Year 443,283
e		Program service revenue (Part VIII, line 2g)		3,925	146,946
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		3,537	946
8	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,832	6,003
	1	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		7,593	597,178
-		Grants and similar amounts paid (Part IX, column (A), lines 1–3)		5,000	0
		Benefits paid to or for members (Part IX, column (A), line 4)			0
ø.	15 3	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)	93.	5,426	284,326
Expenses	16a l	Professional fundraising fees (Part IX, column (A), line 11e)			0
ğ	Ь -	Total fundraising expenses (Part IX, column (D), line 25) ▶ 36,421			
ū	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,88	7,475	484,778
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,82	7,901	769,104
8-		Revenue less expenses Subtract line 18 from line 12	D	-308	<u>-171,926</u>
ي ي ک	톍	Tatal assets (Bod V. line 16)	Beginning of Cu	4,269	End of Year 9,039,809
SCANNED	圖 20 .	Total labilities (Part X, line 16)		6,985	1,404,524
西夏		Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20		7,284	7,635,285
	Part II	Signature Block	<u> </u>	. ,	
A	Jnder per	nalties of penury. I declare that I have examined this return, including accompanying schedules and statem	ents, and to the bo	est of my kn	owledge and belief, it is
•	rue, corre	act, and complete. Declaration of preparer (other than efficer) is based on all information of which preparer	has any knowledg	je .	
— —		I had whill			11/10/20
r, Si	gn	Signature of officer		Date	
23 H	ere	MICHAEL CANFIELD PRESI	DENT AND	CEO	·
~_		Type or print name and title			·
_	1	Print/Type preparer's name Preparer's signature Robert Q, Dettory		Check	If PTIN
Pa		ROBERT A. DEPASQUALE ROBERT A. DEPASQUALE		/20 self-em	
	eparer	Firm's name PULAKOS CPAS, PC		irm's EIN	85-0219147
US	e Only	5921 JEFFERSON ST NE			E0E_220 1500
==		Firm's address ALBUQUERQUE, NM 87109	<u>_</u>	Phone no	505-338-1500
		RS discuss this return with the preparer shown above? (see instructions)	·		X Yes No
FO DA		work neutron act notice, see the separate instructions.		111	Form 990 (2019)

Form 990 (2019) INDIAN PUEBLO CULTURAL CENTER 85-0232968	Page 2
Part III Statement of Program Service Accomplishments	
Check if Schedule O contains a response or note to any line in this Part III	X
1 Briefly describe the organization's mission TO PRESERVE AND PERPETUATE PUEBLO CULTURE AND TO ADVANCE UNDER PRESENTING WITH DIGNITY AND RESPECT THE ACCOMPLISHMENTS AND EV HISTORY OF THE PUEBLO PEOPLE OF NEW MEXICO.	
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes X No
If "Yes," describe these new services on Schedule ODid the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported	
4a (Code) (Expenses \$ 252,732 including grants of \$) (Revenue \$ SEE SCHEDULE O	121,490)
4b (Code) (Expenses \$ 68,633 including grants of \$) (Revenue \$ TRADITIONAL DANCES - THE INDIAN PUEBLO CULTURAL CENTER (IPCC) ROUND TRADITIONAL NATIVE AMERICAN DANCE PERFORMANCES ACCOMPANI INTERPRETIVE PROGRAMMING. THE DANCE GROUPS REPRESENT A PORTION PUEBLOS OF NEW MEXICO AND SEVERAL GROUPS FROM OTHER SOUTHWESTE THERE ARE TWO PERIODS DURING EACH YEAR WHERE WE INCREASE THE N DANCES AT THE CENTER; AMERICAN INDIAN WEEK-PUEBLO DAYS CELEBRA FULL WEEK IN APRIL; AND BALLOON FIESTA WEEK, 10 DAYS AT THE BE	ED BY OF THE 19 RN TRIBES. UMBER OF TION, LAST
OCTOBER.	GINNING OF
4c (Code) (Expenses \$ 90,416 including grants of \$) (Revenue \$ SEE SCHEDULE O)
4d Other program services (Describe on Schedule O)	
(Expenses \$ 255,765 including grants of \$) (Revenue \$)
4e Total program service expenses ► 667,546	
DAA	Form 990 (2019)

85-0232968

Checklist of Required Schedules

Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?

- Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 candidates for public office? If "Yes," complete Schedule C. Part I
- 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes." complete Schedule C. Part II
- 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III
- 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes." complete Schedule D. Part I
- Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II
- Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D. Part III
- Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV
- Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V
- If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI, VII, VIII, IX, or X as applicable
- Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
- b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII
- c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII
- d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX
- Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
- Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X
- 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI and XII
 - b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional
- Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 14a Did the organization maintain an office, employees, or agents outside of the United States?
- b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes." complete Schedule F. Parts I and IV
- 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV
- 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV
- Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)
- Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II
- Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III
- 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H
- b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?
- Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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17 X 18 X 19 X 20a X 20b	15		х
18 X 19 X 20a X 20b	16		x
19 X 20a X 20b	17		х
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20a X 20b X	19		x
21 X	20a		X
	20b		
Form 990 (2019)	21		
	Forr	ո 990	(2019)

	n 990 (2019) INDIAN PUEBLO CULTURAL CENTER 85-0232968		F	Page
_P	art iV Checklist of Required Schedules (continued)		Voc	T N.c
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	i	x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c	L	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	L	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			İ
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key	ľ	İ	
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part			
	IV instructions, for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			ļ
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	_28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			l
	conservation contributions? If "Yes," complete Schedule M	30	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	_31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-37 If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	ļ.		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			1
	19? Note: All Form 990 filers are required to complete Schedule O	38	X	
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V			oxdot
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 26			į
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			É
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			Ĺ

reportable gaming (gambling) winnings to prize winners?

Pa	Statements Regarding Other IRS Fillings and Tax Compliance (contin	luea)			
_		1 1		Yes	No
2a		26			
	Statements, filed for the calendar year ending with or within the year covered by this return	2a 36	-		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu		2b	X	
2-	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	- 0	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b	_	
4a		·			₹.
h	a financial account in a foreign country (such as a bank account, securities account, or other financial if "Yes," enter the name of the foreign country ▶	ar account) /	4a		X
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Accounts (EBAB)			
5a		ACCOUNTS (FBAR)	5 0		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?	ction?	5a 5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	ction	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne	100		
· ·	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or	Ju		
~	gifts were not tax deductible?	5113 51	6b		
7	Organizations that may receive deductible contributions under section 170(c)		"		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods			
_	and services provided to the payor?	3	7a		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as	1		
	required to file Form 8282?		7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c	ontract?	7 _e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine	ed by the			
	sponsoring organization have excess business holdings at any time during the year?		8		ĺ
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter				ĺ
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			ĺ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b]		
11	Section 501(c)(12) organizations. Enter				İ
а	Gross income from members or shareholders	11a	_		į
b	Gross income from other sources (Do not net amounts due or paid to other sources				
	against amounts due or received from them)	11b	1		İ
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1 1	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	4 1		į
3	Section 501(c)(29) qualified nonprofit health insurance issuers				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O				
b	Enter the amount of reserves the organization is required to maintain by the states in which	1 1			
	the organization is licensed to issue qualified health plans	13b	4 1		
С	Enter the amount of reserves on hand	13c	 		
4a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		_X_
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b		
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune.	ration or	_		77
	excess parachute payment(s) during the year?		15		X
	If "Yes," see instructions and file Form 4720, Schedule N	•		-	v
6	Is the organization an educational institution subject to the section 4968 excise tax on net investment	Income?	16		X
-	If "Yes," complete Form 4720, Schedule O		1 -	<u>-</u> } ₁ 990	
			Forr	ロンフリ	(2019)

Forn	990 (2019) INDIAN PUEBLO CULTURAL CENTER 85-0232968				P	age 6
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through	gh 7b	below, an	d for a	"No"	
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes o	n Sch	edule O 3	See insi	ructio	ns
	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	5			
	If there are material differences in voting rights among members of the governing body, or					
	If the governing body delegated broad authority to an executive committee or similar					
	committee, explain on Schedule O					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			7		
	any other officer, director, trustee, or key employee?			2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct					
-	supervision of officers, directors, trustees, or key employees to a management company or other person?			3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	•		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6	Did the organization have members or stockholders?			6	х	
7a	Did the organization have members of stockholders, or other persons who had the power to elect or appoint			-		
<i>,</i> a	one or more members of the governing body?			7a	х	
h				/ a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			7.	x	
	stockholders, or persons other than the governing body?		- f -11	, 7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ir by tr	ie following		v	
a	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at					37
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	/ -		9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Interi	nai R	<u>evenue C</u>	oae)		
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		_X_
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	the fo	rm?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to co	nflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
	describe in Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approval by					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization			15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
	with a taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its					
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
	organization's exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure		-			
17	List the states with which a copy of this Form 990 is required to be filed NM					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Se	ction f	501(c)			
.0	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply	5011	(0)			
	Own website X Another's website X Upon request Other (explain on Schedule O)					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest	et nat	cv and			
13		ot pui	cy, and			
20	financial statements available to the public during the tax year.	de 🕨				
20	State the name, address, and telephone number of the person who possesses the organization's books and record RBARA TRACY 2401 12TH STREET NW	12 🖊				
		۵	E0	5-72	1 _つ	512
WT.	BUQUERQUE NM 8710	J	20	<u> </u>	<u> ح</u>	<u> </u>

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

X

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above

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

	gamzation nor a	any r	elate	ea or	ganiz	zatior	1 C	ompensated any current of	onicer, director, or trustee	
(A) Name and title	(B) Average hours per week (list any hours for	box	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			both a	an e)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(44-271035-44130)	(**-21035************************************	related organizations
(1) LARRY PHILLIPS	JR. 0.50									
BOARD MEMBER	0.50	X						.0	18,625	0
(2) BRUCE BLEAKMAN					П			•		
	0.50									
BOARD MEMBER	0.50	\mathbf{x}					i	o	18,250	0
(3) JAMES ROGER MAD		1								
	0.50									
SECRETARY/TREASURER	0.50	X		X				0	17,250	0
(4) CHRIS BACA								-		
(,, , , , , , , , , , , , , , , , , , ,	0.50									
VICE CHAIRMAN	0.50	X		x				o	20,238	0
(5) RON SHUTIVA		†	†		\Box				/	
(-,	0.50									
CHAIRMAN	0.50	$ \mathbf{x} $		x		1		ol	18,500	0
(6) MICHAEL CANFIEL		 	†		Н	\dashv			20,000	
(o) riz Gin Ed Gin Cin Cin Cin Cin Cin Cin Cin Cin Cin C	0.20									
PRESIDENT AND CEO	0.20			x				o	337,397	0
(7) CHRISTOPHER AND		\vdash	┢			\dashv	\dashv		<u> </u>	
(//CIRCISTOFIER AND	10.00									
CFO	30.00			x				o	173,631	3,375
(8) BARBARA TRACY	30.00	+	┢	_	┝╼╌┢		-	<u> </u>	113,031	
(0) BANDANA INACI	10.00									
DIRECTOR OF FINANCE	30.00					\mathbf{x}		o	118,136	8,592
(9) MONIQUE FRAGUA	30.00	+	\vdash	\vdash		^ +			110,130	<u> </u>
(9)MONIQUE FRAGOR	10.00									
VP COMMERCIAL ENTERP	l					\mathbf{x}		o	141,880	9,184
(10)MICHELLE GARCIA		┼─	-	\vdash	\vdash	^ +	\dashv		141,000	9,104
(WHICHELLE GARCIA	0.00						ļ			
VP SUPPORT SERVICES	40.00]				\mathbf{x}		o	127,800	8,830
(11) EMILY HOWARD	-20.00	+		\vdash	┝╾┼	^	\dashv	<u>U</u>		0,030
(II)EMILI NOWARD	0.00						Ì			
VP OF MARKETING	40.00					\mathbf{x}		o	165,540	4,347
AE OF HWEVETING	-20.00	<u> </u>				<u> </u>		<u> </u>	100,040	Form 990 (2019)

4320000100 11/09/2020 3 41 PM Pg 13 Page **8**

1 1	11 VII . Occion A. Omecia	, 5, 5, 100, 110		, , , ,		٠٠٠١٢٠		-, -	The ringing of Gornperisates	Zimproyoco (commuco)	T
	` (A) Name and title	(B) Average hours per week (list any	bo	x, unle	Pos check ess pe	rson	than c s both r/trust	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(12	BEVERLEE MCC	URE									
,	•	40.00									
VPC	CULTUR & COMMUNITY	0.00	<u> </u>	<u> </u>		ļ	X		129,791	16,450	2,792
	- ·- · · · · · · · · · · · · · · · · ·										
1b	Subtotal			·				>	129,791	1,173,697	37,120
C	Total from continuation she	ets to Part VII, S	ecti	on A	١.				120 701	1 172 607	27 120
<u>d</u> _2	Total (add lines 1b and 1c) Total number of individuals (in	cluding but not l		d to	thos	e list	ed a	▶ bov	129,791	1,173,697	37,120
_	reportable compensation from										LV. IN
3	Did the organization list any fo	ormer officer du	ector	r tru	stee	kev	emr	olove	ee or highest compensated	1	Yes No
Ů	employee on line 1a? If "Yes,"	complete Sched	dule .	J for	such	n ina	ividu	al	•		3 X
4	For any individual listed on line organization and related organ										
	ındıvıdual								,		4 X
5	Did any person listed on line 1 for services rendered to the or									ındıvıdual	5 X
Sect	on B. Independent Contracto										
1	Complete this table for your five compensation from the organic	e highest compe	ensa	ted i	ndep	end	ent c	ontr	actors that received more t	than \$100,000 of	an r
		(A) business address	ппре	11150	.1011	וטו נו	ie ca	ICIT		(B) Ion of services	(C) Compensation
	Name and	business address							резспр	ion of services	Compensation
		_ 									
					_						
	Total number of independent of	contractors (inclin	disc	bu4	not !	mita	nd +c	the	se listed above) who		
2 —	received more than \$100,000									0	5 990 (2010)

Pa	rt V			f Revenue edule O cont	ains a	a respon	se or note	to any line in this	s Part VIII		
	-							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Program Service Contributions, Gifts, Grants Revenue and Other Similar Amounts	2a b c d e	MUSEUM ADM EVENTS All other program	es ents ents eations ontribution gifts, gra ot included i	ns) nots, nd above in lines 1a-1f ons	1a 1b 1c 1d 1e 1f 1g		311,400 60,686 71,197 19,170 ••••••••••••••••••••••••••••••••••••	443,283 121,490 25,456	121,490 25,456		
	3 4 5	Total Add lines Investment inco other similar am Income from inv Royalties	me (ın nounts)	cluding dividend		proceeds	Personal	946			946
	6a b c	Gross rents Less rental expenses Rental inc or (loss)	6a 6b 6c	16 11	,617 ,814 ,803						
	d	Net rental incom Gross amount from sales of assets other than inventory				(11)	Other	4,803			4,803
er Revenue	С	Less cost or other basis and sales exps Gain or (loss) Net gain or (loss	7b 7c		_ .						·····
Other	8a b	Gross income from (not including \$ of contributions rep See Part IV, line 18 Less direct expo Net income or (I	ported of 8 enses loss) fr	on line 1c) om fundraising	8a 8b events		>				
	b c	Gross income from See Part IV, line 19 Less direct expo Net income or (I Gross sales of in returns and alloy	9 enses loss) fr nvento	om gamıng actı ry, less	9a 9b vities		350	350			350
		Less cost of go	ods so	ld	10b		Puemes Code				······
Miscellaneous Revenue	11a b	MISC REVE	NUE				Business Code	850	_		850
Misce Rev		All other revenue		1d			>	850			
	12_	Total revenue.					•	597,178	146,946	: 0	6,949

Statement of Functional Expenses

DAA

Sect	tion 501(c)(3) and 501(c)(4) organizations must c			olete column (A)	
	Check if Schedule O contains a resp	onse or note to any line in th	IS PAIT IX	(C)	(D)
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals See Part IV, line 22				
3	Grants and other assistance to foreign		 		
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				***
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				<u> </u>
7	Other salaries and wages	243,709	224,221	3,794	15,694
8	Pension plan accruals and contributions (include	′ 1			
	section 401(k) and 403(b) employer contributions)	1,884	1,737	28	119
9	Other employee benefits				
10	Payroll taxes	38,733	36,185	391	2,157
11	Fees for services (nonemployees)				
а	Management				
b	· ·				
С	Accounting				
d	, 5				
e	Professional fundraising services See Part IV, line 17				
t	Investment management fees				
g	' <u>*</u>	41 514	27 012	2 020	772
40	(A) amount, list line 11g expenses on Schedule (O)	41,514 11,910	37,812 11,910	2,930	112
	Advertising and promotion	12,388	11,472	311	605
13	Office expenses Information technology	12,500	11,412	311	803
14 15	Royalties				
16	Occupancy	102,441	98,664	3,181	596
17	Travel	5,116	5,116	3/202	
	Payments of travel or entertainment expenses	0,220			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	32,073	31,651	211	211
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	75,203	50,899	20,120	4,184
23	Insurance	725	725		
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				<u></u>
а	ADMINISTRATIVE	130,591	85,810	32,698	12,083
b	EVENT/PERFORMANCE	43,932	43,932		
С	MUSEUM	23,103	21,630	1,473	
đ	MEMBERSHIP	3,979	3,979		
	All other expenses	1,803	1,803		
25_	Total functional expenses Add lines 1 through 24e	769,104	667,546	65,137	36,421
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and		•		
	fundraising solicitation. Check here				
DAA	following SOP 98-2 (ASC 958-720)				Form 990 (2019)
					FORM 330 (2019)

Form 990 (2019) INDIAN PUEBLO CULTURAL CENTER

85-0232968

Page 11

		-0232968		Page 11
Part	X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
	officer in concession of contrains a response of flote to any line in this fact.	(A)		(B)
		Beginning of year		End of year
1	Cash—non-interest-bearing	382,660	1	140,566
2	Savings and temporary cash investments		2	
3		251,800	3	243,800
4	Accounts receivable, net	5,296	4	6,003
5	Loans and other receivables from any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons		5	
6	Loans and other receivables from other disqualified persons (as defined			
छ	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
Assets	Notes and loans receivable, net		7	
8 تخ	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	18,335	9	45,023
10	a Land, buildings, and equipment cost or other			
	basis Complete Part VI of Schedule D 10a 9,123,541			
	b Less accumulated depreciation 10b 3,833,214	<u>4,929,453</u>	10c	5,290,327
11	Investments—publicly traded securities		11	
12	Investments—other securities See Part IV, line 11	1,831,958	12	1,890,153
13	Investments—program-related See Part IV, line 11		13	<u>,</u>
14	Intangible assets		14	
15	Other assets See Part IV, line 11	1,404,767	15	1,423,937
16	Total assets. Add lines 1 through 15 (must equal line 33)	8,824,269	16	9,039,809
17	' '	70,445	17	379,986
18	' '		18	
19	}	108,741	19	116,807
20	·		20	
21	, '		21	
<u>s</u> 22				
<u>≝</u>	trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities	controlled entity or family member of any of these persons		22	
23	, ,		23	
24	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		24	
25	` ' '			
	parties, and other liabilities not included on lines 17-24) Complete Part X	907 700		007 731
1,,	of Schedule D	897,799 1,076,985	25	907,731 1,404,524
26		1,070,965	26	1,404,524
ဖွ	Organizations that follow FASB ASC 958, check here ► X			
8 27	and complete lines 27, 28, 32, and 33. Net assets without donor restrictions	5,420,739	27	5 564 966
Fund Balances	la companya di managantan di managantan di managantan di managantan di managantan di managantan di managantan d	2,326,545	28	5,564,966 2,070,319
B 2°	Organizations that do not follow FASB ASC 958, check here ▶	2,320,343		2,010,319
<u>.</u> 5	and complete lines 29 through 33			
ნ 29	_	1	29	
ets 30	· · · · · · · · · · · · · · · · · · ·		30	
30 31			31	
Net Assets or 35 35 35 35 35 35 35 35 35 35 35 35 35		7,747,284	32	7,635,285
2 32	F	8,824,269	33	9,039,809
1 23	Total nations and not assets/fund palanees	0,024,200	33	5,039,009

orn	1 990 (2019) INDIAN PUEBLO CULTURAL CENTER 85-0232968				Pa	ge 12	
Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI					X	
1	Total revenue (must equal Part VIII, column (A), line 12)	_1		5	97,	178	
2	Total expenses (must equal Part IX, column (A), line 25)	_2		769,104			
3	Revenue less expenses Subtract line 2 from line 1	3				926	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	<u> </u>	7,7	47,	284	
5	Net unrealized gains (losses) on investments	5			59,	928	
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8_					
9	Other changes in net assets or fund balances (explain on Schedule O)	9				-1	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line						
	32, column (B))	10	•	7,6	35,	285	
Pa	rt XII Financial Statements and Reporting					_	
	Check if Schedule O contains a response or note to any line in this Part XII						
					Yes	No	
1	Accounting method used to prepare the Form 990						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in						
	Schedule O						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or						
	reviewed on a separate basis, consolidated basis, or both						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?			2b	X		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a						
	separate basis, consolidated basis, or both						
	X Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		ì				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c	X		
	If the organization changed either its oversight process or selection process during the tax year, explain on						
	Schedule O						
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	Single Audit Act and OMB Circular A-133?		Į	3a		<u> </u>	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		ſ				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b			
				For	n 990	(2019)	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust

► Attach to Form 990 or Form 990-EZ.

Reason for Public Charity Status (All organizations must complete this part) See instructions

2019

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part I

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

Name of the organization

INDIAN PUEBLO CULTURAL CENTER

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

Employer identification number 85-0232968

1		A church, co	nvention of churches, or ass	ociation of churches described	ın sectio	n 170(b)(1)(A)(i).	- ()	l
2		A school described in section 170(b)(1)(A)(ii) (Attach Schedule E (Form 990 or 990-EZ))								L
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,								
		city, and stat	e							
5		An organizat	ion operated for the benefit	of a college or university owned	or operat	ed by a g	overnmental unit described in			
	_	section 170	(b)(1)(A)(ıv). (Complete Part	: II)						
6		A federal, sta	ate, or local government or g	overnmental unit described in s	ection 1	70(b)(1)(<i>A</i>	\)(v).			
7	X	•	ion that normally receives a section 170(b)(1)(A)(vi). (C	substantial part of its support fromplete Part II)	om a gov	ernmenta	l unit or from the general public	C		
8		A community	trust described in section	170(b)(1)(A)(vi). (Complete Part	t II)					
9	П	An agrıcultur	al research organization des	scribed in section 170(b)(1)(A)(ıx) operat	ed in con	junction with a land-grant colle	ge		
		or university university	or a non-land-grant college	of agriculture (see instructions)	Enter the	name, c	ity, and state of the college or			
10		An organizat	ion that normally receives (1) more than 33 1/3% of its sup	port from	contributi	ons, membership fees, and gro	oss		
		•		npt functions—subject to certain	•		•			
			•	nd unrelated business taxable ir 0, 1975 See <mark>section 509(a)(2)</mark>	•		•			
11		An organizat	ion organized and operated	exclusively to test for public safe	ety See s	section 5	09(a)(4).			
12		J		exclusively for the benefit of, to	•					
				zations described in section 50						
			•	nat describes the type of suppor			•	-		
	а			erated, supervised, or controlled	-	• •		ng		
		• •	• ' '	ver to regularly appoint or elect omplete Part IV, Sections A a		or the ai	rectors or trustees of the			
	b		• •	pervised or controlled in connec		its sunna	rted organization(s), by having			
	-			ting organization vested in the						
				Part IV, Sections A and C.			3			
	С			upporting organization operated tructions) You must complete				rith,		
	d	Type III	non-functionally integrated	I. A supporting organization ope	erated in o	onnectio	n with its supported organization	on(s)		
			•	e organization generally must sa	•		•	ess		
			·	nust complete Part IV, Section						
	е	\Box	•	eived a written determination fro			s a Type I, Type II, Type III			
	f		mber of supported organizati	n-functionally integrated support	ung organ	IIZation	•	٦		
	g		ollowing information about the					L		
(1)	_	e of supported	(ii) EIN	(iii) Type of organization	(IV) Is the	organization	(v) Amount of monetary	(vi) Amount	of	
1.7		janization	(ii) Liiv	(described on lines 1–10	1	or governing	support (see	other support		
				above (see instructions))	docu	ment?	instructions)	instructions	s)	
					Yes	No	<u> </u>			
(A)										
(B)										
(C)										
(D)										
(E)								! 		
T_4-'										
Total			l		.f	l				

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Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support						<u> </u>
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	2,518,332	2,178,070	1,780,123	2,405,963	443,28	3 9,325,771
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	2,518,332	2,178,070	1,780,123	2,405,963	443,28	9,325,771
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						279,674
6	Public support. Subtract line 5 from line 4 tion B. Total Support	,		_			9,046,097
	ndar year (or fiscal year beginning in)	(2) 2015	(b) 2016	(c) 2017	(4) 2019	(e) 2019	(f) Total
		(a) 2015	· · · · · ·	· · · · · · · · · · · · · · · · · · ·	(d) 2018	· · · · · · · · · · · · · · · · · · ·	(f) Total
7	Amounts from line 4	2,518,332	2,178,070	1,780,123	2,405,963	443,28	9,325,771
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	70,685	65,274	67,018	70,002	17,56	3 290,542
9	Net income from unrelated business activities, whether or not the business is regularly carried on		,				
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)			;			
11	Total support Add lines 7 through 10						9,616,313
12	Gross receipts from related activities, etc	(see instructions)				12	570,871
13	First five years If the Form 990 is for the	organization's first	, second, third, for	urth, or fifth tax yea	ir as a section 501	(c)(3)	
	organization, check this box and stop her						<u> </u>
Sec	tion C. Computation of Public Su	ipport Percent	tage				
14	Public support percentage for 2019 (line 6	, column (f) dıvıded	by line 11, colum	n (f))		14	94.07%
15	Public support percentage from 2018 School					15	95.16%
16a	33 1/3% support test—2019. If the organ	ızatıon dıd not che	ck the box on line	13, and line 14 is 3	3 1/3% or more, c	heck this	
	box and stop here. The organization quali	fies as a publicly s	upported organiza	tion			▶ X
b	33 1/3% support test—2018. If the organ	ization did not che	ck a box on line 13	or 16a, and line 1	5 is 33 1/3% or mo	ore, check	
	this box and stop here. The organization of	qualifies as a public	cly supported orga	nızatıon			▶ [_]
17a	10%-facts-and-circumstances test—201						
	10% or more, and if the organization meet				•		
	Part VI how the organization meets the "fa organization	icts-and-circumstai	nces" test. The org	janization qualifies	as a publicly supp	ported	▶ □
b	10%-facts-and-circumstances test—201	•				d line	
	15 is 10% or more, and if the organization				•		
	Explain in Part VI how the organization me	ets the "facts-and-	circumstances" te	st The organizatio	n qualifies as a pu	iblicly	, —
	supported organization						
18	Private foundation. If the organization did instructions	not check a box o	on line 13, 16a, 16	o, 17a, or 17b, che	ck this box and se	e	▶ □

Part 链 Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support					<i></i>	
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				/		
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)		,	/ /			
Sac	tion B. Total Support	<u>- </u>	<u> </u>]	
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	(4) 20.0	(5) 25 15	/(0/2011	(4) 20.0	(0, 20.0	(1) 10(01
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		/				
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)		,				
14	First five years. If the Form 990 is for the	organization's firs	t, second, third, fo	urth, or fifth tax vea	ar as a section 501	I(c)(3)	
	organization, check this box and stop here	- /		,			▶ □
Sec	tion C. Computation of Public Su	pport Pércen	tage				
15	Public support percentage for 2019 (line 8,	, column (f), dıvıde	ed by line 13, colur	nn (f))		15	%
16	Public support percentage from 2018 Sche	edule A,/Part III, Iir	<u>ne</u> 15			16	_%_
<u>Sec</u>	tion D. Computation of Investme	<u>nt Income Per</u>	rcentage				
17	Investment income percentage for 2019 (li	ne 10c, column (f)), divided by line 13	3, column (f))		17	%
18	Investment income percentage from 2018	,				18	%
19a	33 1/3% support tests—2019. If the organ	nization did not ch	eck the box on line	e 14, and line 15 is	more than 33 1/39	%, and line	
	17 is not more than 33 1/3%, check this bo	/					▶□
b	33 1/3% support tests—2018 If the organ						۲
	line 18 is not more than 33 1/3%, check th		_				▶ ∐
20	Private foundation. If the organization did	not check a box	on line 14, 19a, or	19b, check this bo	x and see instructi	ions	▶ [_]

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Part 1V **Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section	A. All	Supporting	Organizations

Jeci	ion A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain	1 1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2]
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a]
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с		ĺ
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		İ
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations	_ 4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			
	(III) the authority under the organization's organizing document authorizing such action, and (IV) how the action			
	was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
С	Substitutions only Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (III) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity			
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		·····
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to		1	

determine whether the organization had excess business holdings)

Sched	ule A (Form 990 or 990-EZ) 2019 INDIAN PUEBLO CULTURAL CENTER 85-023	<u> 2968</u>		Page 5
Pa	rt IV Supporting Organizations (continued)			·
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	· 11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		<u> </u>
Sect	ion B. Type I Supporting Organizations			r
		ر	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		ļ
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
<u> </u>	supervised, or controlled the supporting organization	2		
Sect	ion C. Type II Supporting Organizations			T
		F	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
C4	the supported organization(s)	1		L
Sect	ion D. All Type III Supporting Organizations			
		F	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
•	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		ļ
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
Sect	supported organizations played in this regard ion E. Type III Functionally-Integrated Supporting Organizations	3		_
		1		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction organization satisfied the Activities Test Complete line 2 below	ons)		
a b	The organization satisfied the Activities rest <i>Complete line 2 below</i> The organization is the parent of each of its supported organizations. <i>Complete line 3 below</i>			
	The organization is the parent of each of its supported organizations. Complete time 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instance).	truotional		
С	The organization supported a governmental entity Describe in Fart VI now you supported a government entity (see ins	su ucuons)		
2 /	Activities Test Answer (a) and (b) below	ſ	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	140
u	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		
h	·	Za		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	26		
•	activities but for the organization's involvement Percent of Supported Organizations, Anguar (a) and (b) helpy	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	,		
h	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	36		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

INDIAN PUEBLO CULTURAL CENTER 85-0232968 Schedule A (Form 990 or 990-EZ) 2019 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 2 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 4 Add lines 1 through 3 4 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other expenses (see instructions) 7 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) a Average monthly value of securities 1a 1b b Average monthly cash balances Fair market value of other non-exempt-use assets 1c С Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI) 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) Net value of non-exempt-use assets (subtract line 4 from line 3) 5 5 Multiply line 5 by 035 6 7 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year 1 Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Enter greater of line 2 or line 3 4 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2019

instructions)

h Applied to 2019 distributable amount i Carryover from 2014 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2019 from Section D, line 7 a Applied to underdistributions of prior years b Applied to 2019 distributable amount c Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2019, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI See instructions Remaining underdistributions for 2019 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI See instructions Excess distributions carryover to 2020. Add lines 3 and 4c Breakdown of line 7 a Excess from 2015 b Excess from 2016 c Excess from 2017 d Excess from 2018 e Excess from 2019

Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019

INDIAN PUEBLO CULTURAL CENTER

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Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

SUPPLEMENTAL INFORMATION

CHANGE OF ACCOUNTING PERIOD:

IN 2019, IPCC CHANGED ITS FISCAL YEAR END FROM SEPTEMBER 30, TO DECEMBER 31 IN ORDER TO BETTER REFLECT THE OPERATING CYCLE OF ITS OPERATIONS AND TO ALIGN ITS FISCAL YEAR WITH RELATED ORGANIZATIONS. SCHEDULE A, COLUMN E, REFLECTS ONLY THOSE ITEMS RECEIVED FOR THE SHORT PERIOD, OCTOBER 1, 2019 TO DECEMBER 31, 2019.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Name	of the orgar	nization		Employer (dentificat	tion number
т.	MATAN	PUEBLO CULTURAL CENTER		85-02329	168
	rt I	Organizations Maintaining Donor Advised For Complete If the organization answered "Yes" on			
			(a) Donor advised funds	(b) Funds a	nd other accounts
1	Total nu	mber at end of year			
2	Aggrega	te value of contributions to (during year)			
3	Aggrega	te value of grants from (during year)			
4	Aggrega	te value at end of year			
5	Did the d	organization inform all donors and donor advisors in writing th	at the assets held in donor advised		
	funds are	e the organization's property, subject to the organization's ex	clusive legal control?		Yes No
6	Did the d	organization inform all grantees, donors, and donor advisors i	n writing that grant funds can be used		
	only for o	charitable purposes and not for the benefit of the donor or do	nor advisor, or for any other purpose		
		g impermissible private benefit?			Yes No
Pa	ırt II	Conservation Easements. Complete if the organization answered "Yes" on	Form 990, Part IV, line 7		
1		(s) of conservation easements held by the organization (chec			
	=	ervation of land for public use (for example, recreation or edu	· 🛏		ea
	Prote	ection of natural habitat	Preservation of a certified hi	storic structure	
		ervation of open space			
2		e lines 2a through 2d if the organization held a qualified cons	ervation contribution in the form of a conse		
		nt on the last day of the tax year		······	the End of the Tax Yea
а		mber of conservation easements		2a	
b		eage restricted by conservation easements		_2b	
C		of conservation easements on a certified historic structure in		2c	
d		of conservation easements included in (c) acquired after 7/25	5/06, and not on a		
		tructure listed in the National Register			
3		of conservation easements modified, transferred, released, e	extinguished, or terminated by the organiza	ition during the	
	tax year				
4		of states where property subject to conservation easement is			
5		organization have a written policy regarding the periodic mo	nitoring, inspection, handling of		
_		s, and enforcement of the conservation easements it holds?	of water and outside a		∐ Yes ∐ No
6	Starr and	volunteer hours devoted to monitoring, inspecting, handling	of violations, and enforcing conservation e	easements during t	ne year
7	Amount	of average in a constant of the second consta	olotions and onforcing accounting accounting		
7	Amount €	of expenses incurred in monitoring, inspecting, handling of vi	olations, and enforcing conservation easer	nents during the ye	ear
0	•	oh consequation exception transited on line 2/d\ chave extent	the requirements of section 170/h\/4\/D\/	۸	
0		ch conservation easement reported on line 2(d) above satisfy	the requirements of section 170(n)(4)(B)(i	')	☐ Yes ☐ No
9		ion 170(h)(4)(B)(ii)?	mente in its revenue and evnence statemen	-td	res 140
3		III, describe how the organization reports conservation easer sheet, and include, if applicable, the text of the footnote to the	•		
		tion's accounting for conservation easements	e organization's imancial statements that o	lescribes trie	
Pa	rt III	Organizations Maintaining Collections of Art Complete if the organization answered "Yes" on		Similar Assets).
1a	If the ora	anization elected, as permitted under FASB ASC 958, not to		re sheet works	
	_	storical treasures, or other similar assets held for public exhibit			
		provide in Part XIII the text of the footnote to its financial state			
b		anization elected, as permitted under FASB ASC 958, to rep		heet works of	
	_	rical treasures, or other similar assets held for public exhibition			
	-	he following amounts relating to these items			
	-	enue included on Form 990, Part VIII, line 1		▶ \$	19,170
		ts included in Form 990, Part X		> \$	1,423,937
2		anization received or held works of art, historical treasures, c	or other similar assets for financial gain, pro		. ,
	_	amounts required to be reported under FASB ASC 958 relat	• • • • • • • • • • • • • • • • • • • •		
а	•	included on Form 990, Part VIII, line 1	-	▶ \$	
		cluded in Form 990, Part X		▶ \$	
		Reduction Act Notice, see the Instructions for Form 990).	Sched	dule D (Form 990) 2019

Sche	edule D (Form 990) 2019 INDIAN I	PUEBLO CULTU	RAL CENTER	85-	-0232968	Page 2			
P	art III Organizations Maintaini	ng Collections of	Art, Historical Tr	easures, or Ot	her Similar Assets				
3	Using the organization's acquisition, access collection items (check all that apply)	ssion, and other records	s, check any of the foll	owing that make sig	gnificant use of its				
а	Public exhibition	d 🗌	Loan or exchange pro	gram					
b	Scholarly research	=	Other						
С		الما							
4	Provide a description of the organization's	collections and explain	how they further the o	organization's exem	ot purpose in Part				
	XIII		, , , , , , , , , , , , , , , , , , ,		F. F.				
5	During the year, did the organization solici	t or receive donations of	of art, historical treasur	es, or other similar					
	assets to be sold to raise funds rather than					Yes X No			
Pa	art IV Escrow and Custodial A								
	Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21								
	Is the organization an agent, trustee, custo	dian or other intermed	lary for contributions o	r other assets not					
	included on Form 990, Part X?	dian or other intermed	iary for contributions o	other assets not		☐ Yes ☐ No			
h	If "Yes," explain the arrangement in Part X	III and complete the fol	iowing table			res no			
	Tes, explain the arrangement in Fart X	in and complete the for	lowing table			Amount			
c	Beginning balance				1c	7 timodite			
	Additions during the year				1d	· · · · · · · · · · · · · · · · · · ·			
	Distributions during the year				1e				
f					1f				
	Did the organization include an amount on	Form 900 Part Y line	21 for accrow or cust	odial account liabilit		Yes No			
	If "Yes," explain the arrangement in Part X				sy'				
	art V Endowment Funds.	III Oneck here ii the ex	planation has been pr	Ovided Off Falt Alli					
, ,	Complete if the organization	on answered "Yes"	on Form 990 Par	rt IV line 10					
	Complete if the organization	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back			
15	Beginning of year balance	1,831,958	1,804,860	1,733,87					
	Contributions	2,002,000	22,394	13,48					
	Net investment earnings, gains, and		22,334	15,40	10,00	11,040			
C	losses	60,874	15,106	57,49	96,66	2 57,531			
ч	Grants or scholarships	00,012	13,100	37,43	30,00	31,331			
	Other expenditures for facilities and								
-	,								
f	programs Administrative expenses	2,679	10,402		<u> </u>				
'	End of year balance	1,890,152	1,831,958	1,804,86	1,733,87	1,620,610			
2	Provide the estimated percentage of the cu		·		10 1,733,07	1,020,010			
	Board designated or quasi-endowment	10.00 %	(line 1g, coluinir (a))	ieiu as					
	Permanent endowment ► 68.00 %								
	Term endowment ▶ 22.00 %								
·	The percentages on lines 2a, 2b, and 2c sl	nould equal 100%							
3a	Are there endowment funds not in the poss	•	tion that are held and :	administered for the	•				
- u	organization by	ocosion of the organiza	tion that are nell and t	administered for the	•	Yes No			
	(i) Unrelated organizations					3a(ı) X			
	(ii) Related organizations					3a(ii) X			
h	If "Yes" on line 3a(ii), are the related organ	zations listed as requir	ed on Schedule R2			3b			
4	Describe in Part XIII the intended uses of t	•				<u> </u>			
Pa	art VI Land, Buildings, and Equ		Willett Idilds						
	Complete if the organization		on Form 990 Par	t IV line 11a S	ee Form 990 Part	X line 10			
	Description of property	(a) Cost or other ba		· · · · · · · · · · · · · · · · · · ·	c) Accumulated	(d) Book value			
	Securption of property	(investment)	(othe	·	depreciation	(a) book value			
10	Land	,,	(35	·	•				
	Buildings		5 5 5	51,117	2,211,363	3,339,754			
	Leasehold improvements			9,942	74,430	135,512			
	Equipment				1,543,561	1,013,512			
	Other			05,343	3,860	801,483			
	I Add lines 1a through 1e (Column (d) musi	Legual Form 900 Port			3,800	5,290,327			
, J.(d	, taa iiilaa ta tiilaagii ta (oolaliii (a) masi	. oqual i Ollii 030, i alt	, oomini (D), mie 100	·/		Ulo D (Form 990) 2019			

Schedule D (Form 990) 2019 INDIAN PUEBLO CULTURAL	CENTER	85-0232968	Page
Part VII Investments – Other Securities.			
Complete if the organization answered "Yes" on F			
(a) Description of security or category	(b) Book value	(c) Method of	
(including name of security)		Cost or end-of-yea	r market value
(1) Financial derivatives			
(2) Closely held equity interests	1 170 667	VA DIVIN	
(3) Other FUNDS HELD BY COMMUNITY FOUNDA	1,179,667	MARKET	
(A) MONEY MARKET FUNDS	710,486	MARKET	
(B)	<u>-</u>		
(C)	_		· · · · · · · · · · · · · · · · · · ·
(D)			.
(E)			
(F)			
(G)			
(H)	1 000 153		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	1,890,153		
Part VIII Investments - Program Related.	form 000 Dort IV line	11a Caa Farm 000 D	
Complete if the organization answered "Yes" on F			
(a) Description of investment	(b) Book value	(c) Method of Cost or end-of-yea	
(4)		Cost of end-of-yea	i illainet value
(1)			
(3)			 .
(4)			·
(5)	·		
(6)			
(7)			
(8)			
(9)		<u></u> -	
Total (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets.			
Complete if the organization answered "Yes" on F	orm 990, Part IV, line	11d See Form 990, P	art X, line 15
(a) Description			(b) Book value
(1) MUSEUM ARTIFACTS			1,423,937
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			1 402 025
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities.		<u> </u>	1,423,937
	orm 000 Dort IV line	110 or 11f Coo Form	200 Bort V
Complete if the organization answered "Yes" on F	orm 990, Part IV, line	The or Thi See Forms	990, Part A,
line 25 1. (a) Description of liability			(h) Book value
			(b) Book value
(1) Federal income taxes (2) DUE TO INDIAN PUEBLOS MARKETING INC	· · · · · · · · · · · · · · · · · · ·		907,731
(3)			501,131
(4)			
(5)			
(6)			
(7)			
(8)	· · · · · · · · · · · · · · · · · · ·		
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)		>	907,731

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

Sche	dule D (Form 990) 2019 INDIAN PUEBLO CULTURAL CENTER	85-023296	8	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	nts With Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Pa			
1	Total revenue, gains, and other support per audited financial statements		1	3,626,362
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments	2a 59,928		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d 2,957,442		
е	Add lines 2a through 2d		2e	<u>3,017,370</u>
3	Subtract line 2e from line 1		3	608,992
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	ł	
b	Other (Describe in Part XIII)	4b -11,814	ļ	
С	Add lines 4a and 4b		4c	-11,814
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	- <u>11,814</u> 597,178
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses per F	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Pa	rt IV, line 12a		
1	Total expenses and losses per audited financial statements		1	3,723,567
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII)	2d 2,954,463		
е	Add lines 2a through 2d		2e	2,954,463
3	Subtract line 2e from line 1		3	769,104
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	769,104

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

Supplemental Information.

ON FEBRUARY 15, 2008, IPCC ENTERED INTO AN AGREEMENT WITH NEW MEXICO COMMUNITY FOUNDTION (NMCF) ESTABLISHING AN ENDOWMENT FUND. THE PURPOSE OF THE ENDOWMENT IS TO SUPPORT IPCC'S PROGRAMS AND THE COLLABORATIVE LEADERSHIP FUND, A PERMANENT SUB-FUND OF THE ENDOWMENT FUND WAS ESTABLISHED FOR THE PURPOSE OF DEVELOPING COLLABORATIVE LEADERSHIP WITH NEW MEXICO'S DIVERSE COMMUNITIES. ANY DISTRIBUTION FROM THE ENDOWMENT FUND FOR A PURPOSE THAT ADVANCES IPCC'S PROGRAMS AND ACTIVITIES WILL BE CONSIDERED A QUALIFIED USE OF FUNDS FROM THE COLLABORATIVE LEADERSHIP FUND.

AT DECEMBER 31, 2019 AND SEPTEMBER 30, 2018, NMCF HELD \$1,179,667 AND \$1,121,233 OF THE TOTAL ENDOWMENT FUNDS. THE REMAINDER OF IPCC'S ENDOWMENT

^{2,} Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS

Page 5

IS HELD BY IPCC IN DEPOSITORY ACCOUNTS.

PART X - FIN 48 FOOTNOTE

IPCC HAS RECEIVED TAX-EXEMPT STATUS UNDER CODE SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND IS CLASSIFIED AS A PUBLICLY SUPPORTED ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION.

IPCC HAS ADOPTED ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA AS THEY RELATE TO UNCERTAIN TAX POSITIONS AND HAS EVALUATED ITS TAX POSITIONS TAKEN FOR ALL OPEN TAX YEARS. IPCC IS NOT CURRENTLY UNDER AUDIT NOR HAS IPCC BEEN CONTACTED BY ANY TAXING JURISDICTION. MANAGEMENT BELIEVES THAT THE ACTIVITIES OF IPCC ARE WITHIN THEIR TAX-EXEMPT PURPOSE, AND THAT THERE ARE NO UNCERTAIN TAX POSITIONS.

PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER REVENUE (OCT. 18' TO SEPT. 19'); 15 MONTH AUDIT 2,957,442

PART XI, LINE 4B - REVENUE AMOUNTS INCLUDED ON RETURN - OTHER RENT EXPENSES RECLASSIFIED \$ -11.814

PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER RENTAL EXPENSES RECLASSIFIED \$ 11,814 EXPENSES (OCT 18' TO SEPT. 19'); 15 MONTH AUDIT \$ 2,942,649

PART XIII - SUPPLEMENTAL FINANCIAL INFORMATION

IN 2019, IPCC CHANGED ITS FISCAL YEAR END FROM SEPTEMBER 30, TO DECEMBER 31 IN ORDER TO BETTER REFLECT THE OPERATING CYCLE OF ITS OPERATIONS AND TO

Page 5

ALIGN ITS FISCAL YEAR WITH RELATED ORGANIZATIONS. ACCORDINGLY, SCHEDULE D PARTS XI AND XII LINE 1 AMOUNTS ARE FOR THE AUDITED FIFTEEN MONTHS ENDED DECEMBER 31, 2019, WITH THE NECESSARY TWELVE-MONTH ADJUSTED AMOUNTS REPORTED ON LINES 2D TO ARRIVE AT THE THREE-MONTH PERIOD ENDED DECEMBER 31, 2019 FOR FORM REPORTING 990 PURPOSES.

SCHEDULE J

(Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

▶ Complete If the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990

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

OMB No 1545-0047

2019

Open to Public Inspection

		[NDIA]	N P	UEBLO	CULTURAL	CENTE
 	 			_	4.5	

Employer identification number 85-0232968

P	art I Questions Regarding Compensation			
			Yes	No
1:	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form			
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
	Discretionary sperioring account.			
1	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1 _b		
		1.2		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
3				
	organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee X Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization			7.
	Receive a severance payment or change-of-control payment?	4a		X
t	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
•	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9			
5				
•	compensation contingent on the revenues of			
:	The organization?	5a		X
	o Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of			
ā	a The organization?	6a		Х
k	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III			
_				
7		_ 1		77
_	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject		İ	
	to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			_
	ın Part III	8		<u> X</u>
_				
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	_		
	Regulations section 53 4958-6(c)?	. 9 1	l	

Page 2

INDIAN PUEBLO CULTURAL CENTER

Schedule J (Form 990) 2019

Part II

85-0232968

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

muchicera (a)		of M. 2 and/or 1000 MIC commonstant (a) and or 1000 MIC commonstant (b) and or 1000 MIC commonstant	Composition of	di di	(a) pin (a) m	יונס וכו נוומר וווכוחוספפ	4
(A) Name and Title	(I) Base compensation	(II) Bonus & incentive compensation	(III) Other reportable compensation	compensation	(D) Nonaxable benefits	(E) 100al of columns (B)(i)+(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	0 (1)	0	0	0	0	0	
1 PRESIDENT AND CEO	337,397	0	0	0	ō	337,397	0
STOPHER ANDERSON	0 (i)	0	0	0	0	0	0
2 CFO (1	(11) 173,631	0	0	0	3,375	177,006	0
QUE FRAGUA	0 (i)	0	0	0	0	0	0
3 VP COMMERCIAL ENTERP	(11) 141,880	0	0	5,752	3,432	151,064	0
	0 (1)	0	0	0		•	0
4 VP OF MARKETING	(11) 165,540		0	1,188	3,159	169,887	0
	(1)						<u> </u>
(1)	(11)						
	(1)						
9	(11)						
13	(1)						
7	(E)					•	
	(0)						
8	(11)					•	
	(0)						
1) 6	(11)						
2. 3	(0)						
	(1)						
- 	E E		•				
	ε						
12	(11)						
<u> </u>	(2)						
13	(II)						
	(e) (f)						
14							
15	(1)						
	ε						
16	(11)						

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

PART III - OTHER ADDITIONAL INFORMATION

PAGE 7, PART VII), INDIAN PUEBLOS MARKETING, INC. ("IPMI") CONTRACTS WITH A CORPORATION TO PROVIDE THE CHIEF EXECUTIVE OFFICER ("CEO"), INCLUDING THE A SISTER SECTION 17 CORPORATION (RELATED FOR DISCLOSURE ON IRS FORM 990, RELATED SUPPORT, BENEFITS, TRAINING, RETIREMENT, ETC. FOR THE CEO.

THE EFFECTIVELY ALLOCATES 50% OF THE TOTAL CEO COST REFLECTED ON THE IRS FORM OF THE COST OF CONTRACT BETWEEN IPMI AND CORPORATION THAT PROVIDES THE CEO. THIS IPMI CONTRACTS WITH IPCC TO PROVIDE THE CEO, THE RELATED SUPPORT, BENEFITS, TRAINING, RETIREMENT, ETC. IPCC PAYS IPMI 50% 990, PAGE 7, PART VII TO IPCC.

THE OTHER EMPLOYEES, CHRISTOPHER, MONIQUE, AND EMILY ARE FULLY COMPENSATED A RELATED ORGANIZATION, AND DO NOT HAVE HOURS ALLOCATED TO IPCC. ΒY Schedule J (Form 990) 2019

SCHEDULE M (Form 990)

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30

2019

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ➤ Attach to Form 990
➤ Go to www irs gov/Form990 for instructions and the latest information

Open To Public Inspection

INDIAN PUEBLO CULTURAL CENTE

Employer identification number

		ERTO	CULTURAL CE	NTER	85-02329	<u>68</u> _		
Pa	art I Types of Property			· · · · · · · · · · · · · · · · · · ·				
		(a) Check if	(b) Number of contributions or	(c) Noncash contribution amounts reported on	(d) Method of determining	9		
	_ :	applicable	items contributed	Form 990, Part VIII, line 1g	noncash contribution amo	ounts		
1	Art — Works of art							
2	Art — Historical treasures							
3	Art — Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles		······································					
7	Boats and planes							
8	Intellectual property							
9	Securities — Publicly traded		<u> </u>					
10	Securities — Closely held stock							
11	Securities — Partnership, LLC,							
	or trust interests				<u>.</u>			
12	Securities — Miscellaneous							
13	Qualified conservation]						
	contribution — Historic							
	structures							
14	Qualified conservation							
15	contribution — Other Real estate — Residential							
15 16	Real estate — Commercial							
17	Real estate — Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy						-	
22	Historical artifacts	х	35	19,170	APPRAISED VALUE			
23	Scientific specimens							
24	Archeological artifacts							
25	Other ►(
26	Other ►(
27	Other ►(
28	Other ►(
29	Number of Forms 8283 received by the	e organız	ation during the tax yea	r for contributions for				
	which the organization completed Form	n 8283, F	Part IV, Donee Acknowle	edgement	29			
							Yes	No
30a	During the year, did the organization re	eceive by	contribution any proper	ty reported in Part I, lines 1	through			
	28, that it must hold for at least three y	ears fron	n the date of the initial o	ontribution, and which isn't	required			
	to be used for exempt purposes for the	e entire hi	olding period?			30a		X
b	If "Yes," describe the arrangement in F							
31	Does the organization have a gift acce	ptance p	olicy that requires the re	eview of any nonstandard				
	contributions?					31		X
32a	Does the organization hire or use third	parties o	r related organizations	to solicit, process, or sell no	oncash			
	contributions?				•	32a		X
b	If "Yes," describe in Part II							
33	If the organization didn't report an amo	ount in co	lumn (c) for a type of pr	operty for which column (a)	ıs checked,			
	describe in Part II					<u> </u>		

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information

SCHEDULE M - SUPPLEMENTAL INFORMATION

SCHEDULE M, PART I, COLUMN (B):

THE ORGANIZATION REPORTED THE NUMBER OF CONTRIBUTIONS IN COLUMN (B) ON PAGE 1 OF SCHEDULE M.

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

Quento Public

Department of the Treasury Internal Revenue Service Name of the organization

INDIAN PUEBLO CULTURAL CENTER

Employer identification number 85-0232968

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT EXHIBITS & AFFILIATED PROGRAMS - THROUGH OUR EXHIBITS, THE INDIAN PUEBLO CULTURAL CENTER (IPCC) CREATES EXPERIENCES FOR OUR GUESTS, BOTH NATIVE AMERICAN AND NON-NATIVE AMERICAN, TO BETTER UNDERSTAND THE ACCOMPLISHMENTS, STRUGGLES, AND OUR UNIQUE LIFEWAYS AND BELIEFS AS PUEBLO PEOPLE. WE STRIVE TO CREATE MEANINGFUL EXHIBITS, LECTURES, AND DEVELOP EDUCATIONAL PROGRAMMING THAT FOCUSES ON THE HUMAN EXPERIENCE. THIS IS DONE BY SHARING STORIES, HEARING THE DISTINCTIVE PUEBLO LANGUAGES, SHOWCASING ART, AND HIGHLIGHTING CULTURAL OBJECTS IN A MANNER THAT ACCURATELY REPRESENTS WHO WE ARE AS PUEBLO PEOPLE. WE HOPE TO START, CONTINUE, AND/OR BE A PART OF THE DIALOGUE WHEN ADDRESSING THE STATE'S CULTURAL LANDSCAPE, LEGACY OF HISTORICAL TRAUMA, AND STORY OF RESILIENCE, SURVIVAL, AND CONTINUANCE FROM THE PUEBLO PERSPECTIVE. IPCC IS A WORLD-CLASS FACILITY IN EDUCATING VISITORS ABOUT THE LEGACY OF RESILIENCE, ACCOMPLISHMENTS, AND LIVING HISTORY OF PUEBLO PEOPLE AND SERVES AS A VIBRANT PLACE FOR PEOPLE OF ALL CULTURES TO SHARE, LEARN, AND DISCOVER.

FORM 990, PART III, LINE 4C - THIRD ACCOMPLISHMENT

CULTURAL EDUCATION AND TOURS - THE INDIAN PUEBLO CULTURAL CENTER (IPCC) HAS

WORKED TO DEVELOP ITS EDUCATIONAL PROGRAMMING TO SHARE WITH OUR GUESTS, AT

ALL BACKGROUNDS AND EXPERIENCES, THE COMPLEX POLITICAL, SOCIAL, CULTURAL,

AND ECONOMIC HISTORY OF PUEBLO PEOPLE. WHETHER ON A GUIDED TOUR OR

EXPLORING IPCC ON THEIR OWN, GUESTS CAN MOVE THROUGHOUT OUR FACILITY AND

FEEL OUR PUEBLO PERSPECTIVE ON HISTORICAL EVENTS, LEARN TRADITIONAL

CONCEPTS, AND/OR DRAW CRITICAL CONNECTIONS TO PUEBLO CORE VALUES, WHICH

Employer identification number

85-0232968

INDIAN PUEBLO CULTURAL CENTER

DEVELOPS AND PROMOTES MUTUAL RESPECT ACROSS CULTURES. IPCC HAS WORKED TO CREATE A PUEBLO CURRICULUM (K-12) WHICH ALIGNS WITH NM STANDARDS AND BENCHMARKS TO PROVIDE NM EDUCATORS OVER 100 UNIT PLANS THEY CAN USE TO INCORPORATE THE PUEBLO STORY AND PERSPECTIVE THEIR CLASSROOM. OUR EDUCATION PROGRAM ALSO HOSTS TOUR GROUP WITH AGE SPECIFIC TOURS AND HANDS-ON ACTIVITIES TO ENHANCE THEIR EXPERIENCE AND UNDERSTANDING OF PUEBLO CULTURE. OUR LEARNING GARDEN, ENTITLED RESILIENCE GARDEN SHARES THE STORY OF PUEBLO AGRICULTURE FROM PRE-CONTACT THROUGH TODAY'S FARM-TO-TABLE MOVEMENT. BY CREATING EXHIBITS THAT ARE INTERACTIVE AND ENCOURAGING GUESTS TO LEARN AND DISCOVER WE FEEL WE'RE BETTER ABLE TO CONNECT VALUES OF THE PAST WITH COMMUNITIES OF TODAY.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS ANA GRANT -ARCHIVAL WORK; WFFK GRANT - CURRICULUM; WKKF GRANT - APCG; VOLUNTEERS - MEMBERSHIP; PUEBLO HOUSE.

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS THE 19 PUEBLO INDIAN TRIBES OF NEW MEXICO ARE MEMBERS OF THE INDIAN PUEBLO CULTURAL CENTER.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS THE INDIAN PUEBLO CULTURAL CENTER WAS FOUNDED BY THE 19 PUEBLO TRIBES OF NEW MEXICO. THE GOVERNING BODIES OF THESE TRIBES SELECT THE MEMBERS OF THE BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS DECISIONS ARE MADE BY THE BOARD OF DIRECTORS AS REFERENCED WITHIN THE

PAGE 1 OF 3

BYLAWS OF THE INDIAN PUEBLO CULTURAL CENTER, WHICH HAS THE ENTRUSTMENT OF THE SHAREHOLDERS (19 PUEBLO TRIBES OF NEW MEXICO). CERTAIN DECISIONS OF THE BOARD ARE BROUGHT FORTH AT THE ANNUAL SHAREHOLDERS' MEETING WITH THE REPRESENTATIVES OF THE 19 PUEBLOS PRESENT.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

A COPY OF FORM 990 AND ALL SCHEDULES HAS BEEN PROVIDED TO THE MEMBERS OF
THE BOARD OF DIRECTORS PRIOR TO FILING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
THE ORGANIZATION REQUIRES ALL BOARD MEMBERS TO DISCLOSE ANY CONFLICT OF
INTEREST WHENEVER SUCH CONFLICT WOULD ARISE.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE BOARD OF DIRECTORS USES SALARY STUDIES AND COMPARABLE DATA FOR THE

REGION TO DETERMINE THE SALARIES OF THE MANAGEMENT OF THE ORGANIZATION.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

THE BOARD OF DIRECTORS USES SALARY STUDIES AND COMPARABLE DATA FOR THE

REGION TO DETERMINE THE SALARIES OF OTHER OFFICERS AND KEY EMPLOYEES OF THE

ORGANIZATION.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY

AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART VII - ADDITIONAL INFORMATION

Schedule O (Form 990 or 990-EZ) (2019)

Page 2

Name of the organization

Employer identification number

INDIAN PUEBLO CULTURAL CENTER

85-0232968

COMPENSATION FOR BOARD MEMBERS AND STAFF IS BASED ON THE ANNUAL AMOUNTS REPORTED ON THE 2019 FORM W-2 AND 1099, RATHER THAN THE TOTAL COMPENSATION RECEIVED FOR THE SHORT FILING PERIOD 10-01-19 TO 12-31-19.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

ROUNDING ADJUSTMENT \$ -1

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SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Go to www.irs.gov/Form990 for instructions and the latest information ▶ Attach to Form 990.

OMB No 1545-0047

2019

Open to Public Inspection

Employer identification number

Schedule R (Form 990) 2019 ., (g) Section 512(b)(13) controlled entity? õ × (f) Direct controlling entity Yes Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year 85-0232968 (f)
Direct controlling entity (e) End-of-year assets N/A (e)
Public chanty status
(if section 501(c)(3)) Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 (d) Total income (d) Exempt Code section 501C1 Legal domicile (state or foreign country) (c) Legal domicile (state or foreign country) Σ Primary activity GOV ENTITY (b) Primary activity 2401 12TH STREET NW, SUITE 210 NORT 61-1719897 INDIAN PUEBLO CULTURAL CENTER For Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA (a)Name, address, and EIN (if applicable) of disregarded entity (a)
Name, address, and EIN of related organization 87104 M 19 PUEBLOS DISTRICT ALBUQUERQUE Part II Part Ξ Ξ (2) (5) 3 <u>@</u> <u>4</u> 3 ල <u>₹</u>

Schedule R (Form 990) 2019 INDIAN PUEBLO CULTURAL CENTER 85-0232968 Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" because it had one or more related organizations treated as a partnership during the tax year (a) (b) (c) (d) (g)	rural center ons Taxable as ganizations trea	85-(a Partnership ted as a partne	85-0232968 *artnership. Complete if the organizas a partnership during the tax year (d)	e organization tax year	answered "Yes"		on Form 990, Part IV, line	e 34,	Page 2≎
Name, address, and EIN of related organization	ctivity	Legal Direct controlling domicile (state or foreign country)	Prec incom unr exclu tax	Share of total income	Share of end-of- year assets	Dispro-	Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	Percentage ownership
						<u>2</u>		g G	
,	·								
Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered line 34, because it had one or more related organizations treated as a corporation or trust during the tax year	ons Taxable as elated organizati	a Corporation ons treated as	n or Trust. Com a corporation or	plete if the or trust during t	ganization answe he tax year	"Yes"	on Form 990, Part IV	art IV,	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicite (state or foreign country)	(d) Direct confrolling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ets ownership	itage ship	(i) Section 512(b)(13) controlled entity?
- 1									Yes No
(1)INDIAN PUEBLOS MARKERTING, INC. 2401 12TH STREET NW ALBUQUERQUE 85-0460050	SEE PT VII	NM	N/A	υ					×
(2)IPFDC, INC. 2401 12TH STREET NW, SUITE 210 N. ALBUQUERQUE 85-0428187	SEE PT VII	MN	N/A	. 0					×
							Schedule	R (Form	Schedule R (Form 990) 2019

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Yes

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Part V

Transactions With Related Organizations. Complete If the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

- 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
 - a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b Gift, grant, or capital contribution to related organization(s)
- c Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- Dividends from related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)
- Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- i Performance of services or membership or fundraising solicitations for related organization(s)
 - m Performance of services or membership or fundraising solicitations by related organization(s)
 - n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
 - Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses ۵
- q Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- s Other transfer of cash or property from related organization(s)
- 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	19 PUEBLOS DISTRICT	υ	311,400 CASH	CASH
(2)	INDIAN PUEBLOS MARKETING, INC.	м	88,385	CASH - SHARED FACILITIES
(3)	INDIAN PUEBLOS MARKETING, INC.	ы	52,511	САЅН
(4)	INDIAN PUEBLOS MARKETING, INC.	0	64,522	CASH - SHARED STAFF
(5)				
(9)				

Page 4

Part VI

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(k) Percentage ownership	1									1	
					ļ .		ļ				
1 2 9 8 6 L	2		<u></u>		 						
	Yes	<u> </u>			-						
Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)											
(1) Code V- nount in f Schedu (Form 1)											
			<u> </u>						<u> </u>		
12 55 1	Si Si									<u> </u>	
Disp	468	<u> </u>									
(g) Share of end-of-year assets	:										
Sha end-c ass											
(f) Share of total income											
to Sy										-	
arthers on (3) trons?	2										
(e) Are all partners section 501(c)(3) organizations?	NO Les										
(d) Predominant income (related, unrelated, excluded from tax under ' sections 512-514)											
(d) Predominant income (related, unrelated, excluded from tax under ' sections 512-514)											
al al al al al al al al al al al al al a				<u> </u>				'	-		
(c) Legal domicile (state or foreign country)	-										
(b) Primary activity											
Primary											
-											
nty				`							
IN of en											
(a) is, and E											
(a) Name, address, and EIN of entity											
Name											
!											
	Ξ	(2)	(3)	(4)	(2)	(9)	(2)	(8)	(6)	(10)	(11)
	1	1 -	1 -	-	-	-	-	-	-	ت ا	<u> </u>

Supplemental Information.

Provide additional information for responses to questions on Schedule R See Instructions

SCHEDULE R - ADDITIONAL INFORMATION

PART IV, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS A CORPORATION OR TRUST

ITEM 1:

COLUMN (A), NAME OF RELATED ORGANIZATION: INDIAN PUEBLOS MARKETING, INC.

COLUMN (B), PIRMARY ACTIVITY: RETAIL SALES

ITEM 2:

COLUMN (A), NAME OF RELATED ORGANIZATION: IPFDC, INC.

COLUMN (B), PRIMARY ACTIVITY: FINANCE & CONSTRUCTION OF REAL ESTATE