4577 02/12/2015 8:41 AM

Form

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.

Information about Form 990 and its instructions is at www.irs.gov/form990.

beginning 11/01/13 and ending 10/31/14

Open to Public Inspection

		C Name of organization	TI/OI/IJ , and e	naing 10/31/			
(k if applicable:	•			D	Emplo	yer identification number
Addre	ess change		ico Humanities C	ouncil			
Name	e change	Doing Business As				85	-0225681
[]		Number and street (or P.O. box if mail is not del	ivered to street address)		Room/suite E	Teleph	none number
Initial	return	4115 Silver Avenue SI	E			50!	5-633-7370
Termi	inated	City or town, state or province, country, and ZIP	or foreign postal code	· · · · · · · · · · · · · · · · · · ·			
Amen	ided return	Albuquerque	NM 87108			Gross rec	eipts \$ 874,780
1		F Name and address of principal officer:				Giuss ieu	eipis \$ 074,700
Applic	cation pending	Craig Newbill			H(a) Is this a group	return for s	ubordinates? Yes X No
		4115 Silver Avenu	o CF		H(b) Are all subord	inataa laali	ided? Yes No
		Albuquerque	NM 87108	9			(see instructions)
					- 1100, 000	acir a list.	(ace mandonal)
	exempt status:			1) or 527	_		
		ww.nmhum.org			H(c) Group exempt		
0000000000000000	of organization:	X Corporation Trust Association	on Other >		rear of formation: 19	72	M State of legal domicile: NM
<u>Part</u>	l Su	mmary					
1	Briefly des	scribe the organization's mission or mo	st significant activities:				
စ္ပ	See	Schedule O				4	~
an an				IAXI	DAMA:		OMET
Activities & Governance 9 9 4 6 6 7					Juy	T	Copy
8 2	Check this	s box ▶ ☐ if the organization disconti	nued its operations or dispo	sed of more than 25%	of its net assets		· · · · · · · · · · • • • • • • • • • •
ڻ ق		f voting members of the governing body	(D. (VIII.)			3	17
ο σ σ				4 L X		13	17
i iii	Number o	f independent voting members of the go	overning body (Part VI, line	10)		4	
Z Iti		ber of individuals employed in calendar				5	6
A 6		ber of volunteers (estimate if necessary				6	0
7	' a Total unre	lated business revenue from Part VIII,	column (C), line 12			7a	0
	b Net unrela	ted business taxable income from Forr	n 990-T, line 34			7b	0
				-	Prior Year	404	Current Year
<u>a</u> 8					610,		764,696
Ē 9						255	16,771
		t income (Part VIII, column (A), lines 3,			15,	731	19,079
LE 11	Other reve	nue (Part VIII, column (A), lines 5, 6d,	8c, 9c, 10c, and 11e)				1,641
		nue – add lines 8 through 11 (must equ			644,	417	802,187
		d similar amounts paid (Part IX, column	(A) lines 1 2)		83,	320	138,782
1		aid to or for members (Part IX, column					, 0
4.5		ther compensation, employee benefits		-10)	268,	920	329,315
		al fundraising fees (Part IX, column (A)					
be l		raising expenses (Part IX, column (D), I		13,428			
X 17		enses (Part IX, column (A), lines 11a–1			285.	379	355,050
					637,		
I		nses. Add lines 13–17 (must equal Par		,		798	823,147
_ g	Revenue is	ess expenses. Subtract line 18 from line	9 12		Beginning of Current		-20,960 End of Year
Net Assets or Fund Balances	Total accet	e (Part V. line 16)		-	1,047,		1,096,058
Sse Bala						690	
The state of		ties (Part X, line 26)					130,919
	4,454,434	or fund balances. Subtract line 21 from	1 line 20	<u> </u>	983,	346	965,139
Part I		nature Block					
		rjury, I declare that I have examined this re				my knov	vledge and belief, it is
true, cor	rrect, and con	pplete. Declaration of preparer (other than	officer) is based on all informat	ion of which preparer ha	is any knowledge.	·	
	_	& Can					<u>u</u>
Sign		nature of officer	**			Date	
Here		Craig Newbill	<u> </u>	Execut	cive Direc	ctor	
	Тур	e or print name and title	1				
	Print/Type p	reparer's name	Preparer's signature		Date	Check	if PTIN
Paid	Jim Van	Der Geest, CPA			02/12/15	self-emp	P00196092
Preparer	Firm's name	Mackie, Reid	& Company, PA		Firm's	EIN >	85-0303670
Use Only			chool Rd Ste				
	Firm's addre	78 71 12			Phone	9 00	505-268-4335
May the IF		his return with the preparer shown abo			I FROM		X Yes No
		ion Act Notice, see the separate instruc					Form 990 (2013)
DAA		House, oce the acparate matruc					rorm 330 (2013)

Form 990 (2013)	New Mexico H	umanities Council	85-0225681	Page 2
		m Service Accomplishments		
	Check if Schedule O	contains a response or note to	any line in this Part III	X
	cribe the organization's mis			
See Sch	nedule O			
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
* *******				
2 Did the ora	anization undertake any sid	gnificant program services during the ye	ear which were not listed on the	
	990 or 990-EZ?			Yes X No
	scribe these new services			163 22 140
		n, or make significant changes in how it	and late and manage	
	anization cease conducting	, or make significant changes in now it	conducts, any program	V W
services?				Yes X No
	scribe these changes on S			• •
			three largest program services, as meas	
			ort the amount of grants and allocations to	others,
the total ex	penses, and revenue, if any	y, for each program service reported.		
4a (Code:) (Expenses \$	741,490 including gran		
			s throughout New Mex	
include	s Chautauqua	programs, History	Day, and initiatives	and grants.

*				
* ********		,		
4b (Code:) (Expenses \$	including grant	ts of \$) (Re	evenue \$)
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
* ******				
*	, , ,			
4c (Code:) (Expenses \$	including grant	s of \$) (Re	evenue \$
10 (0000	, (πνροιίσσο φ	g grant	, , , , , , , , , , , , , , , , , , ,	,
	* * * * * * * * * * * * * * * * * * * *			
*			,	
	. , , , , , , , , , , , , , , , , , , ,			
	am services. (Describe in S			
(Expenses		including grants of \$) (Revenue \$)
4e Total progra	m service expenses 🕨	741,490		

2000#3	Checkinst of Required Schedules	· · · · · · · · · · · · · · · · · · ·	Vac	T
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	x	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	A	x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
7	"Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		Х
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
O	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		- 22	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	X	
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	11b		х
С	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	11c		х
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	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
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	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	40		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?			Х
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			
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		X
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			X
17	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	16		<u> </u>
18	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	17		Х
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		<u>x</u>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			(2013)

Form 990 (2013) New Mexico Humanities Council 85-0225681 Part IV Checklist of Required Schedules (continued)

2003800	discovery Checkinst of Negaried Schedules (Continued)		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		100	-110
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	x	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) 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		Х
b	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, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		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, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
_	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		***************************************	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			************
••	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,			
•		31		X
32	Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
-		32		X
33	Complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
•		33		X
34	was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I			
J-4		34		х
35a	or IV, and Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?			$\frac{x}{x}$
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
IJ	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			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
		37		X
38	Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 31 Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 0 b 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X 3a If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial X If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X 5a 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X 5b С If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X organization solicit any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). 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? X 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? b 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? X 7с If "Yes," indicate the number of Forms 8282 filed during the year X Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f X If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g g X If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a Did the organization make a distribution to a donor, donor advisor, or related person? b Section 501(c)(7) organizations. Enter: 10 Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b b 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a а b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 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. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b Enter the amount of reserves on hand 14a X 14a Did the organization receive any payments for indoor tanning services during the tax year?

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14b

Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year 17 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 17 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 X 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X The governing body? 8a Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a **10a** Did the organization have local chapters, branches, or affiliates? 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 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a 11a 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 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 X Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X 15a X Other officers or key employees of the organization 15b 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 X with a taxable entity during the year? 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its b 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? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the 20 4115 SILVER AVENUE SE Craig Newbill organization: 🕨

NM 87108

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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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for	bo of	x, unle	Pos check ess pe nd a d	rson i lirecto	than one s both an r/trustee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee	(W-2/1099-MISC)	(1. 2. 00000)	organization and related organizations
(1)Ms. Shari Morris	on								
Director	0.80	x					o	0	0
(2) Dr. Avelina Bard									
	0.80								
Director	0.00	X					0	0	0
(3)Mr.Terry Bumpass									
Chair	0.80	х					0	0	0
(4)Mr. John F. Andr									
Director	0.80 0.00	x					0	0	0
(5) Mr. Elmo Baca									
, ,	0.80								
Director	0.00	X					0	0	0
(6)Mr. Ray Battagli									
	0.80							·	
Director	0.00	X					0	0	0
(7)Dr. Charmazel Du									
	0.80			Ì					
Vice-Chair	0.00	X					0	0	0
(8) Dr. Doris Fields	0 00								
5	0.80 0.00	x					o	0	0
Director (9) Dr. Tomas Jaehn	0.00	^							
(9) DI. IOMAS DAEIM	0.80								
Secretary	0.00	x					0	0	0
(10) Dr. Dennis O'Too									
(10,221 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	0.80								
Treasurer	0.00	x					0	0	0
(11)Dr. Felipe de Or		as	ca						
	0.80								_
Director DAA	0.00	X					0	0	O Form 990 (2013)

4577 02/12/2015 8:41 AM Form 990 (2013) New Mexic								85-022		Page
Part VII Section A. Officers (A) Name and title	(B) Average hours per week (list any	(d	do not ox, unl	Po check less pe	(C) sition more erson	than o	one an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(12)Dr. Linda Lopez	McAliste	r								
Director	0.80	x						0	o	C
(13) Ms. Julia McTagu	ie		 							
	0.80									_
Director (14)Mr. Larry Rodger	0.00	X		 				0	0	
· · · · · · · · · · · · · · · · · · ·	0.80									
Director	0.00	X						0	0	C
(15)Ms. Katherine Co	rdova 0.80									
Director	0.00	x						0	o	0
(16)Mr. Algernon D'A										
Director	0.80	x						o	o	O
(17)Dr. Dennis Reinh	artz									
	0.80									
Director (18) Craig Newbill	0.00	X						0	0	0
(,	40.00									
Executive Director	0.00			X			_	111,565	0	8,367
(19)										
1b Sub-total							>	111,565		8,367
c Total from continuation shee d Total (add lines 1b and 1c)	ts to Part VII, Se						P	111,565		8,367
2 Total number of individuals (incl	luding but not lim	ited	to the		isted	abo	ve) w		00,000 in	3,00.
reportable compensation from the	he organization	<u> </u>	1							Yes No
3 Did the organization list any for										
employee on line 1a? If "Yes," c 4 For any individual listed on line	omplete Schedu 1a, is the sum of	le J f repo	or su ortabl	uch ir le co	ndivi mpe	dual nsati	on ar	nd other compensation from	the	3 X
organization and related organiz	zations greater th	an \$	150,	000?	ıf "\	res,"	com	plete Schedule J for such		4 X
5 Did any person listed on line 1a	receive or accru	e co	mper	nsati	on fr	om a	ny ur	hrelated organization or indi		4 X
for services rendered to the orga		s," cc	mple	ete S	che	dule .	l for s	such person		5 X
Section B. Independent Contractors 1 Complete this table for your five		sate	d ind	eper	 nden	t con	tracto	ors that received more than	\$100.000 of	
compensation from the organiza	ition. Report com							year ending with or within th	ne organization's tax year.	(0)
Name and b	(A) pusiness address							Description	(B) on of services	(C) Compensation
							·····			
2 Total number of independent correceived more than \$100,000 of							se lis	sted above) who	^	
received more than \$100,000 of	compensation in	UIII (ile Ol	yanı	∠all() >			U U	

Pa	art V		nent of Reve i : if Schedule C		tains a	response	or note to any line	in this Part VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
str	1a	Federated can	npaigns	1a						
Srai	b	Membership d		1b						
A, C	С	Fundraising ev		1c			4			
igi Bir	d	Related organ		1d			-			
Sin,	е	Government grants	1	1e		754,770	2			
er.	1	 All other contribution and similar amounts 		1f		9,926				
를 증글	g		L ns included in lines 1a-1		***************************************	9,920	4			
Contributions, Gifts, Grants and Other Similar Amounts	h		es 1a–1f				764,696			
						Busn. Code				
Program Service Revenue	2a	Program	Service Fees			71130	16,771	16,771		
8	b									
Ğ.	С									
Se	d									
Jran	e									
Pro	"		am service revent es 2a–2f			•	16,771		<u> </u>	I
	3		ome (including di							
		and other simil	ar amounts)			•	5,958			5,958
	4	Income from in	vestment of tax-e				·			
	5	Royalties				>				
			(i) Real		(ii) F	Personal	_			
		Gross rents					_			
	b	·					+			
	c d		me or (loss)				1			
		Gross amount from	(i) Securities	· · · · · · · · · · · · · · · · · · ·	(ii)	Other				
		sales of assets other than inventory	85,	714			1			
	b	Less: cost or other								
		basis & sales exps.	72,				_			
	С	Gain or (loss)	13,	121						
		•	ss)		<u> </u>	<u></u>	13,121	13,121		
ne	8a		m fundraising event	6						
le /e		(not including \$	eported on line 1c).							
Re		See Part IV, line	10	а						
Other Revenu	b	Less: direct ex		b			1			
ö			(loss) from fundra	ے ۔۔ ising e	vents					
	9a	Gross income fro	m gaming activities.							
		See Part IV, line	19	a						
		Less: direct exp		b		,	_			
			(loss) from gamin	g activ	ties	>				
	10a	Gross sales of	• •							
	h	Less: cost of go	owances	a b			-			
			(loss) from sales		ntory			***************************************		***************************************
			cellaneous Revenue			Busn. Code				
ĺ	11a	Other Inc	ome				1,641	1,641		
	b		,							
	C									
	d	Total. Add lines	ue e 11a_11d			L	1,641			
	е 12		See instructions.				802,187	31,533	0	5,958
						· · · · · · · · · · · · · · · · · · ·	<u> </u>	·	······································	

Form 990 (2013)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b. Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and 138,782 138,782 organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 119,676 101,854 15,544 2,278 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 21,669 178,496 153,649 3,178 Other salaries and wages Pension plan accruals and contributions (include 8,367 8,367 section 401(k) and 403(b) employer contributions) Other employee benefits 22,776 2,765 19,606 405 10 Payroll taxes Fees for services (non-employees): Management Legal 4,823 6,803 12,623 997 С Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column 67,398 67,398 (A) amount, list line 11g expenses on Schedule O.) 23,714 20,413 2,879 422 Advertising and promotion 12 9,092 1,282 10,562 188 Office expenses 13 1,324 1,140 160 Information technology 24 14 15 Royalties 6,197 28,147 21,041 909 Occupancy 16 78,172 4,923 72,527 722 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates 21 10,689 9,200 1,299 190 Depreciation, depletion, and amortization 22 4,514 548 3,886 80 23 Insurance 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 51,457 51,457 Scholar Costs 19,074 19,074 Other Program Costs b 18,025 542 373 18,940 С Dues 8,013 6,897 973 143 Printing 14,259 2,645 20,423 3,519 All other expenses е 823,147 68,229 741,490 13,428 Total functional expenses. Add lines 1 through 24e 25 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 following SOP 98-2 (ASC 958-720)

Form 990 (2013)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash—non-interest bearing 86 7,893 Savings and temporary cash investments 31,418 2 2 29,028 Pledges and grants receivable, net 316,150 3 3 351,270 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net Inventories for sale or use 8 4,771 Prepaid expenses and deferred charges 1,892 10a Land, buildings, and equipment: cost or 526,143 other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 10b 90,628 446,204 435,515 b 10c Investments—publicly traded securities 248,607 270,460 11 Investments—other securities. See Part IV, line 11 12 12 13 Investments—program-related. See Part IV, line 11 13 14 Intangible assets 14 Other assets. See Part IV, line 11 15 15 1,047,236 Total assets. Add lines 1 through 15 (must equal line 34) 1,096,058 16 16 13,343 27,063 Accounts payable and accrued expenses 17 17 22,419 58,464 18 Grants payable 18 Deferred revenue 19 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 27,928 45,392 of Schedule D 63,690 130,919 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 704,827 706,903 27 Unrestricted net assets 278,719 258,236 Temporarily restricted net assets 28 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 983,546 33 965,139 33 Total net assets or fund balances 1,047,236 34 1,096,058 Total liabilities and net assets/fund balances

Form 990 (2013)

	990 (2013) New Mexico Humanities Council	85-0225681			Pag	ge 12
Pε	nt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in thi					
1	Total revenue (must equal Part VIII, column (A), line 12)		1		02,	
2	Total expenses (must equal Part IX, column (A), line 25)		2		23,:	
3	Developed Incompany on College of Box O force Box 4		1 2 1		20,9	960
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (9	83,	546
5	Net unrealized gains (losses) on investments		5		2,!	553
6	Donated services and use of facilities		6			
7	Investment expenses					
8	Prior period adjustments					
9	Other changes in net assets or fund balances (explain in Schedule O)		9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Pa					
	33, column (B))		10	9	65,3	139
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this	s Part XII				
1	Accounting method used to prepare the Form 990: Cash X Accrual If the organization changed its method of accounting from a prior year or checked "Oth Schedule O.	Other		-	Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent If "Yes," check a box below to indicate whether the financial statements for the year w reviewed on a separate basis, consolidated basis, or both:			2a		<u> </u>
b	Separate basis Consolidated basis Both consolidated and separate the organization's financial statements audited by an independent accountant?			2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year w separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis	arate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes respon				.,	
	of the audit, review, or compilation of its financial statements and selection of an inde			2c	X	
	If the organization changed either its oversight process or selection process during the	e tax year, explain in				
	Schedule O.					
3а	As a result of a federal award, was the organization required to undergo an audit or au	udits as set forth in				
	the Single Audit Act and OMB Circular A-133?			3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization of					
	required audit or audits, explain why in Schedule O and describe any steps taken to un	ndergo such audits		. 3b	X	

Form **990** (2013)

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

New Mexico Humanities Council

85-0225681

Employer Identification number

P	art l	Reas	on for Public Charity	Status (All organizations	must co	mplete	this pa	rt.) Se	e instr	uctions	3 .			
The	orga	nization is not	a private foundation because	e it is: (For lines 1 through 11, che	eck only o	ne box.)								
1	Ň			ociation of churches described in			A)(i).							
2	Series Series	A school des	scribed in section 170(b)(1)(A)(ii). (Attach Schedule E.)										
3				e organization described in sect	ion 170(b)(1)(A)(iii).							
4	constant			in conjunction with a hospital de)(A)(iii).	Enter t	ne hospi	tal's nar	me.		
•	lJ	city, and stat					,	,,,,,,,,,				,		
5		•		f a college or university owned or	r onerated	by a gove	 ernments	al unit de	escribec	in				
J	LJ		(b)(1)(A)(iv). (Complete Part		орегиса	by a gov	Similome	ar armit ac	,00,1000					
				overnmental unit described in se c	ction 170	(h)/4)/A)/	.A							
6	X			ubstantial part of its support from				n tha aa	noral ni	ıblio				
7	A	•	•	• • • • • • • • • • • • • • • • • • • •	i a govern	imental ul	III OI II OI	n me ge	nerai pi	IDIIC				
	[]		section 170(b)(1)(A)(vi). (Co		1.5									
8		•												
9		•	•											
		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a Type b Type II C Type III Functionally integrated d Type III Non-functionally integrated												
			×				TI tax) fr	om busi	nesses					
	Γ		•	, , , , , ,			-1/41							
10		U	•						.4.41					
11		-								41				
										uon				
		(monin)	(range of the same			s rie un			6			1	
	· · · · · ·	a Type	hamand	c Type III–Functiona			a				many in	negran	30	
е		-		inization is not controlled directly										
			-	than one or more publicly suppo	oned orga	nizations	describe	a in seci	euc noi.	(a)(1)				
		or section 50		the force the IDO that it is a	T 1 T.		Turne III e		~					
f				mination from the IRS that it is a	Type I, Ty	/pe II, or I	ype iii s	upportin	g					\Box
		•	check this box											LJ
g		-		on accepted any gift or contributi	ion from a	ny or the								
		following per												Τ
				ntrols, either alone or together wi	ith persons	s describe	ed in (II) a	and			1	[Yes	No
			w, the governing body of the									11g(i)		
			member of a person describe	***************************************								11g(ii)		
		, -	ontrolled entity of a person de									11g(iii)		
h		Provide the t	following information about th				Τ		T					
(e of supported	(ii) EIN	(III) Type of organization (described on lines 1–9	1 ' '	organization sted in your		ou notify		ls the ion in col.	(vII) A	Amount o supp		ary
	org	anization		above or IRC section	1	document?	col. (i)	of your	(i) organ	zed in the		очрр	,,,	
				(see instructions))		Τ		oort?	1	S.?				
					Yes	No	Yes	No	Yes	No				
A)														
						ļ								
B)														
C)														
						<u> </u>	<u> </u>		 					
D)														
E)					-	 								
- /														
ota	ı					1	l							

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

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	ction A. Public Support										
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total				
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	869,691	724,611	628,898	610,431	764,696	3,598,327				
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	19,041	19,041	14,821			52,903				
4	Total. Add lines 1 through 3	888,732	743,652	643,719	610,431	764,696	3,651,230				
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)										
6	Public support. Subtract line 5 from line 4.						3,651,230				
Sec	tion B. Total Support										
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total				
7	Amounts from line 4	888,732	743,652	643,719	610,431	764,696	3,651,230				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	11,004	16,613	7,805	6,074	5,958	47,454				
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 IV.)										
11	Total support. Add lines 7 through 10						3,698,684				
12	Gross receipts from related activities, etc. (s	see instructions)				12	18,412				
13	First five years. If the Form 990 is for the o	organization's first, s	second, third, fourth	n, or fifth tax year a	s a section 501(c)(3)					
	organization, check this box and stop here					********					
Sec	tion C. Computation of Public Su					,					
14	Public support percentage for 2013 (line 6, o			f))		14	98.72%				
15	Public support percentage from 2012 Scheo						98.53%				
16a	33 1/3% support test—2013. If the organize										
	box and stop here. The organization qualifier						> [X]				
b	33 1/3% support test—2012. If the organize										
	check this box and stop here. The organiza						▶ ⊔				
17a	10%-facts-and-circumstances test—201										
	10% or more, and if the organization meets		•		•						
	Part IV how the organization meets the "fact organization										
b	10%-facts-and-circumstances test—2013					ne					
	15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.										
	Explain in Part IV how the organization mee	ts the "facts-and-cir	cumstances" test.	The organization q	ualifies as a publicl	у	_				
							▶ ∐				
18	Private foundation. If the organization did						L				
	instructions						P L				

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

(Complete only if you checked the box on line 9 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.)

Se	ction A. Public Support	r quality arract to	ne tests listed	below, piease e	ompicte i art ii	.,	
	ndar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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.)						
	tion B. Total Support		•				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
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 IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)					<u> </u>	
14	First five years. If the Form 990 is for the organization, check this box and stop here	-		•	- •	, .	
500	tion C. Computation of Public Su						>
15	Public support percentage for 2013 (line 8,			·	-	15	%
16	Public support percentage from 2012 Sche	dule A Part III line	oy iine 13, coluinii 1 15	(<i>'))</i>		16	
***************************************	tion D. Computation of Investme					10	
17	Investment income percentage for 2013 (lir			olumn (f))		17	%
18	Investment income percentage for 2013 (iii					1 40 1	
19a	33 1/3% support tests—2013. If the organ			4. and line 15 is mo	ore than 33 1/3%	 	70
104	17 is not more than 33 1/3%, check this box						>
b	33 1/3% support tests—2012. If the organ						لــا
~	line 18 is not more than 33 1/3%, check this						> [
20	Private foundation. If the organization did						· · · · · · · · · · · · · · · · · · ·

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
•••••••••••••••••••••••••••••••••••••••

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► See separate instructions.

Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047
2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Nai	ne of organization New Mexico Humanities	s Council		85-02256	
Pa	rt I-A Complete if the organization is exem		or is a sectio		
1 2 3	Provide a description of the organization's direct and indirect Political expenditures Volunteer hours	t political campaign activities in	Part IV.	▶ \$	
8892988					
*********	rt I-B Complete if the organization is exem				
1	Enter the amount of any excise tax incurred by the organizat	tion under section 4955	• • • • • • • • • • • • • • • • • • • •		
2	Enter the amount of any excise tax incurred by organization	managers under section 4955		····· > \$	TV TN-
3	If the organization incurred a section 4955 tax, did it file Form				Tes No
4a					Yes No
	If "Yes," describe in Part IV. It I+C Complete if the organization is exem	nt under coetion E04(c)	overnt eastle	nn E04(a)(2)	
				on sor(c)(s).	
1	Enter the amount directly expended by the filing organization	•		. .	
•	activities Enter the amount of the filing organization's funds contribute			▶ \$	
2		<u>-</u>		. .	
				▶ \$	
3	Total exempt function expenditures. Add lines 1 and 2. Enter	•		▶ 0	
	line 17b			 ▶ \$	
4	Did the filing organization file Form 1120-POL for this year?				Yes No
5	Enter the names, addresses and employer identification num		-	-	
	organization made payments. For each organization listed, e	•			
	the amount of political contributions received that were prom			-	
	as a separate segregated fund or a political action committee				() ()
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	promptly and directly delivered to a separate
					political organization. If
					none, enter -0
1)					

2)					
3)					
\$)					
5)					
5)					

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2013

Sched	tule C (Form 990 or 990-EZ) 2013 New M	exico Human	nities Counc	cil	85-0225681	Page 2
Pa	rt II-A Complete if the organi	zation is exempt	t under section 5	01(c)(3) and file	ed Form 5768 (elect	tion under
	section 501(h)).					
Α	Check ▶ ☐ if the filing organizati	•	•		•	p member's
_	name, address, EIN,					
R (Check ▶ ☐ if the filing organizat			rol" provisions a	······································	
		bbying Expendit			(a) Filing organization's totals	(b) Affiliated group totals
	(The term "expenditures"				Organization's totals	group totals
	Total lobbying expenditures to influence pu					
	Total lobbying expenditures to influence a l					
C	, , , ,			1		
d						
e						
ı	 Lobbying nontaxable amount. Enter the am columns. 	iount from the following	g table in both			
ſ	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxab	le amount is:			
ľ	Not over \$500,000	20% of the amount on lin	**************************************			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the				
Ī	Over \$1,000,000 but not over \$1,500,000		e excess over \$1,000,000.			
Ī	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,000.			
	Over \$17,000,000	\$1,000,000.				
g	Grassroots nontaxable amount (enter 25%	of line 1f)				
h	Subtract line 1g from line 1a. If zero or less	, enter -0-				
i	Subtract line 1f from line 1c. If zero or less,	enter -0-				
j	If there is an amount other than zero on eitl	ner line 1h or line 1i, di	id the organization file l	Form 4720		
	reporting section 4911 tax for this year?					Yes No
		4 Voor Avoragi	ng Period Under S	action 501(h)		
	(Some organizations				omplete all of the five	
			structions for lines			
	L	obbying Expenditu	ures During 4-Year	Averaging Perio	d	
	Calendar year (or fiscal year			/ , , , , , ,	(1) 0040	
	beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount					
	(150% of line 2a, column(e))					
С	Total lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2013

d Grassroots nontaxable amount e Grassroots ceiling amount (150% of line 2d, column (e)) f Grassroots lobbying expenditures

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT f (election under section 501(h)).	iled	Form	5768	***************************************		, ago
Can a a a la 1111/a		(a)		(b)	
	s," response to lines 1a through 1i below, provide in Part IV a detailed f the lobbying activity.	Yes	No		Amo	unt	***************************************
1 During to	ne year, did the filing organization attempt to influence foreign, national, state or local						
legislatio	n, including any attempt to influence public opinion on a legislative matter or						
referend	um, through the use of:						
a Voluntee			X				
	f or management (include compensation in expenses reported on lines 1c through 1i)?	X					
	Ivertisements?		X				
d Mailings	to members, legislators, or the public?		X				
	ons, or published or broadcast statements?	 	X				
	o other organizations for lobbying purposes?		X				
g Direct co	ntact with legislators, their staffs, government officials, or a legislative body?		X				
i Other ac	lemonstrations, seminars, conventions, speeches, lectures, or any similar means?	x				2	000
	A Brown had	<u> </u>					000
•	ctivities in line 1 cause the organization to be not described in section 501(c)(3)?	39338888888 	X			~ /	
	and and the construction of a section of the contract of the c		<u> </u>			4000000000	.00000000
	enter the amount of any tax incurred under section 4912 enter the amount of any tax incurred by organization managers under section 4912						w
	g organization incurred a section 4912 tax, did it file Form 4720 for this year?	.0000000000					
Part III-A	Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5) c	or se	ction		300000000000	
	501(c)(6).					·	γ
4 10/222 211	sotantially all (000) as soons due a respired manded atible by soons and					Yes	No
	ostantially all (90% or more) dues received nondeductible by members? rganization make only in-house lobbying expenditures of \$2,000 or less?				1		
	rganization make only in-house lobbying expenditures of \$2,000 or less? rganization agree to carry over lobbying and political expenditures from the prior year?				3	 	
1 Dues, as	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Ol answered "Yes." sessments and similar amounts from members	· (b)	1	····		, 13	
	62(e) nondeductible lobbying and political expenditures (do not include amounts of		•	·····			
	expenses for which the section 527(f) tax was paid).						
a Current y	· · · · · · · · · · · · · · · · · · ·		2a				
	r from last year	• • •	2b			***************************************	
c Total			2c				***************************************
	e amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
	were sent and the amount on line 2c exceeds the amount on line 3, what portion of the						
excess d	pes the organization agree to carryover to the reasonable estimate of nondeductible lobbying	Ì					
and politi	cal expenditure next year?		4				
5 Taxable a	mount of lobbying and political expenditures (see instructions)		5				
Part IV	Supplemental Information						
Schedu. Portion	criptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, I Also, complete this part for any additional information. Le C, Part I-A, Line 1 of dues to Federation of State Humanities Councils						
	deration for lobbying activities. e C, Part II-B, Line 1						
	id to the Federation of State Humanities Councils f						

Scriedule C (Form 990 of 990	0-EZ) 2013 IV	ew Meyrco) numanitu	Les Counc	<u> </u>	63-0223661	Page 4
Part IV Su	upplemental li	n <mark>formation</mark> (co	ontinued)				
assisting	lobbying	efforts	in the U.	S. Congr	ess.		

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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Employer identification number New Mexico Humanities Council 85-0225681 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Schedule D (F	orm 990) 2013 New Mexico numanitute	2 COUNCIL	03-0223001	Page
Part VII	Investments—Other Securities.	- 000 D (N/ II	441 0 5 000 5	
	Complete if the organization answered "Yes" to (a) Description of security or category	o Form 990, Part IV, line (b) Book value	11b. See Form 990, P	····
	(including name of security)	(b) Book value	Cost or end-of-ye	
(1) Financial d	lerivatives			
	ld equity interests			
(0) (04)				***************************************
(A)				
(B)				
(C)				
(D)				de la companya de la
(E)				
(F)				
(G)				
(H)	(h) much a mid Fama 000 Part V and (D) line 40.)			
Part VIII	(b) must equal Form 990, Part X, col. (B) line 12.) ► Investments—Program Related.			
rait viii	Complete if the organization answered "Yes" to	n Form 990 Part IV line	11c See Form 990 P:	art X line 13
	(a) Description of investment	(b) Book value	(c) Method	
	(-,/	(4, 444, 744, 744, 744, 744, 744, 744, 7	Cost or end-of-ye	
(1)				
(2)				
(3)				
(4)				
(5)			, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	
(6)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	+
(7)				
(8)				
(9)				
	(b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX	Other Assets. Complete if the organization answered "Yes" to	Earm 990 Part IV line	11d See Form 990 D	art Y line 15
**************************************	(a) Description	or orm 990, raitiv, line	Tra. Occ Form 550, Fa	(b) Book value
(1)	(a) bootiplist			(2) 2001. (3.00
(2)				
(3)				
(4)		***************************************		
(5)				
(6)				
(7)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(8)				
(9)		······	<u></u>	
	(b) must equal Form 990, Part X, col. (B) line 15.)		<u> </u>	
Part X	Other Liabilities. Complete if the organization answered "Yes" to	Earm 000 Part IV line	110 or 11f Coo Earm (OOO Dort V
	line 25.	o romi 990, raitiv, iine	THE OF THE SECTORINE	990, Part A,
1.	(a) Description of liability	(b) Book value		
	ncome taxes	147 2001 7440		
	nsated Absences	45,392		
(3)		, , , , , , , , , , , , , , , , , , , ,		
(4)				
(5)				
(6)				
(7)				

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

45,392

(8) (9)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶

Schedule D (Form 990) 2013	New 1	Mexico	Humanities	Council	85-	0225681	Page 5
Part XIII	Suppleme	ental Infor	mation (co	Humanities ontinued)				
					, , , , , , , , , , , , , , , , , , , ,			
			,					
	,,					. , , , ,		
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02/12/2015
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SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No. 1545-0047 2013 Open to Public Inspection

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number 85-0225681 ŝ

X Yes

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. New Mexico Humanities Council General Information on Grants and Assistance Parti

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV. line 21. for any recipient that received more than \$5.000. Part II can be duplicated if additional space is needed Part II

Fart IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	received more t	han \$5,00	00. Part II can be d	uplicated if additi	onal space is no	seded.	
1 (a) Name and address of organization	(p) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation (book, FMV, appraisal	(g) Description of	(h) Purpose of grant
מסמבוויום ביים		if applicable	grant	cash assistance	other)	non-cash assistance	or assistance
(1) Center for International Studies							
P.O. Box 92995							Support Humanities
ALBUQUERQUE	56-2362864	501c3	15,000				
(2) NM State University							
1780 East University Avenue							Support Humanities
Las Cruces NM 88003	85-6900401	115a	7,500				
(3) OASIS Albuquerque							
3301 Menaul Blvd NE Suite 18							Support Humanities
ALBUQUERQUE NM 87107	32-0081580	501c3	8,193				
(4) Regents of the University of New M							
1 University of New Mexico MSC01 12	CJ.						Support Humanities
ALBUQUERQUE NM 87131	85-6000064	115a	8,475))))
(5) Cinefemme				A A A A A A A A A A A A A A A A A A A			
P,O. Box 3126							Support Humanities
Sausalito CA 94966	52-2374579	501c3	5,828				
(6) Lore of the Land, Inc							
HC 68 Box 79-S							Support Humanities
Silver City NM 88061	85-0421569	501c3	12,320				4
(7) IAIA Museum of Contemporary Native							
108 Cathedral Place							Support Humanities
Santa Fe NM 87501	85-0365964	501c3	7,500				1
(8) El Rancho De Las Golondrinas							
334 Los Pinos Road							Support Humanities
Santa Fe NM 87507	20-3845643	501c3	7,500				1
(9) Youth Media Project							
1000 Cordova Place #655							Support Humanities
Santa Fe NM 87505	90-0583656	501c3	5,008				

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2013)

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

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047 2013

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. ▶ Attach to Form 990.

Open to Public Inspection

Employer identification number

New Mexico Humanities Counc	ncil				α	Employer Identification Infilling 85-0005681
Part 1 General Information on Grants and Assistance)e					
	e grants or as	sistance, the grantees' elig	ibility for the grants or a	ssistance, and		Yes
cribe	of grant funds	in the United States.				٦
Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	s and Orga lore than \$5	nizations in the Uni ,000. Part II can be o	ted States. Comp duplicated if additic	lete if the orgar	nization answe eeded.	red "Yes" to Form 990,
1 (a) Name and address of organization (b) EIN or government	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) 516 Arts 516 Central Ave ALBUQUERQUE NM 87102 20-854074	4			oner		Support Humanities
(2) Corporation for Downtown Developmen P.O. Box 4068 Silver City NM 88062 85-035928	283 501c3					Support Humanities
(3) Museum of New Mexico Foundation P.O. Box 2065 Santa FE NM 87504 85-020250	503 501c3	3 8,750				Support Humanities
(4)						
(5)	***************************************					
(9)						
(2)						
(8)						
(6)						
 2 Enter total number of section 501(c)(3) and government organizations listed 3 Enter total number of other organizations listed in the line 1 table 	sted in the line 1 table	1 table				A

Schedule I (Form 990) (2013)