

## Forms 990 / 990-EZ Return Summary

For calendar year 2014, or tax year beginning **07/01/14** , and ending **06/30/15**

85-6018576

### NEW MEXICO CHRISTIAN CHILDRENS HOME

**Net Asset / Fund Balance at Beginning of Year** 21,046,548

#### Revenue

Contributions	<u>3,688,319</u>	
Program service revenue	<u>90,441</u>	
Investment income	<u>738,890</u>	
Capital gain / loss	<u>-158,954</u>	
Fundraising / Gaming:		
Gross revenue	<u>16,200</u>	
Direct expenses	<u>14,515</u>	
Net income	<u>1,685</u>	
Other income	<u>100,159</u>	
<b>Total revenue</b>		<u>4,460,540</u>

#### Expenses

Program services	<u>2,948,020</u>	
Management and general	<u>354,470</u>	
Fundraising	<u>309,753</u>	
<b>Total expenses</b>		<u>3,612,243</u>
<b>Excess / (deficit)</b>		<u>848,297</u>

Changes -1,454,640

**Net Asset / Fund Balance at End of Year** 20,440,205

#### Reconciliation of Revenue

Total revenue per financial statements	<u>3,013,897</u>	
Less:		
Unrealized gains	<u>-1,358,361</u>	
Donated services	<u>                    </u>	
Recoveries	<u>                    </u>	
Other	<u>-88,175</u>	
Plus:		
Investment expenses	<u>                    </u>	
Other	<u>107</u>	
<b>Total revenue per return</b>	<u>4,460,540</u>	

#### Reconciliation of Expenses

Total expenses per financial statements	<u>3,620,240</u>	
Less:		
Donated services	<u>                    </u>	
Prior year adjustments	<u>                    </u>	
Losses	<u>                    </u>	
Other	<u>8,104</u>	
Plus:		
Investment expenses	<u>                    </u>	
Other	<u>107</u>	
<b>Total expenses per return</b>	<u>3,612,243</u>	

		Balance Sheet		
		Beginning	Ending	Differences
Assets	<u>21,369,966</u>	<u>21,001,673</u>		
Liabilities	<u>323,418</u>	<u>561,468</u>		
Net assets	<u>21,046,548</u>	<u>20,440,205</u>	<u>-606,343</u>	

#### Miscellaneous Information

Amended return \_\_\_\_\_  
 Return / extended due date 05/16/16  
 Failure to file penalty \_\_\_\_\_

## Form 990-T Return Summary

For calendar year 2014, or tax year beginning **07/01/14** , and ending **06/30/15**

85-6018576

### NEW MEXICO CHRISTIAN CHILDRENS HOME

#### Income

Gross profit		
Capital gain / loss		
Unrelated debt-financed income		
All other income	<b>38,944</b>	
<b>Total income</b>		<b>38,944</b>

#### Deductions

Officer compensation		
Salaries		
All other deductions		
Net operating loss		
Specific deduction	<b>1,000</b>	
<b>Total deductions</b>		<b>1,000</b>

**Unrelated business taxable income**

**37,944**

#### Taxes / Credits / Payments

Regular tax	<b>5,692</b>	
Proxy tax		
Alternative minimum tax		
<b>Tax</b>		<b>5,692</b>

Foreign tax credit

Other credits

General business credits

Prior year minimum tax credit

#### Total nonrefundable credits

Other taxes

#### Total tax

**5,692**

Estimated tax payments

**9,520**

Paid with extension

Tax withheld

Other credits / payments

Estimated tax penalty

**7**

Overpayment applied to next year's tax

**3,821**

#### Payments / penalty / application

**5,692**

#### Net tax due

**0**

#### Additions to Tax

Interest on late payments

Failure to file penalty

Failure to pay penalty

#### Total additions

**Balance due**

**Refund**

#### Next Year's Estimates

1st quarter		
2nd quarter		
3rd quarter		
4th quarter	<b>1,879</b>	
<b>Total</b>	<b>1,879</b>	

#### Miscellaneous Information

Amended return

Return / extended due date **05/15/16**

**RPC CPAs + Consultants, LLP**  
**2403 82nd St**  
**Lubbock, TX 79423-2300**  
**806-745-6789**

May 16, 2016

**CONFIDENTIAL**

NEW MEXICO CHRISTIAN CHILDRENS HOME  
1356 NM 236  
PORTALES, NM 88130

Dear CHARLES ANDERSON:

We have prepared the following returns from information provided by you without verification or audit.

Return of Organization Exempt From Income Tax (Form 990)  
Exempt Organization Business Income Tax Return (Form 990-T)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements.

**Federal Filing Instructions**

Your Form 990 for the year ended 6/30/15 shows no balance due.

You are using a Personal Identification Number (PIN) for signing your return electronically. Sign the IRS e-file Authorization and mail it as soon as possible to:

RPC CPAs + Consultants, LLP  
2403 82nd St  
Lubbock, TX 79423-2300

Initial and date the copies of the IRS e-file Signature Authorization and the Form 990. Retain them for your records. If previously signed and returned no further action is required for Form 8879-EO.

Your return is being filed electronically with the IRS and is not required to be mailed. Mailing a paper copy of your return to the IRS will delay the processing of your return.

Your Form 990-T for the tax year ended 6/30/15 shows a total overpayment of \$3,821, all of which is to be credited to your estimated tax liability for the coming year. The return should be signed and dated on Page 2 by an officer representing the organization. Mail the return AS SOON AS POSSIBLE to:

Department of the Treasury  
Internal Revenue Service Center  
Ogden, UT 84201-0027

If a private delivery service is used, mail to:

OSPC  
1973 N. Rulon White Blvd.  
Ogden, UT 84404

Your required 2016 Form 990-T estimated tax payments are as follows:

<b>Due Date</b>	<b>Remittance</b>
10/15/15	\$0
12/15/15	\$0
3/15/16	\$0
6/15/16	\$1,879

Each payment should be made by a method of Electronic Funds Transfer (EFT). If using the ACH Debit Remittance Method, contact the EFTPS Financial Agent of the United States Treasury and direct the Agent to initiate a withdrawal from your account. If using the ACH Credit Remittance Method, contact your financial institution to initiate each tax payment.

Reminders for estimated federal tax installments will not be sent to you. Therefore, you should establish your own reminder system for making timely deposits.

Also enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

RPC CPAs + Consultants, LLP

# IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

Form **8879-EO**

For calendar year 2014, or fiscal year beginning 7/01, 2014, and ending 6/30, 20 15

**2014**

Department of the Treasury  
Internal Revenue Service

**Do not send to the IRS. Keep for your records.**  
Information about Form 8879-EO and its instructions is at [www.irs.gov/form8879e](http://www.irs.gov/form8879e).

Name of exempt organization

**NEW MEXICO CHRISTIAN CHILDRENS HOME**

Employer identification number

**85-6018576**

Name and title of officer

**ROD SELF  
EXECUTIVE DIRECTOR**

## Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a	Form 990 check here	<input checked="" type="checkbox"/>	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<b>4,460,540</b>
2a	Form 990-EZ check here	<input type="checkbox"/>	b	Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here	<input type="checkbox"/>	b	Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here	<input type="checkbox"/>	b	Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here	<input type="checkbox"/>	b	Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	

## Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2014 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

### Officer's PIN: check one box only

I authorize RPC CPAS + CONSULTANTS, LLP to enter my PIN 11111 as my signature  
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2014 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2014 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature

Date **05/16/16**

## Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

**80199433333**

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2014 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

**MICHELE KIRKLAND**

Date

**05/16/16**

**ERO Must Retain This Form—See Instructions**

**Do Not Submit This Form To the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2014)

Form **990**

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](http://www.irs.gov/form990).

OMB No. 1545-0047

**2014**

Open to Public Inspection

**A** For the 2014 calendar year, or tax year beginning **07/01/14**, and ending **06/30/15**

- B Check if applicable:
- Address change
- Name change
- Initial return
- Final return/terminated
- Amended return
- Application pending

<b>C</b> Name of organization <b>NEW MEXICO CHRISTIAN CHILDRENS HOME</b>		<b>D</b> Employer identification number <b>85-6018576</b>
Doing business as		<b>E</b> Telephone number <b>575-356-5372</b>
Number and street (or P.O. box if mail is not delivered to street address) <b>1356 NM 236</b>		
City or town, state or province, country, and ZIP or foreign postal code <b>PORTALES NM 88130</b>		<b>G</b> Gross receipts \$ <b>8,974,511</b>

<b>F</b> Name and address of principal officer: <b>ROD SELF</b> <b>1356 NM 236</b> <b>PORTALES NM 88130</b>	<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
--	---

<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	<b>J</b> Website: <b>WWW.NMCCH.ORG</b>	<b>H(c)</b> Group exemption number ▶
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	<b>L</b> Year of formation: <b>1963</b>	<b>M</b> State of legal domicile: <b>NM</b>

## Part I Summary

<b>Activities &amp; Governance</b>	1	Briefly describe the organization's mission or most significant activities: <b>TO TRANSFORM EACH CHILD WE SERVE INTO A CHRISTIAN CHAMPION WHO IS A RESPECTED, RESPONSIBLE CITIZEN THROUGH SERVICES PROVIDED BY A DEDICATED PROFESSIONAL TEAM UNDER GOD'S DIRECTION.</b>		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>16</b>
	4	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>16</b>
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	<b>5</b>	<b>53</b>
	6	Total number of volunteers (estimate if necessary)	<b>6</b>	<b>0</b>
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>38,944</b>
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>37,944</b>	
<b>Revenue</b>	8	Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b> <b>2,733,074</b>	<b>Current Year</b> <b>3,688,319</b>
	9	Program service revenue (Part VIII, line 2g)	<b>188,459</b>	<b>90,441</b>
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>673,634</b>	<b>579,936</b>
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>138,815</b>	<b>101,844</b>
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>3,733,982</b>	<b>4,460,540</b>
<b>Expenses</b>	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		<b>25,800</b>
	14	Benefits paid to or for members (Part IX, column (A), line 4)		<b>0</b>
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>1,632,078</b>	<b>1,644,979</b>
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		<b>0</b>
	<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>309,753</b>		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>1,980,945</b>	<b>1,941,464</b>	
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>3,613,023</b>	<b>3,612,243</b>	
	19 Revenue less expenses. Subtract line 18 from line 12	<b>120,959</b>	<b>848,297</b>	
<b>Net Assets or Fund Balances</b>	20	Total assets (Part X, line 16)	<b>Beginning of Current Year</b> <b>21,369,966</b>	<b>End of Year</b> <b>21,001,673</b>
	21	Total liabilities (Part X, line 26)	<b>323,418</b>	<b>561,468</b>
	22	Net assets or fund balances. Subtract line 21 from line 20	<b>21,046,548</b>	<b>20,440,205</b>

## Part II Signature Block

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

<b>Sign Here</b>	Signature of officer <b>ROD SELF</b>	Date <b>EXECUTIVE DIRECTOR</b>
	Type or print name and title	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>MICHELE KIRKLAND</b>	Preparer's signature <b>MICHELE KIRKLAND</b>	Date <b>05/16/16</b>	Check <input checked="" type="checkbox"/> if self-employed	PTIN <b>P00949599</b>
	Firm's name ▶ <b>RPC CPAS + CONSULTANTS, LLP</b>	Firm's EIN ▶ <b>85-0454285</b>			
	Firm's address ▶ <b>2403 82ND ST LUBBOCK, TX 79423-2300</b>	Phone no. <b>806-745-6789</b>			

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

For Paperwork Reduction Act Notice, see the separate instructions.

**Part III** Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

**TO TRANSFORM EACH CHILD WE SERVE INTO A CHRISTIAN CHAMPION WHO IS A RESPECTED, RESPONSIBLE CITIZEN THROUGH SERVICES PROVIDED BY A DEDICATED PROFESSIONAL TEAM UNDER GOD'S DIRECTION.**

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  No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O.

4 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 \$ **2,948,020** including grants of \$ **25,800** ) (Revenue \$ **151,430** )

**THE ORGANIZATION PROVIDES HEALTH, EDUCATION AND WELFARE TO APPROXIMATELY 60 CHILDREN.**

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses **2,948,020**

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<b>X</b>	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	<b>X</b>	
<b>3</b> 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		<b>X</b>
<b>4 Section 501(c)(3) organizations.</b> 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		<b>X</b>
<b>5</b> 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		<b>X</b>
<b>6</b> 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		<b>X</b>
<b>7</b> 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		<b>X</b>
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		<b>X</b>
<b>9</b> 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		<b>X</b>
<b>10</b> 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		<b>X</b>
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<b>X</b>	
<b>b</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		<b>X</b>
<b>c</b> 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		<b>X</b>
<b>d</b> 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	<b>X</b>	
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		<b>X</b>
<b>f</b> 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		<b>X</b>
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	<b>X</b>	
<b>b</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		<b>X</b>
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<b>X</b>
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?		<b>X</b>
<b>b</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		<b>X</b>
<b>15</b> 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		<b>X</b>
<b>16</b> 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		<b>X</b>
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		<b>X</b>
<b>18</b> 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	<b>X</b>	
<b>19</b> 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		<b>X</b>
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		<b>X</b>
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		



**Part IV Checklist of Required Schedules (continued)**

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		<b>X</b>
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	<b>X</b>	
<b>23</b> 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		<b>X</b>
<b>24a</b> 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		<b>X</b>
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		<b>X</b>
<b>b</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		<b>X</b>
<b>26</b> 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 "Yes," complete Schedule L, Part II		<b>X</b>
<b>27</b> 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		<b>X</b>
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		<b>X</b>
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		<b>X</b>
<b>c</b> 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		<b>X</b>
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	<b>X</b>	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		<b>X</b>
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		<b>X</b>
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		<b>X</b>
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		<b>X</b>
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		<b>X</b>
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?		<b>X</b>
<b>b</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		
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		<b>X</b>
<b>37</b> 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, Part VI		<b>X</b>
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	<b>X</b>	

**Part 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

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>X</b>	
<b>2a</b>	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		
<b>2b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<b>X</b>	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>X</b>	
<b>3b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	<b>X</b>	
<b>4a</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 account)?		<b>X</b>
<b>4b</b>	If "Yes," enter the name of the foreign country: <b>▶</b> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		<b>X</b>
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		<b>X</b>
<b>5c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		<b>X</b>
<b>6b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>7a</b>	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?		<b>X</b>
<b>7b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>7c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		<b>X</b>
<b>7d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
<b>7e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		<b>X</b>
<b>7f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		<b>X</b>
<b>7g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		<b>X</b>
<b>7h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>X</b>	
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>9a</b>	Did the sponsoring organization make any taxable distributions under section 4966?		
<b>9b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>10a</b>	Initiation fees and capital contributions included on Part VIII, line 12		
<b>10b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>11a</b>	Gross income from members or shareholders		
<b>11b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>12b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>13a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		
<b>13b</b>	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		
<b>13c</b>	Enter the amount of reserves on hand		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		<b>X</b>
<b>14b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

**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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	<b>16</b>		
Enter the number of voting members of the governing body at the end of the tax year. 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.			
<b>1b</b>	<b>16</b>		
Enter the number of voting members included in line 1a, above, who are independent.			
<b>2</b>			<b>X</b>
Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			
<b>3</b>			<b>X</b>
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?			
<b>4</b>			<b>X</b>
Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			
<b>5</b>			<b>X</b>
Did the organization become aware during the year of a significant diversion of the organization's assets?			
<b>6</b>			<b>X</b>
Did the organization have members or stockholders?			
<b>7a</b>			<b>X</b>
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?			
<b>7b</b>			<b>X</b>
Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			
<b>8</b>			
Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
<b>8a</b>		<b>X</b>	
a The governing body?			
<b>8b</b>		<b>X</b>	
b Each committee with authority to act on behalf of the governing body?			
<b>9</b>			<b>X</b>
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.			

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>			<b>X</b>
Did the organization have local chapters, branches, or affiliates?			
<b>10b</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?			
<b>11a</b>			<b>X</b>
Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			
<b>11b</b>			
Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
<b>12a</b>		<b>X</b>	
Did the organization have a written conflict of interest policy? If "No," go to line 13.			
<b>12b</b>			<b>X</b>
Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?			
<b>12c</b>			<b>X</b>
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.			
<b>13</b>		<b>X</b>	
Did the organization have a written whistleblower policy?			
<b>14</b>		<b>X</b>	
Did the organization have a written document retention and destruction policy?			
<b>15</b>			
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?			
<b>15a</b>		<b>X</b>	
a The organization's CEO, Executive Director, or top management official			
<b>15b</b>		<b>X</b>	
b Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
<b>16a</b>			<b>X</b>
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?			
<b>16b</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?			

**Section 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 (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  Upon request  Other (explain in Schedule O)
- 19** 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.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **▶**

**NMCCCH**

**1356 NM 236**

**PORTALES**

**NM 88130-9411 575-356-5372**

**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

**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.

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 organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) <b>ROD SELF</b>	50.00									
<b>EXECUTIVE DIRECTOR</b>	0.00	X		X			76,351	0	0	
(2) <b>G.C. ROSS</b>	5.00									
<b>PRESIDENT</b>	0.00	X		X			0	0	0	
(3) <b>MIKE WISCHKAEMPER</b>	5.00									
<b>VICE PRESIDENT</b>	0.00	X		X			0	0	0	
(4) <b>JACK MERRICK</b>	3.00									
<b>SECRETARY</b>	0.00	X		X			0	0	0	
(5) <b>ROY ALEXANDER</b>	3.00									
<b>DIRECTOR</b>	0.00	X					0	0	0	
(6) <b>JACE ENSOR</b>	3.00									
<b>DIRECTOR</b>	0.00	X					0	0	0	
(7) <b>BUDDY BLUE</b>	3.00									
<b>DIRECTOR</b>	0.00	X					0	0	0	
(8) <b>MIKE HANKINS</b>	3.00									
<b>DIRECTOR</b>	0.00	X					0	0	0	
(9) <b>HAL HOWELL</b>	3.00									
<b>DIRECTOR</b>	0.00	X					0	0	0	
(10) <b>EDDIE WILSON</b>	3.00									
<b>DIRECTOR</b>	0.00	X					0	0	0	
(11) <b>MARLIN POYNOR</b>	3.00									
<b>DIRECTOR</b>	0.00	X					0	0	0	

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) DAVID REVES ..... DIRECTOR	3.00 0.00	X						0	0	0
(13) LEROY THOMAS ..... DIRECTOR	3.00 0.00	X						0	0	0
(14) SCOTTY HOLLOMAN ..... DIRECTOR	3.00 0.00	X						0	0	0
(15) ROGER HARRELL ..... DIRECTOR	3.00 0.00	X						0	0	0
(16) KERRY FENDER ..... DIRECTOR	3.00 0.00	X						0	0	0
(17) KEITH RALL ..... DIRECTOR	3.00 0.00	X						0	0	0
(18) BOB TERHUNE ..... DIRECTOR	0.00 0.00	X						0	0	0
(19)										
<b>1b Sub-total</b> .....								<b>76,351</b>		
<b>c Total from continuation sheets to Part VII, Section A</b> .....										
<b>d Total (add lines 1b and 1c)</b> .....								<b>76,351</b>		

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual .....		<b>X</b>
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual .....		<b>X</b>
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person .....		<b>X</b>

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

**Part VIII Statement of Revenue**

Check if Schedule O contains 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	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>	25,408				
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	3,662,911				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$		377,703				
	<b>h Total.</b> Add lines 1a-1f		3,688,319				
<b>Program Service Revenue</b>	<b>2a</b> SOCIAL SECURITY PAYMENTS	Busn. Code	42,659	42,659			
	<b>b</b> RETAINERS		26,050	26,050			
	<b>c</b> GOVERNMENT PAYMENTS		13,369	13,369			
	<b>d</b> FAMILY PAYMENTS		8,263	8,263			
	<b>e</b> FAMILY COUNSELING		100	100			
	<b>f</b> All other program service revenue						
	<b>g Total.</b> Add lines 2a-2f		90,441				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		738,890			738,890	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties						
	<b>6a</b> Gross rents	(i) Real	36,863				
		(ii) Personal					
	<b>b</b> Less: rental exps.						
	<b>c</b> Rental inc. or (loss)		36,863				
	<b>d</b> Net rental income or (loss)		36,863	36,863			
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	4,341,352				
		(ii) Other	-850				
	<b>b</b> Less: cost or other basis & sales exps.		4,491,352	8,104			
	<b>c</b> Gain or (loss)		-150,000	-8,954			
	<b>d</b> Net gain or (loss)		-158,954	-8,104		-150,850	
	<b>8a</b> Gross income from fundraising events (not including \$ 25,408 of contributions reported on line 1c). See Part IV, line 18	<b>a</b>	16,200				
		<b>b</b> Less: direct expenses		14,515			
<b>c</b> Net income or (loss) from fundraising events			1,685				
<b>9a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>						
	<b>b</b> Less: direct expenses						
	<b>c</b> Net income or (loss) from gaming activities						
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>a</b>	24,126					
	<b>b</b> Less: cost of goods sold						
	<b>c</b> Net income or (loss) from sales of inventory		24,126	24,126			
Miscellaneous Revenue		Busn. Code					
<b>11a</b> DAYS ESTATE, LTD ORDINARY INC	531310	38,573		38,573			
<b>b</b> CCDR, LTD RENTAL INCOME	531310	247		247			
<b>c</b> OTHER INCOME		226			226		
<b>d</b> All other revenue		124		124			
<b>e Total.</b> Add lines 11a-11d		39,170					
<b>12 Total revenue.</b> See instructions.		4,460,540	143,326	38,944		588,266	

**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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	25,800	25,800		
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	76,351	49,628	7,635	19,088
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,113,832	733,960	222,773	157,099
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	41,916	16,766	21,377	3,773
9 Other employee benefits	316,589	285,566	12,170	18,853
10 Payroll taxes	96,291	60,663	18,296	17,332
11 Fees for services (non-employees):				
a Management				
b Legal	20,358	20,358		
c Accounting	36,668	36,668		
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	18,217	18,217		
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	29,411	29,411		
12 Advertising and promotion	23,951	17,963		5,988
13 Office expenses	177,651	100,741	55,896	21,014
14 Information technology				
15 Royalties				
16 Occupancy	275,148	263,586	8,971	2,591
17 Travel	89,096	53,120	1,582	34,394
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	241,650	241,650		
23 Insurance	81,891	81,891		
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.)				
a <b>CHILD RELATED EXPENSES</b>	624,179	624,179		
b <b>PUBLIC RELATIONS</b>	119,495	91,757		27,738
c <b>OTHER</b>	56,874	54,707	2,167	
d <b>FUEL</b>	54,151	51,759	2,392	
e All other expenses	92,724	89,630	1,211	1,883
<b>25 Total functional expenses.</b> Add lines 1 through 24e	<b>3,612,243</b>	<b>2,948,020</b>	<b>354,470</b>	<b>309,753</b>
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash—non-interest bearing	95,889	1	289,303
	2 Savings and temporary cash investments	1,993,562	2	1,038,064
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 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	
	7 Notes and loans receivable, net	163,116	7	232,946
	8 Inventories for sale or use	96,022	8	133,572
	9 Prepaid expenses and deferred charges	21,217	9	21,168
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 10,365,539		
	b Less: accumulated depreciation	10b 4,744,160	5,147,928	10c 5,621,379
	11 Investments—publicly traded securities	11,691,450	11	11,585,970
	12 Investments—other securities. See Part IV, line 11	98,823	12	110,646
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	2,061,959	15	1,968,625
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	21,369,966	16	21,001,673	
<b>Liabilities</b>	17 Accounts payable and accrued expenses	323,418	17	561,468
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		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 of Schedule D		25	
	26 <b>Total liabilities.</b> Add lines 17 through 25	323,418	26	561,468
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	27 Unrestricted net assets	17,167,215	27	16,603,167
	28 Temporarily restricted net assets	1,333,041	28	1,569,921
	29 Permanently restricted net assets	2,546,292	29	2,267,117
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	21,046,548	33	20,440,205	
34 Total liabilities and net assets/fund balances	21,369,966	34	21,001,673	



**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	<b>4,460,540</b>
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	<b>3,612,243</b>
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	<b>848,297</b>
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	<b>21,046,548</b>
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	<b>-1,358,361</b>
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	<b>-96,279</b>
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	<b>20,440,205</b>

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		<b>X</b>
<b>b</b>	Were the organization's financial statements audited by an independent accountant? 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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>X</b>	
<b>c</b>	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	<b>X</b>	
<b>3a</b>	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?		<b>X</b>
<b>b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

**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](http://www.irs.gov/form990).

OMB No. 1545-0047

**2014**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization

**NEW MEXICO CHRISTIAN CHILDRENS HOME**

Employer identification number

**85-6018576**

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 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 state: .....
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  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.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations .....
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

**Part II 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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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 <b>Total.</b> Add lines 1 through 3						
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 <b>Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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 <b>Total support.</b> Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	%
16a <b>33 1/3% support test—2014.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b 33 1/3% support test—2013.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a <b>10%-facts-and-circumstances test—2014.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test—2013.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

**Part III 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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,997,042	3,148,972	2,667,682	2,733,074	3,688,319	15,235,089
<b>2</b> 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	191,078	154,695	151,868	267,080	167,630	932,351
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5	3,188,120	3,303,667	2,819,550	3,000,154	3,855,949	16,167,440
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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	583,801	998,671	289,000	161,262	613,086	2,645,820
<b>c</b> Add lines 7a and 7b	583,801	998,671	289,000	161,262	613,086	2,645,820
<b>8 Public support.</b> (Subtract line 7c from line 6.)						13,521,620

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
<b>9</b> Amounts from line 6	3,188,120	3,303,667	2,819,550	3,000,154	3,855,949	16,167,440
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	425,840	786,609	557,397	682,289	738,890	3,191,025
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b	425,840	786,609	557,397	682,289	738,890	3,191,025
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	6,822	23,730	70,854	59,352	38,187	198,945
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)	3,620,782	4,114,006	3,447,801	3,741,795	4,633,026	19,557,410

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	69.14 %
<b>16</b> Public support percentage from 2013 Schedule A, Part III, line 15	<b>16</b>	68.56 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	16 %
<b>18</b> Investment income percentage from 2013 Schedule A, Part III, line 17	<b>18</b>	16 %

**19a 33 1/3% support tests—2014.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests—2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
<b>2</b> 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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
<b>b</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 <b>Part VI</b> when and how the organization made the determination.		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
<b>c</b> 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 <b>Part VI</b> 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.		
<b>5a</b> 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 <b>Part VI</b> , 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).		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
<b>8</b> 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).		
<b>9a</b> 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 <b>Part VI</b> .		
<b>b</b> Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .		
<b>c</b> Did a disqualified person (as defined in line 9(a)) 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 <b>Part VI</b> .		
<b>10a</b> Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.		
<b>b</b> Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

**Part IV Supporting Organizations** (continued)

		Yes	No
<b>11</b>	Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b>	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?		
<b>b</b>	A family member of a person described in (a) above?		
<b>c</b>	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .		

**Section B. Type I Supporting Organizations**

		Yes	No
<b>1</b>	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 <b>Part VI</b> 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.		
<b>2</b>	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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

**Section C. Type II Supporting Organizations**

		Yes	No
<b>1</b>	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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

**Section D. All Type III Supporting Organizations**

		Yes	No
<b>1</b>	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>2</b>	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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>3</b>	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 <b>Part VI</b> the role the organization's supported organizations played in this regard.		

**Section E. Type III Functionally-Integrated Supporting Organizations**

<b>1</b>	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year ( <b>see instructions</b> ):		
<b>a</b>	<input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
<b>b</b>	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
<b>c</b>	<input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).		
<b>2</b>	Activities Test. <b>Answer (a) and (b) below.</b>		
<b>a</b>	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> 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.		
<b>b</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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
<b>3</b>	Parent of Supported Organizations. <b>Answer (a) and (b) below.</b>		
<b>a</b>	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI</b> .		
<b>b</b>	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

**1**  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Net short-term capital gain	<b>1</b>		
<b>2</b> Recoveries of prior-year distributions	<b>2</b>		
<b>3</b> Other gross income (see instructions)	<b>3</b>		
<b>4</b> Add lines 1 through 3	<b>4</b>		
<b>5</b> Depreciation and depletion	<b>5</b>		
<b>6</b> 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)	<b>6</b>		
<b>7</b> Other expenses (see instructions)	<b>7</b>		
<b>8 Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	<b>8</b>		

<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
<b>a</b> Average monthly value of securities	<b>1a</b>		
<b>b</b> Average monthly cash balances	<b>1b</b>		
<b>c</b> Fair market value of other non-exempt-use assets	<b>1c</b>		
<b>d Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>		
<b>e Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
<b>2</b> Acquisition indebtedness applicable to non-exempt-use assets	<b>2</b>		
<b>3</b> Subtract line 2 from line 1d	<b>3</b>		
<b>4</b> Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	<b>4</b>		
<b>5</b> Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>		
<b>6</b> Multiply line 5 by .035	<b>6</b>		
<b>7</b> Recoveries of prior-year distributions	<b>7</b>		
<b>8 Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>		

<b>Section C - Distributable Amount</b>			Current Year
<b>1</b> Adjusted net income for prior year (from Section A, line 8, Column A)	<b>1</b>		
<b>2</b> Enter 85% of line 1	<b>2</b>		
<b>3</b> Minimum asset amount for prior year (from Section B, line 8, Column A)	<b>3</b>		
<b>4</b> Enter greater of line 2 or line 3	<b>4</b>		
<b>5</b> Income tax imposed in prior year	<b>5</b>		
<b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	<b>6</b>		

**7**  Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 <b>Total annual distributions.</b> Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013 . . . . .			
f <b>Total</b> of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2014 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 <b>Excess distributions carryover to 2015.</b> Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013 . . .			
e Excess from 2014 . . .			





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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

OMB No. 1545-0047

**2014**

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

▶ Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

Employer identification number

**NEW MEXICO CHRISTIAN CHILDRENS HOME**

**85-6018576**

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)( **3** ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub> % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ .....

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

Name of organization <b>NEW MEXICO CHRISTIAN CHILDRENS HOME</b>	Employer identification number <b>85-6018576</b>
--	---

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	..... ..... .....	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	..... ..... .....	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	..... ..... .....	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	..... ..... .....	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	..... ..... .....	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	..... ..... .....	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>NEW MEXICO CHRISTIAN CHILDRENS HOME</b>	Employer identification number <b>85-6018576</b>
--	---

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	..... ..... .....	\$ ..... 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	..... ..... .....	\$ ..... 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	..... ..... .....	\$ ..... 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	..... ..... .....	\$ ..... 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	..... ..... .....	\$ ..... 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	..... ..... .....	\$ ..... 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>NEW MEXICO CHRISTIAN CHILDRENS HOME</b>	Employer identification number <b>85-6018576</b>
--	---

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	..... ..... .....	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	..... ..... .....	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15	..... ..... .....	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16	..... ..... .....	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17	..... ..... .....	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
18	..... ..... .....	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

<b>Name of organization</b> <b>NEW MEXICO CHRISTIAN CHILDRENS HOME</b>	<b>Employer identification number</b> <b>85-6018576</b>
---	--

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	..... ..... .....	\$ ..... 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
20	..... ..... .....	\$ ..... 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21	..... ..... .....	\$ ..... 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
22	..... ..... .....	\$ ..... 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
23	..... ..... .....	\$ ..... 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
24	..... ..... .....	\$ ..... 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

**NEW MEXICO CHRISTIAN CHILDRENS HOME**

Employer identification number

**85-6018576**

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	..... ..... .....	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
26	..... ..... .....	\$ 5,180	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
27	..... ..... .....	\$ 5,600	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
28	..... ..... .....	\$ 5,925	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
29	..... ..... .....	\$ 6,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
30	..... ..... .....	\$ 6,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

**NEW MEXICO CHRISTIAN CHILDRENS HOME**

Employer identification number

**85-6018576**

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31	..... ..... .....	\$ 6,300	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
32	..... ..... .....	\$ 6,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
33	..... ..... .....	\$ 7,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
34	..... ..... .....	\$ 7,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
35	..... ..... .....	\$ 7,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
36	..... ..... .....	\$ 7,704	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization

**NEW MEXICO CHRISTIAN CHILDRENS HOME**

Employer identification number

**85-6018576**

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	..... ..... .....	\$ 8,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
38	..... ..... .....	\$ 9,959	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
39	..... ..... .....	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
40	..... ..... .....	\$ 35,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
41	..... ..... .....	\$ 39,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
42	..... ..... .....	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

**NEW MEXICO CHRISTIAN CHILDRENS HOME**

Employer identification number

**85-6018576**

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
43	..... ..... .....	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
44	..... ..... .....	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
45	..... ..... .....	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
46	..... ..... .....	\$ 10,379	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
47	..... ..... .....	\$ 10,382	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
48	..... ..... .....	\$ 12,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

**NEW MEXICO CHRISTIAN CHILDRENS HOME**

Employer identification number

**85-6018576**

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49	..... ..... .....	\$ 14,200	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
50	..... ..... .....	\$ 14,668	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
51	..... ..... .....	\$ 14,800	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
52	..... ..... .....	\$ 15,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
53	..... ..... .....	\$ 15,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
54	..... ..... .....	\$ 287,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>NEW MEXICO CHRISTIAN CHILDRENS HOME</b>	Employer identification number <b>85-6018576</b>
--	---

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
55	..... ..... .....	\$ 60,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
56	..... ..... .....	\$ 20,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
57	..... ..... .....	\$ 20,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
58	..... ..... .....	\$ 20,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
59	..... ..... .....	\$ 20,200	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
60	..... ..... .....	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>NEW MEXICO CHRISTIAN CHILDRENS HOME</b>	Employer identification number <b>85-6018576</b>
--	---

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
61		\$ 31,013	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
62		\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
63		\$ 51,893	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
64		\$ 155,163	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
65		\$ 55,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
66		\$ 60,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

**NEW MEXICO CHRISTIAN CHILDRENS HOME**

Employer identification number

**85-6018576**

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
67	..... ..... .....	\$ 60,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
68	..... ..... .....	\$ 250,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	..... ..... .....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	..... ..... .....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	..... ..... .....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	..... ..... .....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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.

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

Employer identification number

NEW MEXICO CHRISTIAN CHILDRENS HOME

85-6018576

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors...?, 6 Did the organization inform all grantees...?

Part II Conservation Easements.

Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization, 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution..., 3 Number of conservation easements modified..., 4 Number of states where property subject to conservation easement is located..., 5 Does the organization have a written policy..., 6 Staff and volunteer hours devoted to monitoring..., 7 Amount of expenses incurred..., 8 Does each conservation easement reported on line 2(d) above satisfy the requirements..., 9 In Part XIII, describe how the organization reports 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.

Table with 2 columns: Amounts. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report..., 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report..., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain...

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**

**3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a**  Public exhibition
- b**  Scholarly research
- c**  Preservation for future generations
- d**  Loan or exchange programs
- e**  Other .....

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

**5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

**b** If "Yes," explain the arrangement in Part XIII and complete the following table:

- c** Beginning balance .....
- d** Additions during the year .....
- e** Distributions during the year .....
- f** Ending balance .....

	Amount
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	

**2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

**b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

**Part V Endowment Funds.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance .....					
<b>b</b> Contributions .....					
<b>c</b> Net investment earnings, gains, and losses .....					
<b>d</b> Grants or scholarships .....					
<b>e</b> Other expenditures for facilities and programs .....					
<b>f</b> Administrative expenses .....					
<b>g</b> End of year balance .....					

**2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment ▶ ..... %
- b** Permanent endowment ▶ ..... %
- c** Temporarily restricted endowment ▶ ..... %

The percentages in lines 2a, 2b, and 2c should equal 100%.

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** unrelated organizations .....
- (ii)** related organizations .....

	Yes	No
<b>3a(i)</b>		
<b>3a(ii)</b>		
<b>3b</b>		

**b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? .....

**4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land .....		<b>779,042</b>		<b>779,042</b>
<b>b</b> Buildings .....		<b>7,096,078</b>	<b>2,579,007</b>	<b>4,517,071</b>
<b>c</b> Leasehold improvements .....		<b>653,770</b>	<b>587,419</b>	<b>66,351</b>
<b>d</b> Equipment .....		<b>969,801</b>	<b>814,221</b>	<b>155,580</b>
<b>e</b> Other .....		<b>844,247</b>	<b>763,513</b>	<b>80,734</b>
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶				<b>5,598,778</b>



**Part VII Investments—Other Securities.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

**Part VIII Investments—Program Related.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) <b>BENEFICIAL INTEREST IN PERPETUAL TRU</b>	<b>1,968,625</b>
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	<b>1,968,625</b>

**Part X Other Liabilities.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶		

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

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>	<b>3,013,897</b>
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	<b>-1,358,361</b>	
<b>b</b>	Donated services and use of facilities	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	<b>-88,175</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	<b>-1,446,536</b>
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	<b>4,460,433</b>
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	<b>107</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	<b>107</b>
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)		<b>5</b>	<b>4,460,540</b>

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>	<b>3,620,240</b>
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities	<b>2a</b>		
<b>b</b>	Prior year adjustments	<b>2b</b>		
<b>c</b>	Other losses	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	<b>8,104</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	<b>8,104</b>
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	<b>3,612,136</b>
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	<b>107</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	<b>107</b>
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)		<b>5</b>	<b>3,612,243</b>

**Part XIII Supplemental Information.**

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 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER**

<b>NET CHANGE IN BENEFICIAL INTEREST IN PERPETUAL TRUST</b>	<b>\$</b>	<b>-93,334</b>
<b>CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS</b>	<b>\$</b>	<b>-2,945</b>
<b>DISPOSAL OF ASSETS INCLUDED IN EXPENSES</b>	<b>\$</b>	<b>8,104</b>

**PART XI, LINE 4B - REVENUE AMOUNTS INCLUDED ON RETURN - OTHER**

<b>K-1 EXPENSE DIFFERENCES</b>	<b>\$</b>	<b>107</b>
--------------------------------	-----------	------------

**PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER**

<b>DISPOSAL OF ASSETS INCLUDED IN EXPENSES</b>	<b>\$</b>	<b>8,104</b>
--	-----------	--------------

**PART XII, LINE 4B - EXPENSE AMOUNTS INCLUDED ON RETURN - OTHER**

<b>K-1 EXPENSE DIFFERENCES</b>	<b>\$</b>	<b>107</b>
--------------------------------	-----------	------------



**SCHEDULE G  
(Form 990 or 990-EZ)**

**Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

**2014**

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

**NEW MEXICO CHRISTIAN CHILDRENS HOME**

Employer identification number

**85-6018576**

**Part I Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a**  Mail solicitations
- b**  Internet and email solicitations
- c**  Phone solicitations
- d**  In-person solicitations
- e**  Solicitation of non-government grants
- f**  Solicitation of government grants
- g**  Special fundraising events

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
<b>1</b>						
<b>2</b>						
<b>3</b>						
<b>4</b>						
<b>5</b>						
<b>6</b>						
<b>7</b>						
<b>8</b>						
<b>9</b>						
<b>10</b>						
<b>Total</b>						

**3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<b>GOLF TOURNAMENT</b> (event type)	_____ (event type)	<b>NONE</b> (total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts	32,550		32,550
	2	Less: Contributions	16,350		16,350
	3	Gross income (line 1 minus line 2)	16,200		16,200
Direct Expenses	4	Cash prizes	1,000		1,000
	5	Noncash prizes	930		930
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	12,585		12,585
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				1,685

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d)				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
 a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No

b If "No," explain: \_\_\_\_\_  
 \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  Yes  No

b If "Yes," explain: \_\_\_\_\_  
 \_\_\_\_\_

11 Does the organization conduct gaming activities with nonmembers?  Yes  No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ .....

Address ▶ .....

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ ..... and the amount of gaming revenue retained by the third party ▶ \$ .....

c If "Yes," enter name and address of the third party:

Name ▶ .....

Address ▶ .....

16 Gaming manager information:

Name ▶ .....

Gaming manager compensation ▶ \$ .....

Description of services provided ▶ .....

Director/officer      Employee      Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ .....

**Part IV** **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

**2014**

**Open to Public  
Inspection**

Name of the organization

**NEW MEXICO CHRISTIAN CHILDRENS HOME**

Employer identification number

**85-6018576**

**Part I General Information on Grants and Assistance**

- 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?  **Yes**  **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** 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.

1	(a) Name and address of organization or government	(b) EIN	(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)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								

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

**Part III: Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
 Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 SCHOLARSHIP	7	25,800			
2					
3					
4					
5					
6					
7					

**Part IV: Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

**PART IV - ADDITIONAL INFORMATION**

CHILDREN OF EMPLOYEES WHO HAVE WORKED AT THE HOME FOR TWO THAN YEARS, AND  
 CHILDREN WHO ARE IN OUR PROGRAM FOR TWO OR MORE YEARS, ARE ELIGIBLE FOR  
 COLLEGE SCHOLARSHIPS. SCHOLARSHIPS ARE AWARDED ON A SEMESTER BASIS FOR UP  
 TO EIGHT SEMESTERS, CONTINGENT UPON MAINTAINING A PLAN OF STUDY AND  
 REQUIRED GPA. NOMINALLY, CHILDREN OF EMPLOYEES RECEIVE \$800 PER SEMESTER,  
 PROGRAM CHILDREN RECEIVE \$2500 PER SEMESTER. SOME ALLOWANCES ARE MADE ON A  
 CASE BY CASE BASIS FOR ADDITIONAL EXPENSES IN PARTICULAR FIELDS OF STUDY.



**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2014**

**Open To Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

**NEW MEXICO CHRISTIAN CHILDRENS HOME**

Employer identification number

**85-6018576**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art				
2 Art — Historical treasures				
3 Art — Fractional interests				
4 Books and publications				
5 Clothing and household goods	<b>X</b>		<b>99,800</b>	<b>DONOR VALUE</b>
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities — Publicly traded				
10 Securities — Closely held stock				
11 Securities — Partnership, LLC, or trust interests				
12 Securities — Miscellaneous				
13 Qualified conservation contribution — Historic structures				
14 Qualified conservation contribution — Other				
15 Real estate — Residential				
16 Real estate — Commercial				
17 Real estate — Other				
18 Collectibles				
19 Food inventory	<b>X</b>	<b>1</b>	<b>224,985</b>	<b>DONOR VALUE</b>
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ( <b>LIVESTOCK</b> )	<b>X</b>	<b>1</b>	<b>28,100</b>	<b>DONOR VALUE</b>
26 Other ▶ ( <b>MISCELLANEOUS</b> )	<b>X</b>	<b>1</b>	<b>24,818</b>	<b>DONOR VALUE</b>
27 Other ▶ ( )				
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		<b>X</b>
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?		<b>X</b>
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		<b>X</b>
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

**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 O**  
(Form 990 or 990-EZ)Department of the Treasury  
Internal Revenue Service

Name of the organization

**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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2014**Open to Public  
Inspection

Employer identification number

**NEW MEXICO CHRISTIAN CHILDRENS HOME****85-6018576**

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990  
DUE TO TIMING CONSTRAINTS, THE FORM 990 WILL NOT BE REVIEWED BY THE BOARD  
OF DIRECTORS UNTIL AFTER THE FORM 990 HAS ALREADY BEEN FILED. IT WILL BE  
REVIEWED AT THE NEXT REGULARLY SCHEDULED BOARD MEETING.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL  
BOARD MEMBERS ARE NOT COMPENSATED FOR THEIR SERVICE. THE COMPENSATION FOR  
THE EXECUTIVE DIRECTOR IS DETERMINED BY THE BOARD OF DIRECTORS, OF WHICH  
THE EXECUTIVE DIRECTOR IS NOT A VOTING MEMBER.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS  
THE COMPENSATION FOR THE KEY EMPLOYEES IS DETERMINED BY THE BOARD OF  
DIRECTORS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION  
DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST AND AVAILABLE  
THROUGH THE ATTORNEY GENERAL OF NEW MEXICO WEBSITE. 990 IS ALSO AVAILABLE  
THROUGH NON-PROFIT WATCH SITES SUCH AS GUIDESTAR.ORG

FORM 990, PART XI, LINE 9 - RECONCILIATION OF CHANGES - OTHER

NET CHANGE IN BENEFICIAL INTEREST IN PERPETUAL TRUST	\$	-93,334
CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS	\$	-2,945
DISPOSAL OF ASSETS INCLUDED IN EXPENSES	\$	8,104
K-1 EXPENSE DIFFERENCES	\$	-107
DISPOSAL OF ASSETS INCLUDED IN EXPENSES	\$	-8,104

Name of the organization

Employer identification number

**NEW MEXICO CHRISTIAN CHILDRENS HOME**

**85-6018576**

**K-1 EXPENSE DIFFERENCES**

**\$**

**107**

Form **990-T**

**Exempt Organization Business Income Tax Return**  
(and proxy tax under section 6033(e))

OMB No. 1545-0687

**2014**

For calendar year 2014 or other tax year beginning **07/01/14**, and ending **06/30/15**

Information about Form 990-T and its instructions is available at [www.irs.gov/form990t](http://www.irs.gov/form990t).

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

**A**  Check box if address changed

**B** Exempt under section  
 501(c) ( **3** )  
 408(e)  220(e)  
 408A  530(a)  
 529(a)

Name of organization (  Check box if name changed and see instructions.)  
**NEW MEXICO CHRISTIAN CHILDRENS HOME**

Number, street, and room or suite no. If a P.O. box, see instructions.  
**1356 NM 236**

City or town, state or province, country, and ZIP or foreign postal code  
**PORTALES NM 88130**

**D** Employer identification number  
(Employees' trust, see instructions.)  
**85-6018576**

**E** Unrelated business activity codes  
(See instructions.)  
**531310 531310**

**C** Book value of all assets at end of year  
**21,001,673**

**F** Group exemption number (See instructions.) ▶

**G** Check organization type ▶  501(c) corporation  501(c) trust  401(a) trust  Other trust

**H** Describe the organization's primary unrelated business activity.  
▶

**I** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ..... ▶  Yes  No  
 If "Yes," enter the name and identifying number of the parent corporation.  
▶

**J** The books are in care of ▶ **JOE CHAPPEL** Telephone number ▶ **575-356-5372**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
<b>1a</b> Gross receipts or sales				
<b>b</b> Less returns and allowances				
<b>c</b> Balance	<b>1c</b>			
<b>2</b> Cost of goods sold (Schedule A, line 7)	<b>2</b>			
<b>3</b> Gross profit. Subtract line 2 from line 1c	<b>3</b>			
<b>4a</b> Capital gain net income (attach Schedule D)	<b>4a</b>			
<b>b</b> Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	<b>4b</b>			
<b>c</b> Capital loss deduction for trusts	<b>4c</b>			
<b>5</b> Income (loss) from partnerships and S corporations (attach statement) <b>SEE STMT 1</b>	<b>5</b>	<b>38,944</b>		<b>38,944</b>
<b>6</b> Rent income (Schedule C)	<b>6</b>			
<b>7</b> Unrelated debt-financed income (Schedule E)	<b>7</b>			
<b>8</b> Interest, annuities, royalties, and rents from controlled organizations (Schedule F)	<b>8</b>			
<b>9</b> Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	<b>9</b>			
<b>10</b> Exploited exempt activity income (Schedule I)	<b>10</b>			
<b>11</b> Advertising income (Schedule J)	<b>11</b>			
<b>12</b> Other income (See instructions; attach schedule)	<b>12</b>			
<b>13 Total.</b> Combine lines 3 through 12	<b>13</b>	<b>38,944</b>		<b>38,944</b>

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)			
<b>14</b> Compensation of officers, directors, and trustees (Schedule K)	<b>14</b>		
<b>15</b> Salaries and wages	<b>15</b>		
<b>16</b> Repairs and maintenance	<b>16</b>		
<b>17</b> Bad debts	<b>17</b>		
<b>18</b> Interest (attach schedule)	<b>18</b>		
<b>19</b> Taxes and licenses	<b>19</b>		
<b>20</b> Charitable contributions (See instructions for limitation rules)	<b>20</b>		
<b>21</b> Depreciation (attach Form 4562)	<b>21</b>		
<b>22</b> Less depreciation claimed on Schedule A and elsewhere on return	<b>22a</b>		<b>22b</b> 0
<b>23</b> Depletion	<b>23</b>		
<b>24</b> Contributions to deferred compensation plans	<b>24</b>		
<b>25</b> Employee benefit programs	<b>25</b>		
<b>26</b> Excess exempt expenses (Schedule I)	<b>26</b>		
<b>27</b> Excess readership costs (Schedule J)	<b>27</b>		
<b>28</b> Other deductions (attach schedule)	<b>28</b>		
<b>29 Total deductions.</b> Add lines 14 through 28	<b>29</b>		
<b>30</b> Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	<b>30</b>		<b>38,944</b>
<b>31</b> Net operating loss deduction (limited to the amount on line 30)	<b>31</b>		
<b>32</b> Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	<b>32</b>		<b>38,944</b>
<b>33</b> Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	<b>33</b>		<b>1,000</b>
<b>34 Unrelated business taxable income.</b> Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	<b>34</b>		<b>37,944</b>

**Part III Tax Computation**

<b>35 Organizations Taxable as Corporations.</b> See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> <b>See instructions</b> and:		
<b>a</b> Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ _____ (2) \$ _____ (3) \$ _____		
<b>b</b> Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) ..... \$ _____ (2) Additional 3% tax (not more than \$100,000) ..... \$ _____		
<b>c</b> Income tax on the amount on line 34 .....	<b>35c</b>	<b>5,692</b>
<b>36 Trusts Taxable at Trust Rates.</b> See instructions for tax computation. Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) .....	<b>36</b>	
<b>37 Proxy tax.</b> See instructions .....	<b>37</b>	
<b>38 Alternative minimum tax</b> .....	<b>38</b>	
<b>39 Total.</b> Add lines 37 and 38 to line 35c or 36, whichever applies .....	<b>39</b>	<b>5,692</b>

**Part IV Tax and Payments**

<b>40a</b> Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) .....	<b>40a</b>	
<b>b</b> Other credits (see instructions) .....	<b>40b</b>	
<b>c</b> General business credit. Attach Form 3800 (see instructions) .....	<b>40c</b>	
<b>d</b> Credit for prior year minimum tax (attach Form 8801 or 8827) .....	<b>40d</b>	
<b>e Total credits.</b> Add lines 40a through 40d .....	<b>40e</b>	
<b>41</b> Subtract line 40e from line 39 .....	<b>41</b>	<b>5,692</b>
<b>42</b> Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (att. sch.) .....	<b>42</b>	
<b>43 Total tax.</b> Add lines 41 and 42 .....	<b>43</b>	<b>5,692</b>
<b>44a</b> Payments: A 2013 overpayment credited to 2014 .....	<b>44a</b>	
<b>b</b> 2014 estimated tax payments .....	<b>44b</b>	<b>9,520</b>
<b>c</b> Tax deposited with Form 8868 .....	<b>44c</b>	
<b>d</b> Foreign organizations: Tax paid or withheld at source (see instructions) .....	<b>44d</b>	
<b>e</b> Backup withholding (see instructions) .....	<b>44e</b>	
<b>f</b> Credit for small employer health insurance premiums (Attach Form 8941) .....	<b>44f</b>	
<b>g</b> Other credits and payments: <input type="checkbox"/> Form 2439 _____ <input type="checkbox"/> Form 4136 _____ <input type="checkbox"/> Other _____ Total ▶	<b>44g</b>	
<b>45 Total payments.</b> Add lines 44a through 44g .....	<b>45</b>	<b>9,520</b>
<b>46</b> Estimated tax penalty (see instructions). Check if Form 2220 is attached .....	<b>46</b>	<b>7</b>
<b>47 Tax due.</b> If line 45 is less than the total of lines 43 and 46, enter amount owed .....	<b>47</b>	
<b>48 Overpayment.</b> If line 45 is larger than the total of lines 43 and 46, enter amount overpaid .....	<b>48</b>	<b>3,821</b>
<b>49</b> Enter the amount of line 48 you want: <b>Credited to 2015 estimated tax</b> ▶ <b>3,821</b> <b>Refunded</b> ▶	<b>49</b>	

**Part V Statements Regarding Certain Activities and Other Information** (see instructions)

<b>1</b> At any time during the 2014 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here ▶	Yes	No
		<b>X</b>
<b>2</b> During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.		<b>X</b>
<b>3</b> Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$ _____		

**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation ▶

<b>1</b> Inventory at beginning of year .....	<b>1</b>		<b>6</b> Inventory at end of year .....	<b>6</b>	
<b>2</b> Purchases .....	<b>2</b>		<b>7 Cost of goods sold.</b> Subtract line 6 from line 5. Enter here and in Part I, line 2 .....	<b>7</b>	
<b>3</b> Cost of labor .....	<b>3</b>				
<b>4a</b> Additional sec. 263A costs (attach schedule) .....	<b>4a</b>		<b>8</b> Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? .....	Yes	No
<b>b</b> Other costs (attach schedule) .....	<b>4b</b>				
<b>5 Total.</b> Add lines 1 through 4b .....	<b>5</b>				

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

**Sign Here** ▶ \_\_\_\_\_ **EXECUTIVE DIRECTOR**

Signature of officer \_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_

May the IRS discuss this return with the preparer shown below (see instructions)?  Yes  No

<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>MICHELE KIRKLAND</b>	Preparer's signature <b>MICHELE KIRKLAND</b>	Date <b>05/16/16</b>	Check <input checked="" type="checkbox"/> if self-employed	PTIN <b>P00949599</b>
	Firm's name ▶ <b>RPC CPAS + CONSULTANTS, LLP</b>	Firm's EIN ▶ <b>85-0454285</b>			
	Firm's address ▶ <b>2403 82ND ST LUBBOCK, TX 79423-2300</b>	Phone no. <b>806-745-6789</b>			

**Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property)**

(see instructions)

**1. Description of property**

(1) <b>N/A</b>
(2)
(3)
(4)

**2. Rent received or accrued**

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		

<b>Total</b>	<b>Total</b>	<b>(b) Total deductions.</b> Enter here and on page 1, Part I, line 6, column (B) ▶
--------------	--------------	--

**(c) Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶

**Schedule E – Unrelated Debt-Financed Income (see instructions)**

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1) <b>N/A</b>			
(2)			
(3)			
(4)			

4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		

Enter here and on page 1, Part I, line 7, column (A).  
Enter here and on page 1, Part I, line 7, column (B).

**Totals** ▶

**Total dividends-received deductions** included in column 8 ▶

**Schedule F – Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)**

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross inc.	6. Deductions directly connected with income in column 5
(1) <b>N/A</b>					
(2)					
(3)					
(4)					

**Nonexempt Controlled Organizations**

7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).

Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).

**Totals** ▶

**Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col.4)
(1) <b>N/A</b>				
(2)				
(3)				
(4)				
<b>Totals</b>	Enter here and on page 1, Part I, line 9, column (A).			Enter here and on page 1, Part I, line 9, column (B).

**Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1) <b>N/A</b>						
(2)						
(3)						
(4)						
<b>Totals</b>	Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).				Enter here and on page 1, Part II, line 26.

**Schedule J – Advertising Income** (see instructions)

**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) <b>N/A</b>						
(2)						
(3)						
(4)						
<b>Totals</b> (carry to Part II, line (5))						

**Part II Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) <b>N/A</b>						
(2)						
(3)						
(4)						
<b>Totals from Part I</b>						
<b>Totals, Part II</b> (lines 1-5)	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27.

**Schedule K – Compensation of Officers, Directors, and Trustees** (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1) <b>N/A</b>		%	
(2)		%	
(3)		%	
(4)		%	

**Total.** Enter here and on page 1, Part II, line 14



Form **2220**

**Underpayment of Estimated Tax by Corporations**

OMB No. 1545-0123

Department of the Treasury  
Internal Revenue Service

▶ Attach to the corporation's tax return.

**2014**

▶ Information about Form 2220 and its separate instructions is at [www.irs.gov/form2220](http://www.irs.gov/form2220).

Name

**NEW MEXICO CHRISTIAN CHILDRENS HOME**

Employer identification number

**85-6018576**

**Note:** Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38 on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

**Part I Required Annual Payment**

<b>1</b> Total tax (see instructions) .....	<b>1</b>	<b>5,692</b>
<b>2a</b> Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	<b>2a</b>	
<b>b</b> Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method .....	<b>2b</b>	
<b>c</b> Credit for federal tax paid on fuels (see instructions) .....	<b>2c</b>	
<b>d Total.</b> Add lines 2a through 2c .....	<b>2d</b>	
<b>3</b> Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation does not owe the penalty .....	<b>3</b>	<b>5,692</b>
<b>4</b> Enter the tax shown on the corporation's 2013 income tax return (see instructions). <b>Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5</b> .....	<b>4</b>	<b>9,519</b>
<b>5 Required annual payment.</b> Enter the <b>smaller</b> of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 .....	<b>5</b>	<b>5,692</b>

**Part II Reasons for Filing**—Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty (see instructions).

- 6**  The corporation is using the adjusted seasonal installment method.
- 7**  The corporation is using the annualized income installment method.
- 8**  The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

**Part III Figuring the Underpayment**

	(a)	(b)	(c)	(d)	
<b>9</b> <b>Installment due dates.</b> Enter in column (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year .....	<b>9</b>	<b>10/15/14</b>	<b>12/15/14</b>	<b>03/15/15</b>	<b>06/15/15</b>
<b>10</b> <b>Required installments.</b> If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% of line 5 above in each column .....	<b>10</b>	<b>1,423</b>	<b>1,423</b>	<b>1,423</b>	<b>1,423</b>
<b>11</b> Estimated tax paid or credited for each period (see instructions). For column (a) only, enter the amount from line 11 on line 15 .....	<b>11</b>		<b>4,760</b>	<b>2,380</b>	<b>2,380</b>
<b>Complete lines 12 through 18 of one column before going to the next column.</b>					
<b>12</b> Enter amount, if any, from line 18 of the preceding column .....	<b>12</b>			<b>1,914</b>	<b>2,871</b>
<b>13</b> Add lines 11 and 12 .....	<b>13</b>		<b>4,760</b>	<b>4,294</b>	<b>5,251</b>
<b>14</b> Add amounts on lines 16 and 17 of the preceding column .....	<b>14</b>		<b>1,423</b>		
<b>15</b> Subtract line 14 from line 13. If zero or less, enter -0- .....	<b>15</b>	<b>0</b>	<b>3,337</b>	<b>4,294</b>	<b>5,251</b>
<b>16</b> If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- .....	<b>16</b>		<b>0</b>	<b>0</b>	
<b>17</b> <b>Underpayment.</b> If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18 .....	<b>17</b>	<b>1,423</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>18</b> <b>Overpayment.</b> If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column .....	<b>18</b>		<b>1,914</b>	<b>2,871</b>	

**Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17—no penalty is owed.**

**For Paperwork Reduction Act Notice, see separate instructions.**

Form **2220** (2014)

**Part IV Figuring the Penalty**

	(a)	(b)	(c)	(d)
<b>19</b> Enter the date of payment or the 15th day of the 3rd month after the close of the tax year, whichever is earlier (see instructions). <b>(Form 990-PF and Form 990-T filers: Use 5th month instead of 3rd month.)</b>				
<b>19</b> <b>SEE WORKSHEET</b>				
<b>20</b> Number of days from due date of installment on line 9 to the date shown on line 19				
<b>21</b> Number of days on line 20 after 4/15/2014 and before 7/1/2014				
<b>22</b> Underpayment on line 17 x $\frac{\text{Number of days on line 21}}{365}$ x 3%	\$	\$	\$	\$
<b>23</b> Number of days on line 20 after 6/30/2014 and before 10/1/2014				
<b>24</b> Underpayment on line 17 x $\frac{\text{Number of days on line 23}}{365}$ x 3%	\$	\$	\$	\$
<b>25</b> Number of days on line 20 after 9/30/2014 and before 1/1/2015				
<b>26</b> Underpayment on line 17 x $\frac{\text{Number of days on line 25}}{365}$ x 3%	\$	\$	\$	\$
<b>27</b> Number of days on line 20 after 12/31/2014 and before 4/1/2015				
<b>28</b> Underpayment on line 17 x $\frac{\text{Number of days on line 27}}{365}$ x 3%	\$	\$	\$	\$
<b>29</b> Number of days on line 20 after 3/31/2015 and before 7/1/2015				
<b>30</b> Underpayment on line 17 x $\frac{\text{Number of days on line 29}}{365}$ x %	\$	\$	\$	\$
<b>31</b> Number of days on line 20 after 6/30/2015 and before 10/1/2015				
<b>32</b> Underpayment on line 17 x $\frac{\text{Number of days on line 31}}{365}$ x %	\$	\$	\$	\$
<b>33</b> Number of days on line 20 after 9/30/2015 and before 1/1/2016				
<b>34</b> Underpayment on line 17 x $\frac{\text{Number of days on line 33}}{365}$ x %	\$	\$	\$	\$
<b>35</b> Number of days on line 20 after 12/31/2015 and before 2/16/2016				
<b>36</b> Underpayment on line 17 x $\frac{\text{Number of days on line 35}}{366}$ x %	\$	\$	\$	\$
<b>37</b> Add lines 22, 24, 26, 28, 30, 32, 34, and 36	\$	\$	\$	\$
<b>38 Penalty.</b> Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 33; or the comparable line for other income tax returns			<b>38</b> \$	<b>7</b>

\*Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at [www.irs.gov](http://www.irs.gov). You can also call 1-800-829-4933 to get interest rate information.

Form <b>2220</b>	<b>Form 2220 Worksheet</b>	<b>2014</b>
For calendar year 2014, or tax year beginning <b>07/01/14</b> , and ending <b>06/30/15</b>		

Name <b>NEW MEXICO CHRISTIAN CHILDRENS HOME</b>	Employer Identification Number <b>85-6018576</b>
--	---

	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
Due date of estimated payment	<u>10/15/14</u>	<u>12/15/14</u>	<u>03/15/15</u>	<u>06/15/15</u>
Amount of underpayment	<u>1,423</u>	_____	_____	_____
Prior year overpayment applied	_____			

	1st Payment	2nd Payment	3rd Payment	4th Payment	5th Payment
Date of payment	_____	<u>12/15/14</u>	<u>03/15/15</u>	<u>06/15/15</u>	_____
Amount of payment	_____	<u>4,760</u>	<u>2,380</u>	<u>2,380</u>	_____

QTR	FROM	TO	UNDERPAYMENT	#DAYS	RATE	PENALTY
1	10/15/14	12/15/14	1,423	61	3.00	7
<b>TOTAL PENALTY</b>						<b>7</b>
						=====

Form **4562**

Department of the Treasury  
Internal Revenue Service (99)

Name(s) shown on return

### Depreciation and Amortization

(Including Information on Listed Property)

▶ Attach to your tax return.

▶ Information about Form 4562 and its separate instructions is at [www.irs.gov/form4562](http://www.irs.gov/form4562).

OMB No. 1545-0172

**2014**

Attachment Sequence No. **179**

Identifying number

**85-6018576**

**NEW MEXICO CHRISTIAN CHILDRENS HOME**

Business or activity to which this form relates

#### INDIRECT DEPRECIATION

#### Part I Election To Expense Certain Property Under Section 179

**Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2013 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2015. Add lines 9 and 10, less line 12	▶ 13	

**Note:** Do not use Part II or Part III below for listed property. Instead, use Part V.

#### Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	240,955

#### Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

##### Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2014	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	▶ <input type="checkbox"/>	

##### Section B—Assets Placed in Service During 2014 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

##### Section C—Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

#### Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	700
22	<b>Total.</b> Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	241,655
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

**For Paperwork Reduction Act Notice, see separate instructions.**

**Part V Listed Property** (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

<b>24a</b> Do you have evidence to support the business/investment use claimed?				<b>Yes</b>	<b>No</b>	<b>24b</b> If "Yes," is the evidence written?				<b>Yes</b>	<b>No</b>
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)		(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost		
<b>25</b> Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) .....									<b>25</b>		
<b>26</b> Property used more than 50% in a qualified business use:											
<b>2002 FORD ECOLINE</b>	<b>08/31/13</b>	<b>100.00%</b>	<b>3,500</b>	<b>3,500</b>		<b>5.0</b>	<b>S/L-</b>	<b>700</b>			
		%									
<b>27</b> Property used 50% or less in a qualified business use:											
		%					S/L-				
		%					S/L-				
<b>28</b> Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 .....									<b>28</b>		<b>700</b>
<b>29</b> Add amounts in column (i), line 26. Enter here and on line 7, page 1 .....										<b>29</b>	

**Section B—Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>30</b> Total business/investment miles driven during the year ( <b>do not</b> include commuting miles) .....												
<b>31</b> Total commuting miles driven during the year .....												
<b>32</b> Total other personal (noncommuting) miles driven .....												
<b>33</b> Total miles driven during the year. Add lines 30 through 32 .....												
<b>34</b> Was the vehicle available for personal use during off-duty hours? .....												
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person? .....												
<b>36</b> Is another vehicle available for personal use? .....												

**Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions).

<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? .....	<b>Yes</b>	<b>No</b>
<b>38</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners .....		
<b>39</b> Do you treat all use of vehicles by employees as personal use? .....		
<b>40</b> Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? .....		
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) .....		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
<b>42</b> Amortization of costs that begins during your 2014 tax year (see instructions):					
<b>43</b> Amortization of costs that began before your 2014 tax year .....					<b>43</b>
<b>44 Total.</b> Add amounts in column (f). See the instructions for where to report .....					<b>44</b>

**Federal Statements****Statement 1 - Form 990-T, Part I, Line 5 - Income (Loss) from Partnerships or S-Corps**

<u>Name of Partnership or S-Corp</u>	<u>Gross Income</u>	<u>Direct Deductions (Part. only)</u>	<u>Net Income</u>
CCDR, LTD RENTAL INCOME	\$ 247	\$	\$ 247
CCDR, LTD OTHER INCOME	141		141
CCDR, LTD OTHER DEDUCTIONS		17	-17
DAYS ESTATE, LTD ORDINARY INC	38,573		38,573
DAY ESTATE OTHER DEDUCTIONS			
TOTAL	<u>\$ 38,961</u>	<u>\$ 17</u>	<u>\$ 38,944</u>

85-6018576

## Federal Asset Report

FYE: 6/30/2015

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
<b>Other Depreciation:</b>									
1	STORAGE/OLD GROCERY ROOM 54	3/01/54	10,000			10,000	18 MO S/L	10,000	0
2	FRENCH ORIGINAL	1/01/65	20,000			20,000	30 MO S/L	20,000	0
3	OFFICE 1976	6/01/76	8,872			8,872	50 MO S/L	6,886	178
4	REMODEL FRENCH 1977	1/01/77	730			730	20 MO S/L	730	0
5	OFFICE ADDITION 1978	6/01/78	9,357			9,357	50 MO S/L	6,752	187
6	OFFICE ADDITION 1981	6/01/81	5,156			5,156	50 MO S/L	3,412	103
7	YOUTH CENTER/GYM (COST TO 83)	6/01/83	80,951			80,951	19 MO S/L	80,951	0
8	COTTAGE I (COST TO 6/83) '83	6/01/83	73,142			73,142	50 MO S/L	73,142	0
9	COTTAGE I REMODEL 1984	6/01/83	7,302			7,302	50 MO S/L	4,539	146
10	COTTAGE II (COST TO 6/83) '83	6/01/83	74,609			74,609	40 MO S/L	74,609	0
11	COTTAGE III (COST TO 6/83) '83	6/01/83	76,359			76,359	40 MO S/L	76,359	0
12	COTTAGE IV (COST TO 6/83) '83	6/01/83	70,289			70,289	29 MO S/L	70,289	0
13	CENTER CAMPUS HOUSE '83	6/01/83	35,384			35,384	44 MO S/L	24,661	793
14	EAST CAMPUS HOUSE 1983	6/01/83	26,785			26,785	50 MO S/L	16,651	536
15	FRENCH COTTAGE REMODEL TO 83	6/01/83	34,323			34,323	40 MO S/L	26,473	852
16	DUPLEX I APT 1/2 1983	6/01/83	28,949			28,949	41 MO S/L	21,683	697
17	OFFICE ADDITION 1984	6/01/84	55,841			55,841	50 MO S/L	33,598	1,117
18	YOUTH CNTR/GYM REMODEL 1984	6/01/84	998			998	50 MO S/L	601	20
19	COTTAGE II REMODEL 1984	6/01/84	3,570			3,570	50 MO S/L	2,148	71
20	COTTAGE III REMODEL 1984	6/01/84	5,508			5,508	50 MO S/L	3,314	110
21	COTTAGE IV REMODEL 1984	6/01/84	8,055			8,055	50 MO S/L	4,846	162
22	CENTER CAMPUS HOUSE REMODEL 8	6/01/84	4,406			4,406	50 MO S/L	2,651	88
23	EAST CAMPUS HOUSE REMODEL 1984	6/01/84	3,374			3,374	50 MO S/L	2,030	67
24	FRENCH COTTAGE REMODEL 1984	6/01/84	27,641			27,641	49 MO S/L	16,731	556
25	DUPLEX I REMODEL 1984	6/01/84	31,289			31,289	49 MO S/L	18,901	628
26	DUPLEX II APT 3/4 1984	6/01/84	66,223			66,223	47 MO S/L	41,678	1,386
27	WELL/LAWNMOWER HOUSEII 1985	6/01/85	6,341			6,341	18 MO S/L	6,341	0
28	COTTAGE I REMODEL 1985	6/01/85	1,838			1,838	18 MO S/L	1,838	0
29	COTTAGE II REMODEL 1985	6/01/85	29,673			29,673	40 MO S/L	21,575	742
30	COTTAGE III REMODEL 1985	6/01/85	7,751			7,751	41 MO S/L	5,393	186
31	CENTER CAMPUS HOUSE REMODEL 8	6/01/85	2,219			2,219	18 MO S/L	2,219	0
32	FRENCH COTTAGE REMODEL 1985	6/01/85	12,996			12,996	49 MO S/L	7,605	262
33	REMODEL COTTAGE II 1986	1/01/86	273			273	10 MO S/L	273	0
34	COMMISSARY/CLOTHING ROOM 1986	6/01/86	85,343			85,343	20 MO S/L	85,343	0
35	COTTAGE I REMODEL 1986	6/01/86	2,021			2,021	20 MO S/L	2,021	0
36	COTTAGE II REMODEL 1986	6/01/86	10,044			10,044	20 MO S/L	10,044	0
37	COTTAGE IV REMODEL 1986	6/01/86	7,028			7,028	20 MO S/L	7,028	0
38	EAST CAMPUS HOUSE REMODEL 1986	6/01/86	9,953			9,953	23 MO S/L	9,953	0
39	FRENCH COTTAGE REMODEL 1986	6/01/86	3,562			3,562	20 MO S/L	3,562	0
41	COTTAGE II FENCE 1987	1/01/87	295			295	10 MO S/L	295	0
42	EAST CAMPUS HS REMODEL 1987	1/01/87	841			841	5 MO S/L	841	0
43	FRENCH HOME FENCE 1987	1/01/87	876			876	10 MO S/L	876	0
44	YOUTH CNTR/GYM REMODEL 1987	9/01/87	598			598	17 MO S/L	598	0
45	COTTAGE II REMODEL 1990	1/01/90	4,291			4,291	5 MO S/L	4,291	0
46	CENTER CAMPUS HS REMODEL 1990	1/01/90	1,732			1,732	5 MO S/L	1,732	0
47	YOUTH CNTR/GYM REMODEL 1990	3/05/90	72,059			72,059	33 MO S/L	51,723	2,126
48	GROCERY RM TO IND LIVING 1990	10/31/90	5,404			5,404	40 MO S/L	3,197	135
49	IND LIVING QUARTERS REM 1991	3/31/91	9,441			9,441	31 MO S/L	7,035	303
50	FRENCH COTTAGE REMODEL 1992	1/30/92	583			583	40 MO S/L	327	14
51	COTTAGE II REMODEL 1992	1/31/92	910			910	40 MO S/L	510	23
52	STORAGE UNITS 1992	2/05/92	29,213			29,213	40 MO S/L	16,371	730
53	CLOTHING ROOM REMODEL 1992	4/10/92	596			596	20 MO S/L	596	0
54	COTTAGE IV TILE 1992	4/30/92	2,700			2,700	40 MO S/L	1,496	68
55	OFFICE ADDITION 1992	6/30/92	41,179			41,179	40 MO S/L	22,648	1,030
56	VOCATIONAL AG BLDG 1992	6/30/92	114,893			114,893	40 MO S/L	63,191	2,872
57	FRENCH COTTAGE CARPORT 7/1992	7/31/92	16,711			16,711	40 MO S/L	9,156	418
58	COTTAGE I CARPORT 07/1992	7/31/92	16,338			16,338	40 MO S/L	8,952	408
59	COTTAGE II CARPORT 07/1992	7/31/92	12,755			12,755	40 MO S/L	6,988	319
60	COTTAGE IV CARPORT 07/1992	7/31/92	16,123			16,123	40 MO S/L	8,834	403
61	COTTAGE III CARPORT 07/1992	7/31/92	17,130			17,130	40 MO S/L	9,386	428
62	PHASE II GYM REMODEL 1/93	1/01/93	94,952			94,952	40 MO S/L	51,036	2,374
63	SEPTIC TANK COTTAGE IV 01/93	1/30/93	1,500			1,500	15 MO S/L	1,500	0
64	DUPLEX 3/APT 5/6 02/93	2/01/93	106,908			106,908	37 MO S/L	61,220	2,858
65	DUPLEX 4/APT 7/8 2/93	2/01/93	106,780			106,780	37 MO S/L	61,146	2,855
66	FRENCH BATHROOM REMODEL 4/93	4/01/93	7,754			7,754	40 MO S/L	4,119	194
67	SEPT TANK YC/GYM 04/93	4/07/93	2,250			2,250	15 MO S/L	2,250	0
68	SEPTIC TANK COTTAGE IV 04/93	4/30/93	3,362			3,362	15 MO S/L	3,362	0
69	SEPTIC TANK COTTAGE II 8/93	8/17/93	1,702			1,702	15 MO S/L	1,702	0

85-6018576

## Federal Asset Report

FYE: 6/30/2015

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
70	SEPTIC TANK WORK 8/93	8/18/93	3,512			3,512	15 MO S/L	3,512	0
71	SEPTIC TANK/DUP 1 8/93	8/18/93	1,076			1,076	15 MO S/L	1,076	0
72	SEPTIC TANK DUPLEX 2 8/93	8/19/93	1,076			1,076	15 MO S/L	1,076	0
73	SEPTIC TANK/LAKE HS 12/93 15	12/23/93	1,952			1,952	15 MO S/L	1,952	0
74	COTTAGE III REMODEL 12/93 40	12/31/93	31,407			31,407	40 MO S/L	16,096	785
75	FRENCH FACIA/PORCH REM 3/94	3/04/94	4,510			4,510	40 MO S/L	2,293	112
76	FRENCH BATHROOM REM 4/94	4/30/94	2,223			2,223	40 MO S/L	1,121	56
77	FRENCH COTTAGE GABLES 5/94 40	5/01/94	1,910			1,910	40 MO S/L	963	48
78	COTTAGE II HP QTRS 5/94 40	5/31/94	3,787			3,787	40 MO S/L	1,901	95
79	OFFICE REMODEL/ 6/94 40	6/30/94	3,935			3,935	40 MO S/L	1,967	99
80	COTTAGE V /GRANT 6/30/94 40	6/30/94	255,679			255,679	40 MO S/L	127,839	6,392
81	LAKE HOUSE REMODEL 6/94 40	6/30/94	1,754			1,754	40 MO S/L	877	44
82	COTTAGE III REMODEL 1994	12/30/94	62,288			62,288	40 MO S/L	30,366	1,557
83	EC HOUSE REMODEL 1994	12/30/94	14,441			14,441	40 MO S/L	7,040	361
84	OFFICE REMODEL/SHELVING 4/95	4/01/95	4,910			4,910	40 MO S/L	2,363	123
85	SEPTIC TANK COTTAGE I 5/95 15	5/15/95	1,585			1,585	15 MO S/L	1,585	0
86	SEPTIC TANK/COTTAGE III 7/95	7/15/95	3,003			3,003	10 MO S/L	3,003	0
87	REMODEL COTTAGE I/GRANT 11/95	11/01/95	112,397			112,397	40 MO S/L	52,452	2,810
89	CENTER CAMPUS HS REMODEL 1986	1/01/96	1,030			1,030	10 MO S/L	1,030	0
90	COTTAGE IV REMODEL 2/96	2/01/96	151,356			151,356	40 MO S/L	69,687	3,784
91	HP DUPLEX/F DUPLEX 3/96	3/01/96	146,915			146,915	40 MO S/L	67,336	3,673
92	REMODEL BEGAN 1/96 THR 8/96	3/31/97	25,543			25,543	30 MO S/L	14,687	852
93	DOORS/HALLWAY IMPROVEMENT 6/95	6/01/97	3,889			3,889	30 MO S/L	2,215	129
94	EXTERIOR DOORS IV 6/97	6/01/97	3,528			3,528	30 MO S/L	2,009	118
95	FACIA REFURBISH IV 9/97	9/17/97	2,596			2,596	30 MO S/L	1,449	87
96	CONCESSION STND/BALLFIELD 9/97	9/30/97	11,304			11,304	30 MO S/L	6,312	377
97	SEPTIC TANK/CONCESSION 9/97	9/30/97	1,552			1,552	15 MO S/L	1,552	0
98	COTTAGE VI COMPLETED 9/97	9/30/97	263,359			263,359	53 MO S/L	81,994	4,895
99	CONCESSIONS STAND EXP 12/97	12/01/97	186			186	15 MO S/L	186	0
100	REMODEL COTTAGE II 2ND PHASE	1/15/98	38,942			38,942	38 MO S/L	16,865	1,022
101	FINAL PMT VI 1/98	1/15/98	2,211			2,211	29 MO S/L	1,258	76
102	EC HOUSE WINDOWS/SIDING 1/98	1/15/98	6,680			6,680	29 MO S/L	3,775	228
103	SEPTIC LEACH LINES VI TUCKER	2/15/98	975			975	15 MO S/L	975	0
104	WINDOWS/TUCKER FRENCH 2/98	2/15/98	3,594			3,594	29 MO S/L	1,980	120
105	REMODEL 97/98 3/98	3/01/98	31,332			31,332	40 MO S/L	12,794	783
106	OFFICE REMODEL/CASEWORKER 4/98	4/15/98	3,328			3,328	40 MO S/L	1,352	83
107	SOUTH OFFICE DOOR 6/98	6/01/98	1,037			1,037	40 MO S/L	417	26
108	HP/F DUPLEX WELLHOUSE 9/98	9/01/98	1,301			1,301	10 MO S/L	1,301	0
109	FRENCH REMODEL 2000	3/01/00	40,932			40,932	30 MO S/L	19,557	1,364
110	PATIO FOR V FINISHED JULY 2000	7/01/00	6,800			6,800	20 MO S/L	4,760	340
111	FRENCH SEWER/FRAZIER	12/31/00	1,840			1,840	10 MO S/L	1,840	0
112	FRENCH UPGRADE ON CELLAR 2000	1/30/01	3,140			3,140	40 MO S/L	1,053	79
113	FINAL BILLING ON FRENCH CELLAR	2/01/01	163			163	10 MO S/L	163	0
114	TRANE COMPRESSOR REPLACE	6/30/01	1,126			1,126	5 MO S/L	1,126	0
115	OFFICE REMODEL FINISHED 08/01	8/01/01	4,482			4,482	10 MO S/L	4,482	0
116	COTTAGE V ROOF REDONE 10/2001	10/01/01	4,525			4,525	10 MO S/L	4,525	0
117	TEAGUE COTTAGE FINALIZED 04/02	12/01/01	336,626			336,626	40 MO S/L	105,897	8,416
118	NEW CARPET COTTAGE III 05/02	5/05/02	2,400			2,400	5 MO S/L	2,400	0
119	CARPET/COTTAGE IV 6/2002	6/01/02	3,495			3,495	5 MO S/L	3,495	0
120	REPLACE COTT I CARPET 07/02	7/01/02	6,400			6,400	10 MO S/L	6,400	0
121	SEPTIC TANK/TEAGUE 06/02	7/24/02	5,055			5,055	5 MO S/L	5,055	0
122	REPLACE CARPET DUP 6 09/2002	9/01/02	2,536			2,536	5 MO S/L	2,536	0
123	HICKS PAVILION FINALIZED 12/02	12/01/02	43,233			43,233	40 MO S/L	12,520	1,080
124	SEPTIC TANK/OFFICE 02/03	2/01/03	2,217			2,217	40 MO S/L	633	55
125	SEPTIC TANK COTTAGE I 2/03	2/01/03	4,435			4,435	40 MO S/L	1,266	111
126	ROOF REMODEL & SHINGLING 2003	4/01/03	12,375			12,375	20 MO S/L	6,961	619
127	COTT II CARPORT ENCLOSURE 03	7/15/03	2,700			2,700	5 MO S/L	2,700	0
128	MILLER PLACE HOME	6/17/04	55,445			55,445	20 MO S/L	27,723	2,772
129	NEW SHINGLES/10/2004 III	10/05/04	11,421			11,421	10 MO S/L	11,135	286
130	CONFERENCE ROOM 1/2005	1/01/05	170,478			170,478	40 MO S/L	40,488	4,262
131	STAGE/GYM BUILT 2004	1/01/05	46,267			46,267	40 MO S/L	10,989	1,156
132	YC REMODEL INTO GARDEN OF HONC	1/01/05	10,385			10,385	40 MO S/L	2,466	260
133	SHINGLES 06/30/05	6/15/05	7,170			7,170	20 MO S/L	3,256	359
134	EC SHINGLES 07/05	7/01/05	6,928			6,928	10 MO S/L	6,235	693
135	EC SHINGLES 07/05	7/01/05	3,220			3,220	10 MO S/L	2,898	322
137	COTTAGE I GARAGE 11/2007	11/10/07	7,849			7,849	40 MO S/L	1,308	196
138	COTTAGE 3 GARAGE 11/2007	11/10/07	7,849			7,849	40 MO S/L	1,308	196
139	COTTAGE 4 GARAGE	11/10/07	7,849			7,849	40 MO S/L	1,308	196
140	2008 REMODEL MILLER HM	6/30/08	29,378			29,378	40 MO S/L	4,407	734
141	WAHLMAN APARTMENT #1	7/01/08	55,000			55,000	50 MO S/L	6,600	1,100
142	WAHLMAN APARTMEN #2	7/01/08	55,000			55,000	50 MO S/L	6,600	1,100



85-6018576

## Federal Asset Report

FYE: 6/30/2015

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
143	WAHLMAN APARTMENT #4	7/01/08	55,000				55,000	50	MO S/L	6,600	1,100
144	WAHLMAN APARTMENT #5	7/01/08	55,000				55,000	50	MO S/L	6,600	1,100
145	WAHLMAN APARTMENT #6	7/01/08	55,000				55,000	50	MO S/L	6,600	1,100
146	WAHLMAN APT #3	5/20/09	55,000				55,000	50	MO S/L	5,592	1,100
147	LARGE DRYER	1/01/84	1,568				1,568	10	MO S/L	1,568	0
148	LARGE DRYER	1/01/84	1,568				1,568	10	MO S/L	1,568	0
149	LARGE DRYER	1/01/84	1,568				1,568	10	MO S/L	1,568	0
150	10 DINNING TABLES 1984	1/01/84	3,145				3,145	10	MO S/L	3,145	0
151	DINNING TABLES 1984	1/01/84	629				629	10	MO S/L	629	0
152	DINNING TABLES 1984	1/01/84	629				629	10	MO S/L	629	0
153	DINNING TABLES 1984	1/01/84	629				629	10	MO S/L	629	0
154	DINNING TABLES 1984	1/01/84	629				629	10	MO S/L	629	0
155	WESTINGHOUSE FREEZER 1988	1/01/88	396				396	10	MO S/L	396	0
156	PLAYGROUND EQUIPMENT 1988	1/01/88	1,603				1,603	15	MO S/L	1,603	0
157	MAYTAG WASHERS (2) 1989	1/01/89	946				946	10	MO S/L	946	0
158	MAYTAG (2) WASHERS/DONATED III	1/01/89	1,100				1,100	10	MO S/L	1,100	0
159	FRIGE FROM FOX & LAKE 1990	1/01/90	510				510	10	MO S/L	510	0
160	TELEVISION 1990/FRENCH	1/01/90	751				751	10	MO S/L	751	0
161	RANGE ILQ 1991	1/01/91	1,002				1,002	10	MO S/L	1,002	0
162	TV COTTAGE III 1991	7/31/91	500				500	10	MO S/L	500	0
163	MICROWAVE OFFICE/6/96 1991	9/30/91	297				297	10	MO S/L	297	0
164	REFRIGERATOR/ILQ 1991	10/01/91	399				399	10	MO S/L	399	0
165	TV COTTAGE IV 1991	10/01/91	500				500	10	MO S/L	500	0
166	SOFA/LOVESEAT/IV 91 10	11/20/91	900				900	10	MO S/L	900	0
167	END TABLES FRM SET 1991 10	12/17/91	396				396	9	MO S/L	396	0
168	MULTI/ERTHTNS LVSEAT FRM 01	12/17/91	560				560	10	MO S/L	560	0
169	LOVE SEAT/OFFICE 1992 10	3/31/92	700				700	10	MO S/L	700	0
170	COUCH/CA OFFICE 1992 10	4/30/92	448				448	10	MO S/L	448	0
171	DRESSERS/COTTAGE III 8/92 10	8/30/92	1,400				1,400	10	MO S/L	1,400	0
172	RANGES/4/DUPLEXES 9/92	9/30/92	1,400				1,400	10	MO S/L	1,400	0
173	DISHWASHER/4/DUPLEXES 9/92	9/30/92	829				829	1	MO S/L	829	0
174	WASHER/DUPLEX 4/APT 8 10/92	10/30/92	370				370	10	MO S/L	370	0
175	DRYER/DUPLEX 4/APT 8 10/92	10/30/92	330				330	10	MO S/L	330	0
176	WESTINGHOUSE FRIGE APT8 10/92	10/30/92	500				500	10	MO S/L	500	0
177	WATER HEATER III 10/92	10/30/92	1,517				1,517	10	MO S/L	1,517	0
178	GE WASHING MACHINE/D3/#5 11/92	11/30/92	450				450	10	MO S/L	450	0
179	GE DRYER DUPLEX 3/#5 11/92	11/30/92	350				350	10	MO S/L	350	0
180	REFRIGERATOR/DUP 3/#5 11/92	11/30/92	500				500	10	MO S/L	500	0
181	TV & STAND/DUP 3/#5 11/92	11/30/92	290				290	10	MO S/L	290	0
182	TV & STAND/DUP HP 12/95 11/92	11/30/92	290				290	10	MO S/L	290	0
183	SOFA DUPLEX 3/#5 11/92 10	11/30/92	749				749	93	MO S/L	749	0
184	MATT/SPRINGS DUP 3 11/92 10	11/30/92	1,440				1,440	10	MO S/L	1,440	0
185	BEDROOM SUITE/DUP 3/#5 11/92	11/30/92	480				480	10	MO S/L	480	0
186	MATT/SPRINGS D4/#7 11/92 10	11/30/92	630				630	10	MO S/L	630	0
187	4 PC BEDROOM SUITE 11/92	11/30/92	520				520	10	MO S/L	520	0
188	DINNETTE SET DUP 3/#5 11/92 10	11/30/92	380				380	10	MO S/L	380	0
189	5 PC DINNETTE SET/D4/#7 11/92	11/30/92	380				380	10	MO S/L	380	0
190	WINDOW FIXTURES/DUP 3 11/92	11/30/92	725				725	10	MO S/L	725	0
191	WINDOW FIXTURES/DUP 4 11/92	11/30/92	725				725	10	MO S/L	725	0
192	VOCATIONAL SHOP SHELVES 11/92	11/30/92	1,941				1,941	10	MO S/L	1,941	0
193	WASHERS(2) 6/7DUP 12/92	12/31/92	1,000				1,000	10	MO S/L	1,000	0
194	DRYERS (2) 6/7DUP 12/92	12/31/92	963				963	10	MO S/L	963	0
195	REFRIGERATORS(2) 6/7DUP 12/92	12/31/92	1,000				1,000	10	MO S/L	1,000	0
196	COUCH/DONATED/IV 01/93 10	1/31/93	300				300	10	MO S/L	300	0
197	REFRIGERATOR E CAMPUS HS 3/93	3/31/93	680				680	10	MO S/L	680	0
198	DINNETTE SET/APT 3 06/30/93	6/30/93	450				450	10	MO S/L	450	0
199	SOUND CABINET/GYM 06/30/93	6/30/93	849				849	10	MO S/L	849	0
200	AIR CONDITIONER/CC HS 8/93	8/18/93	766				766	10	MO S/L	766	0
201	AIR CONDITIONER/LAKE HS 8/93	8/19/93	1,344				1,344	10	MO S/L	1,344	0
202	FRIGE/FRENCH 8/93	8/30/93	719				719	10	MO S/L	719	0
203	ICEMAKER COTTAGE V 9/93 10YR	9/03/93	800				800	10	MO S/L	800	0
204	DESK/JACK'S OFFICE 10/93 10	10/15/93	458				458	10	MO S/L	458	0
205	EX CHAIR/JS OFFICE 10/93 10	10/30/93	300				300	10	MO S/L	300	0
206	COUCH/JS OFFICE 10/93 10	10/30/93	752				752	10	MO S/L	752	0
207	WATER HEATER/IV 11/93 10YRS	11/30/93	1,450				1,450	10	MO S/L	1,450	0
208	WATER HEATER/YC 4/94 11/93 10	11/30/93	187				187	10	MO S/L	187	0
209	ELEC ORGAN/DONATED 12/93 10	12/06/93	750				750	10	MO S/L	750	0
210	ENTERTAINMENT CENTER 1994	1/01/94	3,100				3,100	5	MO S/L	3,100	0
211	U-LINE ICEMAKER/OFFICE 2/94 10	2/01/94	550				550	10	MO S/L	550	0
212	COTTAGE V KA DISHWASHER 2/94	2/01/94	400				400	10	MO S/L	400	0
213	COTTAGE V VERSAMATIC VAC 2/94	2/28/94	431				431	10	MO S/L	431	0

85-6018576

## Federal Asset Report

FYE: 6/30/2015

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
214	TELL CITY TABLES(2) V 4/94 10	4/03/94	837			837	10 MO S/L	837	0
215	MAYTAG WASHER/V BLK/WH 4/94 10	4/30/94	580			580	10 MO S/L	580	0
216	MAYTAG WASHER/V 4/94 10	4/30/94	580			580	10 MO S/L	580	0
217	MAYTAG DRYER/V BLK/WH 4/94 10	4/30/94	394			394	10 MO S/L	394	0
218	MAYTAG DRYER/COTT V 4/94 10	4/30/94	394			394	10 MO S/L	394	0
219	GE SPACEMAKER MICROWAVE V 4/94	4/30/94	479			479	10 MO S/L	479	0
220	GE SPACEMAKER MICROWAVE V 4/94	4/30/94	479			479	10 MO S/L	479	0
221	JENAIRE RANGE/V 4/94 10	4/30/94	1,173			1,173	10 MO S/L	1,173	0
222	GE JENAIRE RANGE/V 4/94 10	4/30/94	1,173			1,173	10 MO S/L	1,173	0
223	GIBSON UPRIGHT FREEZER V/4/94	4/30/94	500			500	10 MO S/L	500	0
224	GIBSON CHEST FREEZER/V 4/94 10	4/30/94	425			425	10 MO S/L	425	0
225	ADMIRAL REFRIGERATOR/V 4/94 10	4/30/94	717			717	10 MO S/L	717	0
226	BUNK BED SETS(4)/V 4/94 WOODEN	4/30/94	550			550	10 MO S/L	550	0
227	WOODEN 3 DRAWER DRESSERS(4)V	4/30/94	550			550	10 MO S/L	550	0
228	METAL TWIN BED SETS(4) 4/94 10	4/30/94	788			788	10 MO S/L	788	0
229	RD/WHT/BLU WOODEN DRESSERS/V	4/30/94	476			476	10 MO S/L	476	0
230	TELL CITY CHAIRS(18)/V 4/94 10	4/30/94	1,488			1,488	10 MO S/L	1,488	0
231	KITCHEN AID MIXER V 4/94 10	4/30/94	299			299	10 MO S/L	299	0
232	REFRIGERATOR V 05/94 10	5/01/94	717			717	10 MO S/L	717	0
233	SOFA/INDIAN PRNT 5/94 V 10	5/15/94	312			312	10 MO S/L	312	0
234	SOFA/INDIAN PRNT (2) V 5/94 10	5/15/94	312			312	10 MO S/L	312	0
235	CHAIR/INDIAN PRNT V 5/94 10	5/15/94	163			163	10 MO S/L	163	0
236	GREEN RECLINER V 5/94 10	5/15/94	310			310	10 MO S/L	310	0
237	GREEN RECLINER/ V 5/94 10	5/15/94	310			310	10 MO S/L	310	0
238	BUNKIE MATTRESSES(4) V 5/94 10	5/19/94	400			400	10 MO S/L	400	0
239	SINGER SEWING MACHINE/DON 5/94	5/31/94	300			300	10 MO S/L	300	0
240	EXTRACTOR/COTTAGE V 6/94 6	6/22/94	1,405			1,405	6 MO S/L	1,405	0
241	AM AIR MOVER/COTTAGE V 6/94 6	6/22/94	225			225	6 MO S/L	225	0
242	SSS 19XL BUFFER/V 6/94 6	6/22/94	828			828	6 MO S/L	828	0
243	VERSAMATIC VACUUM/V 07/94 6	7/07/94	459			459	6 MO S/L	459	0
244	FR DISHWASHER/KITCHENAID 8/94	8/04/94	400			400	10 MO S/L	400	0
245	GREEN VELVET LOVESEAT/8/94 10	8/25/94	350			350	10 MO S/L	350	0
246	MICROWAVE/EC HS 10/94 10	10/01/94	347			347	10 MO S/L	347	0
247	WPDOUBLE OVEN/III 10/94 10	10/01/94	915			915	10 MO S/L	915	0
248	DOWNDRAFT COOKTOP/III 10/94 10	10/01/94	702			702	10 MO S/L	702	0
249	KITCHEN AID DISPOSAL/III 10/94	10/01/94	206			206	10 MO S/L	206	0
250	BLT IN OVEN/EC HS 10/94 10	10/04/94	338			338	10 MO S/L	338	0
251	GIBSON UPRIGHT FRZR III 11/94	11/15/94	800			800	10 MO S/L	800	0
252	GIBSON CHEST FRZR III 11/94	11/15/94	680			680	10 MO S/L	680	0
253	ADMIRAL FRIGE III 11/94	11/15/94	660			660	10 MO S/L	660	0
254	ADMIRAL FRIGE III 11/94	11/15/94	660			660	10 MO S/L	660	0
255	CRANBERRY RECLINER III 11/94	11/15/94	335			335	10 MO S/L	335	0
256	CRANBERRY RECLINER III 11/94	11/15/94	335			335	10 MO S/L	335	0
257	WATER HEATER III 11/94	11/15/94	180			180	10 MO S/L	180	0
258	PADDED FOLDING CHAIRS 12/94 1	12/01/94	921			921	10 MO S/L	921	0
259	COTTAGE III BUNK BEDS 12/94 10	12/30/94	1,100			1,100	10 MO S/L	1,100	0
260	Pioneer Stereo V 1/94 6	1/25/95	599			599	6 MO S/L	599	0
261	OFFICE CHAIR/JL 1/94 6	1/31/95	250			250	6 MO S/L	250	0
262	COTT II VCR/DON/MULESHOE 2/95	2/01/95	323			323	10 MO S/L	323	0
263	TV ZENITH SEQ I 3/95	2/24/95	750			750	10 MO S/L	750	0
264	VCR ZENITH COTTAGE I 3/95	2/24/95	323			323	10 MO S/L	323	0
265	WHIRLPOOL OVEN 01 5/95 6	5/15/95	825			825	6 MO S/L	825	0
266	WHIRLPL DNDRFT COOKTOP 0 5/95 6	5/15/95	370			370	6 MO S/L	370	0
267	WINDSOR VACUUM 01/IN 2 5/95 6	5/15/95	487			487	6 MO S/L	487	0
268	KENMORE VAC/SHMPR DON 5/95 6	5/15/95	225			225	6 MO S/L	225	0
269	KA DISHWASHER HPD 12/95 5/95	5/15/95	635			635	6 MO S/L	635	0
270	COTTAGE I BLINDS 5/95 10	5/15/95	1,000			1,000	10 MO S/L	1,000	0
271	GIBSON UPRIGHT FRZR/01 7/95 6	7/15/95	470			470	6 MO S/L	470	0
272	ADMIRAL FRIGE/01 7/95 6	7/15/95	590			590	6 MO S/L	590	0
273	ADMIRAL FRIGE/01 07/95 6	7/15/95	590			590	6 MO S/L	590	0
274	6 METAL TWIN HEAD BRDS/01 7/95	7/15/95	240			240	10 MO S/L	240	0
275	4 FULL/TWIN BUNK BED SETS 7/95	7/15/95	1,567			1,567	10 MO S/L	1,567	0
276	HEAT PUMP/SITTING ROOM OFFICE	7/15/95	828			828	10 MO S/L	828	0
277	ADMIRAL CHEST FREEZER/01 8/95	8/15/95	500			500	10 MO S/L	500	0
278	BED FRAMES (6) 01 8/95	8/15/95	216			216	10 MO S/L	216	0
279	5 END TABLES/DONATED 10/95	10/15/95	1,250			1,250	10 MO S/L	1,250	0
280	2 KING MATTRESSES/DONATED/10/95	10/15/95	1,400			1,400	10 MO S/L	1,400	0
281	YOUTH CENTER TABLES 10/95	10/15/95	524			524	10 MO S/L	524	0
282	CROSLEY FREEZERS 20/ IV 11/95	11/01/95	1,320			1,320	10 MO S/L	1,320	0
283	FURNACE/FRENCH 11/95 10	11/01/95	1,050			1,050	10 MO S/L	1,050	0
284	BLT IN OVEN IV 12/95 10	12/15/95	835			835	10 MO S/L	835	0

85-6018576

## Federal Asset Report

FYE: 6/30/2015

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
285	DNRFT COOKTOP IV 12/95 10	12/15/95	374			374	10 MO S/L	374	0
286	WP DISHWASHER IV 12/95 10	12/15/95	412			412	10 MO S/L	412	0
287	WP BLT IN OVEN II 1/96	1/15/96	853			853	10 MO S/L	853	0
288	GE RANGE FARM DUPLEX 1/96	1/15/96	500			500	10 MO S/L	500	0
289	GE RANGE HP DUPLEX 1/96	1/15/96	500			500	10 MO S/L	500	0
290	WP DNRFT CKTP II 1/96	1/15/96	385			385	10 MO S/L	385	0
291	WP DISHWASHER II 1/96	1/15/96	385			385	10 MO S/L	385	0
292	WP DISHWASHER I(I TO HPD) 1/96	1/15/96	486			486	10 MO S/L	486	0
293	WP DISHWASHER FARM DUPLEX 1/96	1/15/96	451			451	10 MO S/L	451	0
294	TOP MOUNT REFRIGERATOR IV 1/96	1/15/96	590			590	10 MO S/L	590	0
295	REFRIGERATOR IV 1/96	1/15/96	590			590	10 MO S/L	590	0
296	GRN/WINE/CREAM SOFA IV 1/96	1/15/96	440			440	10 MO S/L	440	0
297	GRN/WINE/CREAM CHAIR IV 1/96	1/15/96	243			243	93 MO S/L	243	0
298	GRN/WINE/CREAM LVSEAT IV 1/96	1/15/96	351			351	10 MO S/L	351	0
299	4 BUNKBED SETS W/FULL IV 1/96	1/15/96	896			896	10 MO S/L	896	0
300	FINAL PMT ON COOKTOP	2/15/96	99			99	10 MO S/L	99	0
301	COOK TOP II 2/96	2/15/96	395			395	10 MO S/L	395	0
302	LZ BOY RECLINER 02 02/96	2/15/96	279			279	10 MO S/L	279	0
303	LZ BOY RECLINER 02 02/96	2/15/96	279			279	10 MO S/L	279	0
304	BLINDS COTTAGE II 02/96	2/15/96	350			350	10 MO S/L	350	0
305	(2) AIR CURTAINS/TORRES 7/96	7/15/96	2,080			2,080	10 MO S/L	2,080	0
306	BUNK BED W/MAT FL/HLF(4) 10/96	10/15/96	1,811			1,811	10 MO S/L	1,811	0
307	CONCESSION STAND WTR HTR 11/96	11/15/96	241			241	10 MO S/L	241	0
308	SEARS ICEMAKER VI 4/97	2/01/97	1,019			1,019	9 MO S/L	1,019	0
309	MICROWAVES (2) VI 4/97	4/15/97	562			562	10 MO S/L	562	0
310	DOWN DRAFT COOKTOP VI 4/97	4/15/97	644			644	10 MO S/L	644	0
311	WP DISHWASHER VI 4/97	4/15/97	388			388	10 MO S/L	388	0
312	MAYTAG WASHERS (2) VI 5/97	5/15/97	947			947	10 MO S/L	947	0
313	MAYTAG DRYERS (2) VI 5/97	5/15/97	853			853	10 MO S/L	853	0
314	GE ICE MAKER/BALLFIELD 5/97	5/15/97	200			200	5 MO S/L	200	0
315	VERSAMATIC VACUUM VI 5/97	5/15/97	487			487	10 MO S/L	487	0
316	COTTAGE VI FRIGE 5/97	5/15/97	160			160	10 MO S/L	160	0
317	CROSELY TV VI 5/97	5/15/97	490			490	10 MO S/L	490	0
318	SOUND SYSTEM VI 5/97	5/15/97	1,042			1,042	10 MO S/L	1,042	0
319	CROSELY VCR VI 5/97	5/15/97	240			240	10 MO S/L	240	0
320	FIREPLACE SCREEN/ACCS VI 5/97	5/15/97	234			234	5 MO S/L	234	0
321	GREEN/MARON MULTI SOFA VI 5/97	5/15/97	680			680	10 MO S/L	680	0
322	DRK GRN VELVET CHAIR VI 5/97	5/15/97	202			202	10 MO S/L	202	0
323	4 BUNK BED FRAMES VI 5/97	5/15/97	608			608	10 MO S/L	608	0
324	QUEEN FRM/SPRNG/MATT SET VI 97	5/15/97	290			290	10 MO S/L	290	0
325	TWIN MATT/SPRNG SETS (12) 5/97	5/15/97	720			720	10 MO S/L	720	0
326	FULL MATTRESS SET VI 5/97	5/15/97	298			298	10 MO S/L	298	0
327	TWIN ADJUSTABLE FRMS(4) 5/97	5/15/97	100			100	10 MO S/L	100	0
328	18 DINING CHAIRS VI 5/97	5/15/97	756			756	10 MO S/L	756	0
329	BLINDS VI 5/97	5/15/97	1,500			1,500	5 MO S/L	1,500	0
330	TRADE-IN/UPGRADE WASHER 6/97	6/01/97	28			28	10 MO S/L	28	0
331	GE 25' CHEST FREEZER VI 6/97	6/01/97	518			518	10 MO S/L	518	0
332	GE UPRIGHT FREEZER VI 06/97	6/01/97	629			629	10 MO S/L	629	0
333	(2) REFRIGERATORS VI 06/97	6/01/97	1,867			1,867	10 MO S/L	1,867	0
334	TWIN BED HEADBOARDS VI 7/97	7/01/97	100			100	5 MO S/L	100	0
335	TWO MAYTAG WASHERS I 1/98	1/15/98	1,080			1,080	10 MO S/L	1,080	0
336	MAYTAG STOVE CC HS 1/98	1/15/98	550			550	10 MO S/L	550	0
337	MAYTAG DISHWASHER CC HS 1/98	1/15/98	430			430	10 MO S/L	430	0
338	AC/HEATER NW CORNER OFC 1/98	1/15/98	840			840	10 MO S/L	840	0
339	BLINDS II 1/98	1/15/98	1,600			1,600	5 MO S/L	1,600	0
340	BLUE/TAN/RED LVSEAT 02/98	2/15/98	600			600	10 MO S/L	600	0
341	BLUE/TAN/RED LVSEAT 02/98	2/15/98	559			559	10 MO S/L	559	0
342	REFRIGERATOR CROSELY 09/98	9/15/98	700			700	5 MO S/L	700	0
343	32 INCH TV FOR YC/MOVED TO II	1/01/99	800			800	5 MO S/L	800	0
344	QUILTER DISCOUNT/NONCASH DON	8/01/99	1,702			1,702	9 MO S/L	1,702	0
345	QUILTER EMBROIDERY MACHINE	8/19/99	1,999			1,999	9 MO S/L	1,999	0
346	DINING TABLE/CHAIRS FR 10/99	10/01/99	1,194			1,194	10 MO S/L	1,194	0
347	MAYTAG WASHER/FR 12/99	12/01/99	500			500	10 MO S/L	500	0
348	MAYTAG DRYER/FR 12/99	12/01/99	450			450	10 MO S/L	450	0
349	CROSELY RANGE/FR 12/99	12/01/99	648			648	10 MO S/L	648	0
350	CROSELY 20FT FREEZER/FR	12/01/99	650			650	10 MO S/L	650	0
351	MAYTAG WASHER	1/01/00	530			530	10 MO S/L	530	0
352	MAYTAG DRYER FRENCH 01/00	1/01/00	478			478	10 MO S/L	478	0
353	U-LINE ICEMAKERS (2) 01/00 VAR	1/01/00	1,294			1,294	10 MO S/L	1,294	0
354	U-LINE ICEMAKER FRENCH 01/00	1/01/00	647			647	10 MO S/L	647	0
355	COMMISSARY FRZR COMPRSR 1/00	1/01/00	2,236			2,236	10 MO S/L	2,236	0

85-6018576

## Federal Asset Report

FYE: 6/30/2015

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
356	OAK DINING CHAIRS 2/00	2/01/00	4,320			4,320	10 MO S/L	4,320	0
357	GRILL PROJECT 3/00	3/01/00	1,053			1,053	5 MO S/L	1,053	0
358	BF REFRIGERATOR S/P DUPLEX NE	9/27/00	513			513	5 MO S/L	513	0
359	BF SOFA/LOVESEAT COTTAGE I	9/30/00	998			998	5 MO S/L	998	0
360	BF 2 LAZYBOY RECLINERS V	10/31/00	928			928	5 MO S/L	928	0
361	BF METAL FOLDING CHAIRS MBNA	12/31/00	1,548			1,548	5 MO S/L	1,548	0
362	BF ICE MAKER AMHOTEL TEAGUE	2/20/01	675			675	10 MO S/L	675	0
363	BF ICE MAKER II AMHOTEL	2/20/01	675			675	10 MO S/L	675	0
364	BF ICE MAKER III AMHOTEL	2/20/01	675			675	10 MO S/L	675	0
365	3 PIECE SOFA LOVESEAT 02/01	2/28/01	945			945	10 MO S/L	945	0
366	3 TRANE SYSTEMS/OFFICE 04/2001	4/11/01	12,193			12,193	5 MO S/L	12,193	0
367	BF A/C FOR FOSHEE APT	5/31/01	1,727			1,727	5 MO S/L	1,727	0
368	SOFA/LSEAT/RCLNR COTT IV 6/01	6/16/01	1,525			1,525	5 MO S/L	1,525	0
369	TRANE COTTAGE V 07/01	7/05/01	10,812			10,812	5 MO S/L	10,812	0
370	COTTAGE V BLIND REPLACE 07/01	7/05/01	750			750	5 MO S/L	750	0
371	CHAIR/OTTOMAN TEAGUE COTT 08/0	8/15/01	533			533	4 MO S/L	533	0
372	TEAGUE 62" SOFA 09/01	9/01/01	930			930	5 MO S/L	930	0
373	TEAGUE/2 ROCKER RECLINERS 9/01	9/01/01	1,130			1,130	5 MO S/L	1,130	0
374	TEAGUE TABLE/CHAIRS 09/01	9/01/01	3,952			3,952	10 MO S/L	3,952	0
375	BLINDS FOR TEAGUE COTT 09/01	9/01/01	2,550			2,550	5 MO S/L	2,550	0
376	ENT CNTR TEAGUE 09/01	9/12/01	1,564			1,564	5 MO S/L	1,564	0
377	TEAGUE 42" LOVESEAT 09/01	9/12/01	852			852	5 MO S/L	852	0
378	STOVE TOP FOR TEAGUE COTTAGE	11/01/01	754			754	5 MO S/L	754	0
379	W/P 30" DOUBLE OVEN	11/01/01	917			917	5 MO S/L	917	0
380	W/P REFRIGERATORS FOR TEAGUE	11/01/01	1,028			1,028	5 MO S/L	1,028	0
381	ROCKER FOR COTTAGE I 11/01	12/18/01	519			519	5 MO S/L	519	0
382	YOUTH CENTER FURNACE 01/2002	1/01/02	1,139			1,139	5 MO S/L	1,139	0
383	GRAY FOLDING TABLES (20) 3/02	3/15/02	4,000			4,000	10 MO S/L	4,000	0
384	SOFA/LOVESEAT PLUM PLAID VI	4/01/02	1,168			1,168	5 MO S/L	1,168	0
385	U-LINE ICEMAKER COTT I 07/02	7/15/02	670			670	5 MO S/L	670	0
386	HP DUPLEX QUEEN MATTRESS 10/02	10/01/02	700			700	10 MO S/L	700	0
387	YC ICE MAKER MANITOWAC 10/2002	10/01/02	3,524			3,524	5 MO S/L	3,524	0
388	MAPLE FURN/NMCCH CMPS 12/02	12/01/02	1,000			1,000	5 MO S/L	1,000	0
389	3PAVILION PICNIC TABLES 2003	4/20/03	1,908			1,908	10 MO S/L	1,908	0
390	HEAT PUMP COTTAGE II 05/2003	5/01/03	6,333			6,333	10 MO S/L	6,333	0
392	HEAT PUMP COTTAGE IV 05/2003	5/01/03	6,333			6,333	10 MO S/L	6,333	0
393	FLORAL SOFA/LVST BARKER 03	7/15/03	1,000			1,000	2 MO S/L	1,000	0
394	U LINE ICEMAKER COTT 04	8/15/03	724			724	5 MO S/L	724	0
395	WATER HEATER I 2004	2/16/04	2,432			2,432	5 MO S/L	2,432	0
396	YOUTH CENTER TABLES	7/01/04	2,539			2,539	10 MO S/L	2,539	0
397	GYM SOUND SYSTEM	10/01/04	7,704			7,704	5 MO S/L	7,704	0
398	LOVESEATS FOR GARDEN OF HONOR	10/01/04	1,300			1,300	5 MO S/L	1,300	0
399	CHAIRS CONFERENCE CENTER/GYM	10/01/04	3,532			3,532	5 MO S/L	3,532	0
400	VACUUM HALL OF HONOR 11/04	11/01/04	691			691	7 MO S/L	691	0
401	HEAT PUMP IV 11/2004	11/01/04	3,426			3,426	6 MO S/L	3,426	0
402	HALL OF HONOR BRONZE STATUE	11/01/04	1,250			1,250	10 MO S/L	1,208	42
403	WATER HEATER 07/2005	7/01/05	3,123			3,123	10 MO S/L	2,811	312
404	HEAT PUMP COTTAGE 1 10/2005	10/01/05	4,435			4,435	20 MO S/L	1,940	222
405	W/P DOUBLE OVEN VI 01/2006	1/15/06	1,200			1,200	10 MO S/L	1,020	120
406	HEAT PUMP 06/2007 APT 5	6/15/07	5,407			5,407	10 MO S/L	3,830	541
407	HEAT PUMP APT 6 6/2007	6/15/07	5,407			5,407	10 MO S/L	3,830	541
408	HEAT PUMP APT 7 6/2007	6/15/07	5,407			5,407	10 MO S/L	3,830	541
409	APARTMENT 1 HEAT PUMP 07/2007	7/10/07	5,207			5,207	10 MO S/L	3,645	521
410	APARTMENT 2 HT PUMP 7/2008	7/10/07	5,407			5,407	10 MO S/L	3,785	541
411	APT 3 HEAT PUMP 7/2007	7/10/07	5,135			5,135	10 MO S/L	3,595	513
412	APT 4 HEAT PUMP 7/2007	7/10/07	5,135			5,135	10 MO S/L	3,595	513
413	HEAT PUMP/TR HS	7/15/07	5,753			5,753	10 MO S/L	4,027	575
414	HEAT PUMP MILLER HOUSE	10/15/07	6,407			6,407	10 MO S/L	4,325	640
415	WAHLMAN APT 5 HEATPUMP 10/08	1/01/08	4,172			4,172	5 MO S/L	4,172	0
416	TAPPAN HEATING/COOLING EC 5/08	5/15/08	5,767			5,767	5 MO S/L	5,767	0
417	HP DUPLEX TAPPAN HT/COOL 5/08	5/15/08	4,843			4,843	5 MO S/L	4,843	0
418	CC HS HEAT PUMP	6/01/08	3,777			3,777	5 MO S/L	3,777	0
419	WAHLMAN APT 1 HEATPUMP 10/08	10/01/08	4,172			4,172	5 MO S/L	4,172	0
420	WAHLMAN APT 2 HEATPUMP 10/08	10/01/08	4,172			4,172	5 MO S/L	4,172	0
421	KLEIN SECURITY COTT01 12/2008	12/15/08	5,121			5,121	5 MO S/L	5,121	0
422	KLEIN SECURITY COTT02 12/2008	12/15/08	6,357			6,357	5 MO S/L	6,357	0
423	KLEIN SECURITY COTT03 12/2008	12/15/08	5,121			5,121	5 MO S/L	5,121	0
424	KLEIN SECURITY COTT04 12/200	12/15/08	5,121			5,121	5 MO S/L	5,121	0
425	KLEIN SECURITY COTT05 12/200	12/15/08	6,563			6,563	5 MO S/L	6,563	0
426	KLEIN SECURITY COTT06 12/200	12/15/08	6,563			6,563	5 MO S/L	6,563	0
427	KLEIN SECURITY COTT FR 12/20	12/15/08	4,337			4,337	5 MO S/L	4,337	0

85-6018576

## Federal Asset Report

FYE: 6/30/2015

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
428	KLEIN SECURITY COTT TG 12/20	12/15/08	6,563				6,563	5	MO S/L	6,563	0
429	ILQ HEATER	12/15/08	2,250				2,250	5	MO S/L	2,250	0
430	WAHLMAN APT 3 HEAT PUMP	12/15/08	4,172				4,172	5	MO S/L	4,172	0
431	WAHLMAN APT #4 HEAT PUMP	12/15/08	4,172				4,172	5	MO S/L	4,172	0
432	WAHLMAN APT #6 HEAT PUMP	12/15/08	4,172				4,172	5	MO S/L	4,172	0
433	PLAYGROUND TUNNEL 7/08	2/03/09	2,849				2,849	10	MO S/L	1,543	285
434	HEAT PUMPS (2) COTT 01 5/2009	5/15/09	4,079				4,079	5	MO S/L	4,079	0
435	CAMPUS MEDIAN AREA	1/01/60	1,800				1,800	20	MO S/L	1,800	0
436	CAMPUS PAVEMENT PRE 1986	1/01/80	19,846				19,846	20	MO S/L	19,846	0
437	PAVING COST TO 6/83	6/01/83	29,062				29,062	49	MO S/L	7,876	586
438	WATER/SEWER LINE PRE 86	1/01/86	2,823				2,823	10	MO S/L	2,823	0
439	GAS LINES 1986	3/30/86	4,826				4,826	19	MO S/L	4,826	0
440	COTTAGE FENCES 1987	1/01/87	566				566	10	MO S/L	566	0
441	MEDIAN REMODEL 1990	6/30/90	2,137				2,137	14	MO S/L	2,137	0
442	SEWER LINES/CAMPUS 1990	6/30/90	1,543				1,543	15	MO S/L	1,543	0
443	GAS LINE/FRENCH 1991	10/30/91	3,402				3,402	40	MO S/L	1,928	85
444	GAS LINE/TERRY HOUSE 1991	10/30/91	3,212				3,212	40	MO S/L	1,820	80
445	3 HP PUMP/STORAGE	3/01/92	409				409	10	MO S/L	409	0
446	UNDERGRND/ELECTRICAL LNS 11/92	11/30/92	2,853				2,853	15	MO S/L	2,853	0
447	CAMPUS GAS LINES 11/92	11/30/92	5,528				5,528	15	MO S/L	5,528	0
448	DUPLEX 3 FENCE 4/93	4/23/93	1,234				1,234	7	MO S/L	1,234	0
449	DUPLEX 4 FENCE 4/93	4/23/93	1,234				1,234	7	MO S/L	1,234	0
450	CAMPUS CURBING/STVNS 6/93	6/01/93	7,794				7,794	15	MO S/L	7,794	0
451	DUPLEX YARDS 08/93	8/30/93	2,023				2,023	15	MO S/L	2,023	0
452	LAKE HOUSE WELL 12/93 15	12/31/93	2,613				2,613	15	MO S/L	2,613	0
453	COTTAGE V IRRIGATION LINE 2/94	2/28/94	1,020				1,020	15	MO S/L	1,020	0
454	IRRIGATION LNS/COTTAGE V 3/94	3/31/94	3,776				3,776	15	MO S/L	3,776	0
455	COMMISSARY/VOC PAVEMENT 4/94	4/01/94	12,322				12,322	15	MO S/L	12,322	0
456	COTTAGE V WATERLINE 4/94	4/30/94	180				180	10	MO S/L	180	0
457	DUPLEX PAVEMENT 5/94 15	5/15/94	26,107				26,107	15	MO S/L	26,107	0
458	1.5 FR HS WELL/PUMP 6/94 10	6/15/94	374				374	10	MO S/L	374	0
459	COTTAGE V FENCE 8/94 7	8/12/94	1,928				1,928	7	MO S/L	1,928	0
460	COTTAGE V LANDSCAPING 8/94 7	8/30/94	1,728				1,728	7	MO S/L	1,728	0
461	COTTAGE V SPRINKLER SYS8/94 15	8/30/94	3,244				3,244	15	MO S/L	3,244	0
462	COTTAGE V PAVEMENT 2/95 15	1/31/95	21,082				21,082	15	MO S/L	21,082	0
463	CAMPUS PAVEMENT UPGRADE 2/95	1/31/95	30,995				30,995	15	MO S/L	30,995	0
464	BASKETBALL COURT/FRENCH 11/95	11/01/95	1,766				1,766	15	MO S/L	1,766	0
465	HP/FARM DUPLEX DIRVEWAY 05/96	5/15/96	3,553				3,553	15	MO S/L	3,553	0
466	PURCHASE 24 TREES	2/15/97	1,852				1,852	30	MO S/L	1,075	62
467	COTTAGE V GAS LINE	4/01/97	875				875	15	MO S/L	875	0
468	CAMPUS/TREE LINES 4/97	4/15/97	25,998				25,998	15	MO S/L	25,998	0
469	IMPROVING TREES 8/97	7/01/97	700				700	40	MO S/L	298	17
470	COTTAGE VI FENCE 8/97	8/01/97	2,189				2,189	10	MO S/L	2,189	0
471	CAMPUS TREE PROJECT 9/97	9/30/97	3,805				3,805	15	MO S/L	3,805	0
472	JUNIPER TREES/CAMPUS 9/97	9/30/97	500				500	15	MO S/L	500	0
473	FENCE & LIGHTS/BALLFIELD 9/97	9/30/97	52,722				52,722	10	MO S/L	52,722	0
474	DRIP LINES/TREES 9/97	9/30/97	56				56	9	MO S/L	56	0
475	SPRINKLER/BALLFIELD 09/97	9/30/97	1,277				1,277	5	MO S/L	1,277	0
476	WELL AT COTTAGE VI 9/97	9/30/97	1,315				1,315	15	MO S/L	1,315	0
477	COTTAGE V MEDIAN 12/97	12/01/97	3,050				3,050	10	MO S/L	3,050	0
478	COTTAGE VI LANDSCAPING 12/97	12/01/97	3,879				3,879	10	MO S/L	3,879	0
479	COTTAGE VI MEDIAN 12/97	12/01/97	2,731				2,731	10	MO S/L	2,731	0
480	COTTAGE VI DRIVEWAY 12/97	12/01/97	5,817				5,817	15	MO S/L	5,817	0
481	REPAIR ON VI WELL 12/97	12/01/97	1,487				1,487	15	MO S/L	1,487	0
482	LIGHTS/SIGN FINAL BB FL 9/98	9/01/98	6,052				6,052	10	MO S/L	6,052	0
483	HP DUPLEX FENCE 9/30	9/01/98	4,602				4,602	7	MO S/L	4,602	0
484	DUPLEX 5 WELL HOUSE LINES 9/98	9/01/98	1,499				1,499	15	MO S/L	1,499	0
485	CAMPUS INCENERATOR 12/97	12/01/98	1,692				1,692	10	MO S/L	1,692	0
486	BALLFIELD BLEACHERS 12/98	12/01/98	4,600				4,600	10	MO S/L	4,600	0
487	BASEBALL FIELD 12/97	12/01/98	2,428				2,428	30	MO S/L	1,261	81
488	CAMPUS PAVEMENT PATCHES 3/99	3/15/99	3,875				3,875	10	MO S/L	3,875	0
489	YARD/DR PREP TEAGUE COT12/01	12/15/01	12,685				12,685	10	MO S/L	12,685	0
490	TEAGUE YARD EXP CLOSE 12/02	12/01/02	2,830				2,830	10	MO S/L	2,830	0
491	TEAGUE FENCE CLOSED 12/02	12/01/02	8,994				8,994	7	MO S/L	8,994	0
492	REPAIR COTTAGE VI WELL	4/01/03	1,495				1,495	5	MO S/L	1,495	0
493	WELL AT LAKE HOUSE 11/04	11/01/04	1,000				1,000	10	MO S/L	966	34
494	REPLACEMENT PLAYGROUND PUMP	3/01/05	1,934				1,934	5	MO S/L	1,934	0
495	WELL/PUMP V	4/26/05	1,048				1,048	10	MO S/L	961	87
496	MONITORING WELLS	6/15/05	4,830				4,830	5	MO S/L	4,830	0
497	1/2 HP PMPS/MONITORING WELLS	6/30/05	2,248				2,248	5	MO S/L	2,248	0
498	3 HP BEHIND COTTAGE1/DOG HS	5/15/09	1,147				1,147	10	MO S/L	592	115

85-6018576

## Federal Asset Report

FYE: 6/30/2015

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
499	5 HP PUMP REPLACEMENT VI	6/15/09	3,031			3,031	10 MO S/L	1,541	303
500	TERRY FARM HOUSE	1/01/53	9,500			9,500	40 MO S/L	9,500	0
501	PLUMBING UPDATE TERRY HOUSE	1/01/74	1,230			1,230	20 MO S/L	1,230	0
502	TERRY HOUSE REMODEL '80	6/01/80	10,646			10,646	19 MO S/L	10,646	0
503	TERRY HOUSE ADDITION '81	5/01/81	1,414			1,414	20 MO S/L	1,414	0
504	VOCATIONAL SHOP TO '83	6/01/83	15,897			15,897	17 MO S/L	15,897	0
505	TERRY HOUSE REMODEL '85	6/01/85	32,366			32,366	18 MO S/L	32,366	0
506	VOCATIONAL AG/SHOP TO '83	6/01/86	24,132			24,132	46 MO S/L	14,733	525
507	VOCATIONAL SHOP REMODEL '86	6/01/86	3,792			3,792	17 MO S/L	3,792	0
508	VOCATIONAL SHOP REMODEL '92	6/30/92	33,638			33,638	40 MO S/L	18,501	841
509	TERRY HOUSE CARPORT 12/92	12/31/92	13,002			13,002	40 MO S/L	6,989	325
510	EXTEND SHOP FLOOR 12/99	12/01/99	6,204			6,204	30 MO S/L	3,016	207
511	FF NEW CARPET POYNORS 6/01	6/30/01	2,695			2,695	5 MO S/L	2,695	0
512	REMODEL/REPLACE ROOF 11/02	11/01/02	4,950			4,950	40 MO S/L	1,444	124
513	MILLER PLACE BARN	5/15/04	15,428			15,428	5 MO S/L	15,428	0
514	AG SHOP SEPTIC TANK	1/01/09	1,430			1,430	15 MO S/L	524	96
515	SCRAPER '75 ITC 1295	7/01/75	278			278	4 MO S/L	278	0
516	AIR IMPACT WRENCH '78 ITC17.01	7/01/78	255			255	4 MO S/L	255	0
517	SEARS ELECTRIC WELDER 1980	1/01/80	250			250	10 MO S/L	250	0
518	WIRE ROLLER 1985	1/01/85	300			300	10 MO S/L	300	0
519	MULCHER SHANKS 1987	1/01/87	700			700	10 MO S/L	700	0
520	MTL GRAIN/PKUP/FLTBED TRAILERS	1/01/87	770			770	10 MO S/L	770	0
521	20' TANDEM DISK 1988	1/01/88	1,530			1,530	10 MO S/L	1,530	0
522	14' OFFSET DISK 1988	1/01/88	2,530			2,530	10 MO S/L	2,530	0
523	BLADE COLTER AND LIFT 1989	1/01/89	650			650	10 MO S/L	650	0
524	3 7 MULCHERS 1989	1/01/89	1,488			1,488	10 MO S/L	1,488	0
525	CUTOFF SAW VICE AND MIXER 1989	1/01/89	550			550	10 MO S/L	550	0
526	BOBCAT WELDER 1989	1/01/89	2,000			2,000	10 MO S/L	2,000	0
527	NURSETANK DONATED 1983	1/01/89	3,200			3,200	10 MO S/L	3,200	0
528	TOOLBAR AND SHANKS 1990	1/01/90	2,500			2,500	10 MO S/L	2,500	0
529	8 - 6 ROW PLANTER	1/01/90	2,000			2,000	10 MO S/L	2,000	0
530	TOOLBOX 1990	1/01/90	690			690	10 MO S/L	690	0
531	2 INCH IRRIGATION PIPE 1990	1/01/90	1,860			1,860	10 MO S/L	1,860	0
532	AIR COMPRESSOR 1991	1/01/91	1,695			1,695	10 MO S/L	1,695	0
533	WYLIE 500 GAL SPRAYER '92	3/31/92	4,040			4,040	10 MO S/L	4,040	0
534	DIESEL TANK/DONATED '92	5/31/92	750			750	10 MO S/L	750	0
535	VIC/ACETELTEN TORCH '92	7/01/92	430			430	10 MO S/L	430	0
536	MILLER DIALARC 250 WELDER '92	7/01/92	860			860	10 MO S/L	860	0
537	JET POWER WASHER '92	7/01/92	2,275			2,275	10 MO S/L	2,275	0
538	WELDER/VOAG 1992	7/01/92	2,070			2,070	10 MO S/L	2,070	0
539	12 VOLT SPRAYER 1983	1/01/93	400			400	10 MO S/L	400	0
540	BIG OX DEEP RIPPER 02/93	2/03/93	1,800			1,800	10 MO S/L	1,800	0
541	POST HOLE DIGGER 02/93	2/24/93	601			601	10 MO S/L	601	0
542	LATERAL SPRINKLER MOTOR 3/93	3/05/93	305			305	10 MO S/L	305	0
543	HYDRAULIC FLOOR JACK 12/93 10	12/13/93	757			757	10 MO S/L	757	0
544	GUIDE WHEELS 05/94 10	5/14/94	496			496	10 MO S/L	496	0
545	Flex King Rod Weeder 1/94 10	1/17/95	2,000			2,000	10 MO S/L	2,000	0
546	COMPRESSOR/DONATED VAUGHN 6/95	6/01/96	700			700	10 MO S/L	700	0
547	6 ROW WHEAT DRILL 9/96 JN DEER	9/15/96	4,500			4,500	10 MO S/L	4,500	0
548	PRESS WHEELS/WHEAT DRILL 9/96	9/15/96	2,771			2,771	10 MO S/L	2,771	0
549	SCHAFFER OFFSET DISK PLOW 12/98	12/15/98	1,500			1,500	10 MO S/L	1,500	0
550	ROLLA CONE DONATED 10/99	10/01/99	1,500			1,500	10 MO S/L	1,500	0
551	SPREADER F4095 01/00	1/01/00	4,128			4,128	10 MO S/L	4,128	0
552	25' EQUIPMENT TRAILER	1/15/03	4,700			4,700	10 MO S/L	4,700	0
553	1/4 MI SIDEROLL MLR 5/2004	5/15/04	1,741			1,741	5 MO S/L	1,741	0
554	DRILL PRESS 4/2005	4/12/05	1,125			1,125	5 MO S/L	1,125	0
555	BUSH HOG SHREDDER	11/01/06	7,350			7,350	7 MO S/L	7,350	0
556	TERRY FARM HOUSE OVEN '92	7/01/92	575			575	10 MO S/L	575	0
557	DOMESTIC WELL/DC 1974	1/01/74	500			500	20 MO S/L	500	0
558	UNDRGRND PIPE 1975	1/01/75	2,000			2,000	20 MO S/L	2,000	0
559	TERRY IRRIGATION WELL 1975	1/01/75	1,625			1,625	20 MO S/L	1,625	0
560	TERRY UNDRGRND PIPE 1977	1/01/77	524			524	20 MO S/L	524	0
561	FENCE ITC 104.5H '85	7/01/85	1,045			1,045	4 MO S/L	1,045	0
562	HOME PLACE FENCE 1986/1987	1/01/87	1,566			1,566	10 MO S/L	1,566	0
563	PUMP REPLACED #13 1987	1/01/87	349			349	10 MO S/L	349	0
564	TERRY DOMESTIC WELL	1/01/87	500			500	10 MO S/L	500	0
565	IRRIGATION WELLS 1976	1/01/87	3,750			3,750	10 MO S/L	3,750	0
566	FRENCH FENCE 1988	1/01/88	2,333			2,333	10 MO S/L	2,333	0
567	WILLIAMS UNDRGRND 1990	1/01/88	7,931			7,931	5 MO S/L	7,931	0
568	METERS & INSTALLATION 1988 WM	1/01/88	1,409			1,409	10 MO S/L	1,409	0
569	FENCE /FRENCH '90	6/30/90	1,137			1,137	9 MO S/L	1,137	0

85-6018576

## Federal Asset Report

FYE: 6/30/2015

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
570	WILLIAMS UNDRGRND 1991	1/01/91	5,500			5,500	5 MO S/L	5,500	0
571	WELL #1/WILLIAMS 01/93	1/14/93	3,121			3,121	10 MO S/L	3,121	0
572	WELL #2/WILLIAMS 01/93	1/14/93	3,121			3,121	10 MO S/L	3,121	0
573	WELL #3/WILLIAMS 01/93	1/14/93	3,121			3,121	10 MO S/L	3,121	0
574	WELL #4/WILLIAMS 01/93	1/14/93	3,121			3,121	10 MO S/L	3,121	0
575	7 1/2 HP SUB/HM PL 9/93 10	9/20/93	1,433			1,433	10 MO S/L	1,433	0
576	UNDERGROUND PIPE/TERRY 2/94	2/28/94	1,907			1,907	15 MO S/L	1,907	0
577	5 HP PUMP/MTR N OF DUP 3/94 10	3/10/94	2,137			2,137	10 MO S/L	2,137	0
578	10 HP SUB MOTOR/WM 3/28 10	3/28/94	1,163			1,163	10 MO S/L	1,163	0
579	COMPLETION UNDERGRND/TR 3/94	3/31/94	8,654			8,654	15 MO S/L	8,654	0
580	UNDERGROUND LINE TERRY 4/94	4/30/94	257			257	10 MO S/L	257	0
581	CIRCLE SPRINKLER SYS WM 11/94	11/01/94	30,978			30,978	15 MO S/L	30,978	0
582	DICTION DOMESTIC UPGRADE 9/98	9/01/98	700			700	10 MO S/L	700	0
583	1/2 HP SUB PUMP 1/99	1/25/99	593			593	10 MO S/L	593	0
584	3 HP PUMP/BULA	4/01/00	1,892			1,892	10 MO S/L	1,892	0
585	2 HP 4 INCH PUMP/MOTOR BULA	6/01/00	1,163			1,163	10 MO S/L	1,163	0
586	FF PUMP FOR FRENCH FARM WELL	2/28/01	545			545	10 MO S/L	545	0
587	FINAL PAYMENT ON SPRINKLER /HM	3/01/02	4,287			4,287	15 MO S/L	3,525	286
588	CIRCLE SPRINKLER HM 03/2002	3/18/02	30,000			30,000	15 MO S/L	24,500	2,000
589	7 1/2 HP SUB WM #4 06/2002	6/15/02	2,522			2,522	5 MO S/L	2,522	0
590	7 1/2 HP SUBMERSIBLE WM 6/02	6/15/02	2,501			2,501	5 MO S/L	2,501	0
591	5 HP SUB N OF TERRY PLC 06/02	6/15/02	1,022			1,022	5 MO S/L	1,022	0
592	WILLIAMS FEED YARD FENCE 08/02	8/01/02	7,178			7,178	10 MO S/L	7,178	0
593	COMPLETE WILLIAMS FENCE 2004	2/16/04	1,813			1,813	10 MO S/L	1,813	0
594	1/4 MI UNDERGROUND MLR 5/2004	5/15/04	2,332			2,332	7 MO S/L	2,332	0
595	MILLER PLACE PUMPS/WELLS	5/15/04	4,342			4,342	5 MO S/L	4,342	0
596	5 HP SUB PUMP 3 PHASE	10/12/05	2,503			2,503	20 MO S/L	1,095	125
597	ADDITIONAL CHARGES/PUMP #1 WM	12/01/05	233			233	20 MO S/L	100	12
598	TEAGUE PORTION/TERRY FENCE6/06	9/30/06	3,502			3,502	7 MO S/L	3,502	0
599	5 HP WILLIAMS #4 RPLCMNT4/2007	4/01/07	3,279			3,279	10 MO S/L	2,377	328
600	REPLACING MILLER PUMP	10/01/08	4,419			4,419	10 MO S/L	2,541	442
601	1194 CASE TRACTOR 1988	1/01/88	12,500			12,500	10 MO S/L	12,500	0
602	4455 JOHN DEER 1991	1/01/91	64,588			64,588	5 MO S/L	64,588	0
603	J.D. 4455 MFWD 01/00	1/01/00	45,000			45,000	10 MO S/L	45,000	0
604	99 FORD F250 SUPER DUTY PU	4/27/01	19,900			19,900	5 MO S/L	19,900	0
605	78 FORD RANCHERO 06/2009	5/15/09	1,500			1,500	5 MO S/L	1,500	0
606	JD RIDING MOWER 1984	1/01/84	3,000			3,000	10 MO S/L	3,000	0
607	TABLE SAW DONATED 1988	1/01/88	500			500	5 MO S/L	500	0
608	STIHL CHAIN SAW 1989	1/01/89	221			221	10 MO S/L	221	0
609	TORO LAWN MOWER 1990	1/01/90	540			540	5 MO S/L	540	0
610	1/2 SUBPUM FRENCH 1991	1/01/91	651			651	5 MO S/L	651	0
611	NAILER 1991	1/01/91	351			351	10 MO S/L	351	0
612	STUDIO MASTER MIXER/AMP 1992	1/01/92	1,495			1,495	5 MO S/L	1,495	0
613	SWANSON/22 WIRELESS MIC 1992	1/01/92	580			580	5 MO S/L	580	0
614	LECTURN 1992	1/01/92	335			335	10 MO S/L	335	0
615	RADIAL ARM SAW/VOC 1992	3/31/92	400			400	10 MO S/L	400	0
616	VIC/ACCETELENE TORCH/VOC 1992	4/30/92	430			430	10 MO S/L	430	0
617	AIR COMPRESSOR/VO 1992	4/30/92	1,025			1,025	10 MO S/L	1,025	0
618	AIR LIFT/VOC 1992	4/30/92	679			679	10 MO S/L	679	0
619	PORTABLE POWER PUMP/VO 1992	4/30/92	652			652	10 MO S/L	652	0
620	BAND SAW/VOCATIONAL BLDG 92	7/01/92	349			349	10 MO S/L	349	0
621	BACK BOARDS 7/92 BECKLEY CARDY	7/01/92	1,307			1,307	10 MO S/L	1,307	0
622	BACK BOARD/FLAG HS 07/1992	7/29/92	1,713			1,713	10 MO S/L	1,713	0
623	NAIL GUN 07/1992	7/31/92	560			560	10 MO S/L	560	0
624	TRAINER STATION 08/92	8/30/92	7,339			7,339	10 MO S/L	7,339	0
625	70 AMP BOGEN YC 10/92	10/30/92	450			450	10 MO S/L	450	0
626	PING PONG/YC/LADIES ASSOC11/92	11/30/92	384			384	10 MO S/L	384	0
627	ROTOTILLER 5/93 POYNORS	5/30/93	600			600	10 MO S/L	600	0
628	JOHN DEERE LAWN MOWER 5/93 DON	5/31/93	1,500			1,500	10 MO S/L	1,500	0
629	TWO CYCLE MOWER 07/93	7/30/93	532			532	10 MO S/L	532	0
630	718 GRASSHOPPER MOWER 9/93	9/30/93	6,000			6,000	10 MO S/L	6,000	0
631	PICNIC TABLES 9/93 10YRS	9/30/93	428			428	10 MO S/L	428	0
632	CHAIN SAW/POYNORS 10/93 6	10/30/93	265			265	6 MO S/L	265	0
633	WELCOME MATS/YTH CNTR 11/93 10	11/30/93	1,135			1,135	10 MO S/L	1,135	0
634	TITAN EPIC AIRLESS SP 7/94 6	7/01/94	899			899	6 MO S/L	899	0
635	BOSCH HAMMER/GARY FIELDS 9/94	9/02/94	702			702	6 MO S/L	702	0
636	TON AND A HALF PU TRLR 11/94	11/15/94	1,000			1,000	10 MO S/L	1,000	0
637	SENCO NAIL GUN SN325 12/94 6	12/30/94	525			525	6 MO S/L	525	0
638	TIRE CHANGER/DNTD HAYDON 4/95	4/01/95	1,610			1,610	10 MO S/L	1,610	0
639	PINWELDER/HAYNIES 04/95	4/05/95	280			280	10 MO S/L	280	0
640	GF NAIL GUN/FIELDS 5/95 5	5/15/95	300			300	10 MO S/L	300	0

85-6018576

## Federal Asset Report

FYE: 6/30/2015

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
641	TORO LAWN MOWER PHDWE 8/95 10	8/15/95	905				905	10 MO S/L	905	0
642	TORO LAWN MOWER PHDWE 8/95 950	8/15/95	905				905	10 MO S/L	905	0
643	LAWN MOWER/MSTRCRFT 9/95 5	9/01/95	220				220	5 MO S/L	220	0
644	16' UTILITY TRAILER K&G 10/95	10/15/95	996				996	10 MO S/L	996	0
645	(4) SHURE MICS/YC 05/96	5/01/96	640				640	5 MO S/L	640	0
646	CEMENT MIXER ENGINE 5/96	5/15/96	1,172				1,172	10 MO S/L	1,172	0
647	6 X 10 CARGO TRAILER 5/96	5/15/96	2,243				2,243	10 MO S/L	2,243	0
648	POPCORN POPPER/BALLFIELD 5/96	6/12/96	381				381	10 MO S/L	381	0
649	3 1/2 HP 11 GAL COMPRESSOR 7/96	7/15/96	262				262	10 MO S/L	262	0
650	SILVER FLUTE DONATED 9/96	9/15/96	200				200	10 MO S/L	200	0
651	BUNDY CLARINET DONATED 9/96	9/15/96	325				325	10 MO S/L	325	0
652	5' TANDEM/YARDS 09/96 10 YRS	9/17/96	425				425	10 MO S/L	425	0
653	BATTING MACHINE 7/97	7/01/97	1,692				1,692	5 MO S/L	1,692	0
654	SOFT TOSS MACHINE BALLFLD 7/97	7/01/97	424				424	5 MO S/L	424	0
655	72 INCH GRASSHOPPER MOWER 8/97	8/01/97	9,360				9,360	5 MO S/L	9,360	0
656	POPCORN MACHINE BALLFIELD 3/98	3/15/98	983				983	5 MO S/L	983	0
657	BALLFIELD SOUND SYSTEM 5/98	5/01/98	515				515	5 MO S/L	515	0
658	DR. TRIMMER/MOWER 06/98	7/15/98	894				894	5 MO S/L	894	0
659	CRFSTSMN RIDING MOWER W/TRLR9	7/15/98	1,700				1,700	5 MO S/L	1,700	0
660	SEARS GENERATOR 08/99	8/01/99	600				600	9 MO S/L	600	0
661	SEARS GENERATORS (5) 09/99	9/01/99	3,025				3,025	10 MO S/L	3,025	0
662	AIR COMPRESSOR 02/00	2/01/00	990				990	10 MO S/L	990	0
663	GATOR FOR CAMPUS 4/00	4/01/00	8,736				8,736	5 MO S/L	8,736	0
664	SPRAYER FOR GATOR 4/00	4/01/00	829				829	5 MO S/L	829	0
665	ROTOROOTER 05/00	5/01/00	1,785				1,785	5 MO S/L	1,785	0
666	CAR TOW DOLLIE	6/01/00	825				825	10 MO S/L	825	0
667	LIFT AND WHEEL BALANCER 08/01	8/31/01	2,500				2,500	8 MO S/L	2,500	0
668	AIR PURIFIER FOR CAMPUS	2/01/02	700				700	5 MO S/L	700	0
669	JD 660 ROTARY TILLER 04/02	4/01/02	1,250				1,250	5 MO S/L	1,250	0
670	TRAILER/BRUSH DONATED 05/02	5/15/02	1,200				1,200	5 MO S/L	1,200	0
671	3 HP PUMP DONATED/SIMS 6/02	6/15/02	1,200				1,200	5 MO S/L	1,200	0
672	WELDER FOR DAR 10/2002	10/01/02	2,440				2,440	6 MO S/L	2,440	0
673	MAINT/GRO TRAILER 01/03	1/15/03	4,625				4,625	5 MO S/L	4,625	0
675	HONDA POWER MOWER 5/2003	5/01/03	749				749	5 MO S/L	749	0
676	18' PJ TRAILER 03/2004	3/15/04	1,000				1,000	5 MO S/L	1,000	0
677	DIXON RIDING MOWER	11/17/06	2,500				2,500	5 MO S/L	2,500	0
678	FRONTIER RC SHREDDER 3/2007	3/01/07	1,340				1,340	5 MO S/L	1,340	0
680	LOEWEN HONEY WAGON	7/01/07	22,000				22,000	10 MO S/L	13,200	2,200
681	16' TRAILER/WADE DONATION	8/01/07	2,500				2,500	10 MO S/L	1,729	250
682	KAWASKAI STANDING MOWER 1/08	1/11/08	2,998				2,998	5 MO S/L	2,998	0
683	GATOR DONATED 4/2008	4/30/08	3,750				3,750	5 MO S/L	3,750	0
684	MOWER/STRATEGIC 10/08	10/10/08	1,052				1,052	5 MO S/L	1,052	0
685	1 1/2 HP PUMP CAMPUS 04/2009	4/01/09	1,466				1,466	10 MO S/L	770	147
686	HONDA 216 MWR 5/2009 STRTGC	5/01/09	1,053				1,053	5 MO S/L	1,053	0
687	PLAYGROUND EQUIPMENT 5/2009	5/15/09	18,809				18,809	10 MO S/L	9,718	1,881
688	MIP SOFTWARE '87	1/01/87	2,981				2,981	5 MO S/L	2,981	0
689	BROTHER WORD PROCESSOR 1990	1/01/90	311				311	5 MO S/L	311	0
690	FILING CABINET/COMPUTER DESK	1/01/90	261				261	10 MO S/L	261	0
691	MEDALIST PROJECTOR 1991	1/01/91	427				427	10 MO S/L	427	0
692	SEARS CAMCORDER/LA CAMERA	1/01/91	792				792	5 MO S/L	792	0
693	PROJECTOR W/ZOOM 1991M	7/01/91	1,540				1,540	10 MO S/L	1,540	0
694	NIMLOK TABLE TOP 1991	8/03/91	692				692	10 MO S/L	692	0
695	TRNS BAL CAMCORDER PF-GF 4/94	4/01/92	350				350	7 MO S/L	350	0
696	SYMPHONIC TV/VCR OFFICE 1992	6/30/92	380				380	10 MO S/L	380	0
697	SUBIA TABLE TOP DISPLAY 9/92	9/08/92	692				692	10 MO S/L	692	0
698	COMPUTER DESKS/QUILL 2 10/92	10/30/92	521				521	10 MO S/L	521	0
699	SHARP LASER PRINTER CK 1994	1/01/94	1,199				1,199	5 MO S/L	1,199	0
700	MICROFILM EQUIPMENT '86	1/01/94	1,850				1,850	5 MO S/L	1,850	0
701	DONOR SOFTWARE 1994	1/01/94	14,269				14,269	5 MO S/L	14,269	0
702	KROY LETTERING SYSTEM 3/94 6	3/30/94	420				420	10 MO S/L	420	0
703	TAMRON LENS/LADIES ASSOC 8/94 6	8/10/94	275				275	6 MO S/L	275	0
704	USI FX-1200 LAMINATOR 12/94 5	12/30/94	400				400	5 MO S/L	400	0
705	IBM DISPLAY WRTR/DONATED 10/95	10/15/95	250				250	5 MO S/L	250	0
706	EPSON STYLUS COLOR PRNTR CK	2/15/96	249				249	4 MO S/L	249	0
707	PAPER FOLDER/MARTIN YALE 3/98	3/15/98	500				500	5 MO S/L	500	0
709	WINDOWS SOFTWARE 7/98	7/15/98	550				550	5 MO S/L	550	0
710	CRESCENDO ANNUITY SFTWR 7/98	7/15/98	1,055				1,055	5 MO S/L	1,055	0
711	UPGRADE FOR SERVER/DONOR SSS	8/01/98	4,500				4,500	5 MO S/L	4,500	0
712	LABELER 11/98	11/15/98	4,653				4,653	5 MO S/L	4,653	0
713	UPGRADE NETWORK SYSTEM 12/98	12/15/98	999				999	5 MO S/L	999	0
714	VIDEO DUPLICATING SYSTEM 12/98	12/15/98	512				512	5 MO S/L	512	0



85-6018576

## Federal Asset Report

FYE: 6/30/2015

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
715	UPGRADE TO NPS/WINDOWS 2/99	2/01/99	1,997			1,997	5 MO S/L	1,997	0
716	STYLUS PRINTER 5/99 PF/MALISA	5/01/99	655			655	5 MO S/L	655	0
717	MICROFISCHE READER 01/00	1/01/00	2,000			2,000	6 MO S/L	2,000	0
718	EIKI OVERHEAD W/TRIPOD 02/00	2/01/00	2,338			2,338	6 MO S/L	2,338	0
719	BALANCE ON PROJECTOR 2/00	2/01/00	2,338			2,338	6 MO S/L	2,338	0
720	APOLLO ODYSSEY OVRHD W/CART	2/01/00	521			521	6 MO S/L	521	0
721	ALLOCATION MODULE 02/00	2/01/00	1,602			1,602	5 MO S/L	1,602	0
722	CPU EMC 5001 C.K. 2000	3/01/00	628			628	5 MO S/L	628	0
723	LASERJET 4500 03/00	3/01/00	2,205			2,205	5 MO S/L	2,205	0
724	HP PAVILION COMPUTER 06/00	6/01/00	550			550	5 MO S/L	550	0
725	GF KT TABBER/STAND AND TABS	9/30/00	3,285			3,285	5 MO S/L	3,285	0
726	DELL DIMENSION 4100 /JACK 2002	1/29/01	1,291			1,291	5 MO S/L	1,291	0
727	THINKPAD 240X INTEL/Rod	2/28/01	1,445			1,445	5 MO S/L	1,445	0
728	WINBOOK ALPHATOP/CA 11/01	11/01/01	1,546			1,546	5 MO S/L	1,546	0
729	DIMENSION 4300S COMP/CA 12/01	12/05/01	1,109			1,109	5 MO S/L	1,109	0
730	OPTIPLEX DELL COMPUTER/JC	3/15/02	1,206			1,206	5 MO S/L	1,206	0
731	XEROX PRINTER 07/02 MAIN PRN	7/15/02	2,501			2,501	5 MO S/L	2,501	0
732	CREDIT CARD MACHINE 06/02	7/24/02	1,590			1,590	10 MO S/L	1,590	0
733	DELL DEMINISION/TOMMYE 09/2002	9/01/02	1,248			1,248	5 MO S/L	1,248	0
734	DONOR SERVER ATX 10/2002 UPG	10/01/02	1,300			1,300	5 MO S/L	1,300	0
735	DELL DEMINISION 2300/ROD	11/15/02	805			805	5 MO S/L	805	0
736	DELL DEMINISION 2300/V 11/02	11/15/02	955			955	5 MO S/L	955	0
737	PAPER CUTTER 12/02	12/31/02	650			650	5 MO S/L	650	0
738	INSPIRON 4150 05/2003 CK	5/03/03	1,599			1,599	5 MO S/L	1,599	0
739	InFOCUS PROJECTOR	8/15/03	2,380			2,380	5 MO S/L	2,380	0
740	DELL DEMENSION 2400 GF 12/03	12/15/03	696			696	5 MO S/L	696	0
741	DELL DEMINISION/RECEPTION 2/04	2/16/04	794			794	5 MO S/L	794	0
742	BANK REC/FORMS SFTWR BKKP 2004	2/16/04	1,390			1,390	5 MO S/L	1,390	0
743	C5100n COLOR DIGITAL LED PRINT	4/22/04	663			663	10 MO S/L	663	0
744	INSPIRON LAPTOP 5160 11/04	11/30/04	1,119			1,119	5 MO S/L	1,119	0
746	AVAYA PHONE SYSTEM 02/2008	2/10/08	5,827			5,827	10 MO S/L	3,739	582
747	QUAD CORE COMPUTER/SERVER	10/01/08	1,108			1,108	5 MO S/L	1,108	0
748	CAMPUS WIDE WIRELESS 10/08	12/01/08	4,324			4,324	5 MO S/L	4,324	0
750	1990 FORD WANNABE WITH CMPR	1/01/94	10,856			10,856	1 MO S/L	10,856	0
751	1995 SLVR FRD VNIII GRNT 10/95	10/15/95	20,419			20,419	5 MO S/L	20,419	0
753	92 TOYOTA PICKUP 2/97	2/04/97	7,500			7,500	5 MO S/L	7,500	0
754	94 FORD RANGER PU 2/97	2/15/97	7,950			7,950	5 MO S/L	7,950	0
755	96 DODGE DAKOTA 3/97	3/06/97	15,950			15,950	5 MO S/L	15,950	0
759	83 FORD F-700 DUMP TRUCK	3/23/01	9,350			9,350	5 MO S/L	9,350	0
760	99 FORD RANGER XLT	3/15/02	9,700			9,700	5 MO S/L	9,700	0
761	850 JOHN DEERE GRDNTRCTR 04/02	4/01/02	4,900			4,900	5 MO S/L	4,900	0
762	2002 FORD WINDSTAR XL 2/03	2/28/03	17,100			17,100	5 MO S/L	17,100	0
	Sold/Scrapped: 8/14/14								
763	2003 FORD CREW CAB DIESEL	7/15/03	31,100			31,100	5 MO S/L	31,100	0
764	2003 DODGE PU GF 2/2008	9/15/03	25,425			25,425	5 MO S/L	25,425	0
769	92 S10 PICKUP 07/2005	7/01/05	2,280			2,280	5 MO S/L	2,280	0
770	99 LINCOLN EXECUTIVE	3/01/06	4,000			4,000	3 MO S/L	4,000	0
771	2006 ECONOLINE SUPER	3/31/06	29,700			29,700	5 MO S/L	29,700	0
772	06 FORD E350 CLUBWAGON 12/06	12/11/06	18,821			18,821	5 MO S/L	18,821	0
773	06 CHEVY VAN 1246 04/2007	4/15/07	17,000			17,000	5 MO S/L	17,000	0
774	06 CHEVY VAN 8047 04/2007	4/15/07	18,821			18,821	5 MO S/L	18,821	0
775	96 CHEVY 1500	5/15/07	8,500			8,500	5 MO S/L	8,500	0
776	06 CHEVY VAN 0645 5/2007	5/15/07	18,821			18,821	5 MO S/L	18,821	0
777	06 CHEVY VAN 3573 5/2007	5/15/07	18,821			18,821	5 MO S/L	18,821	0
780	2006 EXPRESS VAN 0665	6/23/07	18,821			18,821	5 MO S/L	18,821	0
781	2005 DODGE VAN	8/01/07	9,250			9,250	5 MO S/L	9,250	0
784	2000 FORD CHATEAU 11/07	11/01/07	8,000			8,000	5 MO S/L	8,000	0
785	07 FRD STARCRAFT MINI B 01/08	1/15/08	47,820			47,820	5 MO S/L	47,820	0
786	2007 CHEVY VAN 3/2008 9465	3/15/08	18,512			18,512	5 MO S/L	18,512	0
787	2003 FORD WIDSTAR 5/2008	5/15/08	6,500			6,500	5 MO S/L	6,500	0
789	07 CHEVY SUBURBAN	5/27/08	32,900			32,900	5 MO S/L	32,900	0
790	97 CADILLAC DEVILLE	7/01/08	3,750			3,750	2 MO S/L	3,750	0
791	03 CHEVY SUBURBAN	9/01/08	10,245			10,245	5 MO S/L	10,245	0
792	04 MERCURY MONTEREY VAN	11/01/08	12,447			12,447	5 MO S/L	12,447	0
793	SHEEP BARN/FRENCH '81	2/01/81	5,753			5,753	20 MO S/L	5,753	0
794	LIVESTOCK COMPLEX '85	5/01/85	50,430			50,430	18 MO S/L	50,430	0
795	WELL HOUSE/WILLIAMS 01/03	1/01/93	320			320	19 MO S/L	320	0
796	HORSE BARN 3/96	3/01/96	937			937	7 MO S/L	937	0
797	SHOW PIG SHADE/EAST 5/99	5/31/99	5,052			5,052	10 MO S/L	5,052	0
798	SHOW LAMB SHADE/WEST 5/99	5/31/99	526			526	10 MO S/L	526	0
799	EXTENTION OF PIG SHADE	8/01/99	2,694			2,694	20 MO S/L	2,010	134

85-6018576

## Federal Asset Report

FYE: 6/30/2015

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
800	PAINT COMPLEX FENCES 12/02	12/01/02	3,500				3,500	5	MO S/L	3,500	0
801	COMPLEX SEPTIC TANK 6/2004	6/15/04	800				800	15	MO S/L	538	53
802	COMPLETE SHEEP SHARE 2/08	2/15/08	20,682				20,682	40	MO S/L	3,318	517
803	HOG SCALES '79 ITC 25.59	7/01/79	384				384	4	MO S/L	384	0
804	FEEDER '81 ITC 60	7/01/81	600				600	9	MO S/L	600	0
805	GOOSENECK STK TRLR ITC465.H	7/01/83	4,650				4,650	4	MO S/L	4,650	0
806	SHEEP CLIPPERS STEWART 84	7/01/84	287				287	4	MO S/L	287	0
807	SIGN/COMPLEX '85 ITC 60.00 H	7/01/85	600				600	4	MO S/L	600	0
808	PANELS/OILERS	1/01/88	550				550	10	MO S/L	550	0
809	DONATED GOOSENECK 1988	1/01/88	275				275	10	MO S/L	275	0
810	SHEEP WOOL DRYER	1/01/90	275				275	5	MO S/L	275	0
811	BRANDING CHUTE '92	2/17/92	2,808				2,808	10	MO S/L	2,808	0
812	SHEEP CLIPPERS 4/92/LDS ASSOCI	4/30/92	435				435	10	MO S/L	435	0
813	CLUB LAMB PACER #760 4/95 5	4/15/95	1,423				1,423	5	MO S/L	1,423	0
814	SADLES (3) DONATED HAMILL 8/95	8/15/95	600				600	10	MO S/L	600	0
815	11' STOCK TANK/COMPLEX 1/96	1/15/96	289				289	6	MO S/L	289	0
816	EAGLE PLASMA CUTTER 02/01	2/28/01	1,287				1,287	6	MO S/L	1,287	0
817	FAIR ANIMAL SCALES 5/2003	5/01/03	1,100				1,100	5	MO S/L	1,100	0
818	CATTLE FEEDER	8/15/03	800				800	5	MO S/L	800	0
819	16x5 CM TRAILER 09/2005	9/28/05	5,131				5,131	10	MO S/L	4,490	513
820	LOADER PALLET FORK	3/01/09	1,100				1,100	10	MO S/L	587	110
821	GAS COOK TOP/LVSTK HOME 6/96	6/01/96	319				319	10	MO S/L	319	0
822	IMPROVMENT DICTSON FENCE 6/07	6/30/71	6,646				6,646	10	MO S/L	6,646	0
823	DICTSON IRRIGATION WELL	1/01/74	1,500				1,500	20	MO S/L	1,500	0
824	DICTSON (2) WELLS 1974	1/01/74	2,000				2,000	20	MO S/L	2,000	0
825	UNDRGRND PIPE/DC 1977	1/01/77	3,637				3,637	20	MO S/L	3,637	0
826	SPENCER FENCE 1980	1/01/80	1,793				1,793	10	MO S/L	1,793	0
827	DICTSON FENCE 1985	1/01/85	3,178				3,178	10	MO S/L	3,178	0
828	COMPLEX CORRALS AND IMP 1986	1/01/86	5,283				5,283	10	MO S/L	5,283	0
829	LIVESTOCK SHADES 1990/COMPLEX	1/01/90	7,926				7,926	5	MO S/L	7,926	0
831	COMPLEX SHEEP RUN 1991	1/01/91	1,050				1,050	5	MO S/L	1,050	0
832	DOMESTIC WELL/WILLIAMS 01/93	1/14/93	1,865				1,865	10	MO S/L	1,865	0
833	5 HP PUMP/DICTSON 10/93 10	10/30/93	873				873	10	MO S/L	873	0
834	FRENCH CORRALS COMPLETED 2/94	2/01/94	1,464				1,464	7	MO S/L	1,464	0
835	1.5 HP COMPLEX PUMP 3/94 10	3/07/94	696				696	10	MO S/L	696	0
836	.5 LVSTK WELL PMP/FR 6/94 10	6/15/94	267				267	10	MO S/L	267	0
837	FRENCH LVSTK WATER LN 7/94	7/30/94	1,582				1,582	14	MO S/L	1,582	0
838	WILLIAMS CORRALS 2/95 7	2/01/95	1,314				1,314	7	MO S/L	1,314	0
839	SPENCER CORRALS 2/95 7	2/01/95	1,581				1,581	7	MO S/L	1,581	0
840	CORRAL/ARENA TERRY CMPLX 6/00	6/01/00	3,460				3,460	10	MO S/L	3,460	0
841	MILLER PLACE LOT	6/17/04	2,176				2,176	5	MO S/L	2,176	0
842	DELL DEMENSION 2400 9/03 PF	9/15/03	699				699	5	MO S/L	699	0
843	COMPAQ PRESARIO 7/2004	7/01/04	608				608	4	MO S/L	608	0
845	2001 K15 SUBURBAN 02/2009	2/01/09	8,000				8,000	5	MO S/L	8,000	0
846	LAND	3/01/54	579,042				579,042	0	-- Land	0	0
847	RENOVATION PROJECT	7/01/10	13,497				13,497	40	MO S/L	1,350	337
848	NONDEPRECIABLE ASSETS	6/30/07	22,601				22,601	0	-- Memo	0	0
849	CAMPUS PAVEMENT	6/30/08	35,157				35,157	10	MO S/L	21,094	3,516
850	SIREN	9/30/08	1,165				1,165	10	MO S/L	670	116
851	10 HP PUMP/WELL	7/31/09	6,274				6,274	10	MO S/L	3,085	627
852	WHIRLPOOL OVEN	6/21/10	1,465				1,465	10	MO S/L	586	147
853	300 W. 18TH SAVANNAH'S 09/2009	9/01/09	89,904				89,904	40	MO S/L	10,863	2,248
854	LAUNDREY ROOM/SAVANNAHS 2/2010	2/01/10	21,022				21,022	40	MO S/L	2,321	526
855	322 W. 18TH/STAFF HOUSING 5/10	5/15/10	137,995				137,995	40	MO S/L	14,374	3,450
856	HEAT PUMP APT 8 7/2009	7/15/09	5,185				5,185	5	MO S/L	5,185	0
857	HEAT PUMP COTT II 07/2009	7/15/09	2,032				2,032	5	MO S/L	2,032	0
858	HVAC SYSTEM	12/01/09	6,583				6,583	10	MO S/L	3,017	659
859	SCOTTSMAN ICE MAKER 1/2010	1/01/10	2,654				2,654	10	MO S/L	1,194	266
860	RPLCMNT HEAT PMP OFC 5/2010	5/15/10	2,300				2,300	5	MO S/L	1,917	383
861	SAVANNAH'S FENCE 4/2010	4/13/10	5,812				5,812	10	MO S/L	2,470	581
862	FARM SHOP BATHROOM 07/2009	7/01/09	3,864				3,864	40	MO S/L	483	97
863	JOHN DEERE MOWER	9/01/09	2,700				2,700	5	MO S/L	2,610	90
864	PLAY W/PURPOSE 2/2010	2/01/10	14,501				14,501	10	MO S/L	6,405	1,450
865	HUSTLER MOWER RIDER	2/28/10	9,430				9,430	10	MO S/L	4,086	943
866	POWERHEART G3 4/2010	4/01/10	1,344				1,344	10	MO S/L	571	134
867	KAUFMAN PINTLE TRAILER 3/2010	4/01/10	6,227				6,227	5	MO S/L	5,293	934
869	DELL POWEREDGE/DONOR	4/01/10	3,115				3,115	5	MO S/L	2,648	467
873	03 FORD VAN	2/01/10	6,464				6,464	5	MO S/L	5,709	755
877	10 SILVERADO/FIRETRUCK 4/10	4/01/10	31,617				31,617	5	MO S/L	26,874	4,743
878	SKID STEER LOADER 12/2009	12/01/09	15,000				15,000	5	MO S/L	13,750	1,250
879	WORK/WELDING TRAILER 4/2010	6/12/10	3,500				3,500	5	MO S/L	2,858	642



85-6018576

**Federal Asset Report**

FYE: 6/30/2015

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
955	2001 Lincoln Towncar 4D	4/17/14	3,862			3,862	5 MO S/L	129	772
956	Heat Pump: Duplex #2	11/05/13	2,371			2,371	5 MO S/L	316	474
957	Office Telephone System	4/15/13	20,864			20,864	7 MO S/L	3,726	2,980
958	Carpet Cottage 6	7/16/14	8,101			8,101	10 MO S/L	0	743
959	A/C Unit Learning Center	6/17/15	4,400			4,400	5 MO S/L	0	0
960	Well at Williams Ranch	4/12/15	2,323			2,323	10 MO S/L	0	58
961	Gym Remodels - Gable	10/28/14	4,675			4,675	30 MO S/L	0	104
962	Gym Remodel - Underground Electric	11/02/14	4,560			4,560	30 MO S/L	0	101
963	Gym Remodel - Facia and Soffit	10/29/14	3,285			3,285	30 MO S/L	0	73
964	Lawn Mower	7/02/14	2,896			2,896	5 MO S/L	0	579
965	Mowers, Trimmers & Parts	6/16/15	2,061			2,061	5 MO S/L	0	0
966	Tire Balancing Machine	5/01/15	1,750			1,750	10 MO S/L	0	29
967	Livestock Compound Lights	9/03/14	1,812			1,812	30 MO S/L	0	50
968	Branson 3120R Compact Tractor	7/24/14	20,200			20,200	5 MO S/L	0	3,703
969	1972 Volkswagen Beetle - Donated	2/25/15	5,575			5,575	5 MO S/L	0	372
970	2002 GMC Yukon XL - Donated	4/16/15	3,250			3,250	5 MO S/L	0	108
971	2002 GMC Yukon XL - Donated	7/31/14	6,000			6,000	5 MO S/L	0	1,100
<b>Total Other Depreciation</b>			<u>9,739,145</u>			<u>9,739,145</u>		<u>4,523,243</u>	<u>240,955</u>
<b>Total ACRS and Other Depreciation</b>			<u>9,739,145</u>			<u>9,739,145</u>		<u>4,523,243</u>	<u>240,955</u>
<b>Listed Property:</b>									
943	2002 Ford Ecoline	8/31/13	3,500			3,500	5 MO S/L	583	700
			<u>3,500</u>			<u>3,500</u>		<u>583</u>	<u>700</u>
<b>Grand Totals</b>			9,742,645			9,742,645		4,523,826	241,655
<b>Less: Dispositions and Transfers</b>			29,403			29,403		19,198	2,101
<b>Less: Start-up/Org Expense</b>			0			0		0	0
<b>Net Grand Totals</b>			<u>9,713,242</u>			<u>9,713,242</u>		<u>4,504,628</u>	<u>239,554</u>

# Depreciation Adjustment Report

## All Business Activities

Form Unit Asset

Description

Tax

AMT

AMT  
Adjustments/  
Preferences

**There are no assets that meet the criteria of this report**

85-6018576

**Future Depreciation Report****FYE: 6/30/16**

FYE: 6/30/2015

**Form 990, Page 1**

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
<b><u>Other Depreciation:</u></b>					
1	STORAGE/OLD GROCERY ROOM 54	3/01/54	10,000	0	0
2	FRENCH ORIGINAL	1/01/65	20,000	0	0
3	OFFICE 1976	6/01/76	8,872	177	0
4	REMODEL FRENCH 1977	1/01/77	730	0	0
5	OFFICE ADDITION 1978	6/01/78	9,357	188	0
6	OFFICE ADDITION 1981	6/01/81	5,156	103	0
7	YOUTH CENTER/GYM (COST TO 83)	6/01/83	80,951	0	0
8	COTTAGE I (COST TO 6/83) '83	6/01/83	73,142	0	0
9	COTTAGE I REMODEL 1984	6/01/83	7,302	146	0
10	COTTAGE II (COST TO 6/83) '83	6/01/83	74,609	0	0
11	COTTAGE III (COST TO 6/83) '83	6/01/83	76,359	0	0
12	COTTAGE IV (COST TO 6/83) '83	6/01/83	70,289	0	0
13	CENTER CAMPUS HOUSE '83	6/01/83	35,384	793	0
14	EAST CAMPUS HOUSE 1983	6/01/83	26,785	535	0
15	FRENCH COTTAGE REMODEL TO 83	6/01/83	34,323	851	0
16	DUPLEX I APT 1/2 1983	6/01/83	28,949	698	0
17	OFFICE ADDITION 1984	6/01/84	55,841	1,117	0
18	YOUTH CNTR/GYM REMODEL 1984	6/01/84	998	20	0
19	COTTAGE II REMODEL 1984	6/01/84	3,570	71	0
20	COTTAGE III REMODEL 1984	6/01/84	5,508	110	0
21	COTTAGE IV REMODEL 1984	6/01/84	8,055	161	0
22	CENTER CAMPUS HOUSE REMODEL 84	6/01/84	4,406	89	0
23	EAST CAMPUS HOUSE REMODEL 1984	6/01/84	3,374	68	0
24	FRENCH COTTAGE REMODEL 1984	6/01/84	27,641	556	0
25	DUPLEX I REMODEL 1984	6/01/84	31,289	629	0
26	DUPLEX II APT 3/4 1984	6/01/84	66,223	1,385	0
27	WELL/LAWN MOWER HOUSE II 1985	6/01/85	6,341	0	0
28	COTTAGE I REMODEL 1985	6/01/85	1,838	0	0
29	COTTAGE II REMODEL 1985	6/01/85	29,673	742	0
30	COTTAGE III REMODEL 1985	6/01/85	7,751	185	0
31	CENTER CAMPUS HOUSE REMODEL 85	6/01/85	2,219	0	0
32	FRENCH COTTAGE REMODEL 1985	6/01/85	12,996	261	0
33	REMODEL COTTAGE II 1986	1/01/86	273	0	0
34	COMMISSARY/CLOTHING ROOM 1986	6/01/86	85,343	0	0
35	COTTAGE I REMODEL 1986	6/01/86	2,021	0	0
36	COTTAGE II REMODEL 1986	6/01/86	10,044	0	0
37	COTTAGE IV REMODEL 1986	6/01/86	7,028	0	0
38	EAST CAMPUS HOUSE REMODEL 1986	6/01/86	9,953	0	0
39	FRENCH COTTAGE REMODEL 1986	6/01/86	3,562	0	0
41	COTTAGE II FENCE 1987	1/01/87	295	0	0
42	EAST CAMPUS HS REMODEL 1987	1/01/87	841	0	0
43	FRENCH HOME FENCE 1987	1/01/87	876	0	0
44	YOUTH CNTR/GYM REMODEL 1987	9/01/87	598	0	0
45	COTTAGE II REMODEL 1990	1/01/90	4,291	0	0
46	CENTER CAMPUS HS REMODEL 1990	1/01/90	1,732	0	0
47	YOUTH CNTR/GYM REMODEL 1990	3/05/90	72,059	2,126	0
48	GROCERY RM TO IND LIVING 1990	10/31/90	5,404	135	0
49	IND LIVING QUARTERS REM 1991	3/31/91	9,441	302	0
50	FRENCH COTTAGE REMODEL 1992	1/30/92	583	15	0
51	COTTAGE II REMODEL 1992	1/31/92	910	22	0
52	STORAGE UNITS 1992	2/05/92	29,213	731	0
53	CLOTHING ROOM REMODEL 1992	4/10/92	596	0	0
54	COTTAGE IV TILE 1992	4/30/92	2,700	67	0
55	OFFICE ADDITION 1992	6/30/92	41,179	1,029	0
56	VOCATIONAL AG BLDG 1992	6/30/92	114,893	2,872	0
57	FRENCH COTTAGE CARPORT 7/1992	7/31/92	16,711	418	0
58	COTTAGE I CARPORT 07/1992	7/31/92	16,338	409	0
59	COTTAGE II CARPORT 07/1992	7/31/92	12,755	319	0
60	COTTAGE IV CARPORT 07/1992	7/31/92	16,123	403	0
61	COTTAGE III CARPORT 07/1992	7/31/92	17,130	429	0
62	PHASE II GYM REMODEL 1/93	1/01/93	94,952	2,374	0
63	SEPTIC TANK COTTAGE IV 01/93	1/30/93	1,500	0	0
64	DUPLEX 3/APT 5/6 02/93	2/01/93	106,908	2,859	0
65	DUPLEX 4/APT 7/8 2/93	2/01/93	106,780	2,855	0
66	FRENCH BATHROOM REMODEL 4/93	4/01/93	7,754	194	0
67	SEPT TANK YC/GYM 04/93	4/07/93	2,250	0	0
68	SEPTIC TANK COTTAGE IV 04/93	4/30/93	3,362	0	0

Asset	Description	Date In Service	Cost	Tax	AMT
69	SEPTIC TANK COTTAGE II 8/93	8/17/93	1,702	0	0
70	SEPTIC TANK WORK 8/93	8/18/93	3,512	0	0
71	SEPTIC TANK/DUP 1 8/93	8/18/93	1,076	0	0
72	SEPTIC TANK DUPLEX 2 8/93	8/19/93	1,076	0	0
73	SEPTIC TANK/LAKE HS 12/93 15	12/23/93	1,952	0	0
74	COTTAGE III REMODEL 12/93 40	12/31/93	31,407	785	0
75	FRENCH FACIA/PORCH REM 3/94	3/04/94	4,510	113	0
76	FRENCH BATHROOM REM 4/94	4/30/94	2,223	55	0
77	FRENCH COTTAGE GABLES 5/94 40	5/01/94	1,910	47	0
78	COTTAGE II HP QTRS 5/94 40	5/31/94	3,787	95	0
79	OFFICE REMODEL/ 6/94 40	6/30/94	3,935	98	0
80	COTTAGE V /GRANT 6/30/94 40	6/30/94	255,679	6,392	0
81	LAKE HOUSE REMODEL 6/94 40	6/30/94	1,754	44	0
82	COTTAGE III REMODEL 1994	12/30/94	62,288	1,557	0
83	EC HOUSE REMODEL 1994	12/30/94	14,441	361	0
84	OFFICE REMODEL/SHELVING 4/95	4/01/95	4,910	122	0
85	SEPTIC TANK COTTAGE I 5/95 15	5/15/95	1,585	0	0
86	SEPTIC TANK/COTTAGE III 7/95	7/15/95	3,003	0	0
87	REMODEL COTTAGE I/GRANT 11/95	11/01/95	112,397	2,810	0
89	CENTER CAMPUS HS REMODEL 1986	1/01/96	1,030	0	0
90	COTTAGE IV REMODEL 2/96	2/01/96	151,356	3,783	0
91	HP DUPLEX/F DUPLEX 3/96	3/01/96	146,915	3,672	0
92	REMODEL BEGAN 1/96 THR 8/96	3/31/97	25,543	851	0
93	DOORS/HALLWAY IMPROVEMENT 6/97	6/01/97	3,889	130	0
94	EXTERIOR DOORS IV 6/97	6/01/97	3,528	117	0
95	FACIA REFURBISH IV 9/97	9/17/97	2,596	86	0
96	CONCESSION STND/BALLFIELD 9/97	9/30/97	11,304	376	0
97	SEPTIC TANK/CONCESSION 9/97	9/30/97	1,552	0	0
98	COTTAGE VI COMPLETED 9/97	9/30/97	263,359	4,895	0
99	CONCESSIONS STAND EXP 12/97	12/01/97	186	0	0
100	REMODEL COTTAGE II 2ND PHASE	1/15/98	38,942	1,022	0
101	FINAL PMT VI 1/98	1/15/98	2,211	77	0
102	EC HOUSE WINDOWS/SIDING 1/98	1/15/98	6,680	229	0
103	SEPTIC LEACH LINES VI TUCKER	2/15/98	975	0	0
104	WINDOWS/TUCKER FRENCH 2/98	2/15/98	3,594	121	0
105	REMODEL 97/98 3/98	3/01/98	31,332	784	0
106	OFFICE REMODEL/CASEWORKER 4/98	4/15/98	3,328	83	0
107	SOUTH OFFICE DOOR 6/98	6/01/98	1,037	26	0
108	HP/F DUPLEX WELLHOUSE 9/98	9/01/98	1,301	0	0
109	FRENCH REMODEL 2000	3/01/00	40,932	1,364	0
110	PATIO FOR V FINISHED JULY 2000	7/01/00	6,800	340	0
111	FRENCH SEWER/FRAZIER	12/31/00	1,840	0	0
112	FRENCH UPGRADE ON CELLAR 2000	1/30/01	3,140	78	0
113	FINAL BILLING ON FRENCH CELLAR	2/01/01	163	0	0
114	TRANE COMPRESSOR REPLACE	6/30/01	1,126	0	0
115	OFFICE REMODEL FINISHED 08/01	8/01/01	4,482	0	0
116	COTTAGE V ROOF REDONE 10/2001	10/01/01	4,525	0	0
117	TEAGUE COTTAGE FINALIZED 04/02	12/01/01	336,626	8,415	0
118	NEW CARPET COTTAGE III 05/02	5/05/02	2,400	0	0
119	CARPET/COTTAGE IV 6/2002	6/01/02	3,495	0	0
120	REPLACE COTT I CARPET 07/02	7/01/02	6,400	0	0
121	SEPTIC TANK/TEAGUE 06/02	7/24/02	5,055	0	0
122	REPLACE CARPET DUP 6 09/2002	9/01/02	2,536	0	0
123	HICKS PAVILION FINALIZED 12/02	12/01/02	43,233	1,081	0
124	SEPTIC TANK/OFFICE 02/03	2/01/03	2,217	56	0
125	SEPTIC TANK COTTAGE I 2/03	2/01/03	4,435	111	0
126	ROOF REMODEL & SHINGLING 2003	4/01/03	12,375	619	0
127	COTT II CARPORT ENCLOSURE 03	7/15/03	2,700	0	0
128	MILLER PLACE HOME	6/17/04	55,445	2,772	0
129	NEW SHINGLES/10/2004 III	10/05/04	11,421	0	0
130	CONFERENCE ROOM 1/2005	1/01/05	170,478	4,262	0
131	STAGE/GYM BUILT 2004	1/01/05	46,267	1,157	0
132	YC REMODEL INTO GARDEN OF HONO	1/01/05	10,385	260	0
133	SHINGLES 06/30/05	6/15/05	7,170	358	0
134	EC SHINGLES 07/05	7/01/05	6,928	0	0
135	EC SHINGLES 07/05	7/01/05	3,220	0	0
137	COTTAGE I GARAGE 11/2007	11/10/07	7,849	197	0
138	COTTAGE 3 GARAGE 11/2007	11/10/07	7,849	197	0
139	COTTAGE 4 GARAGE	11/10/07	7,849	197	0
140	2008 REMODEL MILLER HM	6/30/08	29,378	735	0
141	WAHLMAN APARTMENT #1	7/01/08	55,000	1,100	0

85-6018576

**Future Depreciation Report****FYE: 6/30/16**

FYE: 6/30/2015

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Tax	AMT
142	WAHLMAN APARTMEN #2	7/01/08	55,000	1,100	0
143	WAHLMAN APARTMENT #4	7/01/08	55,000	1,100	0
144	WAHLMAN APARTMENT #5	7/01/08	55,000	1,100	0
145	WAHLMAN APARTMENT #6	7/01/08	55,000	1,100	0
146	WAHLMAN APT #3	5/20/09	55,000	1,100	0
147	LARGE DRYER	1/01/84	1,568	0	0
148	LARGE DRYER	1/01/84	1,568	0	0
149	LARGE DRYER	1/01/84	1,568	0	0
150	10 DINNING TABLES 1984	1/01/84	3,145	0	0
151	DINNING TABLES 1984	1/01/84	629	0	0
152	DINNING TABLES 1984	1/01/84	629	0	0
153	DINNING TABLES 1984	1/01/84	629	0	0
154	DINNING TABLES 1984	1/01/84	629	0	0
155	WESTINGHOUSE FREEZER 1988	1/01/88	396	0	0
156	PLAYGROUND EQUIPMENT 1988	1/01/88	1,603	0	0
157	MAYTAG WASHERS (2) 1989	1/01/89	946	0	0
158	MAYTAG (2) WASHERS/DONATED III	1/01/89	1,100	0	0
159	FRIGE FROM FOX & LAKE 1990	1/01/90	510	0	0
160	TELEVISION 1990/FRENCH	1/01/90	751	0	0
161	RANGE ILQ 1991	1/01/91	1,002	0	0
162	TV COTTAGE III 1991	7/31/91	500	0	0
163	MICROWAVE OFFICE/6/96 1991	9/30/91	297	0	0
164	REFRIGERATOR/ILQ 1991	10/01/91	399	0	0
165	TV COTTAGE IV 1991	10/01/91	500	0	0
166	SOFA/LOVESEAT/IV 91 10	11/20/91	900	0	0
167	END TABLES FRM SET 1991 10	12/17/91	396	0	0
168	MULTI/ERTHTNS LVSEAT FRM 01	12/17/91	560	0	0
169	LOVE SEAT/OFFICE 1992 10	3/31/92	700	0	0
170	COUCH/CA OFFICE 1992 10	4/30/92	448	0	0
171	DRESSERS/COTTAGE III 8/92 10	8/30/92	1,400	0	0
172	RANGES/4/DUPLEXES 9/92	9/30/92	1,400	0	0
173	DISHWASHER/4/DUPLEXES 9/92	9/30/92	829	0	0
174	WASHER/DUPLEX 4/APT 8 10/92	10/30/92	370	0	0
175	DRYER/DUPLEX 4/APT 8 10/92	10/30/92	330	0	0
176	WESTINGHOUSE FRIGE APT8 10/92	10/30/92	500	0	0
177	WATER HEATER III 10/92	10/30/92	1,517	0	0
178	GE WASHING MACHINE/D3/#5 11/92	11/30/92	450	0	0
179	GE DRYER DUPLEX 3/#5 11/92	11/30/92	350	0	0
180	REFRIGERATOR/DUP 3/#5 11/92	11/30/92	500	0	0
181	TV & STAND/DUP 3/#5 11/92	11/30/92	290	0	0
182	TV & STAND/DUP HP 12/95 11/92	11/30/92	290	0	0
183	SOFA DUPLEX 3/#5 11/92 10	11/30/92	749	0	0
184	MATT/SPRINGS DUP 3 11/92 10	11/30/92	1,440	0	0
185	BEDROOM SUITE/DUP 3/#5 11/92	11/30/92	480	0	0
186	MATT/SPRINGS D4/#7 11/92 10	11/30/92	630	0	0
187	4 PC BEDROOM SUITE 11/92	11/30/92	520	0	0
188	DINNETTE SET DUP 3/#5 11/92 10	11/30/92	380	0	0
189	5 PC DINNETTE SET/D4/#7 11/92	11/30/92	380	0	0
190	WINDOW FIXTURES/DUP 3 11/92	11/30/92	725	0	0
191	WINDOW FIXTURES/DUP 4 11/92	11/30/92	725	0	0
192	VOCATIONAL SHOP SHELVES 11/92	11/30/92	1,941	0	0
193	WASHERS(2) 6/7DUP 12/92	12/31/92	1,000	0	0
194	DRYERS (2) 6/7DUP 12/92	12/31/92	963	0	0
195	REFRIGERATORS(2) 6/7DUP 12/92	12/31/92	1,000	0	0
196	COUCH/DONATED/IV 01/93 10	1/31/93	300	0	0
197	REFRIGERATOR E CAMPUS HS 3/93	3/31/93	680	0	0
198	DINNETTE SET/APT 3 06/30/93	6/30/93	450	0	0
199	SOUND CABINET/GYM 06/30/93	6/30/93	849	0	0
200	AIR CONDITIONER/CC HS 8/93	8/18/93	766	0	0
201	AIR CONDITIONER/LAKE HS 8/93	8/19/93	1,344	0	0
202	FRIGE/FRENCH 8/93	8/30/93	719	0	0
203	ICEMAKER COTTAGE V 9/93 10YR	9/03/93	800	0	0
204	DESK/JACK'S OFFICE 10/93 10	10/15/93	458	0	0
205	EX CHAIR/JS OFFICE 10/93 10	10/30/93	300	0	0
206	COUCH/JS OFFICE 10/93 10	10/30/93	752	0	0
207	WATER HEATER/IV 11/93 10YRS	11/30/93	1,450	0	0
208	WATER HEATER/YC 4/94 11/93 10	11/30/93	187	0	0
209	ELEC ORGAN/DONATED 12/93 10	12/06/93	750	0	0
210	ENTERTAINMENT CENTER 1994	1/01/94	3,100	0	0
211	U-LINE ICEMAKER/OFFICE 2/94 10	2/01/94	550	0	0
212	COTTAGE V KA DISHWASHER 2/94	2/01/94	400	0	0



Asset	Description	Date In Service	Cost	Tax	AMT
213	COTTAGE V VERSAMATIC VAC 2/94	2/28/94	431	0	0
214	TELL CITY TABLES(2) V 4/94 10	4/03/94	837	0	0
215	MAYTAG WASHER/V BLK/WH 4/94 10	4/30/94	580	0	0
216	MAYTAG WASHER/V 4/94 10	4/30/94	580	0	0
217	MAYTAG DRYER/V BLK/WH 4/94 10	4/30/94	394	0	0
218	MAYTAG DRYER/COTT V 4/94 10	4/30/94	394	0	0
219	GE SPACEMAKER MICROWAVE V 4/94	4/30/94	479	0	0
220	GE SPACEMAKER MICROWAVE V 4/94	4/30/94	479	0	0
221	JENAIRE RANGE /V 4/94 10	4/30/94	1,173	0	0
222	GE JENAIRE RANGE/V 4/94 10	4/30/94	1,173	0	0
223	GIBSON UPRIGHT FREEZER V/4/94	4/30/94	500	0	0
224	GIBSON CHEST FREEZER/V 4/94 10	4/30/94	425	0	0
225	ADMIRAL REFRIGERATOR/V 4/94 10	4/30/94	717	0	0
226	BUNK BED SETS(4)/V 4/94 WOODEN	4/30/94	550	0	0
227	WOODEN 3 DRAWER DRESSERS(4)V	4/30/94	550	0	0
228	METAL TWIN BED SETS(4) 4/94 10	4/30/94	788	0	0
229	RD/WHT/BLU WOODEN DRESSERS/V	4/30/94	476	0	0
230	TELL CITY CHAIRS(18)/V 4/94 10	4/30/94	1,488	0	0
231	KITCHEN AID MIXER V 4/94 10	4/30/94	299	0	0
232	REFRIGERATOR V 05/94 10	5/01/94	717	0	0
233	SOFA/INDIAN PRNT 5/94 V 10	5/15/94	312	0	0
234	SOFA/INDIAN PRNT (2) V 5/94 10	5/15/94	312	0	0
235	CHAIR/INDIAN PRNT V 5/94 10	5/15/94	163	0	0
236	GREEN RECLINER V 5/94 10	5/15/94	310	0	0
237	GREEN RECLINER/ V 5/94 10	5/15/94	310	0	0
238	BUNKIE MATTRESSES(4) V 5/94 10	5/19/94	400	0	0
239	SINGER SEWING MACHINE/DON 5/94	5/31/94	300	0	0
240	EXTRACTOR/COTTAGE V 6/94 6	6/22/94	1,405	0	0
241	AM AIR MOVER/COTTAGE V 6/94 6	6/22/94	225	0	0
242	SSS 19XL BUFFER/V 6/94 6	6/22/94	828	0	0
243	VERSAMATIC VACUUM/V 07/94 6	7/07/94	459	0	0
244	FR DISHWASHER/KITCHENAID 8/94	8/04/94	400	0	0
245	GREEN VELVET LOVESEAT/8/94 10	8/25/94	350	0	0
246	MICROWAVE/EC HS 10/94 10	10/01/94	347	0	0
247	WPDOUBLE OVEN/III 10/94 10	10/01/94	915	0	0
248	DOWNDRAFT COOKTOP/III 10/94 10	10/01/94	702	0	0
249	KITCHEN AID DISPOSAL/III 10/94	10/01/94	206	0	0
250	BLT IN OVEN/EC HS 10/94 10	10/04/94	338	0	0
251	GIBSON UPRIGHT FRZR III 11/94	11/15/94	800	0	0
252	GIBSON CHEST FRZR III 11/94	11/15/94	680	0	0
253	ADMIRAL FRIGE III 11/94	11/15/94	660	0	0
254	ADMIRAL FRIGE III 11/94	11/15/94	660	0	0
255	CRANBERRY RECLINER III 11/94	11/15/94	335	0	0
256	CRANBERRY RECLINER III 11/94	11/15/94	335	0	0
257	WATER HEATER III 11/94	11/15/94	180	0	0
258	PADDED FOLDING CHAIRS 12/94 1	12/01/94	921	0	0
259	COTTAGE III BUNK BEDS 12/94 10	12/30/94	1,100	0	0
260	Pioneer Stereo V 1/94 6	1/25/95	599	0	0
261	OFFICE CHAIR/JL 1/94 6	1/31/95	250	0	0
262	COTT II VCR/DON/MULESHOE 2/95	2/01/95	323	0	0
263	TV ZENITH SEQ I 3/95	2/24/95	750	0	0
264	VCR ZENITH COTTAGE I 3/95	2/24/95	323	0	0
265	WHIRLPOOL OVEN 01 5/95 6	5/15/95	825	0	0
266	WHIRLPL DNRFT COOKTOP 0 5/95 6	5/15/95	370	0	0
267	WINDSOR VACUUM 01/IN 2 5/95 6	5/15/95	487	0	0
268	KENMORE VAC/SHMPR DON 5/95 6	5/15/95	225	0	0
269	KA DISHWASHER HPD 12/95 5/95	5/15/95	635	0	0
270	COTTAGE I BLINDS 5/95 10	5/15/95	1,000	0	0
271	GIBSON UPRIGHT FRZR/01 7/95 6	7/15/95	470	0	0
272	ADMIRAL FRIGE/01 7/95 6	7/15/95	590	0	0
273	ADMIRAL FRIGE/01 07/95 6	7/15/95	590	0	0
274	6 METAL TWIN HEAD BRDS/01 7/95	7/15/95	240	0	0
275	4 FULL/TWIN BUNK BED SETS 7/95	7/15/95	1,567	0	0
276	HEAT PUMP/SITTING ROOM OFFICE	7/15/95	828	0	0
277	ADMIRAL CHEST FREEZER/01 8/95	8/15/95	500	0	0
278	BED FRAMES (6) 01 8/95	8/15/95	216	0	0
279	5 END TABLES/DONATED 10/95	10/15/95	1,250	0	0
280	2 KING MATTRESSES/DONATED/10/95	10/15/95	1,400	0	0
281	YOUTH CENTER TABLES 10/95	10/15/95	524	0	0
282	CROSLEY FREEZERS 20/ IV 11/95	11/01/95	1,320	0	0
283	FURNACE/FRENCH 11/95 10	11/01/95	1,050	0	0

85-6018576

**Future Depreciation Report****FYE: 6/30/16**

FYE: 6/30/2015

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Tax	AMT
284	BLT IN OVEN IV 12/95 10	12/15/95	835	0	0
285	DNRFT COOKTOP IV 12/95 10	12/15/95	374	0	0
286	WP DISHWASHER IV 12/95 10	12/15/95	412	0	0
287	WP BLT IN OVEN II 1/96	1/15/96	853	0	0
288	GE RANGE FARM DUPLEX 1/96	1/15/96	500	0	0
289	GE RANGE HP DUPLEX 1/96	1/15/96	500	0	0
290	WP DNRFT CKTP II 1/96	1/15/96	385	0	0
291	WP DISHWASHER II 1/96	1/15/96	385	0	0
292	WP DISHWASHER I(I TO HPD) 1/96	1/15/96	486	0	0
293	WP DISHWASHER FARM DUPLEX 1/96	1/15/96	451	0	0
294	TOP MOUNT REFRIGERATOR IV 1/96	1/15/96	590	0	0
295	REFRIGERATOR IV 1/96	1/15/96	590	0	0
296	GRN/WINE/CREAM SOFA IV 1/96	1/15/96	440	0	0
297	GRN/WINE/CREAM CHAIR IV 1/96	1/15/96	243	0	0
298	GRN/WINE/CREAM LVSEAT IV 1/96	1/15/96	351	0	0
299	4 BUNKBED SETS W/FULL IV 1/96	1/15/96	896	0	0
300	FINAL PMT ON COOKTOP	2/15/96	99	0	0
301	COOK TOP II 2/96	2/15/96	395	0	0
302	LZ BOY RECLINER 02 02/96	2/15/96	279	0	0
303	LZ BOY RECLINER 02 02/96	2/15/96	279	0	0
304	BLINDS COTTAGE II 02/96	2/15/96	350	0	0
305	(2) AIR CURTAINS/TORRES 7/96	7/15/96	2,080	0	0
306	BUNK BED W/MAT FL/HLF(4) 10/96	10/15/96	1,811	0	0
307	CONCESSION STAND WTR HTR 11/96	11/15/96	241	0	0
308	SEARS ICEMAKER VI 4/97	2/01/97	1,019	0	0
309	MICROWAVES (2) VI 4/97	4/15/97	562	0	0
310	DOWN DRAFT COOKTOP VI 4/97	4/15/97	644	0	0
311	WP DISHWASHER VI 4/97	4/15/97	388	0	0
312	MAYTAG WASHERS (2) VI 5/97	5/15/97	947	0	0
313	MAYTAG DRYERS (2) VI 5/97	5/15/97	853	0	0
314	GE ICE MAKER/BALLFIELD 5/97	5/15/97	200	0	0
315	VERSAMATIC VACUUM VI 5/97	5/15/97	487	0	0
316	COTTAGE VI FRIGE 5/97	5/15/97	160	0	0
317	CROSELY TV VI 5/97	5/15/97	490	0	0
318	SOUND SYSTEM VI 5/97	5/15/97	1,042	0	0
319	CROSELY VCR VI 5/97	5/15/97	240	0	0
320	FIREPLACE SCREEN/ACCS VI 5/97	5/15/97	234	0	0
321	GREEN/MAROON MULTI SOFA VI 5/97	5/15/97	680	0	0
322	DRK GRN VELVET CHAIR VI 5/97	5/15/97	202	0	0
323	4 BUNK BED FRAMES VI 5/97	5/15/97	608	0	0
324	QUEEN FRM/SPRNG/MATT SET VI 97	5/15/97	290	0	0
325	TWIN MATT/SPRNG SETS (12) 5/97	5/15/97	720	0	0
326	FULL MATTRESS SET VI 5/97	5/15/97	298	0	0
327	TWIN ADJUSTABLE FRMS(4) 5/97	5/15/97	100	0	0
328	18 DINING CHAIRS VI 5/97	5/15/97	756	0	0
329	BLINDS VI 5/97	5/15/97	1,500	0	0
330	TRADE-IN/UPGRADE WASHER 6/97	6/01/97	28	0	0
331	GE 25' CHEST FREEZER VI 6/97	6/01/97	518	0	0
332	GE UPRIGHT FREEZER VI 06/97	6/01/97	629	0	0
333	(2) REFRIGERATORS VI 06/97	6/01/97	1,867	0	0
334	TWIN BED HEADBOARDS VI 7/97	7/01/97	100	0	0
335	TWO MAYTAG WASHERS I 1/98	1/15/98	1,080	0	0
336	MAYTAG STOVE CC HS 1/98	1/15/98	550	0	0
337	MAYTAG DISHWASHER CC HS 1/98	1/15/98	430	0	0
338	AC/HEATER NW CORNER OFC 1/98	1/15/98	840	0	0
339	BLINDS II 1/98	1/15/98	1,600	0	0
340	BLUE/TAN/RED LVSEAT 02/98	2/15/98	600	0	0
341	BLUE/TAN/RED LVSEAT 02/98	2/15/98	559	0	0
342	REFRIGERATOR CROSELY 09/98	9/15/98	700	0	0
343	32 INCH TV FOR YC/MOVED TO II	1/01/99	800	0	0
344	QUILTER DISCOUNT/NONCASH DON	8/01/99	1,702	0	0
345	QUILTER EMBROIDERY MACHINE	8/19/99	1,999	0	0
346	DINING TABLE/CHAIRS FR 10/99	10/01/99	1,194	0	0
347	MAYTAG WASHER/FR 12/99	12/01/99	500	0	0
348	MAYTAG DRYER/FR 12/99	12/01/99	450	0	0
349	CROSELY RANGE/FR 12/99	12/01/99	648	0	0
350	CROSELY 20FT FREEZER/FR	12/01/99	650	0	0
351	MAYTAG WASHER	1/01/00	530	0	0
352	MAYTAG DRYER FRENCH 01/00	1/01/00	478	0	0
353	U-LINE ICEMAKERS (2) 01/00 VAR	1/01/00	1,294	0	0
354	U-LINE ICEMAKER FRENCH 01/00	1/01/00	647	0	0

85-6018576

**Future Depreciation Report****FYE: 6/30/16**

FYE: 6/30/2015

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Tax	AMT
355	COMMISSARY FRZR COMPRSR 1/00	1/01/00	2,236	0	0
356	OAK DINING CHAIRS 2/00	2/01/00	4,320	0	0
357	GRILL PROJECT 3/00	3/01/00	1,053	0	0
358	BF REGRIGERATOR S/P DUPLEX NE	9/27/00	513	0	0
359	BF SOFA/LOVESEAT COTTAGE I	9/30/00	998	0	0
360	BF 2 LAZYBOY RECLINERS V	10/31/00	928	0	0
361	BF METAL FOLDING CHAIRS MBNA	12/31/00	1,548	0	0
362	BF ICE MAKER AMHOTEL TEAGUE	2/20/01	675	0	0
363	BF ICE MAKER II AMHOTEL	2/20/01	675	0	0
364	BF ICE MAKER III AMHOTEL	2/20/01	675	0	0
365	3 PIECE SOFA LOVESEAT 02/01	2/28/01	945	0	0
366	3 TRANE SYSTEMS/OFFICE 04/2001	4/11/01	12,193	0	0
367	BF A/C FOR FOSHEE APT	5/31/01	1,727	0	0
368	SOFA/LSEAT/RCLNR COTT IV 6/01	6/16/01	1,525	0	0
369	TRANE COTTAGE V 07/01	7/05/01	10,812	0	0
370	COTTAGE V BLIND REPLACE 07/01	7/05/01	750	0	0
371	CHAIR/OTTOMAN TEAGUE COTT 08/01	8/15/01	533	0	0
372	TEAGUE 62" SOFA 09/01	9/01/01	930	0	0
373	TEAGUE/2 ROCKER RECLINERS 9/01	9/01/01	1,130	0	0
374	TEAGUE TABLE/CHAIRS 09/01	9/01/01	3,952	0	0
375	BLINDS FOR TEAGUE COTT 09/01	9/01/01	2,550	0	0
376	ENT CNTR TEAGUE 09/01	9/12/01	1,564	0	0
377	TEAGUE 42" LOVESEAT 09/01	9/12/01	852	0	0
378	STOVE TOP FOR TEAGUE COTTAGE	11/01/01	754	0	0
379	W/P 30" DOUBLE OVEN	11/01/01	917	0	0
380	W/P REFRIGERATORS FOR TEAGUE	11/01/01	1,028	0	0
381	ROCKER FOR COTTAGE I 11/01	12/18/01	519	0	0
382	YOUTH CENTER FURNACE 01/2002	1/01/02	1,139	0	0
383	GRAY FOLDING TABLES (20) 3/02	3/15/02	4,000	0	0
384	SOFA/LOVESEAT PLUM PLAID VI	4/01/02	1,168	0	0
385	U-LINE ICEMAKER COTT I 07/02	7/15/02	670	0	0
386	HP DUPLEX QUEEN MATTRESS 10/02	10/01/02	700	0	0
387	YC ICE MAKER MANITOWAC 10/2002	10/01/02	3,524	0	0
388	MAPLE FURN/NMCCH CMPS 12/02	12/01/02	1,000	0	0
389	3PAVILION PICNIC TABLES 2003	4/20/03	1,908	0	0
390	HEAT PUMP COTTAGE II 05/2003	5/01/03	6,333	0	0
392	HEAT PUMP COTTAGE IV 05/2003	5/01/03	6,333	0	0
393	FLORAL SOFA/LVST BARKER 03	7/15/03	1,000	0	0
394	U LINE ICEMAKER COTT 04	8/15/03	724	0	0
395	WATER HEATER I 2004	2/16/04	2,432	0	0
396	YOUTH CENTER TABLES	7/01/04	2,539	0	0
397	GYM SOUND SYSTEM	10/01/04	7,704	0	0
398	LOVESEATS FOR GARDEN OF HONOR	10/01/04	1,300	0	0
399	CHAIRS CONFERENCE CENTER/GYM	10/01/04	3,532	0	0
400	VACUUM HALL OF HONOR 11/04	11/01/04	691	0	0
401	HEAT PUMP IV 11/2004	11/01/04	3,426	0	0
402	HALL OF HONOR BRONZE STATUE	11/01/04	1,250	0	0
403	WATER HEATER 07/2005	7/01/05	3,123	0	0
404	HEAT PUMP COTTAGE I 10/2005	10/01/05	4,435	222	0
405	W/P DOUBLE OVEN VI 01/2006	1/15/06	1,200	60	0
406	HEAT PUMP 06/2007 APT 5	6/15/07	5,407	540	0
407	HEAT PUMP APT 6 6/2007	6/15/07	5,407	540	0
408	HEAT PUMP APT 7 6/2007	6/15/07	5,407	540	0
409	APARTMENT 1 HEAT PUMP 07/2007	7/10/07	5,207	520	0
410	APARTMENT 2 HT PUMP 7/2008	7/10/07	5,407	540	0
411	APT 3 HEAT PUMP 7/2007	7/10/07	5,135	514	0
412	APT 4 HEAT PUMP 7/2007	7/10/07	5,135	514	0
413	HEAT PUMP/TR HS	7/15/07	5,753	576	0
414	HEAT PUMP MILLER HOUSE	10/15/07	6,407	641	0
415	WAHLMAN APT 5 HEATPUMP 10/08	1/01/08	4,172	0	0
416	TAPPAN HEATING/COOLING EC 5/08	5/15/08	5,767	0	0
417	HP DUPLEX TAPPAN HT/COOL 5/08	5/15/08	4,843	0	0
418	CC HS HEAT PUMP	6/01/08	3,777	0	0
419	WAHLMAN APT 1 HEATPUMP 10/08	10/01/08	4,172	0	0
420	WAHLMAN APT 2 HEATPUMP 10/08	10/01/08	4,172	0	0
421	KLEIN SECURITY COTT01 12/2008	12/15/08	5,121	0	0
422	KLEIN SECURITY COTT02 12/2008	12/15/08	6,357	0	0
423	KLEIN SECURITY COTT03 12/2008	12/15/08	5,121	0	0
424	KLEIN SECURITY COTT04 12/200	12/15/08	5,121	0	0
425	KLEIN SECURITY COTT05 12/200	12/15/08	6,563	0	0
426	KLEIN SECURITY COTT06 12/200	12/15/08	6,563	0	0

85-6018576

**Future Depreciation Report****FYE: 6/30/16**

FYE: 6/30/2015

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Tax	AMT
427	KLEIN SECURITY COTT FR 12/20	12/15/08	4,337	0	0
428	KLEIN SECURITY COTT TG 12/20	12/15/08	6,563	0	0
429	ILQ HEATER	12/15/08	2,250	0	0
430	WAHLMAN APT 3 HEAT PUMP	12/15/08	4,172	0	0
431	WAHLMAN APT #4 HEAT PUMP	12/15/08	4,172	0	0
432	WAHLMAN APT #6 HEAT PUMP	12/15/08	4,172	0	0
433	PLAYGROUND TUNNEL 7/08	2/03/09	2,849	285	0
434	HEAT PUMPS (2) COTT 01 5/2009	5/15/09	4,079	0	0
435	CAMPUS MEDIAN AREA	1/01/60	1,800	0	0
436	CAMPUS PAVEMENT PRE 1986	1/01/80	19,846	0	0
437	PAVING COST TO 6/83	6/01/83	29,062	586	0
438	WATER/SEWER LINE PRE 86	1/01/86	2,823	0	0
439	GAS LINES 1986	3/30/86	4,826	0	0
440	COTTAGE FENCES 1987	1/01/87	566	0	0
441	MEDIAN REMODEL 1990	6/30/90	2,137	0	0
442	SEWER LINES/CAMPUS 1990	6/30/90	1,543	0	0
443	GAS LINE/FRENCH 1991	10/30/91	3,402	85	0
444	GAS LINE/TERRY HOUSE 1991	10/30/91	3,212	80	0
445	3 HP PUMP/STORAGE	3/01/92	409	0	0
446	UNDERGRND/ELECTRICAL LNS 11/92	11/30/92	2,853	0	0
447	CAMPUS GAS LINES 11/92	11/30/92	5,528	0	0
448	DUPLEX 3 FENCE 4/93	4/23/93	1,234	0	0
449	DUPLEX 4 FENCE 4/93	4/23/93	1,234	0	0
450	CAMPUS CURBING/STVNS 6/93	6/01/93	7,794	0	0
451	DUPLEX YARDS 08/93	8/30/93	2,023	0	0
452	LAKE HOUSE WELL 12/93 15	12/31/93	2,613	0	0
453	COTTAGE V IRRIGATION LINE 2/94	2/28/94	1,020	0	0
454	IRRIGATION LNS/COTTAGE V 3/94	3/31/94	3,776	0	0
455	COMMISSARY/VOC PAVEMENT 4/94	4/01/94	12,322	0	0
456	COTTAGE V WATERLINE 4/94	4/30/94	180	0	0
457	DUPLEX PAVEMENT 5/94 15	5/15/94	26,107	0	0
458	1.5 FR HS WELL/PUMP 6/94 10	6/15/94	374	0	0
459	COTTAGE V FENCE 8/94 7	8/12/94	1,928	0	0
460	COTTAGE V LANDSCAPING 8/94 7	8/30/94	1,728	0	0
461	COTTAGE V SPRINKLER SYS8/94 15	8/30/94	3,244	0	0
462	COTTAGE V PAVEMENT 2/95 15	1/31/95	21,082	0	0
463	CAMPUS PAVEMENT UPGRADE 2/95	1/31/95	30,995	0	0
464	BASKETBALL COURT/FRENCH 11/95	11/01/95	1,766	0	0
465	HP/FARM DUPLEX DIRVEWAY 05/96	5/15/96	3,553	0	0
466	PURCHASE 24 TREES	2/15/97	1,852	62	0
467	COTTAGE V GAS LINE	4/01/97	875	0	0
468	CAMPUS/TREE LINES 4/97	4/15/97	25,998	0	0
469	IMPROVING TREES 8/97	7/01/97	700	18	0
470	COTTAGE VI FENCE 8/97	8/01/97	2,189	0	0
471	CAMPUS TREE PROJECT 9/97	9/30/97	3,805	0	0
472	JUNIPER TREES/CAMPUS 9/97	9/30/97	500	0	0
473	FENCE & LIGHTS/BALLFIELD 9/97	9/30/97	52,722	0	0
474	DRIP LINES/TREES 9/97	9/30/97	56	0	0
475	SPRINKLER/BALLFIELD 09/97	9/30/97	1,277	0	0
476	WELL AT COTTAGE VI 9/97	9/30/97	1,315	0	0
477	COTTAGE V MEDIAN 12/97	12/01/97	3,050	0	0
478	COTTAGE VI LANDSCAPING 12/97	12/01/97	3,879	0	0
479	COTTAGE VI MEDIAN 12/97	12/01/97	2,731	0	0
480	COTTAGE VI DRIVEWAY 12/97	12/01/97	5,817	0	0
481	REPAIR ON VI WELL 12/97	12/01/97	1,487	0	0
482	LIGHTS/SIGN FINAL BB FL 9/98	9/01/98	6,052	0	0
483	HP DUPLEX FENCE 9/30	9/01/98	4,602	0	0
484	DUPLEX 5 WELL HOUSE LINES 9/98	9/01/98	1,499	0	0
485	CAMPUS INCENERATOR 12/97	12/01/98	1,692	0	0
486	BALLFIELD BLEACHERS 12/98	12/01/98	4,600	0	0
487	BASEBALL FIELD 12/97	12/01/98	2,428	81	0
488	CAMPUS PAVEMENT PATCHES 3/99	3/15/99	3,875	0	0
489	YARD/DR PREP TEAGUE COT12/01	12/15/01	12,685	0	0
490	TEAGUE YARD EXP CLOSE 12/02	12/01/02	2,830	0	0
491	TEAGUE FENCE CLOSED 12/02	12/01/02	8,994	0	0
492	REPAIR COTTAGE VI WELL	4/01/03	1,495	0	0
493	WELL AT LAKE HOUSE 11/04	11/01/04	1,000	0	0
494	REPLACEMENT PLAYGROUND PUMP	3/01/05	1,934	0	0
495	WELL/PUMP V	4/26/05	1,048	0	0
496	MONITORING WELLS	6/15/05	4,830	0	0
497	1/2 HP PMPS/MONITORING WELLS	6/30/05	2,248	0	0

85-6018576

**Future Depreciation Report****FYE: 6/30/16**

FYE: 6/30/2015

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Tax	AMT
498	3 HP BEHIND COTTAGE1/DOG HS	5/15/09	1,147	115	0
499	5 HP PUMP REPLACEMENT VI	6/15/09	3,031	303	0
500	TERRY FARM HOUSE	1/01/53	9,500	0	0
501	PLUMBING UPDATE TERRY HOUSE	1/01/74	1,230	0	0
502	TERRY HOUSE REMODEL '80	6/01/80	10,646	0	0
503	TERRY HOUSE ADDITION '81	5/01/81	1,414	0	0
504	VOCATIONAL SHOP TO '83	6/01/83	15,897	0	0
505	TERRY HOUSE REMODEL '85	6/01/85	32,366	0	0
506	VOCATIONAL AG/SHOP TO '83	6/01/86	24,132	524	0
507	VOCATIONAL SHOP REMODEL '86	6/01/86	3,792	0	0
508	VOCATIONAL SHOP REMODEL '92	6/30/92	33,638	841	0
509	TERRY HOUSE CARPORT 12/92	12/31/92	13,002	325	0
510	EXTEND SHOP FLOOR 12/99	12/01/99	6,204	207	0
511	FF NEW CARPET POYNORS 6/01	6/30/01	2,695	0	0
512	REMODEL/REPLACE ROOF 11/02	11/01/02	4,950	123	0
513	MILLER PLACE BARN	5/15/04	15,428	0	0
514	AG SHOP SEPTIC TANK	1/01/09	1,430	95	0
515	SCRAPER '75 ITC 1295	7/01/75	278	0	0
516	AIR IMPACT WRENCH '78 ITC17.01	7/01/78	255	0	0
517	SEARS ELECTRIC WELDER 1980	1/01/80	250	0	0
518	WIRE ROLLER 1985	1/01/85	300	0	0
519	MULCHER SHANKS 1987	1/01/87	700	0	0
520	MTL GRAIN/PKUP/FLTBED TRAILERS	1/01/87	770	0	0
521	20' TANDEM DISK 1988	1/01/88	1,530	0	0
522	14' OFFSET DISK 1988	1/01/88	2,530	0	0
523	BLADE COLTER AND LIFT 1989	1/01/89	650	0	0
524	3 7 MULCHERS 1989	1/01/89	1,488	0	0
525	CUTOFF SAW VICE AND MIXER 1989	1/01/89	550	0	0
526	BOBCAT WELDER 1989	1/01/89	2,000	0	0
527	NURSETANK DONATED 1983	1/01/89	3,200	0	0
528	TOOLBAR AND SHANKS 1990	1/01/90	2,500	0	0
529	8 - 6 ROW PLANTER	1/01/90	2,000	0	0
530	TOOLBOX 1990	1/01/90	690	0	0
531	2 INCH IRRIGATION PIPE 1990	1/01/90	1,860	0	0
532	AIR COMPRESSOR 1991	1/01/91	1,695	0	0
533	WYLIE 500 GAL SPRAYER '92	3/31/92	4,040	0	0
534	DIESEL TANK/DONATED '92	5/31/92	750	0	0
535	VIC/ACETELLEN TORCH '92	7/01/92	430	0	0
536	MILLER DIALARC 250 WELDER '92	7/01/92	860	0	0
537	JET POWER WASHER '92	7/01/92	2,275	0	0
538	WELDER/VOAG 1992	7/01/92	2,070	0	0
539	12 VOLT SPRAYER 1983	1/01/93	400	0	0
540	BIG OX DEEP RIPPER 02/93	2/03/93	1,800	0	0
541	POST HOLE DIGGER 02/93	2/24/93	601	0	0
542	LATERAL SPRINKLER MOTOR 3/93	3/05/93	305	0	0
543	HYDRAULIC FLOOR JACK 12/93 10	12/13/93	757	0	0
544	GUIDE WHEELS 05/94 10	5/14/94	496	0	0
545	Flex King Rod Weeder 1/94 10	1/17/95	2,000	0	0
546	COMPRESSOR/DONATED VAUGHN 6/96	6/01/96	700	0	0
547	6 ROW WHEAT DRILL 9/96 JN DEER	9/15/96	4,500	0	0
548	PRESS WHEELS/WHEAT DRILL 9/96	9/15/96	2,771	0	0
549	SCHAFFER OFFSET DISK PLOW 12/98	12/15/98	1,500	0	0
550	ROLLA CONE DONATED 10/99	10/01/99	1,500	0	0
551	SPREADER F4095 01/00	1/01/00	4,128	0	0
552	25' EQUIPMENT TRAILER	1/15/03	4,700	0	0
553	1/4 MI SIDEROLL MLR 5/2004	5/15/04	1,741	0	0
554	DRILL PRESS 4/2005	4/12/05	1,125	0	0
555	BUSH HOG SHREDDER	11/01/06	7,350	0	0
556	TERRY FARM HOUSE OVEN '92	7/01/92	575	0	0
557	DOMESTIC WELL/DC 1974	1/01/74	500	0	0
558	UNDRGRND PIPE 1975	1/01/75	2,000	0	0
559	TERRY IRRIGATION WELL 1975	1/01/75	1,625	0	0
560	TERRY UNDRGRND PIPE 1977	1/01/77	524	0	0
561	FENCE ITC 104.5H '85	7/01/85	1,045	0	0
562	HOME PLACE FENCE 1986/1987	1/01/87	1,566	0	0
563	PUMP REPLACED #13 1987	1/01/87	349	0	0
564	TERRY DOMESTIC WELL	1/01/87	500	0	0
565	IRRIGATION WELLS 1976	1/01/87	3,750	0	0
566	FRENCH FENCE 1988	1/01/88	2,333	0	0
567	WILLIAMS UNDRGRND 1990	1/01/88	7,931	0	0
568	METERS & INSTALLATION 1988 WM	1/01/88	1,409	0	0

Asset	Description	Date In Service	Cost	Tax	AMT
569	FENCE /FRENCH '90	6/30/90	1,137	0	0
570	WILLIAMS UNDRGRND 1991	1/01/91	5,500	0	0
571	WELL #1/WILLIAMS 01/93	1/14/93	3,121	0	0
572	WELL #2/WILLIAMS 01/93	1/14/93	3,121	0	0
573	WELL #3/WILLIAMS 01/93	1/14/93	3,121	0	0
574	WELL #4/WILLIAMS 01/93	1/14/93	3,121	0	0
575	7 1/2 HP SUB/HM PL 9/93 10	9/20/93	1,433	0	0
576	UNDERGROUND PIPE/TERRY 2/94	2/28/94	1,907	0	0
577	5 HP PUMP/MTR N OF DUP 3/94 10	3/10/94	2,137	0	0
578	10 HP SUB MOTOR/WM 3/28 10	3/28/94	1,163	0	0
579	COMPLETION UNDERGRND/TR 3/94	3/31/94	8,654	0	0
580	UNDERGROUND LINE TERRY 4/94	4/30/94	257	0	0
581	CIRCLE SPRINKLER SYS WM 11/94	11/01/94	30,978	0	0
582	DICTION DOMESTIC UPGRADE 9/98	9/01/98	700	0	0
583	1/2 HP SUB PUMP 1/99	1/25/99	593	0	0
584	3 HP PUMP/BULA	4/01/00	1,892	0	0
585	2 HP 4 INCH PUMP/MOTOR BULA	6/01/00	1,163	0	0
586	FF PUMP FOR FRENCH FARM WELL	2/28/01	545	0	0
587	FINAL PAYMENT ON SPRINKLER /HM	3/01/02	4,287	286	0
588	CIRCLE SPRINKLER HM 03/2002	3/18/02	30,000	2,000	0
589	7 1/2 HP SUB WM #4 06/2002	6/15/02	2,522	0	0
590	7 1/2 HP SUBMERSIBLE WM 6/02	6/15/02	2,501	0	0
591	5 HP SUB N OF TERRY PLC 06/02	6/15/02	1,022	0	0
592	WILLIAMS FEED YARD FENCE 08/02	8/01/02	7,178	0	0
593	COMPLETE WILLIAMS FENCE 2004	2/16/04	1,813	0	0
594	1/4 MI UNDERGROUND MLR 5/2004	5/15/04	2,332	0	0
595	MILLER PLACE PUMPS/WELLS	5/15/04	4,342	0	0
596	5 HP SUB PUMP 3 PHASE	10/12/05	2,503	126	0
597	ADDITIONAL CHARGES/PUMP #1 WM	12/01/05	233	11	0
598	TEAGUE PORTION/TERRY FENCE6/06	9/30/06	3,502	0	0
599	5 HP WILLIAMS #4 RPLCMNT4/2007	4/01/07	3,279	328	0
600	REPLACING MILLER PUMP	10/01/08	4,419	441	0
601	1194 CASE TRACTOR 1988	1/01/88	12,500	0	0
602	4455 JOHN DEER 1991	1/01/91	64,588	0	0
603	J.D. 4455 MFWD 01/00	1/01/00	45,000	0	0
604	99 FORD F250 SUPER DUTY PU	4/27/01	19,900	0	0
605	78 FORD RANCHERO 06/2009	5/15/09	1,500	0	0
606	JD RIDING MOWER 1984	1/01/84	3,000	0	0
607	TABLE SAW DONATED 1988	1/01/88	500	0	0
608	STIHL CHAIN SAW 1989	1/01/89	221	0	0
609	TORO LAWN MOWER 1990	1/01/90	540	0	0
610	1/2 SUBPUM FRENCH 1991	1/01/91	651	0	0
611	NAILER 1991	1/01/91	351	0	0
612	STUDIO MASTER MIXER/AMP 1992	1/01/92	1,495	0	0
613	SWANSON/22 WIRELESS MIC 1992	1/01/92	580	0	0
614	LECTURN 1992	1/01/92	335	0	0
615	RADIAL ARM SAW/VOC 1992	3/31/92	400	0	0
616	VIC/ACCETELENE TORCH/VOC 1992	4/30/92	430	0	0
617	AIR COMPRESSOR/VO 1992	4/30/92	1,025	0	0
618	AIR LIFT/VOC 1992	4/30/92	679	0	0
619	PORTABLE POWER PUMP/VO 1992	4/30/92	652	0	0
620	BAND SAW/VOCATIONAL BLDG 92	7/01/92	349	0	0
621	BACK BOARDS 7/92 BECKLEY CARDY	7/01/92	1,307	0	0
622	BACK BOARD/FLAG HS 07/1992	7/29/92	1,713	0	0
623	NAIL GUN 07/1992	7/31/92	560	0	0
624	TRAINER STATION 08/92	8/30/92	7,339	0	0
625	70 AMP BOGEN YC 10/92	10/30/92	450	0	0
626	PING PONG/YC/LADIES ASSOC11/92	11/30/92	384	0	0
627	ROTOTILLER 5/93 POYNORS	5/30/93	600	0	0
628	JOHN DEERE LAWN MOWER 5/93 DON	5/31/93	1,500	0	0
629	TWO CYCLE MOWER 07/93	7/30/93	532	0	0
630	718 GRASSHOPPER MOWER 9/93	9/30/93	6,000	0	0
631	PICNIC TABLES 9/93 10YRS	9/30/93	428	0	0
632	CHAIN SAW/POYNORS 10/93 6	10/30/93	265	0	0
633	WELCOME MATS/YTH CNTR 11/93 10	11/30/93	1,135	0	0
634	TITAN EPIC AIRLESS SP 7/94 6	7/01/94	899	0	0
635	BOSCH HAMMER/GARY FIELDS 9/94	9/02/94	702	0	0
636	TON AND A HALF PU TRLR 11/94	11/15/94	1,000	0	0
637	SENCO NAIL GUN SN325 12/94 6	12/30/94	525	0	0
638	TIRE CHANGER/DNTD HAYDON 4/95	4/01/95	1,610	0	0
639	PINWELDER/HAYNIES 04/95	4/05/95	280	0	0

85-6018576

**Future Depreciation Report****FYE: 6/30/16**

FYE: 6/30/2015

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Tax	AMT
640	GF NAIL GUN/FIELDS 5/95 5	5/15/95	300	0	0
641	TORO LAWN MOWER PHDWE 8/95 10	8/15/95	905	0	0
642	TORO LAWN MOWER PHDWE 8/95 950	8/15/95	905	0	0
643	LAWN MOWER/MSTRCRFT 9/95 5	9/01/95	220	0	0
644	16' UTILITY TRAILER K&G 10/95	10/15/95	996	0	0
645	(4) SHURE MICS/YC 05/96	5/01/96	640	0	0
646	CEMENT MIXER ENGINE 5/96	5/15/96	1,172	0	0
647	6 X 10 CARGO TRAILER 5/96	5/15/96	2,243	0	0
648	POPCORN POPPER/BALLFIELD 5/96	6/12/96	381	0	0
649	3 1/2 HP 11 GAL COMPRESSOR7/96	7/15/96	262	0	0
650	SILVER FLUTE DONATED 9/96	9/15/96	200	0	0
651	BUNDY CLARINET DONATED 9/96	9/15/96	325	0	0
652	5' TANDEM/YARDS 09/96 10 YRS	9/17/96	425	0	0
653	BATTING MACHINE 7/97	7/01/97	1,692	0	0
654	SOFT TOSS MACHINE BALLFLD 7/97	7/01/97	424	0	0
655	72 INCH GRASSHOPPER MOWER 8/97	8/01/97	9,360	0	0
656	POPCORN MACHINE BALLFIELD 3/98	3/15/98	983	0	0
657	BALLFIELD SOUND SYSTEM 5/98	5/01/98	515	0	0
658	DR. TRIMMER/MOWER 06/98	7/15/98	894	0	0
659	CRFSTSMN RIDING MOWER W/TRLR98	7/15/98	1,700	0	0
660	SEARS GENERATOR 08/99	8/01/99	600	0	0
661	SEARS GENERATORS (5) 09/99	9/01/99	3,025	0	0
662	AIR COMPRESSOR 02/00	2/01/00	990	0	0
663	GATOR FOR CAMPUS 4/00	4/01/00	8,736	0	0
664	SPRAYER FOR GATOR 4/00	4/01/00	829	0	0
665	ROTOROOTER 05/00	5/01/00	1,785	0	0
666	CAR TOW DOLLIE	6/01/00	825	0	0
667	LIFT AND WHEEL BALANCER 08/01	8/31/01	2,500	0	0
668	AIR PURIFIER FOR CAMPUS	2/01/02	700	0	0
669	JD 660 ROTARY TILLER 04/02	4/01/02	1,250	0	0
670	TRAILER/BRUSH DONATED 05/02	5/15/02	1,200	0	0
671	3 HP PUMP DONATED/SIMS 6/02	6/15/02	1,200	0	0
672	WELDER FOR DAR 10/2002	10/01/02	2,440	0	0
673	MAINT/GRO TRAILER 01/03	1/15/03	4,625	0	0
675	HONDA POWER MOWER 5/2003	5/01/03	749	0	0
676	18' PJ TRAILER 03/2004	3/15/04	1,000	0	0
677	DIXON RIDING MOWER	11/17/06	2,500	0	0
678	FRONTIER RC SHREDDER 3/2007	3/01/07	1,340	0	0
680	LOEWEN HONEY WAGON	7/01/07	22,000	2,200	0
681	16' TRAILER/WADE DONATION	8/01/07	2,500	250	0
682	KAWASKAI STANDING MOWER 1/08	1/11/08	2,998	0	0
683	GATOR DONATED 4/2008	4/30/08	3,750	0	0
684	MOWER/STRATEGIC 10/08	10/10/08	1,052	0	0
685	1 1/2 HP PUMP CAMPUS 04/2009	4/01/09	1,466	146	0
686	HONDA 216 MWR 5/2009 STRTGC	5/01/09	1,053	0	0
687	PLAYGROUND EQUIPMENT 5/2009	5/15/09	18,809	1,881	0
688	MIP SOFTWARE '87	1/01/87	2,981	0	0
689	BROTHER WORD PROCESSOR 1990	1/01/90	311	0	0
690	FILING CABINET/COMPUTER DESK	1/01/90	261	0	0
691	MEDALIST PROJECTOR 1991	1/01/91	427	0	0
692	SEARS CAMCORDER/LA CAMERA	1/01/91	792	0	0
693	PROJECTOR W/ZOOM 1991M	7/01/91	1,540	0	0
694	NIMLOK TABLE TOP 1991	8/03/91	692	0	0
695	TRNS BAL CAMCORDER PF-GF 4/94	4/01/92	350	0	0
696	SYMPHONIC TV/VCR OFFICE 1992	6/30/92	380	0	0
697	SUBIA TABLE TOP DISPLAY 9/92	9/08/92	692	0	0
698	COMPUTER DESKS/QUILL 2 10/92	10/30/92	521	0	0
699	SHARP LASER PRINTER CK 1994	1/01/94	1,199	0	0
700	MICROFILM EQUIPMENT '86	1/01/94	1,850	0	0
701	DONOR SOFTWARE 1994	1/01/94	14,269	0	0
702	KROY LETTERING SYSTEM 3/94 6	3/30/94	420	0	0
703	TAMRON LENS/LADIES ASSOC8/94 6	8/10/94	275	0	0
704	USI FX-1200 LAMINATOR 12/94 5	12/30/94	400	0	0
705	IBM DISPLAY WRTR/DONATED10/95	10/15/95	250	0	0
706	EPSON STYLUS COLOR PRNTR CK	2/15/96	249	0	0
707	PAPER FOLDER/MARTIN YALE 3/98	3/15/98	500	0	0
709	WINDOWS SOFTWARE 7/98	7/15/98	550	0	0
710	CRESCENDO ANNUITY SFTWR 7/98	7/15/98	1,055	0	0
711	UPGRADE FOR SERVER/DONOR SSS	8/01/98	4,500	0	0
712	LABELER 11/98	11/15/98	4,653	0	0
713	UPGRADE NETWORK SYSTEM 12/98	12/15/98	999	0	0

85-6018576

**Future Depreciation Report****FYE: 6/30/16**

FYE: 6/30/2015

**Form 990, Page 1**

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
714	VIDEO DUPLICATING SYSTEM 12/98	12/15/98	512	0	0
715	UPGRADE TO NPS/WINDOWS 2/99	2/01/99	1,997	0	0
716	STYLUS PRINTER 5/99 PF/MALISA	5/01/99	655	0	0
717	MICROFISCHE READER 01/00	1/01/00	2,000	0	0
718	EIKI OVERHEAD W/TRIPOD 02/00	2/01/00	2,338	0	0
719	BALANCE ON PROJECTOR 2/00	2/01/00	2,338	0	0
720	APOLLO ODYSSEY OVRHD W/CART	2/01/00	521	0	0
721	ALLOCATION MODULE 02/00	2/01/00	1,602	0	0
722	CPU EMC 5001 C.K. 2000	3/01/00	628	0	0
723	LASERJET 4500 03/00	3/01/00	2,205	0	0
724	HP PAVILION COMPUTER 06/00	6/01/00	550	0	0
725	GF KT TABBER/STAND AND TABS	9/30/00	3,285	0	0
726	DELL DIMENSION 4100 /JACK 2002	1/29/01	1,291	0	0
727	THINKPAD 240X INTEL/Rod	2/28/01	1,445	0	0
728	WINBOOK ALPHATOP/CA 11/01	11/01/01	1,546	0	0
729	DIMENSION 4300S COMP/CA 12/01	12/05/01	1,109	0	0
730	OPTIPLEX DELL COMPUTER/JC	3/15/02	1,206	0	0
731	XEROX PRINTER 07/02 MAIN PRN	7/15/02	2,501	0	0
732	CREDIT CARD MACHINE 06/02	7/24/02	1,590	0	0
733	DELL DEMINISION/TOMMYE 09/2002	9/01/02	1,248	0	0
734	DONOR SERVER ATX 10/2002 UPG	10/01/02	1,300	0	0
735	DELL DEMINISION 2300/ROD	11/15/02	805	0	0
736	DELL DEMINISION 2300/V 11/02	11/15/02	955	0	0
737	PAPER CUTTER 12/02	12/31/02	650	0	0
738	INSPIRON 4150 05/2003 CK	5/03/03	1,599	0	0
739	InFOCUS PROJECTOR	8/15/03	2,380	0	0
740	DELL DEMENSION 2400 GF 12/03	12/15/03	696	0	0
741	DELL DEMINISION/RECEPTION 2/04	2/16/04	794	0	0
742	BANK REC/FORMS/SFTWR BKBP 2004	2/16/04	1,390	0	0
743	C5100n COLOR DIGITAL LED PRINT	4/22/04	663	0	0
744	INSPIRON LAPTOP 5160 11/04	11/30/04	1,119	0	0
746	AVAYA PHONE SYSTEM 02/2008	2/10/08	5,827	583	0
747	QUAD CORE COMPUTER/SERVER	10/01/08	1,108	0	0
748	CAMPUS WIDE WIRELESS 10/08	12/01/08	4,324	0	0
750	1990 FORD WANNABE WITH CMPR	1/01/94	10,856	0	0
751	1995 SLVR FRD VNIII GRNT 10/95	10/15/95	20,419	0	0
753	92 TOYOTA PICKUP 2/97	2/04/97	7,500	0	0
754	94 FORD RANGER PU 2/97	2/15/97	7,950	0	0
755	96 DODGE DAKOTA 3/97	3/06/97	15,950	0	0
759	83 FORD F-700 DUMP TRUCK	3/23/01	9,350	0	0
760	99 FORD RANGER XLT	3/15/02	9,700	0	0
761	850 JOHN DEERE GRDNTRCTR 04/02	4/01/02	4,900	0	0
763	2003 FORD CREW CAB DIESEL	7/15/03	31,100	0	0
764	2003 DODGE PU GF 2/2008	9/15/03	25,425	0	0
769	92 S10 PICKUP 07/2005	7/01/05	2,280	0	0
770	99 LINCOLN EXECUTIVE	3/01/06	4,000	0	0
771	2006 ECONOLINE SUPER	3/31/06	29,700	0	0
772	06 FORD E350 CLUBWAGON 12/06	12/11/06	18,821	0	0
773	06 CHEVY VAN 1246 04/2007	4/15/07	17,000	0	0
774	06 CHEVY VAN 8047 04/2007	4/15/07	18,821	0	0
775	96 CHEVY 1500	5/15/07	8,500	0	0
776	06 CHEVY VAN 0645 5/2007	5/15/07	18,821	0	0
777	06 CHEVY VAN 3573 5/2007	5/15/07	18,821	0	0
780	2006 EXPRESS VAN 0665	6/23/07	18,821	0	0
781	2005 DODGE VAN	8/01/07	9,250	0	0
784	2000 FORD CHATEAU 11/07	11/01/07	8,000	0	0
785	07 FRD STARCRAFT MINI B 01/08	1/15/08	47,820	0	0
786	2007 CHEVY VAN 3/2008 9465	3/15/08	18,512	0	0
787	2003 FORD WIDSTAR 5/2008	5/15/08	6,500	0	0
789	07 CHEVY SUBURBAN	5/27/08	32,900	0	0
790	97 CADILLAC DEVILLE	7/01/08	3,750	0	0
791	03 CHEVY SUBURBAN	9/01/08	10,245	0	0
792	04 MERCURY MONTERYVEY VAN	11/01/08	12,447	0	0
793	SHEEP BARN/FRENCH '81	2/01/81	5,753	0	0
794	LIVESTOCK COMPLEX '85	5/01/85	50,430	0	0
795	WELL HOUSE/WILLIAMS 01/03	1/01/93	320	0	0
796	HORSE BARN 3/96	3/01/96	937	0	0
797	SHOW PIG SHADE/EAST 5/99	5/31/99	5,052	0	0
798	SHOW LAMB SHADE/WEST 5/99	5/31/99	526	0	0
799	EXTENTION OF PIG SHADE	8/01/99	2,694	135	0
800	PAINT COMPLEX FENCES 12/02	12/01/02	3,500	0	0



Asset	Description	Date In Service	Cost	Tax	AMT
801	COMPLEX SEPTIC TANK 6/2004	6/15/04	800	53	0
802	COMPLETE SHEEP SHARE 2/08	2/15/08	20,682	517	0
803	HOG SCALES '79 ITC 25.59	7/01/79	384	0	0
804	FEEDER '81 ITC 60	7/01/81	600	0	0
805	GOOSENECK STK TRLR ITC465.H	7/01/83	4,650	0	0
806	SHEEP CLIPPERS STEWART 84	7/01/84	287	0	0
807	SIGN/COMPLEX '85 ITC 60.00 H	7/01/85	600	0	0
808	PANELS/OILERS	1/01/88	550	0	0
809	DONATED GOOSENECK 1988	1/01/88	275	0	0
810	SHEEP WOOL DRYER	1/01/90	275	0	0
811	BRANDING CHUTE '92	2/17/92	2,808	0	0
812	SHEEP CLIPPERS 4/92/LDS ASSOCI	4/30/92	435	0	0
813	CLUB LAMB PACER #760 4/95 5	4/15/95	1,423	0	0
814	SADLES (3) DONATED HAMILL 8/95	8/15/95	600	0	0
815	11' STOCK TANK/COMPLEX 1/96	1/15/96	289	0	0
816	EAGLE PLASMA CUTTER 02/01	2/28/01	1,287	0	0
817	FAIR ANIMAL SCALES 5/2003	5/01/03	1,100	0	0
818	CATTLE FEEDER	8/15/03	800	0	0
819	16x5 CM TRAILER 09/2005	9/28/05	5,131	128	0
820	LOADER PALLET FORK	3/01/09	1,100	110	0
821	GAS COOK TOP/LVSTK HOME 6/96	6/01/96	319	0	0
822	IMPROVMENT DICTSON FENCE 6/07	6/30/71	6,646	0	0
823	DICTSON IRRIGATION WELL	1/01/74	1,500	0	0
824	DICTSON (2) WELLS 1974	1/01/74	2,000	0	0
825	UNDRGRND PIPE/DC 1977	1/01/77	3,637	0	0
826	SPENCER FENCE 1980	1/01/80	1,793	0	0
827	DICTSON FENCE 1985	1/01/85	3,178	0	0
828	COMPLEX CORRALS AND IMP 1986	1/01/86	5,283	0	0
829	LIVESTOCK SHADES 1990/COMPLEX	1/01/90	7,926	0	0
831	COMPLEX SHEEP RUN 1991	1/01/91	1,050	0	0
832	DOMESTIC WELL/WILLIAMS 01/93	1/14/93	1,865	0	0
833	5 HP PUMP/DICTSON 10/93 10	10/30/93	873	0	0
834	FRENCH CORRALS COMPLETED 2/94	2/01/94	1,464	0	0
835	1.5 HP COMPLEX PUMP 3/94 10	3/07/94	696	0	0
836	.5 LVSTK WELL PMP/FR 6/94 10	6/15/94	267	0	0
837	FRENCH LVSTK WATER LN 7/94	7/30/94	1,582	0	0
838	WILLIAMS CORRALS 2/95 7	2/01/95	1,314	0	0
839	SPENCER CORRALS 2/95 7	2/01/95	1,581	0	0
840	CORRAL/ARENA TERRY CMLPX 6/00	6/01/00	3,460	0	0
841	MILLER PLACE LOT	6/17/04	2,176	0	0
842	DELL DEMENSION 2400 9/03 PF	9/15/03	699	0	0
843	COMPAQ PRESARIO 7/2004	7/01/04	608	0	0
845	2001 K15 SUBURBAN 02/2009	2/01/09	8,000	0	0
846	LAND	3/01/54	579,042	0	0
847	RENOVATION PROJECT	7/01/10	13,497	338	0
848	NONDEPRECIABLE ASSETS	6/30/07	22,601	0	0
849	CAMPUS PAVEMENT	6/30/08	35,157	3,515	0
850	SIREN	9/30/08	1,165	117	0
851	10 HP PUMP/WELL	7/31/09	6,274	628	0
852	WHIRLPOOL OVEN	6/21/10	1,465	146	0
853	300 W. 18TH SAVANNAH'S 09/2009	9/01/09	89,904	2,248	0
854	LAUNDREY ROOM/SAVANNAHS 2/2010	2/01/10	21,022	525	0
855	322 W. 18TH/STAFF HOUSING 5/10	5/15/10	137,995	3,450	0
856	HEAT PUMP APT 8 7/2009	7/15/09	5,185	0	0
857	HEAT PUMP COTT II 07/2009	7/15/09	2,032	0	0
858	HVAC SYSTEM	12/01/09	6,583	658	0
859	SCOTTSMAN ICE MAKER 1/2010	1/01/10	2,654	265	0
860	RPLCMNT HEAT PMP OFC 5/201	5/15/10	2,300	0	0
861	SAVANNAH'S FENCE 4/2010	4/13/10	5,812	581	0
862	FARM SHOP BATHROOM 07/2009	7/01/09	3,864	96	0
863	JOHN DEERE MOWER	9/01/09	2,700	0	0
864	PLAY W/PURPOSE 2/2010	2/01/10	14,501	1,450	0
865	HUSTLER MOWER RIDER	2/28/10	9,430	943	0
866	POWERHEART G3 4/2010	4/01/10	1,344	135	0
867	KAUFMAN PINTLE TRAILER 3/2010	4/01/10	6,227	0	0
869	DELL POWEREDGE/DONOR	4/01/10	3,115	0	0
873	03 FORD VAN	2/01/10	6,464	0	0
877	10 SILVERADO/FIRETRUCK 4/10	4/01/10	31,617	0	0
878	SKID STEER LOADER 12/2009	12/01/09	15,000	0	0
879	WORK/WELDING TRAILER 4/2010	6/12/10	3,500	0	0
880	01 LARIET F350 8/2009	8/09/09	17,000	0	0

85-6018576

**Future Depreciation Report****FYE: 6/30/16**

FYE: 6/30/2015

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Tax	AMT
881	08 RAV4 PF 2/2010	6/12/10	18,946	0	0
882	RENOVATION PROJECT ON 322 W. 18TH H	1/30/11	38,026	950	0
883	BLOCK FENCE AT 322 W. 18TH HOME	6/24/11	14,370	359	0
884	FIRE TRUCK GARAGE	2/22/11	37,155	929	0
886	FURNITURE FOR COTTAGES 2, 3, & 6	10/25/10	7,929	793	0
887	2006 FORD CROWN VICTORIA SEDAN 4D	8/30/10	11,500	383	0
888	2008 DODGE PICKUP	11/29/10	31,000	2,583	0
889	2007 CHEVROLET EXPRESS 15-PASSENGE]	3/29/11	16,500	2,475	0
891	CARPET FOR COTTAGE 5	6/06/11	12,300	1,230	0
893	2002 Chevy Suburban (C15)	3/29/12	6,000	1,200	0
894	1997 Ford 15 Passenger Van	2/17/12	1,767	353	0
895	1995 Ford 15 Passenger van	2/17/12	1,444	288	0
896	SHARP COPIER	10/03/11	9,572	1,367	0
897	CENTER HOUSE INTERIOR REMODEL	6/19/12	29,535	739	0
898	2 NEW HEAT PUMPS - COTTAGE 5	5/31/12	4,300	430	0
899	1 NEW HEAT PUMP - COTTAGE 5	6/30/12	2,371	237	0
900	NEW 5-TON HEAT PUMP - COTTAGE 4 (MII	6/22/12	3,195	319	0
901	NEW CARPET - EAST CAMPUS HOUSE	7/31/11	4,810	481	0
902	NEW SEPTIC TANK LINER AND LIDS	11/30/11	5,625	375	0
903	NEW CARPORT - 300 W. 18TH STREET	8/08/11	3,430	490	0
904	NEW MALARKY SHINGLES - BACHELOR'S	8/15/11	5,384	359	0
905	NEW MALARKY SHINGLES - COTTAGE 6	5/16/12	33,313	2,221	0
906	NEW MALARKY SHINGLES - COTTAGE 5	5/16/12	35,304	2,354	0
907	NEW PORCH - CENTER CAMPUS HOUSE	6/19/12	20,619	1,031	0
908	BALE ATTACHMENT FOR JD TRACTOR	9/30/11	1,293	258	0
909	NEW MALARKY SHINGLES - SINGLE PARE	5/17/12	27,830	1,855	0
910	HAY BARN	4/26/12	22,299	1,115	0
912	2005 Chevy Suburban	12/18/12	11,700	2,340	0
913	2002 GMC Yukon	7/09/12	7,475	1,495	0
914	2002 Ford Taurus	12/07/12	4,802	960	0
916	New Refrigerator - Cottage 1	3/07/13	1,249	179	0
917	New Refrigerator - Cottage 1	3/07/13	1,249	179	0
918	DOUBLE OVEN - TEAGUE	6/14/13	1,895	271	0
919	OFFICE RENOVATION (COTTAGE 2)	4/12/13	317,436	7,936	0
920	NEW WALL - STINE HOUSE	5/15/13	2,300	230	0
921	HAMILTON SPRINKLER SYSTEM	12/10/12	2,950	295	0
922	GAS FURNANCE - STINE HOUSE	1/29/13	3,017	302	0
923	ICE MAKER - LEVELAND	9/10/12	1,265	127	0
924	CARGO MATE TRAILER	4/08/13	5,000	500	0
925	COTTAGE 8 (LEVELAND)	11/17/12	860,420	21,510	0
926	APARTMENTS - STUART ADDITION	12/18/12	200,000	5,000	0
927	LAND FROM STUART ADDITION	12/18/12	200,000	0	0
930	R-22 HEAT PUMP - COTTAGE 3	5/31/13	2,963	423	0
931	Security System for Tech Building	1/09/14	1,044	149	0
932	Computer Network - Tech Building	1/20/14	6,240	624	0
933	Building Improvements: Technology Building	1/21/14	103,046	2,642	0
934	Building Improvements: Tech Building	11/12/13	74,500	1,910	0
935	Cell Phone Transmitter Project: Main Office	12/09/13	6,492	649	0
936	Cinder Block Wall: 322 W. 18th St.	8/31/13	1,767	118	0
937	Curb Construction: 322 W. 18th St.	4/15/14	8,502	566	0
938	New Water Heater: Cottage 1	1/20/14	3,300	471	0
939	Wall Oven: Cottage 5	1/20/14	1,699	243	0
940	Ice Maker: Cottage 3	1/20/14	1,874	268	0
941	Solar Feeder for Sheep	3/17/14	4,500	642	0
942	Solar Feeder for Sheep	3/17/14	4,500	642	0
944	2000 Chevy 20 Passenger Express	3/17/14	10,000	2,000	0
945	Texas Pride Electric Dump Trailer	6/05/14	6,850	685	0
946	Case 580 Backhoe	12/23/13	36,500	5,215	0
947	2001 Dodge Dakota	8/23/13	4,500	900	0
948	2007 Nissan Altima	9/06/13	11,500	1,150	0
949	2002 Ford F-150	9/06/13	8,000	1,600	0
950	1996 Oldsmobile Cutlass Cierra	8/07/13	2,000	400	0
951	Nuno Erin Sparkle Table	12/08/13	5,000	500	0
952	Stainless Steel Refrigerator	1/31/14	3,500	500	0
955	2001 Lincoln Towncar 4D	4/17/14	3,862	773	0
956	Heat Pump: Duplex #2	11/05/13	2,371	475	0
957	Office Telephone System	4/15/13	20,864	2,981	0
958	Carpet Cottage 6	7/16/14	8,101	810	0
959	A/C Unit Learning Center	6/17/15	4,400	880	0
960	Well at Williams Ranch	4/12/15	2,323	232	0
961	Gym Remodels - Gable	10/28/14	4,675	156	0

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
962	Gym Remodel - Underground Electric	11/02/14	4,560	152	0
963	Gym Remodel - Facia and Soffit	10/29/14	3,285	110	0
964	Lawn Mower	7/02/14	2,896	579	0
965	Mowers, Trimmers & Parts	6/16/15	2,061	412	0
966	Tire Balancing Machine	5/01/15	1,750	175	0
967	Livestock Compound Lights	9/03/14	1,812	61	0
968	Branson 3120R Compact Tractor	7/24/14	20,200	4,040	0
969	1972 Volkswagen Beetle - Donated	2/25/15	5,575	1,115	0
970	2002 GMC Yukon XL - Donated	4/16/15	3,250	650	0
971	2002 GMC Yukon XL - Donated	7/31/14	6,000	1,200	0
	<b>Total Other Depreciation</b>		<u>9,709,742</u>	<u>220,797</u>	<u>0</u>
	<b>Total ACRS and Other Depreciation</b>		<u>9,709,742</u>	<u>220,797</u>	<u>0</u>
<b>Listed Property:</b>					
943	2002 Ford Ecoline	8/31/13	3,500	700	0
			<u>3,500</u>	<u>700</u>	<u>0</u>
	<b>Grand Totals</b>		<u>9,713,242</u>	<u>221,497</u>	<u>0</u>

Form **990-W**  
 (Worksheet)  
 Department of the Treasury  
 Internal Revenue Service

**NEW MEXICO CHRISTIAN CHILDRENS HOME**  
**Estimated Tax on Unrelated Business Taxable**  
**Income for Tax-Exempt Organizations**  
 (and on Investment Income for Private Foundations)  
 (Keep for your records. Do not send to the Internal Revenue Service.)

OMB No. 1545-0976

**2015**

1	Unrelated business taxable income expected in the tax year	1	37,944
2	Tax on the amount on line 1. See instructions for tax computation	2	5,692
3	Alternative minimum tax (see instructions)	3	
4	Total. Add lines 2 and 3	4	5,692
5	Estimated tax credits (see instructions)	5	
6	Subtract line 5 from line 4	6	5,692
7	Other taxes (see instructions)	7	
8	Total. Add lines 6 and 7	8	5,692
9	Credit for federal tax paid on fuels (see instructions)	9	
10a	Subtract line 9 from line 8. <b>Note.</b> If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions	10a	5,692
b	Enter the tax shown on the 2014 return (see instructions). <b>Caution.</b> If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c	10b	5,692
c	<b>2015 Estimated Tax.</b> Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c	10c	5,692

		(a)	(b)	(c)	(d)	
11	Installment due dates (see instructions)	11	10/15/15	12/15/15	03/15/16	06/15/16
12	Required installments. Enter 25% of line 10c in columns (a) through (d) unless the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization" (see instructions)	12				5,700
13	2014 Overpayment (see instructions)	13				3,821
14	Payment due (Subtract line 13 from line 12)	14				1,879

For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2015)

Form **990****Two Year Comparison Report****2013 & 2014**For calendar year 2014, or tax year beginning **07/01/14**, ending **06/30/15**

Name

Taxpayer Identification Number

**NEW MEXICO CHRISTIAN CHILDRENS HOME****85-6018576**

		2013	2014	Differences
<b>Revenue</b>	1. Contributions, gifts, grants	2,733,074	3,688,319	955,245
	2. Membership dues and assessments			
	3. Government contributions and grants			
	4. Program service revenue	188,459	90,441	-98,018
	5. Investment income	682,289	738,890	56,601
	6. Proceeds from tax exempt bonds			
	7. Net gain or (loss) from sale of assets other than inventory	-8,655	-158,954	-150,299
	8. Net income or (loss) from fundraising events		1,685	1,685
	9. Net income or (loss) from gaming			
	10. Net gain or (loss) on sales of inventory	43,740	24,126	-19,614
	11. Other revenue	95,075	76,033	-19,042
	12. <b>Total revenue.</b> Add lines 1 through 11	<b>3,733,982</b>	<b>4,460,540</b>	<b>726,558</b>
<b>Expenses</b>	13. Grants and similar amounts paid		25,800	25,800
	14. Benefits paid to or for members			
	15. Compensation of officers, directors, trustees, etc.	75,850	76,351	501
	16. Salaries, other compensation, and employee benefits	1,556,228	1,568,628	12,400
	17. Professional fundraising fees			
	18. Other professional fees	77,523	104,654	27,131
	19. Occupancy, rent, utilities, and maintenance	351,290	275,148	-76,142
	20. Depreciation and Depletion	249,106	241,650	-7,456
	21. Other expenses	1,303,026	1,320,012	16,986
	22. <b>Total expenses.</b> Add lines 13 through 21	<b>3,613,023</b>	<b>3,612,243</b>	<b>-780</b>
	23. <b>Excess or (Deficit).</b> Subtract line 22 from line 12	<b>120,959</b>	<b>848,297</b>	<b>727,338</b>
<b>Other Information</b>	24. Total exempt revenue	3,733,982	4,460,540	726,558
	25. Total unrelated revenue	59,075	38,944	-20,131
	26. Total excludable revenue	941,833	731,592	-210,241
	27. Total assets	21,369,966	21,001,673	-368,293
	28. Total liabilities	323,418	561,468	238,050
	29. Retained earnings	21,046,548	20,440,205	-606,343
	30. Number of voting members of governing body	16	16	
31. Number of independent voting members of governing body	16	16		
32. Number of employees	54	53		
33. Number of volunteers	17	0		

Form **990T****Two Year Comparison Report****2013 & 2014**For calendar year 2014, or tax year beginning **07/01/14**, ending **06/30/15**

Name

Taxpayer Identification Number

**NEW MEXICO CHRISTIAN CHILDRENS HOME****85-6018576**

		2013	2014	Differences	
<b>Revenue</b>	1. Gross profit/loss on business activities	1.			
	2. Capital gains/losses	2.			
	3. Income/loss from partnerships and S corporations	3.	<b>59,075</b>	<b>38,944</b>	<b>-20,131</b>
	4. Rental income (net of expense)	4.			
	5. Unrelated debt-financed income (net of expense)	5.			
	6. Interest, and other income from controlled organizations (net of expense)	6.			
	7. Investment income of specific organizations (net of expense)	7.			
	8. Exploited exempt activity income (net of expense)	8.			
	9. Advertising income (net of expense)	9.			
	10. Other income	10.			
<b>11. Total trade or business income.</b> Combine lines 1 through 10	<b>11.</b>	<b>59,075</b>	<b>38,944</b>	<b>-20,131</b>	
<b>Expenses</b>	12. Compensation of officers, directors, and trustees	12.			
	13. Other salaries and wages	13.			
	14. Repairs and maintenance	14.			
	15. Bad debts	15.			
	16. Interest	16.			
	17. Taxes and licenses	17.			
	18. Charitable contributions	18.			
	19. Depreciation and Depletion	19.			
	20. Contributions to deferred compensation plans	20.			
	21. Employee benefit programs	21.			
	22. Other deductions	22.			
<b>23. Total deductions.</b> Add lines 12 through 22	<b>23.</b>				
<b>24. Taxable income before NOL.</b> Subtract line 23 from 11	<b>24.</b>	<b>59,075</b>	<b>38,944</b>	<b>-20,131</b>	
25. Net operating loss deduction	25.				
26. Specific deduction	26.	<b>1,000</b>	<b>1,000</b>		
<b>27. Unrelated business taxable income.</b>	<b>27.</b>	<b>58,075</b>	<b>37,944</b>	<b>-20,131</b>	
<b>Tax &amp; Credits</b>	28. Income tax (corporate or trust)	28.	<b>9,519</b>	<b>5,692</b>	<b>-3,827</b>
	29. Proxy tax	29.			
	30. Alternative minimum tax	30.			
	<b>31. Total taxes</b>	<b>31.</b>	<b>9,519</b>	<b>5,692</b>	<b>-3,827</b>
	32. Other credits	32.			
	33. General business credit	33.			
	34. Credit for prior year minimum tax	34.			
	<b>35. Total credits</b>	<b>35.</b>			
	<b>36. Net tax after credits</b>	<b>36.</b>	<b>9,519</b>	<b>5,692</b>	<b>-3,827</b>
	37. Recapture taxes	37.			
<b>38. Total Taxes</b>	<b>38.</b>	<b>9,519</b>	<b>5,692</b>	<b>-3,827</b>	
<b>Due/Refund</b>	39. Prior year overpayment and estimated tax payments	39.	<b>6,000</b>	<b>9,520</b>	<b>3,520</b>
	40. Payment made with extension	40.	<b>3,548</b>		<b>-3,548</b>
	41. Backup withholding and foreign withholding	41.			
	42. Other payments	42.			
	<b>43. Total payments</b>	<b>43.</b>	<b>9,548</b>	<b>9,520</b>	<b>-28</b>
	<b>44. Balance due/(Overpayment)</b>	<b>44.</b>	<b>-29</b>	<b>-3,828</b>	<b>-3,799</b>
	45. Overpayment applied to next year	45.		<b>3,821</b>	<b>3,821</b>
	46. Penalties	46.	<b>29</b>	<b>7</b>	<b>-22</b>
	<b>47. Total due/(Refund)</b>	<b>47.</b>			

Form **990****Tax Return History****2014**

Name

**NEW MEXICO CHRISTIAN CHILDRENS HOME**

Employer Identification Number

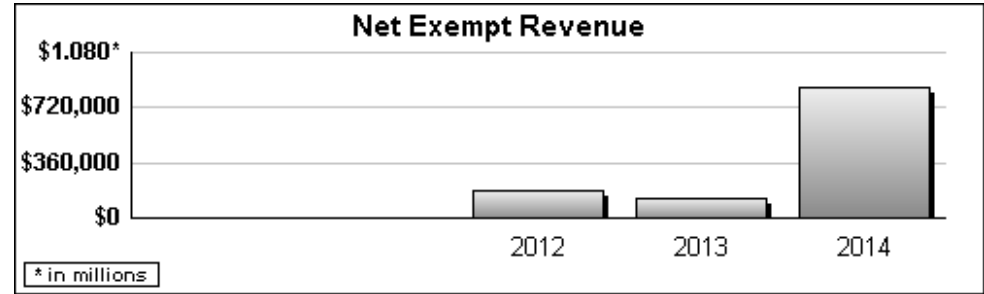
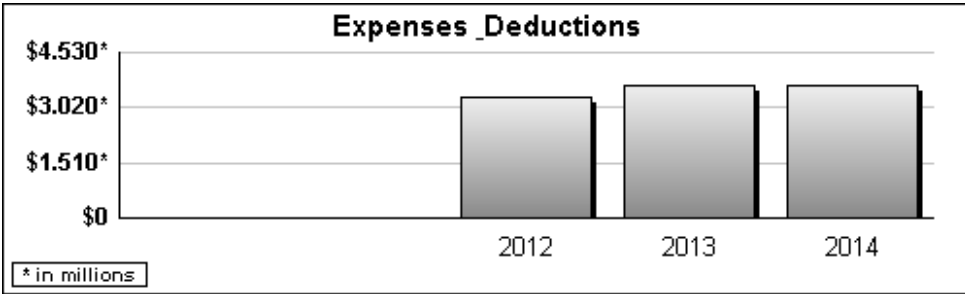
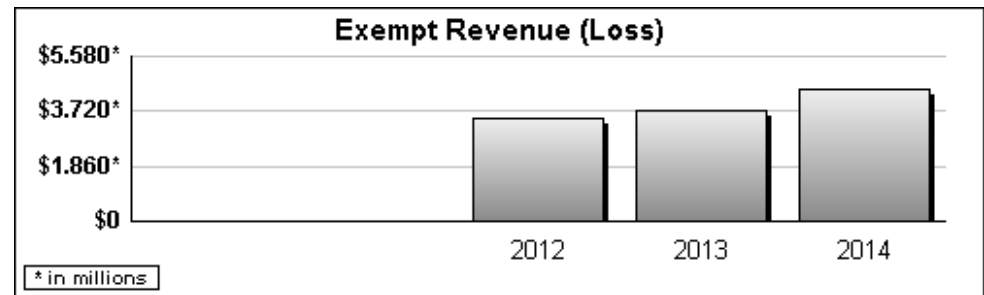
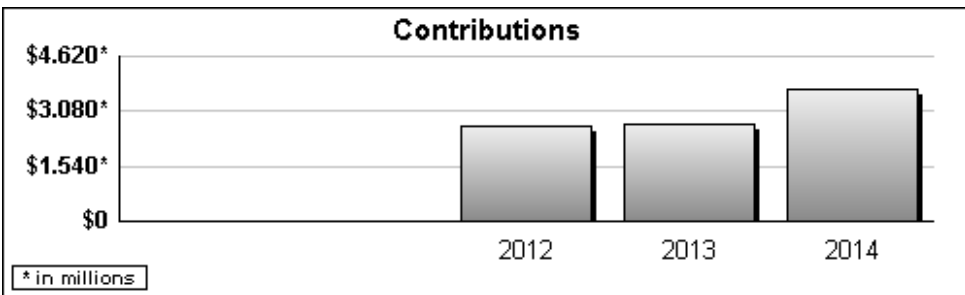
**85-6018576**

	2010	2011	2012	2013	2014	2015
Contributions, gifts, grants .....			2,667,682	2,733,074	3,688,319	
Membership dues .....						
Program service revenue .....			95,401	188,459	90,441	
Capital gain or loss .....			23,607	-8,655	-158,954	
Investment income .....			557,397	682,289	738,890	
Fundraising revenue (income/loss) .....					1,685	
Gaming revenue (income/loss) .....						
Other revenue .....			128,217	138,815	100,159	
<b>Total revenue</b> .....			<b>3,472,304</b>	<b>3,733,982</b>	<b>4,460,540</b>	
Grants and similar amounts paid .....					25,800	
Benefits paid to or for members .....						
Compensation of officers, etc. ....			175,386	75,850	76,351	
Other compensation .....			1,347,958	1,556,228	1,568,628	
Professional fees .....				77,523	104,654	
Occupancy costs .....			343,509	351,290	275,148	
Depreciation and depletion .....			251,369	249,106	241,650	
Other expenses .....			1,171,932	1,303,026	1,320,012	
<b>Total expenses</b> .....			<b>3,290,154</b>	<b>3,613,023</b>	<b>3,612,243</b>	
<b>Excess or (Deficit)</b> .....			<b>182,150</b>	<b>120,959</b>	<b>848,297</b>	
Total exempt revenue .....			3,472,304	3,733,982	4,460,540	
Total unrelated revenue .....			40,219	59,075	38,944	
Total excludable revenue .....			3,432,085	941,833	731,592	
Total Assets .....			19,632,291	21,369,966	21,001,673	
Total Liabilities .....			406,676	323,418	561,468	
Net Fund Balances .....			19,225,615	21,046,548	20,440,205	

Form **990T** **Tax Return History** **2014**

Name **NEW MEXICO CHRISTIAN CHILDRENS HOME** Employer Identification Number  
**85-6018576**

	2010	2011	2012	2013	2014	2015
Business activity profit/loss .....						
Capital gains/losses .....						
Partner and S Corp gain/loss .....			40,219	59,075	38,944	
Rental income* .....						
Debt-financed income* .....						
Controlled organizations income/interest* .....						
Investment income, specific organizations* .....						
Exploited exempt activity income* .....						
Other income .....						
<b>Total trade or business income.</b> .....			40,219	59,075	38,944	
Compensation of officers, ect. ....						
Other salaries and wages .....						
Repairs and maintenance .....						
Bad debts .....						
Interest .....						
Taxes and licenses .....						
Charitable contributions .....						
Depreciation and Depletion .....						
Deferred compensation plans .....						
Employee benefit programs .....						



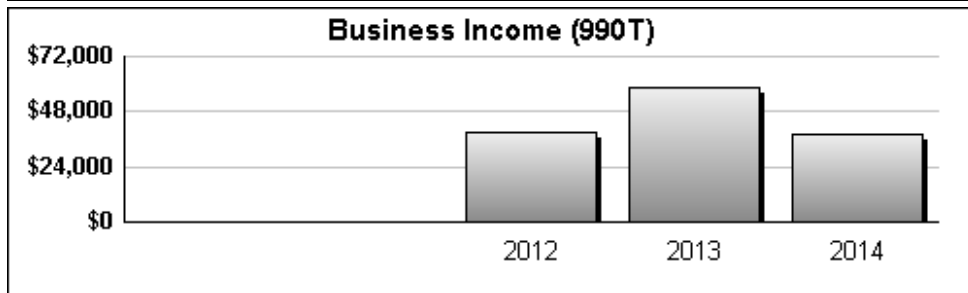
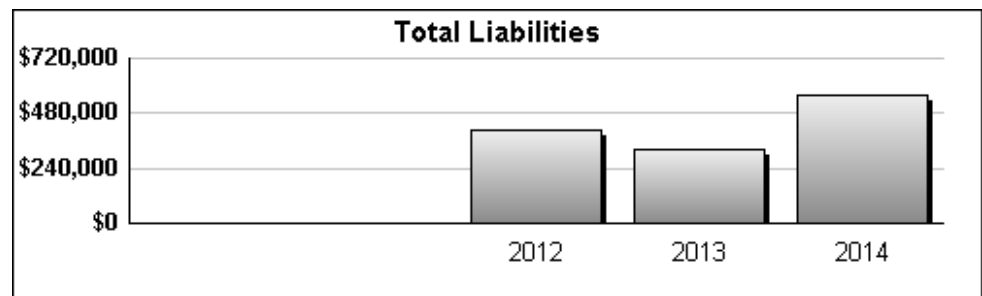
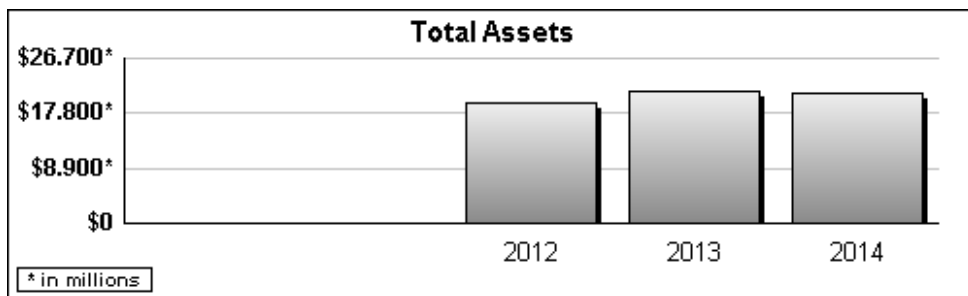


Form **990T** **Tax Return History** **2014**

Name **NEW MEXICO CHRISTIAN CHILDRENS HOME** Employer Identification Number **85-6018576**

	2010	2011	2012	2013	2014	2015
Other deductions .....						
Net operating loss deduction .....						
Specific deduction .....			1,000	1,000	1,000	
<b>Income after expense and deductions</b>			<b>39,219</b>	<b>58,075</b>	<b>37,944</b>	
Income tax (corporate or trust) .....			5,883	9,519	5,692	
Other taxes .....						
<b>Total taxes</b>			<b>5,883</b>	<b>9,519</b>	<b>5,692</b>	
General business credit .....						
Other credits .....						
<b>Net tax after credits</b>				<b>9,519</b>	<b>5,692</b>	
Estimated tax payments .....			3,450	6,000	9,520	
Other payments .....			2,450	7,096		
<b>Balance due/Overpayment</b>			<b>-5,900</b>	<b>-3,577</b>	<b>-3,828</b>	

\* Income shown net of expenses



**Federal Statements****Taxable Interest on Investments**

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
INTEREST-UNRESTRICTED						
	\$ 8,253			14	NM	
INTEREST-TEMP RESTRICTED						
	26			14	NM	
INT/TEMP FROM PERMANENT						
				14	NM	
CCDR, LTD INTEREST INCOME						
	248			14	NM	
DAY ESTATES, LTD INTEREST INC						
	2,651			14	NM	
TOTAL	\$ 11,178					

**Taxable Dividends from Securities**

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
CCDR, LTD DIVIDEND INCOME						
	\$ 636			14	NM	
TOTAL	\$ 636					

**Tax-Exempt Interest on Investments**

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>InState Muni (\$ or %)</u>
CCDR, LTD TE INTEREST INCOME						
	\$ 251			14	NM	
TOTAL	\$ 251					

**Federal Statements****Tax-Exempt Dividends from Securities**

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>InState Muni (\$ or %)</u>
DIVIDENDS-UNRESTRICTED						
\$	461,380				14 NM	
DIVIDENDS-TEMP FROM PERM						
	26,309				14 NM	
TEAGUE TRUST DIVIDENDS						
	185,684				14 NM	
TOTAL	\$ <u>673,373</u>					

**Federal Statements****Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)**

Description	Total Expenses	Program Service	Management & General	Fund Raising
CONTRACT LABOR	\$ 29,411	\$ 29,411	\$	\$
TOTAL	<u>\$ 29,411</u>	<u>\$ 29,411</u>	<u>\$ 0</u>	<u>\$ 0</u>

**Form 990, Part IX, Line 24e - All Other Expenses**

Description	Total Expenses	Program Service	Management & General	Fund Raising
LIVESTOCK SUPPLIES & SHOW	\$ 41,792	\$ 41,792	\$	\$
TAXES & LICENSES	30,229	30,229		
BANK FEES	6,427	4,820		1,607
SUPPLIES	6,249	6,249		
WORKERS COMPENSATION	5,520	4,140	1,104	276
MEDICAL	2,400	2,400		
K-1 EXPENSES	107		107	
TOTAL	<u>\$ 92,724</u>	<u>\$ 89,630</u>	<u>\$ 1,211</u>	<u>\$ 1,883</u>

**Federal Statements****Schedule A, Part III, Line 1(e)**

<u>Description</u>	<u>Amount</u>
CASH CONTRIBUTIONS	\$ 1,287,287
MEMORIAL GIFTS	256,917
ESTATE CONTRIBUTIONS	4,033
MISC RESTRICTED INCOME	
NON-CASH LIVESTOCK	28,100
NON-CASH MISCELLANEOUS	24,818
NON-CASH LIVING ASST	89,825
NON-CASH CLOTHING	9,975
NON-CASH FOOD	346,590
DAVID TIMM	
CASH CONTRIBUTION	5,000
JAMES W DUFFEY	
CASH CONTRIBUTION	10,000
PECOS CHURCH OF CHRIST	
CASH CONTRIBUTION	5,000
LOUISE TAYLOR	
CASH CONTRIBUTION	5,000
CHARLES & KARON JOHNSON	
CASH CONTRIBUTION	5,000
LARRY & NADA DOCKRAY	
CASH CONTRIBUTION	5,000
KELLENE WARMAN	
CASH CONTRIBUTION	5,000
JOHNNY KEPHART	
CASH CONTRIBUTION	5,000
GANDY CORPORATION	
CASH CONTRIBUTION	5,000
JIMMY DAVIS, JR	
CASH CONTRIBUTION	5,000
WYNONA GARRETT	
CASH CONTRIBUTION	5,000
KAT COMMUNICATIONS	
CASH CONTRIBUTION	5,000
TAM & BECKY MCGEE	
CASH CONTRIBUTION	5,000
ADAM D. RAFKIN	
CASH CONTRIBUTION	5,000
CARSON BUCKLES	

**Federal Statements****Schedule A, Part III, Line 1(e) (continued)**

<u>Description</u>	<u>Amount</u>
CASH CONTRIBUTION	\$ 5,000
GANDY MARLEY, INC.	
CASH CONTRIBUTION	5,000
ELNORA CARRUTH	
CASH CONTRIBUTION	5,000
NORTH RIDGE CHURCH OF CHRIST	
CASH CONTRIBUTION	5,000
THOMAS S. BROCK	
CASH CONTRIBUTION	5,000
CO BANK	
CASH CONTRIBUTION	5,000
JERRY & ARLENE MILLER	
CASH CONTRIBUTION	5,000
STEPHENS PNEUMATICS, INC	
CASH CONTRIBUTION	5,000
LINSEY CANNEY	
CASH CONTRIBUTION	5,000
CHARLES & KARON JOHNSON	
CASH CONTRIBUTION	5,000
TIM FLATT	
CASH CONTRIBUTION	5,000
LONGHORN HARLEY	
CASH CONTRIBUTION	5,180
UNITED DAIRY WOMEN	
CASH CONTRIBUTION	5,600
IDALOU CHURCH OF CHRIST	
CASH CONTRIBUTION	5,925
ELLIS & BONITA WITT	
CASH CONTRIBUTION	6,000
KENDALL & RHONA POLAND	
CASH CONTRIBUTION	6,000
ANGEL DIEGO	
CASH CONTRIBUTION	6,300
DAN FENDER	
CASH CONTRIBUTION	6,500
37TH ST CHURCH OF CHRIST	
CASH CONTRIBUTION	7,000
MARK & PAM BURTON	

**Federal Statements****Schedule A, Part III, Line 1(e) (continued)**

<u>Description</u>	<u>Amount</u>
CASH CONTRIBUTION	\$ 7,000
DICK ATKINS	
CASH CONTRIBUTION	7,500
SOUTHSIDE CHURCH OF CHRIST	
CASH CONTRIBUTION	7,704
ED FOREMAN	
CASH CONTRIBUTION	8,000
JERRY & CHERYL SOWDER	
CASH CONTRIBUTION	9,959
TERRY HANEY	
CASH CONTRIBUTION	10,000
WATERSTONE	
CASH CONTRIBUTION	35,000
COMMUNITIES FOUNDATION OF TEXAS FAMI	
CASH CONTRIBUTION	39,000
KERRY FENDER	
CASH CONTRIBUTION	10,000
WILLIAM B QUADE	
CASH CONTRIBUTION	10,000
DARWIN & ROBIN SCHMIDT	
CASH CONTRIBUTION	10,000
DUNCUM FAMILY FOUNDAITON	
CASH CONTRIBUTION	10,000
JOHN FUGESON	
CASH CONTRIBUTION	10,379
FSA BAILEY COUNTY	
CASH CONTRIBUTION	10,382
C&S INC.	
CASH CONTRIBUTION	12,000
DAN FENDER	
CASH CONTRIBUTION	14,200
FRIST TEXASD TITLE CO LLC	
CASH CONTRIBUTION	14,668
DAVID MCWHERTER	
CASH CONTRIBUTION	14,800
GENE TERHUNE	
CASH CONTRIBUTION	15,000
BONNER FAMILY FOUNDATION INC	

**Federal Statements****Schedule A, Part III, Line 1(e) (continued)**

<u>Description</u>	<u>Amount</u>
CASH CONTRIBUTION	\$ 15,000
MWS PRODUCING INC	
CASH CONTRIBUTION	287,000
JARED WALLIS	
CASH CONTRIBUTION	60,500
RC OTTWELL, JR	
CASH CONTRIBUTION	20,000
FOUNDATION FOR TRUTH	
CASH CONTRIBUTION	20,000
SONORA CHURCH OF CHRIST	
CASH CONTRIBUTION	20,000
SHALOM EQUIPMENT, LLC	
CASH CONTRIBUTION	20,200
SHANE & BRENDA FOX	
CASH CONTRIBUTION	25,000
OAKLAND DRIVE CHURCH OF CHRIST	
CASH CONTRIBUTION	31,013
ROYCE & KATHY CRAIG	
CASH CONTRIBUTION	50,000
GRAHAM ABSTRACT CO INC	
CASH CONTRIBUTION	51,893
BOBBIE HICKS	
CASH CONTRIBUTION	155,163
LAURA DAVIS	
CASH CONTRIBUTION	55,500
WOLF MOUNTAIN FOUNDATION	
CASH CONTRIBUTION	60,000
JT & ANNIE JACKSON	
CASH CONTRIBUTION	60,000
STANTON CHURCH OF CHRIST	
CASH CONTRIBUTION	250,000
GOLF TOURNAMENT	
CASH CONTRIBUTION	16,350
OTHER FUNDRAISERS	
CASH CONTRIBUTION	9,058
TOTAL	\$ <u><u>3,688,319</u></u>



**Federal Statements****Schedule A, Part III, Line 2(e)**

<u>Description</u>	<u>Amount</u>
CHILDREN'S CONTRI/TRANS	\$
FAMILY PAYMENTS	8,263
SOCIAL SECURITY PAYMENTS	42,659
RETAINERS	26,050
FAMILY COUNCELING	100
GOVERNMENT PAYMENTS	13,369
FAIR ANIMALS	24,126
GOLF TOURNAMENT	16,200
OTHER FUNDRAISERS	
GROSS RENTS	<u>36,863</u>
TOTAL	\$ <u><u>167,630</u></u>

**Federal Statements****Schedule A, Part III, Line 7b - Excess Gross Receipts**

<u>Donor Name</u>	<u>Total</u>	<u>Excess</u>
	\$	\$
2012	323,478	289,000
2011	1,039,811	998,671
2010	620,009	583,801
COMMUNITY FOUNDATION OF NORTH TEXAS		
2013	52,800	15,382
MR. & MRS. ROYCE CRAIG		
2014	50,000	3,670
2013	66,652	29,234
ESTATE OF CLAUDIA WEAVER		
2013	46,400	8,982
MWS PRODUCING		
2014	287,000	240,670
2013	137,500	100,082
WOLD MOUNTAIN FOUNDATION		
2014	60,000	13,670
2013	45,000	7,582
JARID WALLIS		
2014	60,500	14,170
GRAHAM ABSTRACT CO INC		
2014	51,893	5,563
BOBBIE HICKS		
2014	155,163	108,833
LAURA DAVIS		
2014	55,500	9,170
JT & ANNIE JACKSON		
2014	60,000	13,670
STANTON CHURCH OF CHRIST		
2014	250,000	203,670
TOTAL	\$ <u>3,361,706</u>	\$ <u>2,645,820</u>

**Federal Statements****Schedule A, Part III, Line 10a(e)**

<u>Description</u>	<u>Amount</u>
INTEREST-UNRESTRICTED	\$ 8,253
INTEREST-TEMP RESTRICTED	26
INT/TEMP FROM PERMANENT	
CCDR, LTD INTEREST INCOME	248
DAY ESTATES, LTD INTEREST INC	2,651
CCDR, LTD TE INTEREST INCOME	251
CCDR, LTD DIVIDEND INCOME	636
DIVIDENDS-UNRESTRICTED	461,380
DIVIDENDS-TEMP FROM PERM	26,309
TEAGUE TRUST DIVIDENDS	185,684
OIL LEASES	27,338
OTHER INVESTMENT INCOME	26,114
TOTAL	<u>\$ 738,890</u>

**Schedule A, Part III, Line 11**

<u>Description</u>	<u>Amount</u>
OTHER INCOME	\$ 226
CCDR, LTD RENTAL INCOME	247
CCDR, LTD OTHER INCOME	141
CCDR, LTD OTHER DEDUCTIONS	
DAYS ESTATE, LTD ORDINARY INC	38,573
DAY ESTATE OTHER DEDUCTIONS	
LESS: DEDUCTIONS	<u>-1,000</u>
TOTAL	<u>\$ 38,187</u>

**Federal Statements****GOLF TOURNAMENT****Other Direct Fundraising or Gaming Expenses**

<u>Description</u>	<u>Amount</u>
COWBOYS	\$ 12,435
BALLS	150
TOTAL	\$ <u>12,585</u>