_	990
Form	000

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.

Department of the Treasury Internal Revenue Service

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

2017 Open to Public Inspection

OMB No. 1545-0047

A	For the	e 2017 ca	lendar year, or tax year beginning		, and e	nung				
в	Check if a	applicable:	C Name of organization Santa Fe	e Conservation Trust			D Employer i	dentification n	umber	
Π,	Address	change	Doing business as							
			Number and street (or P.O. box if mail is not delivered to street address) Room/suite 85-0418988							
	Name ch	ange	PO Box 23985				E Telephone	number		
ı	nitial retu	ILL	City or town	State	ZIP code		505-989-701	9		
<u>г</u> ,		lessingled	Santa Fe	NM	87502					
י <u>ل</u>	-inai return	n/lerminated	Foreign country name F	oreign province/state/county	Foreign postal	code				00 052
	Amendeo	d return					G Gross recei	pts \$	5	08,853
	Applicatio	on pending	F Name and address of principal officer	:		H(a) is th	nis a group return fo	subordinates?	Yes	X No
	Application	on pending	Sarah Noss 1660 Old Pecos Tr		37505		e all subordinates		Yes	No
						1	"No," attach a list			
1 1	ax-exem	npt status:	X 501(c)(3) 501(c) () ┥ (insert no.) 📃 4947(a)(1) or 527		NO, andorra sa	(See manueno	13)	
JI	Vebsite	e: ► www	w.sfct.org			H(c) Gr	oup exemption n	umber 🕨		
		rganization		Association Other ►	L Ye	ar of form	ation: 1993	M State of le	gal domicile:	NM
_							1000			
F	art I	Su	mmary	an ar most significant activit	os: The	Santa	Fe Conservat	ion Trust is		
ø	1	Briefly c	describe the organization's mission				C CONSCIVU			
S	1	dedicate	ed to preserving the spirit of plac	e among the communities of	traditional	UY.				
rna			ng open spaces and critical wild							
ve Ve	2	Check t	this box • if the organization	on discontinued its operation	s or disposed	of mor	e than 25% o	f its net ass	ets.	
ő	3	Number	r of voting members of the gover	ning body (Part VI, line 1a)		5.8.9	1.00 2.00	3		16
60	4	Number	r of independent voting members	s of the governing body (Par	t VI, line 1b) .	(\mathbf{x})	1318.0	4		16
ies	5	Total n	umber of individuals employed in	calendar year 2017 (Part V	line 2a)	212 2	10 X X X X	5		6
Ξ	6		umber of volunteers (estimate if r				1 2 2 3	6		100
Activities & Governance	7a		nrelated business revenue from F			8 5 8 		7a		0
	b		related business taxable income		1			7b		0
		Net unit	elated busilless taxable income			T	Prior Year		Current Yea	r
		Centrib	utions and grants (Part VIII, line	1b)			1,448	105	3	98,130
ue	8				15 F F F F			,088		21,669
Revenue	9	Program service revenue (Part VIII, line 2g) 27,088 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 17,118								53,432
ŝ	10	Investm	ient income (Part VIII, column (A), lines 5, 4, and 70).	n 1.8 5.8 . ->			,830		11,111
	11	Other re	evenue (Part VIII, column (A), lin	es 5, 60, 80, 90, 100, and 1	line 19)		1,504			84,342
	12	l otal rev	I revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12).				1,004	0		
	13	Grants	and similar amounts paid (Part I	x, column (A), lines 1–3).				0		
	14	Benefit	s paid to or for members (Part IX				307,667			
es	15	Salaries	s, other compensation, employee b	enents (Part IX, column (A), IIr	ies 5–10) 🔤 💡		200	0		01,001
Expenses	16a	Profess	sional fundraising fees (Part IX, c	olumn (A), line 11e)		<u> </u>	(III.)			
ğ	b	Total fu	Indraising expenses (Part IX, col	umn (D), line 25) 🕨	60,528	<u></u>	104	000		145.004
Ш	17		expenses (Part IX, column (A), lin					,260		115,261
	18	Total ex	xpenses. Add lines 13-17 (must	equal Part IX, column (A), li	ne 25) .			,956	4	122,928
	19	Revenu	ue less expenses. Subtract line 1	8 from line 12				6,185		61,414
Net Assets or	ŝ					Begin	ning of Current		End of Yea	
sets	20	Total as	ssets (Part X, line 16)		03.83		2,241		2,3	361,413
Ass	21	Total lia	abilities (Part X, line 26)				16	5,324		19,862
Net	22	Net ass	sets or fund balances. Subtract li	ne 21 from line 20			2,225	5,129	2,3	341,551
	art II		gnature Block							
Und	der penal	ties of periu	ury. I declare that I have examined this retu	irn, including accompanying schedu	es and statement	s, and to	the best of my kn	owledge		
and	belief, it	is true, corr	rect, and complete. Declaration of prepare	r (other than officer) is based on all	nformation of whi	ch prepar	er has any knowl	edge.		
0:			Sanah 1	ron			11	-8-18	_	
	gn		Signature of officer				Date			
He	ere	N.	Sarah Noss		Exe	cutive	Director			
			Type or print name and title							
-		Pri	int/Type preparer's name	Preparer's signature		Da	ate		PTIN	
D	lid			Thad Porce	6			heck X if		-7
		Th	ad E Porch	Inda Porci	<i>v</i>	1	1	elf-employed	P010804	5/
	epare		rm's name Porch & Associates	LLC			Firm's EIN	16-171908	00	
0	se On		rm's address 🕨 10612 Royal Birkda		'111		Phone no.	505-934-24	152	
_									X Yes	No
Ma	ay the I	RS discu	uss this return with the preparer s	nown above? (see instruction	ons)	$x - x \ge$	A 101 A 100 A	88.63	res	

Form 9	990 (2017) Santa Fe Conservation Trust		85-0418	988 Page 2
Pa	Art III Statement of Program Service Accomplishing Check if Schedule O contains a response or note			🗆
1	Briefly describe the organization's mission:			
	The Santa Fe Conservation Trust is dedicated to preserving the s	pirit of place among the		
	communities of Northern NM by protecting open spaces and critic			
	creating trails and by protecting the traditional landscapes of NM's	diverse culture.		
2	Did the organization undertake any significant program services d	ring the year which were not liv	sted on	
-	the prior Form 990 or 990-EZ?			Yes X No
	If "Yes," describe these new services on Schedule O.			
3	Did the organization cease conducting, or make significant change	es in how it conducts, any progr	am	
	services?			Yes X No
	If "Yes," describe these changes on Schedule O.			
4	Describe the organization's program service accomplishments for			-
	expenses. Section 501(c)(3) and 501(c)(4) organizations are requ		nts and allocations to	o others,
	the total expenses, and revenue, if any, for each program service	reported.		
4a	(Code:) (Expenses \$ 150,470 including	grants of \$) (Revenue \$	26,177)
	Land Program - Over the past twenty years, SFCT has protected of		low	
	Mexico, in Rio Arriba, San Miguel, Santa Fe, and Taos Counties,	vorking with landowners to crea	ate	
	voluntary land protection agreements using conservation easement		ire	
	legal documents that permanently protect private land, ensuring it			
	for future generations which benefits the public at large. SFCT wo			
	families to preserve the natural environment for posterity and futur		, of	
	with local community groups, including the Santa Fe County Oper Santa Fe and others to protect natural lands and trails, and to brin	o new trails and open space		
	projects to the public.			
) (D	=====
4b	(Code:) (Expenses \$ 131,377 including Trails Program - SFCT has been involved in the creation of the D			
	Santa Fe Rail Trail, the Spur Trail, La Tierra Trails, La Piedra Trail	and with the Commonwool		
	conservancythe Galisteo Basin Preserve Trails. SFCT Trails Pro		·	
	the City of Santa Fe, SFCT's volunteer group, The Trails Alliance			
	to coordinate trail development and construction, organize volunte	er trail work, identify and		
	prioritize trail linkages, promote the trails, and provide the public w			
	access through education programs and events. SFCT's Passpor		d	
	field trips to over 1,000 fourth and fifth graders in Santa Fe Public Santa Fe's trail system. The Grand Unified Santa Fe Trail Organiz		~	
	create an interconnected system of natural surface trails that allow			
	travel in a loop around the greater Santa Fe area, as well as betw			
	periphery.			
4c	· · · · · · · · · · · · · · · · · · ·	grants of \$) (Revenue \$	0)
	The Dark Skies Program - The Santa Fe Conservation Trust, with			
	Club and Commonweal Conservancy, has had many successful E community about the importance of the connection between land a		manda	
	steps they can take to reduce light pollution. These are both large			
	people in attendance and smaller scale events at local Santa Fe s			
	shown that light pollution has significant negative impact on huma			
	wildlife, wastes energy, creates glare, and actually reduces nightti			
	hundred people in the community have participated in our educati	onal star parties, celebrating		
	land conservation in New Mexico and the importance of dark skies	for future generations.		
4d	Other program services. (Describe in Schedule O.)			
	(Expenses \$ 0 including grants of \$	0)(Revenue \$	0)	
4e	Total program service expenses>301,872			

Santa Fe Conservation Trust

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			ĺ
	candidates for public office? If "Yes," complete Schedule C, Part I.	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			ĺ
	Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			ĺ
	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	6		Х
7	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.	7	Х	<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt			
	negotiation services? If "Yes," complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	<u> </u>
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Х	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			ĺ
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"			1
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	<u> </u>	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			1
	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.	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
4.5	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		X
17	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).	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			1
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18	Х	├──
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III.	19		X

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Par	IV Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	. 20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		Х
22	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? <i>If "Yes," complete Schedule I, Parts I and III</i> .	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			7
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	22		v
240	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	. 23		Х
2 4 a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	245		v
h	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part L.</i>	250		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	<u>25a</u>		^
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	250		~
20	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	. 28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		Х
	conservation contributions? If "Yes," complete Schedule M.	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N,</i>			V
32	Part I. . <td< td=""><td>31</td><td>┝──┤</td><td>Х</td></td<>	31	┝──┤	Х
32	If "Yes," complete Schedule N, Part II.	. 32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	. 52		~
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
	III, or IV, and Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part</i>			
• -	VI	37	┝──┤	Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.		990	0047

Form 990 (2017)

Form §	990 (2017) Santa Fe Conservation Trust	85-0418988	P	age 5
Par				_
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	4		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		X	
0-	gaming (gambling) winnings to prize winners?	· · · · 1 c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a	6		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	-	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . (see instructions)	25		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b		
4a	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)?	4a		Х
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	;		
_	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? .	5b		Х
с 6а	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	50		
ua	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7 c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7.		
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			X X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as requ			
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?			
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11 а	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.).			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
14a b	Did the organization receive any payments for indoor tanning services during the tax year?			Х
<u> </u>	in real, has three a roth report these payments? If NO, provide an explanation in Schedule O.	140	1	1

Form 9		18988		age 6	
Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S		tructio		
	Check if Schedule O contains a response or note to any line in this Part VI	• •		Х	
Sect	ion A. Governing Body and Management				
10	Enter the number of voting members of the governing body at the end of the tax year 1a	3	Yes	No	
1a	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	b Enter the number of voting members included in line 1a, above, who are independent 1b				
2	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?				
3	Did the organization delegate control over management duties customarily performed by or under the direct				
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?	4		X X	
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets?	5 6		X	
0 7a	Did the organization have members of stockholders, or other persons who had the power to elect or appoint	0			
74	one or more members of the governing body?	7a		х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,				
	stockholders, or persons other than the governing body?	7b		Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during				
	the year by the following:				
а	The governing body?	8a	Х		
b	Each committee with authority to act on behalf of the governing body?	8b	Х		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached				
Soct	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	9 Code)	Х	
0000	ion B. Poneles (mis dection B requests mornation about poneles not required by the internal Revenue	0000.	Yes	No	
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,				
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .	11a	Х		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes,"</i>	12b	Х		
C	describe in Schedule O how this was done	12c	х		
13	Did the organization have a written whistleblower policy?	13	X		
14	Did the organization have a written document retention and destruction policy?	14	Х		
15	Did the process for determining compensation of the following persons include a review and approval by				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official.	15a			
b	Other officers or key employees of the organization	15b	Х		
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		v	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	104		X	
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard				
	the organization's exempt status with respect to such arrangements?	16b			
Sect	ion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed • MM				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(8)s onl	/)		
	available for public inspection. Indicate how you made these available. Check all that apply.				
10	X Own website X Another's website X Upon request Other (explain in Schedule O		d		
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest po financial statements available to the public during the tax year.	ncy, ar	u		
20	State the name, address, and telephone number of the person who possesses the organization's books and records:	►			
	McAllister Yeomans 505-989-7019	-			
	1660 Old Pecos Trail, Suite B, Santa Fe, NM 87505				

Form 990 (2017)	Santa Fe Conservation Trust	85-0418988	Page 7						
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compen	sated							
	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								
1. Complete t	a Complete this table for all persons required to be listed. Report componentian for the colondar war anding with an within the								

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.

				(0	C)					
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles er an	s pe	more rson irecto	than c is both is or/trust Highest compensated employee	an ee)	(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
(1) Kent Little	4.00			х						
Chair	0.00	X		X						
(2) Joanna Prukop	4.00	x		х						
Vice Chair (3) George Strickland	4.00	^	-	^						
(3) George Strickland Treasurer	4.00	х		х						
(4) Sandra Massengill	4.00	~		~						
Secretary	0.00	х		х						
(5) Nancy Cook	4.00	~		~						
At Large	0.00	х		х						
(6) Don DeVito	2.00		1							
Director	0.00	Х								
(7) David Fleischaker	2.00		1							
Director	0.00	Х								
(8) Brant Goodman	2.00									
Director	0.00	Х								
(9) Kathy Holian	2.00									
Director	0.00	Х								
(10) Richard Hughes	2.00									
Director	0.00	Х								
(11) Clayton Jernigan	2.00									
Director	0.00	Х								
(12) Bill Johnson	2.00									
Director	0.00	Х								
(13) Al Reed	2.00									
Director	0.00	Х								
(14) Janet Stoker	2.00									
Director	0.00	Х								- 000

Form **990** (2017)

	90 (2017) Santa Fe Conservation Trust									85-041		Page	e 8
Pa	rt VII Section A. Officers, Directors, Tru	ustees, Key Em	ploye	es,			ghest	t Co	ompensated Em	ployees (contin	nued)		
					-	C) sition							
	(A) Name and title	(B)					than o is both		(D) Reportable	(E) Reportable		(F) stimated	
	Name and the	Average hours per					or/truste		compensation	compensation		nount of	
		week (list any hours for	or Ind	Ins	l₫	Ke	Hig em	Former	from the	from related organizations	com	other pensatior	n
		related	Individual trustee or director	Institutional trustee	Officer	Key employee	hest ploy	mer	organization	(W-2/1099-MISC)	fi	om the	
		organizations below dotted	tor to	onal		ploy	con ee		(W-2/1099-MISC)			anization d related	
		line)	uste	trust		ee	Ipen				orga	anizations	;
			(D	ee			Highest compensated employee						
(4.5)	Den Otsielding	0.00					<u> </u>						
Direc	Ben Strickling	2.00 0.00	1										
	Stenhen Velie	2.00	1										
Direc		0.00	ł										
(17)	Sarah Noss	40.00		1									
Exec	utive Director	0.00			Х				80,382			7,2	50
(18)													
(10)													
(19)							- (
(20)													
(=•)													
(21)													
					\square								
(22)													
(00)													
(23)													
(24)					<u> </u>								
<u>\- ·/</u>													
(25)													
1b	Sub-total		• •						80,382	0	1	7,2	
C d	Total from continuation sheets to Part VII, S		• •	• •	•	• •	• •		0 80,382	0		7.0	0
<u>d</u> 2	Total (add lines 1b and 1c).						receiv			-		7,2	00
-	reportable compensation from the organization				0	VIIO		vcu		,000 01			
					-							Yes N	lo
3	Did the organization list any former officer, dire					e, o	r high	nest	t compensated				
	employee on line 1a? If "Yes," complete Sched	lule J for such in	divid	ual .							3		Х
4	For any individual listed on line 1a, is the sum of	of reportable con	npen	satio	on a	nd c	other of	con	npensation from				
	the organization and related organizations grea	ater than \$150,00	00? li	f "Ye	es, "	com	plete	Sc	hedule J for suc	h			
					-			-			4		Х
5	Did any person listed on line 1a receive or accr				-			-					
	for services rendered to the organization? If "Y ion B. Independent Contractors	es," complete So	chedu	ıle J	for	SUC	h per	son	1		5		Х
1	Complete this table for your five highest compe	nsated indepen	dont	cont	ract	ore	that r	000	aived more than 9	\$100.000 of			
•	compensation from the organization. Report co year.										tax		
	(A)								(B)		(C))	
	Name and business add	ress							Description of ser	vices	Compen	sation	
													0
										 			0
													0
													0
2	Total number of independent contractors (inclu	ding but not limit	ted to	tho	se l	isteo	d abo	ve)	who received				Ĵ
	more than \$100,000 of compensation from the	•					0						

Form **990** (2017)

Part	90 (20 ² VIII	17) Santa Fe Conservation Trust Statement of Revenue				85-04189	88 Page
		Check if Schedule O contains a response or no	ote 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 section 512-514
contributions, Gitts, Grants and Other Similar Amounts	1a b	Federated campaigns 1a Membership dues 1b	0				
	c	Fundraising events	74,859				
ПS,	d	Related organizations	0				
nia c	e	Government grants (contributions) 1e	50,000				
r Sir	f	All other contributions, gifts, grants, and					
contributions, Gitts, Grants and Other Similar Amounts	•	similar amounts not included above 1f	273,271				
	g	Noncash contributions included in lines 1a-1f: \$	0				
ы с	h	Total. Add lines 1a–1f		398,130			
a			Business Code				
Program Service Revenue	2a	Land Conservation	813312	21,250	21,250		
Rev	b	·	611710	419	419		
ice	С						
Serv	d			0			
E I	е			0			
ogra	f	All other program service revenue		0			
۲, E	g	Total. Add lines 2a–2f	🕨	21,669			
	3	Investment income (including dividends, interest, a	and				
		other similar amounts)		18,986			18,98
	4	Income from investment of tax-exempt bond proce	eds 🔪	0			
	5	Royalties		0			
		(i) Real	(ii) Personal				
	6a	Gross rents					
	b	Less: rental expenses					
	С	Rental income or (loss) 0	0				
	d	Net rental income or (loss)		0			
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory	0				
	b	Less: cost or other basis					
		and sales expenses 0	0				
	C	Gain or (loss)	0				
	d	Net gain or (loss)	•	34,446			
۵	•						
n l	8a	Gross income from fundraising					
Š		events (not including \$ 74,859					
Other Revenue		of contributions reported on line 1c). See Part IV, line 18	25 622				
her	h	See Part IV, line 18. a Less: direct expenses b	35,622 24,511				
ð	c c	Net income or (loss) from fundraising events .		11,111			
		Gross income from gaming activities.					
	Ju	See Part IV, line 19	0				
	b	Less: direct expenses b	0				
	c	Net income or (loss) from gaming activities	Ŭ	0			
	10a						
		returns and allowances	0				
	b	Less: cost of goods sold b	0				
		Net income or (loss) from sales of inventory		0			
F	-	Miscellaneous Revenue	Business Code				
F	11a			0			
	b			0			
	С			0			
	d	All other revenue		0			
	е	Total. Add lines 11a–11d		0			
	12	Total revenue. See instructions.		484,342	21,669	0	18,98

	t IX Statement of Functional Expenses			05-0410	Page IU
Secti	on 501(c)(3) and 501(c)(4) organizations must complete all c	columns. All other or	rganizations must c	omplete column (A).	
1	Check if Schedule O contains a response or note	to any line in this Pa	art IX		🔲
	not include amounts reported on lines 6b, 7b, 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		·		
	domestic governments. See Part IV, line 21	0			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,	00.000	50.000	40.057	40.057
c	trustees, and key employees	80,382	56,268	12,057	12,057
6	Compensation not included above, to disqualified				
	persons (as defined under section $4958(f)(1)$) and	0			
7	persons described in section 4958(c)(3)(B)	177,345	124,141	26,602	26,602
7	Other salaries and wages	177,345	124,141	20,002	20,002
8	section 401(k) and 403(b) employer contributions).	7,662	5,364	1,149	1,149
9	Other employee benefits	22,822	15,976	3,423	3,423
10	Payroll taxes	19,456	13,620	2,918	2,918
11	Fees for services (non-employees):	19,430	13,020	2,910	2,910
a	Management	0			
b		0			
c		8,483	5,938	1,273	1,272
d		0,403	5,950	1,275	1,272
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column	Ŭ			
9	(A) amount, list line 11g expenses on Schedule O.)	10,062	7,043	1,509	1,510
12	Advertising and promotion	0	1,010	1,000	1,010
13	Office expenses	15,666	10,966	2,350	2,350
14	Information technology	2,901	2,031	435	435
15	Royalties	0	,		
16	Occupancy	28,218	19,752	4,233	4,233
17	Travel	2,174	1,522	326	326
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	8,645	6,051	1,297	1,297
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	4,405	3,083	661	661
23		11,279	7,895	1,692	1,692
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.)				
а	Trails, easement and outreach	19,409	19,409	0	0
b	Other expenses	4,019	2,813	603	603
С		0			
d		0			
e	All other expenses	0			A
25	Total functional expenses. Add lines 1 through 24e	422,928	301,872	60,528	60,528
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here I if				
	following SOP 98-2 (ASC 958-720)				

	990 (20				85-0418988 Page 11
Pa	art 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
	1	Cash—non-interest-bearing	0	1	
	2	Savings and temporary cash investments	91,924	2	176,590
	3	Pledges and grants receivable, net	0	3	C
	4	Accounts receivable, net	8,333	4	13,500
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L	0	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		· ·	
Assets		organizations (see instructions). Complete Part II of Schedule L	0	6	
Ass	7	Notes and loans receivable, net	0	7	C
4	8	Inventories for sale or use	0	8	
	9	Prepaid expenses and deferred charges	8,248	9	4,718
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 1,158,358		40	4,440,000
	b	Less: accumulated depreciation	1,144,735		1,140,330
	11	Investments—publicly traded securities	767,616		804,478
	12	Investments—other securities. See Part IV, line 11	218,313		219,763
	13 14	Investments—program-related. See Part IV, line 11	0	13 14	C
	14	Intangible assets	2,284	14	2,034
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,204	16	2,361,413
	17	Accounts payable and accrued expenses	16,324	17	19,862
	18	Grants payable	0	18	13,002
	19	Deferred revenue	0	19	
	20	Tax-exempt bond liabilities	0	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	
S	22	Loans and other payables to current and former officers, directors,	-		
Liabilities		trustees, key employees, highest compensated employees, and			
abi		disqualified persons. Complete Part II of Schedule L	0	22	
Ľ	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	0	25	0
	26	Total liabilities. Add lines 17 through 25	16,324	26	19,862
		Organizations that follow SFAS 117 (ASC 958), check here X and			
sec		complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	2,173,863	27	2,294,635
Bal	28	Temporarily restricted net assets	51,266	28	46,916
þ	29	Permanently restricted net assets	0	29	
Ъ		Organizations that do not follow SFAS 117 (ASC958), check here and			
P		complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds	0	30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	
ťĂ	32	Retained earnings, endowment, accumulated income, or other funds	0	32	
Ne	33	Total net assets or fund balances	2,225,129	33	2,341,551
	34	Total liabilities and net assets/fund balances	2,241,453	34	2,361,413
					Form 990 (2017)

Form 9	990 (2017) Santa Fe Conservation Trust	85-0418	1988	Page	e 12
Part	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			. Г	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		18/	,342
2	Total expenses (must equal Part IX, column (A), line 25).	2			,928
3	Revenue less expenses. Subtract line 2 from line 1	3			,320
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	2	2,225	
5	Net unrealized gains (losses) on investments	5			,008
6	Donated services and use of facilities	6		55	,000
7		7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O).	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
10		10	5	2,341	551
Part		,		.,011	,001
Turt	Check if Schedule O contains a response or note to any line in this Part XII.			Г	Х
		<u> </u>	<u> </u>	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			Tes	NU
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
20	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		20		~
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
				X	
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		Х
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		3b		
			Form §	990 (2	2017)
	·				

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-FZ

0 72

5

OMB No. 1545-0047

	Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.								
		e organization						Employer identification	-
	_	Conservation							18988
Par					ganizations must co				
1 ne o	orga			· · ·	or lines 1 through 12, or fines 1 through 12, or fourches described in the second seco			/	
2	님							(A)(I).	
3									
4			-		nction with a nospital d	lescribed	in section	170(b)(1)(A)(III). Er	iter the
F	hospital's name, city, and state:								
5	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	Щ		-	-	ntal unit described in se				
7	Х			eceives a substantia (A)(vi). (Complete F	al part of its support fro Part II.)	m a gove	rnmental u	init or from the gene	ral public
8		A community to	ust described in	section 170(b)(1)(A	A)(vi). (Complete Part	II.)			
9					section 170(b)(1)(A)(ix				
		or university or university:	a non-land-grar	nt college of agricult	ure (see instructions).	Enter the	name, city	, and state of the co	llege or
10			hat normally r	eceives: (1) more th	an 33 1/3% of its supp	ort from c	ontributior	ns. membership fees	and gross
		receipts from a	ctivities related	to its exempt functio	ns-subject to certain	exception	s, and (2)	no more than 33 1/3	3% of its
					ed business taxable in See section 509(a)(2).				sses
44			-		ly to test for public safe				
11 12	님	0	0	•	ly for the benefit of, to				the nurneese
12					escribed in section 509				
					bes the type of support				
а	[ervised, or controlled b				
					larly appoint or elect a	majority of	of the dire	ctors or trustees of th	ne supporting
b	ſ			nplete Part IV, Sect	r controlled in connecti	on with ite	sunnarta	d organization(s) by	(baying
D	I	control or m	anagement of th	e supporting organi	zation vested in the sa				
-	Г		· · /	complete Part IV, S		n connoct	ion with a	and functionally inter	uratad with
С	I				organization operated i You must complete F				rated with,
d	[Type III nor	n-functionally ir	tegrated. A suppor	ting organization opera	ated in cor	nnection w	vith its supported org	
					ion generally must sati				entiveness
е	ſ		•		blete Part IV, Sections itten determination fror				م ااا
C	L				illy integrated supportir			турст, турст, тур	
f		Enter the numb	er of supported	organizations					0
g				n about the support				((a) Amount of
	(1)	Name of supported	organization	(ii) EIN	(iii) Type of organization (described on lines 1–10	• •	organization ar governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
					above (see instructions))	docu	ment?	instructions)	instructions)
						Yes	No		
(A)									
.,			•						
(B)									
(C)									
(D)									
(2)									
(E)									
Tota								0	0

Sche	dule A (Form 990 or 990-EZ) 2017 Santa Fe C	Conservation Trus	st			85-041898	8 Page 2		
	rt II Support Schedule for Orga			ions 170(b)(1)	(A)(iv) and 17	0(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 fa	ils to qualify un	der the tests lis	ted below, plea	ase complete F	Part III.)			
Sec	tion A. Public Support								
Cale	ndar year (or fiscal year beginning in) 📃 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	161,572	231,852	308,236	269,046	273,271	1,243,977		
2	Tax revenues levied for the organization's								
	benefit and either paid to or expended on								
	its behalf						0		
3	The value of services or facilities								
	furnished by a governmental unit to the								
	organization without charge						0		
4	Total. Add lines 1 through 3	161,572	231,852	308,236	269,046	273,271	1,243,977		
5	The portion of total contributions by								
	each person (other than a								
	governmental unit or publicly								
	supported organization) included on								
	line 1 that exceeds 2% of the amount								
	shown on line 11, column (f)								
6	Public support. Subtract line 5 from line 4						1,243,977		
-	tion B. Total Support ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total		
7	Amounts from line 4	161,572	231,852	308,236	269,046	273,271	1,243,977		
8	Gross income from interest, dividends, payments received on securities loans,								
	rents, royalties, and income from								
	similar sources	6,212	6.277	12,181	17,118	18,986	60,774		
9	Net income from unrelated business	0,212	0,217	12,101	,	10,000	00,111		
-	activities, whether or not the business is								
	regularly carried on						0		
10	Other income. Do not include gain or								
	loss from the sale of capital assets								
	(Explain in Part VI.)						0		
11	Total support. Add lines 7 through 10						1,304,751		
12	Gross receipts from related activities, etc. (se	ee instructions) .				12			
13	First five years. If the Form 990 is for the or				()(, ,			
	organization, check this box and stop here .	_							
Sec	tion C. Computation of Public Sup		•			i			
14	Public support percentage for 2017 (line 6, c					14	95.34%		
15	Public support percentage from 2016 Schedu					15	96.04%		
16a	33 1/3% support test-2017. If the organization						<u>با</u> ت		
	and stop here. The organization qualifies as		-				▶ X		
b	33 1/3% support test-2016. If the organization qualifier								
	box and stop here . The organization qualifie						Þ 📘		
1/a	10%-facts-and-circumstances test—2017	-							
	is 10% or more, and if the organization meet Part VI how the organization meets the "facts								
	organization.		-						
b	10%-facts-and-circumstances test—2016	. If the organizatior	n did not check a b	ox on line 13, 16a,	16b, or 17a, and li	ine			
	15 is 10% or more, and if the organization me	eets the "facts-and	-circumstances" te	st, check this box a	ind stop here.				
	Explain in Part VI how the organization meet			•		•			
	supported organization						Þ 📘		
18	Private foundation. If the organization did r		, , ,	, ,			. —		
	instructions						🕨 📘		

Schedule A	(Form	990 or	r 990-EZ) 2017
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Part III

4.5

Page **3**

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

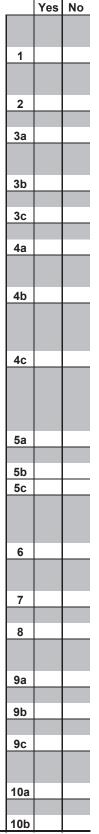
Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")						0
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513.						0
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf						0
5	The value of services or facilities						
-	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	0	0	.0	0	0	0
	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						0
b	Amounts included on lines 2 and 3						-
~	received from other than disgualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						0
c	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from			,			
Ŭ							0
Sec	tion B. Total Support		<u> </u>				
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	0	0	0		0	0
	Gross income from interest, dividends,						-
100	payments received on securities loans, rents,						
	royalties, and income from similar sources						0
b	Unrelated business taxable income (less		*				-
	section 511 taxes) from businesses						
	acquired after June 30, 1975						0
с	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on .						0
12	Other income. Do not include gain or						-
-	loss from the sale of capital assets						
	(Explain in Part VI.)	-					0
13	Total support. (Add lines 9, 10c, 11,						
	and 12.).	0	0	0	0	0	0
14	First five years. If the Form 990 is for the o	rganization's first, s	econd, third, fourth	n, or fifth tax year a	as a section 501(c)((3)	
	organization, check this box and stop here						
Sec	tion C. Computation of Public Su	pport Percenta	ade				
15	Public support percentage for 2017 (line 8, c			f))		15	0.00%
16	Public support percentage from 2016 Sched	.,	•			16	0.00%
	tion D. Computation of Investmer						
17	Investment income percentage for 2017 (line			olumn (f))		17	0.00%
18	Investment income percentage from 2016 S		-			18	0.00%
	33 1/3% support tests—2017. If the organi						
	not more than 33 1/3%, check this box and s						
b	33 1/3% support tests-2016. If the organi				-		- <u>-</u>
	line 18 is not more than 33 1/3%, check this						Þ 🗌
20	Private foundation. If the organization did	not check a box on	line 14, 19a, or 19	b, check this box a	and see instructions		

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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



Schedule A (Form 990 or 990-EZ) 2017 Santa Fe Conservation Trust 85-0418988 Page **5** Part IV Supporting Organizations (continued) Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? 11a **b** A family member of a person described in (a) above? 11b С A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 Did the organization operate for the benefit of any supported organization other than the supported 2 organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, 2 supervised, or controlled the supporting organization. Section C. Type II Supporting Organizations Yes No 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).
- 2 Activities Test. Answer (a) and (b) below.
- a 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 **Part VI identify** those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- **b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If* "Yes," *explain in* **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- **a** 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 Part VI.*
- **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* **Part VI** *the role played by the organization in this regard.*

Schedule A (Form 990 or 990-EZ) 2017

2a

2b

3a

3b

Yes No

Schedule A (Form 990 or 990-EZ) 2017 Santa Fe Conservation Trust			418988 Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting (
1 Check here if the organization satisfied the Integral Part Test as a qualifying	•		,
instructions. All other Type III non-functionally integrated supporting orga	anizations	s must complete Sections	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4	0	0
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			>
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	0	0
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3	0	0
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4	0	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by .035.	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		0
2 Enter 85% of line 1	2		0
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		0
4 Enter greater of line 2 or line 3.	4		0
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		0
7 Check here if the current year is the organization's first as a non-functiona	lly intogr	ated Type III supporting	argonization (and

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

Schedule A (Form 990 or 990-EZ) 2017

	e A (Form 990 or 990-EZ) 2017 Santa Fe Conservation Trust			5-0418988	Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)		
Section	on D - Distributions			Current Ye	ear
1	Amounts paid to supported organizations to accomplish exe	empt purposes			
	Amounts paid to perform activity that directly furthers exemption				
	organizations, in excess of income from activity				
3	Administrative expenses paid to accomplish exempt purpos	es of supported organiza	ations		
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	Total annual distributions. Add lines 1 through 6.				0
8	Distributions to attentive supported organizations to which the	ne organization is respo			0
0	(provide details in Part VI). See instructions.	le organization is respoi			
9	Distributable amount for 2017 from Section C, line 6				0
					<u> </u>
10	Line 8 amount divided by line 9 amount		(;;)	(:::)	0.000
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributal Amount for	
1	Distributable amount for 2017 from Section C, line 6				0
	Underdistributions, if any, for years prior to 2017				
2	(reasonable cause required—explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2017				
а					
b	From 2013 0				
C	From 2014 0				
d	From 2015 0				
	From 2016 0				
-	Total of lines 3a through e	0			
	Applied to underdistributions of prior years		0		
<u> </u>	Applied to 2017 distributable amount		0		0
i	Carryover from 2012 not applied (see instructions)				0
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	0			
	Distributions for 2017 from	0			
4					
	, , , , , , , , , , , , , , , , , , , ,		0		
	Applied to underdistributions of prior years		0		
0	Applied to 2017 distributable amount	0			0
C	Remainder. Subtract lines 4a and 4b from 4.	0			
5	Remaining underdistributions for years prior to 2017, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in Part VI . See instructions.		0		
6	Remaining underdistributions for 2017. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				0
7	Excess distributions carryover to 2018. Add lines 3j				
	and 4c.	0			
8	Breakdown of line 7:				
а	Excess from 2013 0				
b	Excess from 2014 0				
С	Excess from 2015 0				
d	Excess from 2016 0				
е	Excess from 2017 0				
			Schedule	A (Form 990 or 990	-EZ) 2017

Schedule A (F	orm 990 or 990-EZ) 2017 Santa Fe Conservation Trust	85-0418988	Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V,	17b; Part Section 1c, 2a, 2b,	
	lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)		

SCH	EDULE D			• • •		OMB No. 1545-0047	
				nancial Statements			
			he organization answered '				
_		Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.				Open to Public	
	ent of the Treasury Revenue Service	Go to www irs gov	Form990 for instructions a	nd the latest information	n	Inspection	
Name of the organization Employer identification Employer identification					fication number		
Santa	Fe Conservatio	on Trust				85-0418988	
Part		ations Maintaining Donor	Advised Funds or Oth	er Similar Funds or	Acco		
		e if the organization answer					
			(a) Donor advised f	inds	(b) F	unds and other accounts	
1	Total number a	t end of year......					
2		of contributions to (during year) .					
3		f grants from (during year)					
4		e at end of year					
5	-	ation inform all donors and don	-				
6		rganization's property, subject t ation inform all grantees, donor				Yes No	
0		haritable purposes and not for t					
	•	ring impermissible private bene				Yes No	
Part		ation Easements.					
i ui u		e if the organization answer	ed "Yes" on Form 990. F	Part IV, line 7			
1		conservation easements held by					
	· `` ′	on of land for public use (e.g., r	· · ·		istorica	ally important land area	
	X Protection	of natural habitat	Γ	Preservation of a c	ertified	historic structure	
		on of open space	L				
2		2a through 2d if the organization	on held a qualified conserva	tion contribution in the	form o	f a conservation	
-		he last day of the tax year.				Held at the End of the Tax Year	
а		f conservation easements			2a	83	
b		estricted by conservation ease			2b	36,314.03	
С		servation easements on a certil			2c	0	
d		servation easements included i		and not on a			
		e listed in the National Registe			2d		
3		servation easements modified,	transferred, released, extin	guished, or terminated	by the	organization during	
4	the tax year Number of state	1 es where property subject to co	nservation easement is loc	ated 🕨		1	
5		ization have a written policy re			na of		
		enforcement of the conservatio				X Yes No	
6		er hours devoted to monitoring, in					
	▶ 1	,600.00					
7		nses incurred in monitoring, inspec	ting, handling of violations, an	d enforcing conservation	easeme	ents during the year	
		153,545					
8	Does each con	servation easement reported of	n line 2(d) above satisfy the	requirements of sectio	n 170(h)(4)(B)(i)	
•	and section 170	D(h)(4)(B)(ii)?					
9		and include, if applicable, the t				-	
		n's accounting for conservation		janization s intancial st	atemer		
Part		ations Maintaining Collect		Freasures, or Othe	r Simi	lar Assets.	
		if the organization answer			•		
1a	If the organizat	ion elected, as permitted under	SFAS 116 (ASC 958), not	to report in its revenue	statem	ent and balance sheet	
		storical treasures, or other simil					
	•	e, provide, in Part XIII, the text					
b	-	ion elected, as permitted under					
		storical treasures, or other simil	-	nibition, education, or re	esearc	h in furtherance	
	ot public servic	e, provide the following amount	s relating to these items:				
	(I) Revenue ind	cluded on Form 990, Part VIII, I	ne 1			► \$ ► ¢	
2	. ,	ded in Form 990, Part X				> >	
2		ion received or held works of an nts required to be reported und			iancial	gain, provide the	
а	-	led on Form 990, Part VIII, line	, , ,	-		► \$	
a b		d in Form 990, Part X					
	, 00000 INDIUUE	tion Act Notice, see the Instrue	<u> </u>			÷Ψ	

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

Sched	ule D (Form 990) 2017 Santa Fe Conservation	Trust				85-041	8988		Page 2
Part	III Organizations Maintaining Colle	ctions of Art, Histo	rical Trea	asures, or (Other	Similar Asset	s (contil	nued)	
3	Using the organization's acquisition, access	ion, and other records,	check any	of the followi	ng that	are a significant	use of its	S	
	collection items (check all that apply):				0	0			
а	Public exhibition	d	Loan d	or exchange p	orogran	ns			
b	Scholarly research	e	Other		•				
c	Preservation for future generations	•							
4	Provide a description of the organization's of	collections and explain t	ow they fu	rther the ora	anizatio	n's exempt purp	ose in Pa	rt	
-	XIII.			ruler the orga	anizado	in a exempt pulp	050 111 2		
5	During the year, did the organization solicit	or roccive denstions of	art historia	al tracurac	or othe	or cimilor			
5	assets to be sold to raise funds rather than						Π Ye		No
		•		Janization 5 C	onectio			.2	NU
Part									
	Complete if the organization answ	ered "Yes" on Form	990, Part	IV, line 9, c	or repo	rted an amoun	it on ⊢or	m	
	990, Part X, line 21.								
1a	Is the organization an agent, trustee, custoo	lian or other intermedia	ry for contr	ibutions or ot	her ass	ets not			1
	included on Form 990, Part X?						Ye	es	No
b	If "Yes," explain the arrangement in Part XI	I and complete the follo	wing table:						
							Amount		
С	Beginning balance				10				0
d	Additions during the year				10				
е	Distributions during the year				16				
f	Ending balance				1f				0
2a	Did the organization include an amount on	Form 990, Part X, line 2	1, for escre	ow or custodi	al acco	unt liability?	Ye	es X	No
b	If "Yes," explain the arrangement in Part XII	I. Check here if the exp	lanation ha	s been provi	ded on	Part XIII			
Part	V Endowment Funds.								
	Complete if the organization answ	ered "Yes" on Form	990. Part	IV. line 10.					
			ior year	(c) Two years	back	(d) Three years bac	k (e) Fo	ur years	back
1a	Beginning of year balance	218,313	230,954	26	2,088	281,83	32	26	6,913
b	Contributions				,	- ,	0	-	0
с	Net investment earnings, gains,								
	and losses	25,289	13,080	-	1,770	10,22	21	4	15,386
d	Grants or scholarships	23,839	25,721	2	6,913	27,24	14	2	27,719
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses				2,451	2,72	21		2,748
g	End of year balance	219,763	218,313	23	0,954	262,08	38	28	31,832
2	Provide the estimated percentage of the cu	rrent year end balance ((line 1g, co	lumn (a)) hel	d as:				
а	Board designated or quasi-endowment	► <u>100%</u>							
b	Permanent endowment	%							
С	Temporarily restricted endowment	%							
	The percentages on lines 2a, 2b, and 2c sh	-							
3a	Are there endowment funds not in the poss	ession of the organization	on that are	held and adr	ninister	red for the	Г		
	organization by:						0-(1)	Yes	No
							3a(i)	Х	
b	(ii) related organizations						3a(ii)		X
b							3b		<u> </u>
4 Dort	Describe in Part XIII the intended uses of the								
Part			000 Dort	N/ line 11e	500	Form 000 Dor	t V line	10	
	Complete if the organization answ								
	Description of property	(a) Cost or other basis (investment)	. ,	st or other s (other)	. ,	Accumulated lepreciation	(a) Bo	ook valu	e
1a	Land	0		1,132,947		,		1 1 2	32,947
b	Buildings	0		1,132,947		0		1,10	0
c	Leasehold improvements	0	1	0		0			0
d	Equipment	0		25,411		18,028			7,383
e	Other	0		23,411		0			0
	Add lines 1a through 1e. (Column (d) must	*		•		-		1,14	10,330

Investments—Other Securities. Part VII Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (c) Method of valuation: (a) Description of security or category (b) Book value Cost or end-of-year market value (including name of security) (1) Financial derivatives 0 (2) Closely-held equity interests . . 0 219,763 F (3) Other Beneficial Interest in Trust (A) (B) (C) (D) (E) (F) (G) (H) 219,763 Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments—Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (c) Method of valuation: (a) Description of investment (b) Book value Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶ n Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.). ► 0 Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description of liability (b) Book value 1.

(1) Federal income taxes	0
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	0

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

Schedule D (Form 990) 2017

Х

Schedu	lle D (Form 990) 2017 Santa Fe Conservation Trust	85-0418988	Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	. 1	541,081
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а		,984	
b		,755	
С	Recoveries of prior year grants . . . 2c		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	. 2e	56,739
3	Subtract line 2e from line 1	. 3	484,342
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	484,342
Part		per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	. 1	424,659
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а		,731	
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	. 2e	1,731
3	Subtract line 2e from line 1	. 3	422,928
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
c	Add lines 4a and 4b		0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	. 5	422,928
	XIII Supplemental Information.		
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b		X, line
2; Pai	rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inf	ormation.	
Part I	Line 9 Because of the unique nature of the values ascribed to these interests, and		
obtair	ning consistent and reliable estimates of the values ascribed to these interests, and		
consi	stent with the practices followed by environmental land trusts, they are not recorded		
as as	sets in the financial statements.		
Part \	/ Line 4 The SFCF Stewardship Fund was established in 2003. Its purpose is to provide		
assur	ance to easement donors that their conservation easement stewardship donations are		
protec	cted in perpetuity. The fund pays a modest income return to SFCT to help defray the		
cost c	of monitoring easements. The income distributions are deposited into and comingled		
with t	ne SFCT's operating cash account. The purpose of this fund is to be used for costs		
assoc	iated with monitoring and conservation easement defense only. The SFCF easement		
monit	oring fund was established in 2006. Its purpose is to assist in the purchasing of new		
conse	ervation easements as well as to pay for the costs of defending new or existing		
conse	ervation easements.		

Schedule D (For	m 990) 2017	Santa Fe Conservation Trust					
Part XIII	Suppler	nental Information	(continued)				

Page 5

	Supplemer	ntal Information	ctivities	OMB No. 1545-0047			
SCHEDULE G (Form 990 or 990-EZ)		e organization ansv	9, or if the	2017			
Department of the Treasury		Attac	h to Form 9	90 or Form 99			Open to Public
Internal Revenue Service Name of the organization		Go to www.irs.	.gov/Form9	90 for the late	st instructions.	Employer identificati	Inspection on number
Santa Fe Conservation	Trust					85-04	
	ing Activities. Co	mplete if the o	organiza	tion answ	ered "Yes" on Fo	rm 990, Part IV, li	ne 17.
	EZ filers are not						
	the organization rai	sed funds throu					
a Mail solicitati	email solicitations				of non-government g of government grant	-	
c Phone solicit					lraising events		
d In-person sol			a 🗆 c				
	tion have a written o	r oral agreemer	nt with any	/ individual	(including officers.	directors, trustees.	
	sted in Form 990, P						Yes No
	0 highest paid indiv			sers) pursua	ant to agreements u	under which the fund	Iraiser is
to be compensat	ed at least \$5,000 b	y the organizati	on.				
			1				
(i) Name and addres or entity (fund		(ii) Activity	custody of	ndraiser have or control of outions?	(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			
1							0
2					0	0	0
-					0	0	0
3					K		
4					0	0	0
4					0	0	0
5							
					0	0	0
6					0	0	0
7					ŭ		
					0	0	0
8	4				0	0	0
9					0	0	0
					0	0	0
10							
					0	0	0
Total					0	0	0
	which the organizati	on is registered	or license	d to solicit	contributions or has	been notified it is e	-
registration or lic	ensing.						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. $\ensuremath{\mathsf{HTA}}$

Part II Fundraising Events. Complete if the organization answered "Yes" on 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

_		events with gross rece	eipts greater than \$5,00	00.			
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
			Banff Film Festival	Udall Dinner	NONE	(add col. (a) through	
			(event type)	(event type)	(total number)	col. (c))	
Revenue	1	Gross receipts	38,560	71,921	0	110,481	
Å	2	Less: Contributions	23,997	50,862	0	74,859	
	3	Gross income (line 1 minus line 2)	14,563	21,059	0	35,622	
	4	Cash prizes			0	0	
6	5	Noncash prizes			0	0	
Direct Expenses	6	Rent/facility costs			0	0	
ct Exp	7	Food and beverages			0	0	
Dire	8	Entertainment			0	0	
	9	Other direct expenses	9,740	14,771	0	24,511	
	10 11	1 ,	d lines 4 through 9 in colu ct line 10 from line 3, colu	mn (d)	••••••	(<u>24,511)</u> 11,111	
Ра	rt II	I Gaming. Complete if t	he organization answe	ered "Yes" on Form 99	0. Part IV. line 19. or r		
		than \$15,000 on Form			-, , -,	I	
enue		, , , , , , , , , , , , , , , , , 	(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				0	
ses	2	Cash prizes				0	
Direct Expenses	3	Noncash prizes				0	
Direct	4	Rent/facility costs				0	
	5	Other direct expenses				0	
	6	Volunteer labor	Yes% No	Yes% No	Yes% No		
	7	Direct expense summary. Add	l lines 2 through 5 in colu	mn (d)		(0)	
	8	Net gaming income summary	<u>. Subtract line 7 from line</u>	1, column (d)	<u></u>	0	
9		Enter the state(s) in which the or					
		s the organization licensed to co f "No," explain:					
10		Nere any of the organization's ga					
		f "Yes," explain:					

Schedule G (Form 990 or 990-EZ) 2017

Schedu	ule G (Form 990 or 990-EZ) 2017 Santa Fe Conservation Trust	85-04	18988	Page 3
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 a b 14	Indicate the percentage of gaming activity conducted in: The organization's facility	13a 13b		<u>%</u>
	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 \Rightarrow 0 and the amount of gaming revenue retained by the third party \Rightarrow 0.			
с	If "Yes," enter name and address of the third party:			
	Name ►			
	Address ►			
16	Gaming manager information:			
	Name ►			
	Gaming manager compensation \$0			
	Description of services provided			
	Director/officer			
17 а	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to			_
b	retain the state gaming license?		Yes	No
Part	or spent in the organization's own exempt activities during the tax year ▶ \$ Supplemental Information. Provide the explanations required by Part I, line 2b, columns Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional See instructions			0 d

Schedule G (Form 990 or 990-EZ) 2017

SCHEDULE O (Form 990 or 990-EZ)	Supplemental Information to Form 990 or 990 Complete to provide information for responses to specific questio Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.	ns on	OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form990 for the latest information.		Inspection
Name of the organization		Employer identif	ication number
Santa Fe Conservatio	n Trust	85-0418988	
Form 990, Part IV, Se	ction B, Line 11: The Form 990 is provided to SFCT's Finance Committee		
which reviews and app	proves the form before filing. All other Board members also receive a copy		
of the Form 990 prior	to filing.		
Form 990, Part VI, Se	ction B, Line 12C: Each Board of Directors member is required to fill out	\cap	
a conflict of interest po	olicy annually. SFCT staff monitors all business transactions of SFCT		
to ensure compliance	with this policy.		
Form 990, Part VI, Se	ction B, Line 15: The Executive Director is the only paid officer of		
SFCT. Her remunerati	on package is determined by the Executive Committee and voted on by the		
Board of Directors anr	nually with approval of the annual budget. The process is documented.		
Form 990, Part VI, Se	ction C, Line 19: SFCT makes its governing documents, conflict of		
interest policy and fina	ancial statements available to the public upon request.		
Form 990, Part XII, Lir	ne 2C: The process has not changed from the prior year.		
	<u>C</u>		

Schedule O (Form 990 or 990-EZ) (2017)	Page 2
Name of the organization	Employer identification number
Santa Fe Conservation Trust	85-0418988

Part VIII, Lines 1a-h (990) - Contributions, Gifts, Grants, and Other Amounts

		Cash	Noncash
1	Federated Campaigns	1	
2 3	1	2 3 74,859	
4	Related organizations	4	
5	- 5 ()	5 50,000	
6	All other contributions, gifts, grants, and similar amounts not included above:	273,271	
		210,211	
		6 <u>273,271</u>	0
7	Total	7 398,130	0

Santa Fe Conservation Trust

Part VIII, Line 7 (990) - Gain/Loss from Sale of Assets Other than Inventory

	I	Chask if	Chack if			-	Total Non-Put					, other d expenses 0 0 0 0		
		gain/loss is from sale	gain/loss is from sale of	Check if purchaser								of sale and cost of		
Description	CUSIP #	of public securities	non public securities	is a business	Purchaser	Date acquired	Acquisition method	Date sold	Gross sales price	Cost	Donated value	improve- ments	Depreciation	Description of Basis Method
Total Other Sales: 0 0 Check if gain/loss is from sale of public Check if gain/loss is from sale of of public Check if purchaser Check if purchaser Date Acquisition Date Cost or other basis (Enter one field only) Expense of sale and cost of improve-														

85-0418988

Part IX, Line 22 (990) - Depreciation, Depletion, and Amortization

	(A)	(B)	(C)	(D)
	Total	Program	Management	Fundraising
		services	and general	
1 Depreciation 1	4,405	3,083	661	661
2 Depletion 2	0			
3 Amortization 3	0			
4 Total 4	4,405	3,083	661	661

Part X, Line 4 (990) - Accounts Receivable

	Accounts	s receivable	Allowance for doubtful accounts			
	Beginning	End	Beginning	End		
11	8,333	13,500	0			
2 2	0		0			
3 3	0		0			
4 4	0		0			
5 5	0		0			
6 6	0		0			
7 7	0		0			
8 8	0		0			
9 9	0		0			
10 10	0		0			
11 Total accounts receivable	8,333	13,500	0	0		

Santa Fe Conservation Trust

Part X, Lines 10a and 10b (990) - Land, Buildings, and Equipment

			•	i			·	Total:	1,158,358			0	1,144,735	1,140,330
				Leasehold			Check if	Check if		Beginning	Ending			
				Improve-			Investment	Asset	Cost/Other	Accumulated	Accumulated	Disposals/	Beginning	Ending
	Category or Item	Land	Buildings	ments	Equipment	Other	Asset	Disposed	Basis	Depreciation	Depreciation	Adjustments	Balance	Balance
1		Х			V				1,132,947	40.000	40.000		1,132,947	1,132,947
2	<u> </u>		1		Х				25,411	13,623	18,028		11,788	7,383
		3	0				S	0	2°		5			

85-0418988

Santa Fe Conservation Trust

Part X, Lines 11 and 12 (990) - Investments - Securities

					Total:	0	985,929	1,024,241
		Check if		Check if			Beginning	Ending
		Publicly	Check if	Closely-Held	Number	Value	Balance	Balance
		Traded	Financial	Equity	of Shares/	at Time of	Book Value	Book Value
	Description	Securities?	Derivatives	Interests	Face Value	Donation	FMV	FMV
1	Investments	Х					767,616	804,478
2	Beneficial Interest in Trust						218,313	219,763
				9				

85-0418988

Part X, Line 15 (990) - Other Assets

Total:	2,284	2,034
Description	Beginning	End
1 Deposits	2,284	2,034

