** PUBLIC DISCLOSURE COPY **

Form **990** | **Return of Organization Exempt From Income Tax** | OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022 Open to Public Inspection

A For the 2022 calendar year, or tax year beginning JUL 1, 2022 and ending JUN 30, 2023

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

C Name of organization: UNIVERSITY OF NEW MEXICO FOUNDATION, INC

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): 700 LOMAS BLVD. NE | Room/suite: 108

City or town, state or province, country, and ZIP or foreign postal code: ALBUQUERQUE, NM 87102

D Employer identification number: 85-0275408

E Telephone number: 505-313-7600

G Gross receipts $ 101,357,405.

F Name and address of principal officer: JEFFREY TODD
SAME AS C ABOVE

H(a) Is this a group return for subordinates? [ ] Yes [X] No
H(b) Are all subordinates included? [ ] Yes [ ] No
If "No," attach a list. See instructions
H(c) Group exemption number

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: WWW.UNMFUND.ORG

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other | L Year of formation: 1979 | M State of legal domicile: NM

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O.

2 Check this box [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	29
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	29
5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	103
6	Total number of volunteers (estimate if necessary)	6	29
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	2,690,465.
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	1,698,187.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	69,846,458.	48,373,912.
	9	Program service revenue (Part VIII, line 2g)	8,405,901.	8,750,005.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	24,867,461.	10,943,613.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	21,521.	62,227.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	103,141,341.	68,129,757.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	64,012,806.	36,208,555.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	10,221,157.	11,547,114.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	169,745.	190,138.
	b	Total fundraising expenses (Part IX, column (D), line 25) 8,871,788.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,799,452.	4,550,117.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	78,203,160.	52,495,924.
	19	Revenue less expenses. Subtract line 18 from line 12	24,938,181.	15,633,833.
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	393,610,862.	454,667,512.
	21	Total liabilities (Part X, line 26)	99,276,076.	130,521,940.
	22	Net assets or fund balances. Subtract line 21 from line 20	294,334,786.	324,145,572.

Part II Signature Block

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

Sign Here

Signature of officer | Date 5/3/2024

NADINA PAISANO, CHIEF FINANCIAL OFFICER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
STEVEN TALBOT	STEVEN TALBOT	04/29/24		P01695427

Firm's name MOSS ADAMS LLP | Firm's EIN 91-0189318

Firm's address 6565 AMERICAS PARKWAY NE STE 600
ALBUQUERQUE, NM 87110 | Phone no. 505-878-7200

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes [ ] No

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

CREATE POWERFUL ENGAGEMENTS AND PARTNERSHIPS THAT LEAD TO INCREASED PHILANTHROPY, INVESTMENT, INNOVATION, AND SUPPORT FOR THE UNIVERSITY OF NEW MEXICO.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 38,814,104. including grants of $ 36,208,555.) (Revenue $ 8,750,005.)

THE UNIVERSITY OF NEW MEXICO FOUNDATION, INC. ENHANCES THE EDUCATIONAL PURPOSES OF THE UNIVERSITY OF NEW MEXICO BY RAISING PRIVATE FUNDS FOR THE BENEFIT OF STUDENTS, FACULTY AND PROGRAMS; AND INVESTS ENDOWMENT FUNDS AND OTHER FUNDS NOT IMMEDIATELY REQUIRED TO PROVIDE FOR LONG-TERM SUPPORT OF THE UNIVERSITY.

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

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

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

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

4e Total program service expenses 38,814,104.

Part IV 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	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? *If "Yes," complete Schedule D, Part V*	10	X	
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.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b	X	
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
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		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	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, 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 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 Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	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? *If "Yes," complete Schedule I, Parts I and II*	21	X	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
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? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	67			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

				Yes	No
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 103			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a	X	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*		3b	X	
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		X
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?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
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).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
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?		8		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	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	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note:** See the instructions for additional information the organization must report on Schedule O.		13a		
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	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.		15		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		16		X
17	**Section 501(c)(21) organizations.** Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.		17		

Part VI Governance, Management, and Disclosure.

For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year .... 1a: 29 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b: 29			
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?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*	9		X

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	15b	X	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed AL,AR,CA,DC,KY,LA,MA,MD,MI,MN,NH,NJ

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

[X] Own website [ ] Another's website [X] Upon request [ ] Other *(explain on Schedule O)*

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records

NADINA PAISANO - 505-313-7600

700 LOMAS BLVD. NE, SUITE 108, ALBUQUERQUE, NM 87102

SEE SCHEDULE O FOR FULL LIST OF STATES

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JEFFREY TODD PRESIDENT AND CEO	40.00			X				459,877.	0.	50,394.
(2) WILLIAM UHER VICE PRESIDENT	40.00			X				266,572.	0.	33,623.
(3) PATRICK ALLEN GENERAL COUNSEL	40.00			X				253,492.	0.	31,005.
(4) LAWRENCE RYAN VICE PRESIDENT	40.00			X				239,048.	0.	35,871.
(5) KENNETH STANSBURY CFO & TREAS. (THRU 3/31/23)	40.00			X				224,129.	0.	32,853.
(6) KRISTINE C MAZZEI VICE PRESIDENT	40.00			X				175,926.	0.	16,766.
(7) PATRICIA IDAROLA CHIEF DIGITAL STRATEGY AND SOLUTIONS	40.00			X				150,531.	0.	34,793.
(8) ANNETTE HAZEN SENIOR ASSOCIATE VICE PRESIDENT	40.00			X				156,248.	0.	22,904.
(9) GRETCHEN DOYLE SENIOR ASSOCIATE VICE PRESIDENT	40.00					X		147,374.	0.	20,815.
(10) BONNIE MCLESKY ASSOCIATE VICE PRESIDENT	40.00					X		133,803.	0.	27,978.
(11) CHRISTOPHER ALBRECHT SENIOR REGIONAL DIR. OF DEVELOPMENT	40.00					X		137,258.	0.	21,001.
(12) ANNDEE WRIGHT BROWN EXECUTIVE DIRECTOR OF DEVELOPMENT	40.00					X		138,935.	0.	13,562.
(13) JOSEPH WEISS (THRU 4/14/23) SENIOR DIRECTOR OF DEVELOPMENT	40.00					X		131,812.	0.	13,943.
(14) NADINA PAISANO CFO & TREASURER	40.00			X				107,313.	0.	22,397.
(15) RYAN MUMMERT CHAIR	2.00	X		X				0.	0.	0.
(16) FELICIA FINSTON VICE CHAIR/CHAIR ELECT	2.00	X		X				0.	0.	0.
(17) THOMAS DAULTON NATIONAL VICE CHAIR	2.00	X		X				0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(18) CHERYL FOSSUM-GRAHAM SECRETARY	2.00	X		X				0.	0.	0.
(19) ADAM HARRINGTON ASSISTANT TREASURER	2.00	X		X				0.	0.	0.
(20) ALEX ROMERO TRUSTEE	2.00	X						0.	0.	0.
(21) AMY MILLER TRUSTEE	2.00	X						0.	0.	0.
(22) BRAD PREBER TRUSTEE	2.00	X						0.	0.	0.
(23) CAROL MAYO COCHRAN TRUSTEE	2.00	X						0.	0.	0.
(24) CAROLYN ABEITA TRUSTEE	2.00	X						0.	0.	0.
(25) DEE DENNIS, JR. TRUSTEE	2.00	X						0.	0.	0.
(26) DON CLAMPITT TRUSTEE	2.00	X						0.	0.	0.
1b Subtotal								2,722,318.	0.	377,905.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								2,722,318.	0.	377,905.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization 28

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
PERFORMANCE ENHANCEMENTS, INC., 5435 AIRPORT BLVD SUITE 106, BOULDER, CO 80301	IT MGMT CONSULTANTS	213,905.
RUFFALO CODY PO BOX 718, DES MOINES, IA 50303	PROFESSIONAL FUNDRAISING	207,321.
NEPC 255 STATE STREET, BOSTON, MA 02109	INVESTMENT CONSULTANT	165,000.
NORTHERN TRUST 333 S WABASH, CHICAGO, IL 60604	INVESTMENT CUSTODIANS	153,979.
GO BONDS FOR HIGHER EDUCATION 5504 CROWN RIDGE NW, ALBUQUERQUE, NM 87114	LOBBYING	129,300.

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization 5

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
(27) DONALD GODWIN TRUSTEE	2.00	X						0.	0.	0.
(28) DOUG CAMBELL TRUSTEE	2.00	X						0.	0.	0.
(29) FRANCINE GALLIOUR TRUSTEE	2.00	X						0.	0.	0.
(30) GARNETT STOKES TRUSTEE	2.00	X						0.	0.	0.
(31) GREG FOLTZ TRUSTEE	2.00	X						0.	0.	0.
(32) HARRIS SMITH TRUSTEE	2.00	X						0.	0.	0.
(33) JAMES ELLIS TRUSTEE	2.00	X						0.	0.	0.
(34) JERRALD ROEHL TRUSTEE	2.00	X						0.	0.	0.
(35) LAMECK LUKANGA TRUSTEE	2.00	X						0.	0.	0.
(36) LINDA WARNING TRUSTEE	2.00	X						0.	0.	0.
(37) MONICA JOJOLA TRUSTEE	2.00	X						0.	0.	0.
(38) PATRICK VINCENT-COLLAWN TRUSTEE	2.00	X						0.	0.	0.
(39) PAUL CASSIDY TRUSTEE	2.00	X						0.	0.	0.
(40) RANDY VELARDE TRUSTEE	2.00	X						0.	0.	0.
(41) ROBERT SCHWARTZ TRUSTEE	2.00	X						0.	0.	0.
(42) TODD SANDOVAL TRUSTEE	2.00	X						0.	0.	0.
(43) WILLIAM P. LANG TRUSTEE	2.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII **Statement of Revenue**

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	48,373,912.				
	g Noncash contributions included in lines 1a-1f	1g	$ 11,920,006.				
	h **Total.** Add lines 1a-1f			48,373,912.			
Program Service Revenue			Business Code				
	2 a UNM CONTRACT SERVICE REVENUE		611710	5,823,966.	5,823,966.		
	b DEVELOPMENT FUNDING ALLOCATION		523940	2,926,039.	2,926,039.		
	c						
	d						
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a-2f			8,750,005.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			3,183,578.		2690465.	493,113.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties			54,247.			54,247.
			(i) Real / (ii) Personal				
	6 a Gross rents	6a					
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
			(i) Securities / (ii) Other				
	7 a Gross amount from sales of assets other than inventory	7a	40,777,934. / 209,749.				
	b Less: cost or other basis and sales expenses	7b	33,113,036. / 114,612.				
	c Gain or (loss)	7c	7,664,898. / 95,137.				
	d Net gain or (loss)			7,760,035.			7760035.
	8 a Gross income from fundraising events (not including $ ________ of contributions reported on line 1c). See Part IV, line 18	8a					
	b Less: direct expenses	8b					
	c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities. See Part IV, line 19	9a					
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities						
	10 a Gross sales of inventory, less returns and allowances	10a					
	b Less: cost of goods sold	10b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code				
	11 a						
	b						
	c						
	d All other revenue		900099	7,980.			7,980.
	e **Total.** Add lines 11a-11d			7,980.			
	12 **Total revenue.** See instructions			68,129,757.	8,750,005.	2690465.	8315375.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	36,208,555.	36,208,555.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,400,663.	214,316.	1,332,260.	854,087.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	6,870,302.	934,364.	1,361,027.	4,574,911.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	682,936.	91,154.	195,860.	395,922.
9 Other employee benefits	949,529.	128,628.	176,875.	644,026.
10 Payroll taxes	643,684.	82,586.	169,266.	391,832.
11 Fees for services (nonemployees):				
a Management				
b Legal	19,841.		19,841.	
c Accounting	70,668.		70,668.	
d Lobbying	139,098.	132,285.		6,813.
e Professional fundraising services. See Part IV, line 17	190,138.			190,138.
f Investment management fees	231,884.		231,884.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	842,298.	158,308.	262,295.	421,695.
12 Advertising and promotion	179,558.	40,208.	17,565.	121,785.
13 Office expenses	236,649.	28,217.	177,367.	31,065.
14 Information technology	302,704.	3,454.	285,797.	13,453.
15 Royalties				
16 Occupancy	255,930.	8,539.	247,391.	
17 Travel	314,542.	32,992.	10,219.	271,331.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	61,800.		61,800.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	48,405.		48,405.	
23 Insurance	124,475.	40,256.	84,219.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a DONOR RELATIONS	1,187,196.	335,414.	4,170.	847,612.
b PAYMENTS TO ANNUITANTS	284,477.	284,477.		
c DUES AND SUBSCRIPTIONS	185,316.	83,190.	21,958.	80,168.
d PROFESSIONAL DEVELOPMEN	65,276.	7,161.	31,165.	26,950.
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	52,495,924.	38,814,104.	4,810,032.	8,871,788.
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 ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing			1	
	2	Savings and temporary cash investments		45,368,208.	2	27,260,943.
	3	Pledges and grants receivable, net		2,392,415.	3	1,995,070.
	4	Accounts receivable, net		695,277.	4	966,280.
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net		994,453.	7	684,574.
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		197,150.	9	145,690.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 939,407.			
	b	Less: accumulated depreciation	10b 270,285.	762,927.	10c	669,122.
	11	Investments - publicly traded securities		34,344,928.	11	39,420,797.
	12	Investments - other securities. See Part IV, line 11		288,414,948.	12	362,443,255.
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets		143,500.	14	143,500.
	15	Other assets. See Part IV, line 11		20,297,056.	15	20,938,281.
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		393,610,862.	16	454,667,512.
Liabilities	17	Accounts payable and accrued expenses		1,765,772.	17	1,794,906.
	18	Grants payable			18	
	19	Deferred revenue		547,188.	19	441,291.
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		96,963,116.	25	128,285,743.
	26	**Total liabilities.** Add lines 17 through 25		99,276,076.	26	130,521,940.
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here** ☒ **and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		7,402,377.	27	7,490,365.
	28	Net assets with donor restrictions		286,932,409.	28	316,655,207.
		Organizations that do not follow FASB ASC 958, check here ☐ **and complete lines 29 through 33.**				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building, or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		294,334,786.	32	324,145,572.
	33	Total liabilities and net assets/fund balances		393,610,862.	33	454,667,512.

Form **990** (2022)

232011 12-13-22

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	68,129,757.
2	Total expenses (must equal Part IX, column (A), line 25)	2	52,495,924.
3	Revenue less expenses. Subtract line 2 from line 1	3	15,633,833.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	294,334,786.
5	Net unrealized gains (losses) on investments	5	13,911,511.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	265,442.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	324,145,572.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: [ ] Cash [X] Accrual [ ] Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: [ ] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: [ ] Separate basis [ ] Consolidated basis [X] Both consolidated and separate basis			
c	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	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a		X
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 on Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2022
Open to Public Inspection

Name of the organization UNIVERSITY OF NEW MEXICO FOUNDATION, INC

Employer identification number 85-0275408

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

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

1 [ ] A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 [ ] A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
3 [ ] A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 [ ] A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
5 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 [ ] A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
8 [ ] A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
9 [ ] An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
10 [ ] An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
11 [ ] An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
12 [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a [ ] **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b [ ] **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c [ ] **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d [ ] **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e [ ] Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	28894746.	36333277.	39421081.	69846458.	48373912.	222869474
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	28894746.	36333277.	39421081.	69846458.	48373912.	222869474
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)						7754776.
6 **Public support.** Subtract line 5 from line 4.						215114698

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	28894746.	36333277.	39421081.	69846458.	48373912.	222869474
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1477606.	1465944.	2109549.	970,071.	547,360.	6570530.
9 Net income from unrelated business activities, whether or not the business is regularly carried on					1698187.	1698187.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)				21,151.	7,980.	29,131.
11 **Total support.** Add lines 7 through 10						231167322

12 Gross receipts from related activities, etc. (see instructions) ..... **12** 41,308,929.

13 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ..... ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) ..... **14** 93.06 %

15 Public support percentage from 2021 Schedule A, Part II, line 14 ..... **15** 92.30 %

16a **33 1/3% support test - 2022.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ..... ☒

b **33 1/3% support test - 2021.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ..... ☐

17a **10% -facts-and-circumstances test - 2022.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ..... ☐

b **10% -facts-and-circumstances test - 2021.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ..... ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ..... ☐

Part III **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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) — 15 — %

16 Public support percentage from 2021 Schedule A, Part III, line 15 — 16 — %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2022** (line 10c, column (f), divided by line 13, column (f)) — 17 — %

18 Investment income percentage from **2021** Schedule A, Part III, line 17 — 18 — %

19a **33 1/3% support tests - 2022.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

b **33 1/3% support tests - 2021.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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 on lines 11b and 11c below, the governing body of a supported organization?	**11a**		
b	A family member of a person described on line 11a above?	**11b**		
c	A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to line 11a, 11b, or 11c, provide detail in* **Part VI.**	**11c**		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, 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**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* **Part VI** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	**2**		

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 on line 2, above, 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 governmental entity (see instructions).*

			Yes	No
2	Activities Test. **Answer lines 2a and 2b 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.*	**2a**		
b	Did the activities described on line 2a, above, 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.*	**2b**		
3	Parent of Supported Organizations. **Answer lines 3a and 3b 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? *If "Yes" or "No" provide details in* **Part VI.**	**3a**		
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.*	**3b**		

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

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

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		
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		

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		
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		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	**Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount				Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
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		

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

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

Section D - Distributions		**Current Year**
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - *provide details in* **Part VI**)	5	
6 Other distributions (*describe in* **Part VI**). See instructions.	6	
7 **Total annual distributions.** Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (*provide details in* **Part VI**). See instructions.	8	
9 Distributable amount for 2022 from Section C, line 6	9	
10 Line 8 amount divided by line 9 amount	10	

Section E - Distribution Allocations (see instructions)	**(i)** **Excess Distributions**	**(ii)** **Underdistributions Pre-2022**	**(iii)** **Distributable Amount for 2022**
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - *explain in* **Part VI**). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f **Total** of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, *explain in* **Part VI.** See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in* **Part VI**. See instructions.			
7 **Excess distributions carryover to 2023.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MISCELLANEOUS REVENUE

2021 AMOUNT: $ 21,151.

2022 AMOUNT: $ 7,980.

Schedule B (Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Name of the organization	Employer identification number
UNIVERSITY OF NEW MEXICO FOUNDATION, INC	85-0275408

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

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

General Rule

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

Special Rules

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

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

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

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

Name of organization	Employer identification number
UNIVERSITY OF NEW MEXICO FOUNDATION, INC	85-0275408

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		$ 2,052,787.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2		$ 3,998,652.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
3		$ 2,103,750.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4		$ 2,102,934.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
5		$ 2,100,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
6		$ 2,000,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
UNIVERSITY OF NEW MEXICO FOUNDATION, INC	85-0275408

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		$ 1,635,228.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
8		$ 1,595,148.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
9		$ 1,340,938.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
10		$ 1,051,974.	Person [X] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
UNIVERSITY OF NEW MEXICO FOUNDATION, INC	85-0275408

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	SECURITIES	$ 3,998,652.	06/30/23

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
4	SECURITIES	$ 2,102,934.	06/30/23

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
8	SECURITIES	$ 1,595,148.	06/30/23

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
10	SECURITIES	$ 551,974.	06/30/23

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

Name of organization	Employer identification number
UNIVERSITY OF NEW MEXICO FOUNDATION, INC	85-0275408

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.** Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this info. once.) $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE C (Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

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

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

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

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

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

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

Name of organization	Employer identification number
UNIVERSITY OF NEW MEXICO FOUNDATION, INC	85-0275408

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures .... $

3 Volunteer hours for political campaign activities ....

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 .... $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 .... $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .... ☐ Yes ☐ No

4a Was a correction made? .... ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities .... $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities .... $

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b .... $

4 Did the filing organization file **Form 1120-POL** for this year? .... ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds. If none, enter -0-.	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000.

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-		
i Subtract line 1f from line 1c. If zero or less, enter -0-		

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2019	**(b)** 2020	**(c)** 2021	**(d)** 2022	**(e)** Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B **Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a) Yes	(a) No	(b) Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		139,098.
j Total. Add lines 1c through 1i			139,098.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

		Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1		
2 Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3		

Part III-B **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?	4	
5 Taxable amount of lobbying and political expenditures. See instructions	5	

Part IV **Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

LOBBYING ACTIVITIES INCLUDE PAYMENTS TO GO BOND FOR EDUCATION TO SUPPORT 2022 GENERAL OBLIGATION BOND VOTE; AND ATTENDANCE AT COMMUNITY EVENTS AND FOOD/BEVERAGE BY UNM DEPARTMENTS AND RELATED UNITS, WHICH GOVERNMENT OFFICIALS ATTENDED.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2022
Open to Public Inspection

Name of the organization
UNIVERSITY OF NEW MEXICO FOUNDATION, INC

Employer identification number
85-0275408

Part I **Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (for example, recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of a historically important land area
☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ________

4 Number of states where property subject to conservation easement is located ________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ________

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 $ ________

(ii) Assets included in Form 990, Part X $ ________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 $ ________

b Assets included in Form 990, Part X $ 1,543,621.

LHA **For Paperwork Reduction Act Notice, see the Instructions for Form 990.** **Schedule D (Form 990) 2022**

232051 09-01-22

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

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

a [ ] Public exhibition
b [ ] Scholarly research
c [ ] Preservation for future generations
d [ ] Loan or exchange program
e [X] Other SUPPORT UNM ART PROGRAMS

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

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

Part IV **Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

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

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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

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

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

Part V **Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	286,202,327.	299,699,378.	228,138,458.	231,981,429.	225,868,438.
b Contributions	28,342,250.	17,366,167.	17,001,713.	11,970,513.	8,939,647.
c Net investment earnings, gains, and losses	24,133,247.	-12,472,046.	70,153,193.	-1,104,920.	9,263,129.
d Grants or scholarships	18,224,471.	13,805,983.	11,491,811.	10,842,497.	8,368,670.
e Other expenditures for facilities and programs					
f Administrative expenses	5,361,306.	4,585,189.	4,102,175.	3,866,067.	3,721,115.
g End of year balance	315,092,047.	286,202,327.	299,699,378.	228,138,458.	231,981,429.

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

a Board designated or quasi-endowment 6.0900 %

b Permanent endowment 93.8600 %

c Term endowment .0500 %

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

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

		Yes	No
(i) Unrelated organizations	3a(i)		X
(ii) Related organizations	3a(ii)		X
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	132,660.			132,660.
b Buildings	402,000.			402,000.
c Leasehold improvements		7,210.	7,210.	0.
d Equipment		362,537.	263,075.	99,462.
e Other		35,000.		35,000.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)*				669,122.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) CIF - ILLIQUID REAL		
(B) ASSETS	8,721,284.	END-OF-YEAR MARKET VALUE
(C) CIF - MARKETABLE		
(D) ALTERNATIVE	19,057,474.	END-OF-YEAR MARKET VALUE
(E) CIF - PRIVATE EQUITY	82,061,463.	END-OF-YEAR MARKET VALUE
(F) CIF - REAL ESTATE FUNDS	7,221,379.	END-OF-YEAR MARKET VALUE
(G) CIF - MUTUAL FUND, EQUITY	245,381,655.	END-OF-YEAR MARKET VALUE
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	362,443,255.	

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.

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

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.)*	

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.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DUE TO CONSOLIDATED INVESTMENT	
(3) FUND	4,583,323.
(4) DUE TO UNIVERSITY OF NEW MEXICO	102,043,278.
(5) DEFERRED ANNUITIES PAYABLE	2,000,246.
(6) DEFERRED INFLOWS OF BENEFICIAL	
(7) INTEREST	19,658,896.
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)*	128,285,743.

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... [X]

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per 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	82,074,825.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	13,911,511.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	265,442.		
e	Add lines **2a** through **2d**			2e	14,176,953.
3	Subtract line **2e** from line **1**			3	67,897,872.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	231,884.		
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	231,884.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	68,129,756.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses 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	52,264,039.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	0.
3	Subtract line **2e** from line **1**			3	52,264,039.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	231,884.		
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	231,884.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	52,495,923.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART III, LINE 4:

THE DONATED ART HELD FOR SALE WILL BE SOLD, AND THE NET PROCEEDS WILL SUPPORT ART PROGRAMS, COLLECTIONS, MUSEUMS AND OTHER PROGRAMS AT THE UNIVERSITY OF NEW MEXICO.

PART V, LINE 4:

THE PURPOSE OF EACH ENDOWMENT FUND IS SPECIFIED IN A WRITTEN AGREEMENT WITH A DONOR(S) AND SUPPORTS THE MISSION OF THE UNIVERSITY OF NEW MEXICO, INCLUDING SCHOLARSHIPS, FACULTY SUPPORT, LIBRARIES, RESEARCH BUILDINGS, AND EQUIPMENT.

PART X, LINE 2:

Part XIII Supplemental Information *(continued)*

THE FOUNDATION IS AN ORGANIZATION DESCRIBED IN INTERNAL REVENUE CODE (IRC) SECTION 501(C)(3) AND AS SUCH IS EXEMPT FROM FEDERAL AND STATE INCOME TAX ON ITS RELATED INCOME UNDER SECTION 501(A) OF THE IRC. FURTHERMORE, AS A PUBLICLY SUPPORTED ORGANIZATION, IT IS CLASSIFIED AS A PUBLIC CHARITY AND NOT A PRIVATE FOUNDATION UNDER IRC SECTION 509(A)(1). THE FOUNDATION HAD NO MATERIAL UNRELATED BUSINESS INCOME; THEREFORE, NO PROVISION FOR INCOME TAXES IS INCLUDED IN THE FINANCIAL STATEMENTS.

AS OF JUNE 30, 2022, THE MOST RECENT FILING DATE, THE FOUNDATION HAD A NET OPERATING LOSS CARRYFORWARD OF APPROXIMATELY $706 THOUSAND, AS A RESULT OF CUMULATIVE LOSSES FROM UNDERLYING PARTNERSHIP INVESTMENTS WITHIN THE CIF. THE DEFERRED TAX ASSET ASSOCIATED WITH THIS LOSS CARRYFORWARD OF APPROXIMATELY $148 THOUSAND IS NOT RECOGNIZED ON THE ACCOMPANYING STATEMENTS OF NET POSITION DUE TO THE UNCERTAINTY OF FUTURE INCOME THAT WOULD BE NECESSARY TO REALIZE THE BENEFIT. THE FOUNDATION ESTIMATES THAT THE CHANGE IN THE DEFERRED TAX ASSET FOR THE YEAR ENDED JUNE 30, 2023 IS NOT MATERIAL.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

ANNUITIES PAYABLE ADJUSTMENT 265,442.

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
Attach to Form 990.
Go to *www.irs.gov/Form990* **for instructions and the latest information.**

OMB No. 1545-0047
2022
Open to Public Inspection

Name of the organization: UNIVERSITY OF NEW MEXICO FOUNDATION, INC

Employer identification number: 85-0275408

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ...... ☐ **Yes** ☐ **No**

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees, agents, and independent contractors in the region	**(d)** Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in the region	**(f)** Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	0	0	INVESTMENTS		13,205,843.
3 a Subtotal	0	0			13,205,843.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			13,205,843.

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶

3 Enter total number of other organizations or entities ▶

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*	[X] Yes	[ ] No
2	Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)*	[ ] Yes	[X] No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)*	[X] Yes	[ ] No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)*	[X] Yes	[ ] No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)*	[X] Yes	[ ] No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)*	[ ] Yes	[X] No

Schedule F (Form 990) 2022

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 3:

METHOD OF ACCOUNTING: ACCRUAL

SCHEDULE G (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization: UNIVERSITY OF NEW MEXICO FOUNDATION, INC

Employer identification number: 85-0275408

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

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

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

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

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(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
RUFFALO CODY - PO BOX 718, DES MOINES, IA 50303	PHONE, EMAIL, MAIL, CROWDFUNDING		X	233,651.	190,138.	43,513.
Total				233,651.	190,138.	43,513.

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

AL,AK,AR,AZ,CA,CO,CT,DC,DE,FL,GA,HI,IA,ID,IL,IN,KS,KY,MA,MD,ME,MI,MN,MO,MS
MT,NC,ND,NE,NH,NJ,NM,NV,NY,OH,OK,OR,PA,RI,SC,SD,TN,TX,UT,VA,VT,WA,WI,WV,WY

LHA **For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.** **Schedule G (Form 990) 2022**

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.

		(a) Event #1 (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
	11 Net income summary. Subtract line 10 from line 3, column (d)				

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

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

9 Enter the state(s) in which the organization conducts gaming activities: ______

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: ______

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

b If "Yes," explain: ______

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

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

13 Indicate the percentage of gaming activity conducted in:

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

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

Name

Address

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

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

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

Name

Address

16 Gaming manager information:

Name

Gaming manager compensation $

Description of services provided

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

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

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

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

Part IV **Supplemental Information** *(continued)*

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047
2022
Open to Public Inspection

Name of the organization: UNIVERSITY OF NEW MEXICO FOUNDATION, INC

Employer identification number 85-0275408

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF NEW MEXICO 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE, NM 87131	85-6000642	115	36,208,555.	0.			ENABLE UNIVERSITY TO ENGAGE IN COMPREHENSIVE EDUCATIONAL, RESEARCH AND SERVICE PROGRAMS.

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

3 Enter total number of other organizations listed in the line 1 table ..... 0.

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

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of noncash assistance

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

PART I, LINE 2:

THE FOUNDATION MAINTAINS RECORDS SUBSTANTIATING THE AMOUNT OF GRANTS.

GRANTS ARE MONITORED THROUGH THE UNIVERSITY OF NEW MEXICO'S ACCOUNTING

DEPARTMENT AND ITS BOARD OF REGENTS.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2022
Open to Public Inspection

Name of the organization: UNIVERSITY OF NEW MEXICO FOUNDATION, INC
Employer identification number: 85-0275408

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☒ Travel for companions ☐ Tax indemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	X	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☒ Compensation committee ☒ Independent compensation consultant ☐ Form 990 of other organizations ☐ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
c	Participate in or receive payment from an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4c		X
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	5a		X
b	Any related organization? If "Yes" on line 5a or 5b, describe in Part III.	5b		X
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		X
b	Any related organization? If "Yes" on line 6a or 6b, describe in Part III.	6b		X
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7	X	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JEFFREY TODD	(i)	428,597.	31,280.	0.	30,500.	19,894.	510,271.	0.
PRESIDENT AND CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) WILLLIAM UHER	(i)	247,957.	18,615.	0.	25,886.	7,737.	300,195.	0.
VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) PATRICK ALLEN	(i)	234,372.	19,120.	0.	23,647.	7,358.	284,497.	0.
GENERAL COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) LAWRENCE RYAN	(i)	221,356.	17,692.	0.	23,177.	12,694.	274,919.	0.
VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) KENNETH STANSBURY	(i)	207,214.	16,915.	0.	21,252.	11,601.	256,982.	0.
CFO & TREAS. (THRU 3/31/23)	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) KRISTINE C MAZZEI	(i)	163,102.	12,824.	0.	16,646.	120.	192,692.	0.
VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) PATRICIA IDAROLA	(i)	139,432.	11,099.	0.	14,899.	19,894.	185,324.	0.
CHIEF DIGITAL STRATEGY AND SOLUTIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) ANNETTE HAZEN	(i)	144,847.	11,401.	0.	15,167.	7,737.	179,152.	0.
SENIOR ASSOCIATE VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) GRETCHEN DOYLE	(i)	136,182.	11,192.	0.	14,162.	6,653.	168,189.	0.
SENIOR ASSOCIATE VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) BONNIE MCLESKY	(i)	123,750.	10,053.	0.	13,263.	14,715.	161,781.	0.
ASSOCIATE VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) CHRISTOPHER ALBRECHT	(i)	126,988.	10,270.	0.	13,264.	7,737.	158,259.	0.
SENIOR REGIONAL DIR. OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) ANNDEE WRIGHT BROWN	(i)	128,747.	10,188.	0.	13,442.	120.	152,497.	0.
EXECUTIVE DIRECTOR OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 1A:

A FAMILY MEMBER OF THE CEO TRAVELED FOR BONA FIDE BUSINESS PURPOSES OF THE FOUNDATION. NO TAXABLE COMPENSATION WAS REPORTED IN FY 23. EACH EXPENSE WAS EVALUATED FOR TREATMENT OF TAXABLE COMPENSATION, BUT WAS NOT BECAUSE THE EXPENSES WERE INCURRED FOR BUSINESS PURPOSES OF THE FOUNDATION.

PART I, LINE 7:

DISCRETION IS USED IN DETERMINING THE NON-FIXED COMPENSATION, WHICH IS BASED ON COMPLETION OF ORGANIZATION-WIDE GOALS AND IS CALCULATED USING A UNIFORM PERCENTAGE FOR THE ENTIRE ORGANIZATION. THIS COMPENSATION IS APPROVED BY THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization: UNIVERSITY OF NEW MEXICO FOUNDATION, INC

Employer identification number: 85-0275408

Part I **Types of Property**

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	138	11,920,006.	FMV
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ( )				
26	Other ( )				
27	Other ( )				
28	Other ( )				

29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement	29	0

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		X
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	X	
b	If "Yes," describe in Part II.			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

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

SCHEDULE M, PART I, COLUMN (B):

NUMBER OF ITEMS CONTRIBUTED

SCHEDULE M, LINE 32B:

A BROKER IS USED TO SELL GIFTS OF SECURITIES, AND REAL ESTATE AGENCIES ARE USED TO LIST AND SELL GIFTS OF REAL ESTATE

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization	Employer identification number
UNIVERSITY OF NEW MEXICO FOUNDATION, INC	85-0275408

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CREATE POWERFUL ENGAGEMENTS AND PARTNERSHIPS THAT LEAD TO INCREASED PHILANTHROPY, INVESTMENT, INNOVATION, AND SUPPORT FOR THE UNIVERSITY OF NEW MEXICO.

FORM 990, PART VI, SECTION A, LINE 7A:

THE BOARD OF REGENTS OF THE UNIVERSITY OF NEW MEXICO MAY APPOINT ONE MEMBER TO THE UNM FOUNDATION'S BOARD OF TRUSTEES. THE BOARD OF REGENTS IS THE CONSTITUTIONALLY DESCRIBED GOVERNING BODY OF THE UNIVERSITY, HAVING FIDUCIARY RESPONSIBILITY FOR THE ASSETS AND PROGRAMS OF THE UNIVERSITY. THE BOARD OF TRUSTEES IS THE ELECTED GOVERNING BOARD OF THE UNM FOUNDATION, HAVING FIDUCIARY RESPONSIBILITY FOR THE ASSETS AND PROGRAMS OF THE UNM FOUNDATION. THE PRESIDENT OF THE UNIVERSITY OF NEW MEXICO SERVES ON THE UNM FOUNDATION BOARD OF TRUSTEES AND MAY APPOINT UP TO TWO UNM DEANS TO SERVE ON THE UNM FOUNDATION BOARD OF TRUSTEES.

FORM 990, PART VI, SECTION A, LINE 7B:

THE CONSOLIDATED INVESTMENT FUND INCLUDES ASSETS OWNED BY THE UNIVERSITY OF NEW MEXICO AND ASSETS OWNED BY THE UNM FOUNDATION. THE BOARD OF REGENTS OF THE UNIVERSITY AND THE BOARD OF TRUSTEES OF THE UNM FOUNDATION JOINTLY APPROVE THE INVESTMENT POLICY AND THE INVESTMENT CONSULTANT FOR THE CONSOLIDATED INVESTMENT FUND.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM AND REVIEWED BY

Name of the organization: UNIVERSITY OF NEW MEXICO FOUNDATION, INC

Employer identification number: 85-0275408

THE AUDIT COMMITTEE AND THE EXECUTIVE COMMITTEE. AFTER THE AUDIT COMMITTEE APPROVES THE FORM 990, A PUBLIC DISCLOSURE COPY OF THE 990 IS PROVIDED TO EACH MEMBER OF THE BOARD OF TRUSTEES PRIOR TO FILING. THE UNREDACTED SCHEDULE B TO THE FORM 990 IS NOT REVIEWED BY THE FULL BOARD DUE TO THE CONFIDENTIAL AND PRIVATE NATURE OF ITS DONOR LIST. THE FORM 990 IS THEN FILED WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C:

ALL OFFICERS, TRUSTEES AND KEY EMPLOYEES ATTEST TO THEIR INDEPENDENCE UPON APPOINTMENT OR HIRE AND REAFFIRM THEIR INDEPENDENCE ANNUALLY. A TRUSTEE WITH A CONFLICT IS NOT PERMITTED TO VOTE ON ANY ACTION PERTAINING TO THAT MATTER. THERE WERE NO CONFLICTS OF INTEREST IN THE CURRENT YEAR.

FORM 990, PART VI, SECTION B, LINE 15:

THE CEO'S COMPENSATION IS DETERMINED BY THE UNM FOUNDATION BOARD OF TRUSTEES' EXECUTIVE COMMITTEE. THE COMPENSATION FOR ALL OTHER FOUNDATION EMPLOYEES IS DETERMINED BY THE CEO WITHIN RANGES CONSISTENT WITH PEER ORGANIZATIONS. TO ASSURE THE REASONABLENESS OF THE COMPENSATION ARRANGEMENT FOR THE CEO AND ALL OTHER FOUNDATION EMPLOYEES WHO MAY BE CONSIDERED A "DISQUALIFIED PERSON," ON AT LEAST AN ANNUAL BASIS THE FOUNDATION BOARD OF TRUSTEES' COMPENSATION COMMITTEE CONDUCTS A COMPREHENSIVE COMPENSATION ANALYSIS. THE COMPENSATION COMMITTEE'S COMPENSATION ANALYSIS IS PERFORMED BY TRUSTEES WHO ARE INDEPENDENT AND HAVE NO CONFLICT OF INTEREST, AND THE ANALYSIS ASSURES THAT THE COMPENSATION ARRANGEMENT FOR EACH POTENTIALLY DISQUALIFIED PERSON IS REASONABLE BASED ON A COMPARISON TO COMPENSATION DATA FROM LOCAL SOURCES AND BENCHMARKING OF REGIONAL AND NATIONAL PEERS. IN ADDITION, EVERY FIVE YEARS, THE FOUNDATION CONDUCTS AN INDIVIDUALIZED BENCHMARKING STUDY OF THE COMPENSATION FOR ALL POTENTIALLY DISQUALIFIED

Name of the organization: UNIVERSITY OF NEW MEXICO FOUNDATION, INC

Employer identification number: 85-0275408

PERSONS. THE COMPENSATION COMMITTEE DOCUMENTS ALL OF ITS ANALYSES IN WRITTEN MINUTES AND REPORTS. THE COMPENSATION COMMITTEE LAST CONDUCTED AND DOCUMENTED ITS COMPENSATION ANALYSIS IN FY 2022/2023.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL,AR,CA,DC,KY,LA,MA,MD,MI,MN,NH,NJ,NY,OK,OR,SC,WV

FORM 990, PART VI, SECTION C, LINE 18:

THE UNM FOUNDATION'S FORM 990 AND 990-T ARE AVAILABLE UPON REQUEST FROM THE OFFICE OF MARKETING AND COMMUNICATIONS AND ON ITS WEBSITE AT WWW.UNMFUND.ORG. FORM 990 IS ALSO AVAILABLE TO THE PUBLIC THROUGH GUIDESTAR'S WEBSITE AT WWW.GUIDESTAR.ORG.

THE ORGANIZATION'S FORM 1023 IS AVAILABLE UPON REQUEST ONLY.

FORM 990, PART VI, SECTION C, LINE 19:

THE FOUNDATION'S GOVERNING DOCUMENTS ARE FILED WITH THE NEW MEXICO SECRETARY OF STATE. INTERESTED PARTIES MAY REQUEST COPIES OF THE FOUNDATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND AUDITED FINANCIAL STATEMENTS FROM THE UNM FOUNDATION'S OFFICE OF MARKETING AND COMMUNICATIONS. THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND AUDITED FINANCIAL STATEMENTS ARE POSTED ON ITS WEBSITE: WWW.UNMFUND.ORG.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

ANNUITY CHANGE IN ACTUARIAL LIABILITY 265,442.

FORM 990, PART VIII, LINE 2B

Name of the organization: UNIVERSITY OF NEW MEXICO FOUNDATION, INC

Employer identification number: 85-0275408

THE DEVELOPMENT FUNDING ALLOCATION IS A FEE ASSESSED AGAINST THE CONSOLIDATED INVESTMENT FUND, WHICH HOLDS AND INVESTS ENDOWMENT ASSETS ON BEHALF OF THE UNIVERSITY AND THE UNM FOUNDATION. THE AMOUNT REPORTED ON LINE 2B ($2,926,039) AS REVENUE IS THE ASSESSMENT AGAINST THE ENDOWMENT ASSETS OWNED BY THE UNIVERSITY. THE AMOUNT ASSESSED AGAINST ENDOWMENT ASSETS OWNED BY THE UNM FOUNDATION ($5,373,256) IS NOT REFLECTED AS REVENUE BUT AS A TRANSFER OF ASSETS FROM RESTRICTED TO UNRESTRICTED FUNDS.

FORM 990, PART IX, LINE 11F

INVESTMENT MANAGEMENT FEES REPORTED ARE PRORATED BASED ON THE PERCENTAGE OF THE ENDOWMENT OWNED BY THE UNIVERSITY AND THE PERCENTAGE OWNED BY THE UNM FOUNDATION.

FORM 990, PART IX, LINE 25, COLUMN D

THE FUNDRAISING EXPENSES REPORTED REFLECT ALL THE EXPENSES INCURRED BY THE FOUNDATION TO SECURE PRIVATE CONTRIBUTIONS IN SUPPORT OF THE UNIVERSITY OF NEW MEXICO. HOWEVER, THE CONTRIBUTIONS REPORTED IN PART I, LINE 8, AND PART VIII, LINE 1H, INCLUDE ONLY CONTRIBUTIONS THAT ARE PROCESSED THROUGH THE FOUNDATION'S FINANCIAL RECORDS. FOR INSTANCE, GIFTS OF ARTWORK, REAL ESTATE, AND EQUIPMENT FOR USE BY THE UNIVERSITY ARE PROCESSED THROUGH THE UNIVERSITY'S FINANCIAL RECORDS AND ARE NOT INCLUDED IN PART I, LINE 8, AND PART VIII, LINE 1H. SIMILARLY, PLEDGES TO ENDOWMENT FUNDS ARE NOT INCLUDED AND ONLY REALIZED BEQUESTS ARE INCLUDED IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES. THEREFORE, FORM 990 SHOULD NOT BE USED TO DETERMINE THE FOUNDATION'S COST-TO-RAISE-A-DOLLAR, GIVEN THE EXCLUSIONS/LIMITATIONS NOTED ABOVE.

Name of the organization: UNIVERSITY OF NEW MEXICO FOUNDATION, INC

Employer identification number: 85-0275408

FORM 990, PART X, LINES 2, 11 AND 12

ENDOWMENT ASSETS OF BOTH THE UNIVERSITY AND THE UNM FOUNDATION ARE HELD IN THE CONSOLIDATED INVESTMENT FUND. ENDOWMENT ASSETS OWNED BY THE UNIVERSITY ($300,745,514) ARE NOT REPORTED ON THE UNM FOUNDATION'S FORM 990. ENDOWMENT ASSETS OWNED BY THE UNM FOUNDATION ($413,077,926) ARE REPORTED ON THE UNM FOUNDATION'S FORM 990, PART X, LINES 2, 11 AND 12 WITH ADDITIONAL DETAIL ON SCHEDULE D, PART VII.

EXTENDED TO MAY 15, 2024

Form **990-T**

Department of the Treasury
Internal Revenue Service

Exempt Organization Business Income Tax Return

(and proxy tax under section 6033(e))

For calendar year 2022 or other tax year beginning JUL 1, 2022 , and ending JUN 30, 2023 .

Go to www.irs.gov/Form990T for instructions and the latest information.
Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No. 1545-0047

2022

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

A [ ] Check box if address changed.

B Exempt under section
[X] 501(C)(3)
[ ] 408(e) [ ] 220(e)
[ ] 408A [ ] 530(a)
[ ] 529(a) [ ] 529A

Print or Type

Name of organization ([ ] Check box if name changed and see instructions.)
UNIVERSITY OF NEW MEXICO FOUNDATION, INC

Number, street, and room or suite no. If a P.O. box, see instructions.
700 LOMAS BLVD. NE, 108

City or town, state or province, country, and ZIP or foreign postal code
ALBUQUERQUE, NM 87102

D Employer identification number
85-0275408

E Group exemption number (see instructions)

F [ ] Check box if an amended return.

C Book value of all assets at end of year .... 454,667,512.

G Check organization type [X] 501(c) corporation [ ] 501(c) trust [ ] 401(a) trust [ ] Other trust [ ] State college/university

H Check if filing only to [ ] Claim credit from Form 8941 [ ] Claim a refund shown on Form 2439

I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation [ ]

J Enter the number of attached Schedules A (Form 990-T) 1

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

L The books are in care of NADINA PAISANO Telephone number 505-313-7600

Part I Total Unrelated Business Taxable Income

1	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	2,589,486.
2	Reserved	2	
3	Add lines 1 and 2	3	2,589,486.
4	Charitable contributions (see instructions for limitation rules) STMT 1 STMT 2	4	188,688.
5	Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	5	2,400,798.
6	Deduction for net operating loss. See instructions STATEMENT 3	6	701,611.
7	Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7	1,699,187.
8	Specific deduction (generally $1,000, but see instructions for exceptions)	8	1,000.
9	**Trusts.** Section 199A deduction. See instructions	9	
10	**Total deductions.** Add lines 8 and 9	10	1,000.
11	**Unrelated business taxable income.** Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	11	1,698,187.

Part II Tax Computation

1	**Organizations taxable as corporations.** Multiply Part I, line 11 by 21% (0.21)	1	356,619.
2	**Trusts taxable at trust rates.** See instructions for tax computation. Income tax on the amount on Part I, line 11 from: [ ] Tax rate schedule or [ ] Schedule D (Form 1041)	2	
3	**Proxy tax.** See instructions	3	
4	Other tax amounts. See instructions	4	
5	Alternative minimum tax (trusts only)	5	
6	**Tax on noncompliant facility income.** See instructions	6	
7	**Total.** Add lines 3 through 6 to line 1 or 2, whichever applies	7	356,619.

LHA **For Paperwork Reduction Act Notice, see instructions.** Form **990-T** (2022)

223701 01-16-23

Part III Tax and Payments

1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a			
b	Other credits (see instructions) SEE STATEMENT 5	1b	2,864.		
c	General business credit. Attach Form 3800 (see instructions)	1c			
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	1d			
e	**Total credits.** Add lines 1a through 1d			1e	2,864.
2	Subtract line 1e from Part II, line 7			2	353,755.
3	Other amounts due. Check if from: ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach statement)			3	
4	**Total tax.** Add lines 2 and 3 (see instructions). ☐ Check if includes tax previously deferred under section 1294. Enter tax amount here			4	353,755.
5	Current net 965 tax liability paid from Form 965-A, Part II, column (k)			5	0.
6a	Payments: A 2021 overpayment credited to 2022	6a			
b	2022 estimated tax payments. Check if section 643(g) election applies ☐	6b			
c	Tax deposited with Form 8868	6c	340,000.		
d	Foreign organizations: Tax paid or withheld at source (see instructions)	6d			
e	Backup withholding (see instructions)	6e			
f	Credit for small employer health insurance premiums (attach Form 8941)	6f			
g	Other credits, adjustments, and payments: ☐ Form 2439 ____ ☐ Form 4136 ____ ☐ Other ____ Total	6g			
7	**Total payments.** Add lines 6a through 6g			7	340,000.
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached ☐			8	19,369.
9	**Tax due.** If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed			9	33,124.
10	**Overpayment.** If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid			10	
11	Enter the amount of line 10 you want: **Credited to 2023 estimated tax** Refunded			11	

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

		Yes	No
1	At any time during the 2022 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here		X
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
3	Enter the amount of tax-exempt interest received or accrued during the tax year $		
4	Enter available pre-2018 NOL carryovers here $ 701,611. Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.		
5	Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		

Business Activity Code	Available post-2017 NOL carryover
	$
	$

		Yes	No
6a	Did the organization change its method of accounting? (see instructions)		X
b	If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V		

Part V Supplemental Information

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

Sign Here

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

Signature of officer: [signature] | Date: 5/3/24 | Title: CHIEF FINANCIAL OFFICER

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

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
STEVEN TALBOT	STEVEN TALBOT	04/29/24		P01695427
Firm's name MOSS ADAMS LLP			Firm's EIN 91-0189318	
Firm's address 6565 AMERICAS PARKWAY NE STE 600 ALBUQUERQUE, NM 87110			Phone no. 505-878-7200	

FORM 990-T CONTRIBUTIONS STATEMENT 1

DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT
GRANTS AND CONTRIBUTIONS	N/A	36,208,555.
FROM PARTNERSHIPS	N/A	1,064.
CHARITABLE CONTRIBUTIONS - AMBERBROOK VII, LP	N/A	40.
TOTAL TO FORM 990-T, PART I, LINE 4		36,209,659.

FORM 990-T CONTRIBUTIONS SUMMARY STATEMENT 2

QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT		
QUALIFIED CONTRIBUTIONS SUBJECT TO 25% LIMIT		
CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS		
FOR TAX YEAR 2017		
FOR TAX YEAR 2018		
FOR TAX YEAR 2019		
FOR TAX YEAR 2020		
FOR TAX YEAR 2021		
TOTAL CARRYOVER		
TOTAL CURRENT YEAR 10% CONTRIBUTIONS	36,209,659	
TOTAL CONTRIBUTIONS AVAILABLE	36,209,659	
TAXABLE INCOME LIMITATION AS ADJUSTED	188,688	
EXCESS CONTRIBUTIONS	36,020,971	
EXCESS 100% CONTRIBUTIONS	0	
TOTAL EXCESS CONTRIBUTIONS	36,020,971	
ALLOWABLE CONTRIBUTIONS DEDUCTION		188,688
TOTAL CONTRIBUTION DEDUCTION		188,688

FORM 990-T	PRE 2018 NOL SCHEDULE	STATEMENT 3

PRE-2018 NOL CARRY FORWARD FROM PRIOR YEAR	701,611.
PRE-2018 NOL DEDUCTION INCLUDED IN PART I, LINE 6	701,611.

SCHEDULE A PORTION OF PRE-2018 NOL

SCHEDULE A ENTITY	SCHEDULE A SHARE
1	0.

TOTAL SCHEDULE A SHARE OF PRE-2018 NOL	0.
NET OPERATING DEDUCTION	701,611.
BALANCE AFTER PRE-2018 NOL DEDUCTION	1,699,187.
EXPIRING NET OPERATING LOSSES	0.
CARRY FORWARD OF NET OPERATING LOSS	0.

FORM 990-T	PRE-2018 NET OPERATING LOSS DEDUCTION	STATEMENT 4

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/08	118,411.	118,411.	0.	0.
06/30/09	289,765.	289,765.	0.	0.
06/30/10	434,162.	434,162.	0.	0.
06/30/11	507,343.	507,343.	0.	0.
06/30/12	1,255,312.	1,255,312.	0.	0.
06/30/13	371,162.	371,162.	0.	0.
06/30/15	133,442.	88,312.	45,130.	45,130.
06/30/16	656,481.	0.	656,481.	656,481.
NOL CARRYOVER AVAILABLE THIS YEAR			701,611.	701,611.

FORM 990-T	OTHER CREDITS	STATEMENT 5

DESCRIPTION	AMOUNT
FOREIGN TAX CREDIT (1118 ATTACHED)	2,864.
TOTAL TO FORM 990-T, PAGE 2, PART III, LINE 1B	2,864.

SCHEDULE A (Form 990-T)

Department of the Treasury
Internal Revenue Service

Unrelated Business Taxable Income From an Unrelated Trade or Business

Go to www.irs.gov/Form990T for instructions and the latest information.
Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No. 1545-0047

2022

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

A Name of the organization: UNIVERSITY OF NEW MEXICO FOUNDATION, INC

B **Employer identification number**: 85-0275408

C Unrelated business activity code (see instructions): 523000

D Sequence: 1 of 1

E Describe the unrelated trade or business: PARTNERSHIP INVESTMENTS

Part I Unrelated Trade or Business Income

			(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales				
b	Less returns and allowances ___ c Balance	1c			
2	Cost of goods sold (Part III, line 8)	2			
3	Gross profit. Subtract line 2 from line 1c	3			
4a	Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions	4a	358,178.		358,178.
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b			
c	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 6	5	2,332,287.		2,332,287.
6	Rent income (Part IV)	6			
7	Unrelated debt-financed income (Part V)	7			
8	Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8			
9	Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	9			
10	Exploited exempt activity income (Part VIII)	10			
11	Advertising income (Part IX)	11			
12	Other income (see instructions; attach statement)	12			
13	**Total.** Combine lines 3 through 12	13	2,690,465.		2,690,465.

Part II Deductions Not Taken Elsewhere

See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

1	Compensation of officers, directors, and trustees (Part X)	1	7,132.
2	Salaries and wages	2	2,745.
3	Repairs and maintenance	3	
4	Bad debts	4	
5	Interest (attach statement). See instructions	5	
6	Taxes and licenses	6	12,482.
7	Depreciation (attach Form 4562). See instructions — 7		
8	Less depreciation claimed in Part III and elsewhere on return — 8a	8b	
9	Depletion	9	
10	Contributions to deferred compensation plans	10	
11	Employee benefit programs	11	
12	Excess exempt expenses (Part VIII)	12	
13	Excess readership costs (Part IX)	13	
14	Other deductions (attach statement) SEE STATEMENT 7	14	78,620.
15	**Total deductions.** Add lines 1 through 14	15	100,979.
16	Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	16	2,589,486.
17	Deduction for net operating loss. See instructions	17	0.
18	**Unrelated business taxable income.** Subtract line 17 from line 16	18	2,589,486.

Part III Cost of Goods Sold

Enter method of inventory valuation

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach statement)	4	
5	Other costs (attach statement)	5	
6	**Total.** Add lines 1 through 5	6	
7	Inventory at end of year	7	
8	**Cost of goods sold.** Subtract line 7 from line 6. Enter here and in Part I, line 2	8	

9 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? ☐ Yes ☐ No

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.

A ☐

B ☐

C ☐

D ☐

	A	B	C	D
2 Rent received or accrued				
a From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				
b From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				
c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				

3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A) 0.

	A	B	C	D
4 Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)				

5 **Total deductions.** Add line 4 columns A through D. Enter here and on Part I, line 6, column (B) 0.

Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.

A ☐

B ☐

C ☐

D ☐

	A	B	C	D
2 Gross income from or allocable to debt-financed property				
3 Deductions directly connected with or allocable to debt-financed property				
a Straight line depreciation (attach statement)				
b Other deductions (attach statement)				
c Total deductions (add lines 3a and 3b, columns A through D)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement)				
5 Average adjusted basis of or allocable to debt-financed property (attach statement)				
6 Divide line 4 by line 5	%	%	%	%
7 Gross income reportable. Multiply line 2 by line 6				

8 **Total gross income** (add line 7, columns A through D). Enter here and on Part I, line 7, column (A) 0.

	A	B	C	D
9 Allocable deductions. Multiply line 3c by line 6				

10 **Total allocable deductions.** Add line 9, columns A through D. Enter here and on Part I, line 7, column (B) 0.

11 **Total dividends-received deductions** included in line 10 0.

Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

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

Nonexempt Controlled Organizations

7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)
Totals			0.	0.

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)				
(2)				
(3)				
(4)				
	Add amounts in column 2. Enter here and on Part I, line 9, column (A)			Add amounts in column 5. Enter here and on Part I, line 9, column (B)
Totals	0.			0.

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1	Description of exploited activity:		
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	2	
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	3	
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	4	
5	Gross income from activity that is not unrelated business income	5	
6	Expenses attributable to income entered on line 5	6	
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	7	

Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

A ☐
B ☐
C ☐
D ☐

Enter amounts for each periodical listed above in the corresponding column.

	A	B	C	D
2 Gross advertising income				
a Add columns A through D. Enter here and on Part I, line 11, column (A)				0.
3 Direct advertising costs by periodical				
a Add columns A through D. Enter here and on Part I, line 11, column (B)				0.
4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8				
5 Readership costs				
6 Circulation income				
7 Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero				
8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7				

a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13 .... 0.

Part X Compensation of Officers, Directors, and Trustees (see instructions)

	1. Name	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)	SEE STATEMENT 8		%	
(2)			%	
(3)			%	
(4)			%	
Total. Enter here and on Part II, line 1				7,132.

Part XI Supplemental Information (see instructions)

FORM 990-T (A) INCOME (LOSS) FROM PARTNERSHIPS STATEMENT 6

DESCRIPTION	NET INCOME OR (LOSS)
ADAMS STREET 2006 DIRECT FUND, LP - ORDINARY BUSINESS INCOME (LOSS)	837.
ADAMS STREET 2007 DIRECT FUND, LP - ORDINARY BUSINESS INCOME (LOSS)	2,782.
ADAMS STREET 2008 DIRECT FUND, LP - ORDINARY BUSINESS INCOME (LOSS)	82.
ADAMS STREET 2008 DIRECT FUND, LP - OTHER INCOME (LOSS)	-28.
ADAMS STREET 2009 DIRECT FUND, LP - ORDINARY BUSINESS INCOME (LOSS)	889.
ADAMS STREET 2009 DIRECT FUND, LP - OTHER INCOME (LOSS)	-225.
ADAMS STREET PARTNERSHIP FUND - 2005 US FU - ORDINARY BUSINESS INCOME (LOSS)	951.
ADAMS STREET PARTNERSHIP FUND - 2005 US FU - INTEREST INCOME	8.
ADAMS STREET PARTNERSHIP FUND - 2005 US FU - ROYALTIES	3.
ADAMS STREET PARTNERSHIP FUND - 2005 US FU - OTHER INCOME (LOSS)	253.
ADAMS STREET PARTNERSHIP FUND - 2006 NON-U - ORDINARY BUSINESS INCOME (LOSS)	-126.
ADAMS STREET PARTNERSHIP FUND - 2006 NON-U - OTHER INCOME (LOSS)	-26.
ADAMS STREET PARTNERSHIP FUND - 2006 US FU - ORDINARY BUSINESS INCOME (LOSS)	-199.
ADAMS STREET PARTNERSHIP FUND - 2006 US FU - INTEREST INCOME	4.
ADAMS STREET PARTNERSHIP FUND - 2006 US FU - ROYALTIES	2.
ADAMS STREET PARTNERSHIP FUND - 2006 US FU - OTHER INCOME (LOSS)	-11.
ADAMS STREET PARTNERSHIP FUND - 2007 NON-U - ORDINARY BUSINESS INCOME (LOSS)	-440.
ADAMS STREET PARTNERSHIP FUND - 2007 NON-U - OTHER INCOME (LOSS)	-92.
ADAMS STREET PARTNERSHIP FUND - 2007 US FU - ORDINARY BUSINESS INCOME (LOSS)	3,350.
ADAMS STREET PARTNERSHIP FUND - 2007 US FU - INTEREST INCOME	63.
ADAMS STREET PARTNERSHIP FUND - 2007 US FU - DIVIDEND INCOME	57.
ADAMS STREET PARTNERSHIP FUND - 2007 US FU - OTHER INCOME (LOSS)	-473.
ADAMS STREET PARTNERSHIP FUND - 2008 NON-U - ORDINARY BUSINESS INCOME (LOSS)	-376.
ADAMS STREET PARTNERSHIP FUND - 2008 NON-U - OTHER INCOME (LOSS)	-103.
ADAMS STREET PARTNERSHIP FUND - 2008 US FU - ORDINARY BUSINESS INCOME (LOSS)	7,874.
ADAMS STREET PARTNERSHIP FUND - 2008 US FU - INTEREST INCOME	41.
ADAMS STREET PARTNERSHIP FUND - 2008 US FU - DIVIDEND INCOME	36.
ADAMS STREET PARTNERSHIP FUND - 2008 US FU - OTHER INCOME (LOSS)	-2,117.

ADAMS STREET PARTNERSHIP FUND - 2009 NON-U - ORDINARY BUSINESS INCOME (LOSS)	-35.
ADAMS STREET PARTNERSHIP FUND - 2009 NON-U - ORDINARY BUSINESS INCOME (LOSS)	69.
ADAMS STREET PARTNERSHIP FUND - 2009 NON-U - OTHER INCOME (LOSS)	-26.
ADAMS STREET PARTNERSHIP FUND - 2009 US FU - ORDINARY BUSINESS INCOME (LOSS)	17,074.
ADAMS STREET PARTNERSHIP FUND - 2009 US FU - NET RENTAL REAL ESTATE INCOME	-566.
ADAMS STREET PARTNERSHIP FUND - 2009 US FU - INTEREST INCOME	117.
ADAMS STREET PARTNERSHIP FUND - 2009 US FU - DIVIDEND INCOME	36.
ADAMS STREET PARTNERSHIP FUND - 2009 US FU - ROYALTIES	1,102.
ADAMS STREET PARTNERSHIP FUND - 2009 US FU - OTHER INCOME (LOSS)	-5,047.
ADAMS STREET PARTNERSHIP FUND - 2016 US (S - ORDINARY BUSINESS INCOME (LOSS)	-1,089.
ADAMS STREET PARTNERSHIP FUND - 2016 US (S - INTEREST INCOME	898.
ADAMS STREET PARTNERSHIP FUND - 2016 US (S - DIVIDEND INCOME	1,409.
ADAMS STREET PARTNERSHIP FUND - 2016 US (S - OTHER INCOME (LOSS)	-2,356.
ADAMS STREET PARTNERSHIP FUND - 2016 US, L - ORDINARY BUSINESS INCOME (LOSS)	26,165.
ADAMS STREET PARTNERSHIP FUND - 2016 US, L - NET RENTAL REAL ESTATE INCOME	-77.
ADAMS STREET PARTNERSHIP FUND - 2016 US, L - OTHER NET RENTAL INCOME (LOSS)	1.
ADAMS STREET PARTNERSHIP FUND - 2016 US, L - INTEREST INCOME	2,772.
ADAMS STREET PARTNERSHIP FUND - 2016 US, L - DIVIDEND INCOME	3,968.
ADAMS STREET PARTNERSHIP FUND - 2016 US, L - ROYALTIES	1,200.
ADAMS STREET PARTNERSHIP FUND - 2016 US, L - OTHER INCOME (LOSS)	-54,236.
AMBERBROOK VII, LP - ORDINARY BUSINESS INCOME (LOSS)	13,278.
AMBERBROOK VII, LP - NET RENTAL REAL ESTATE INCOME	-89.
AMBERBROOK VII, LP - OTHER NET RENTAL INCOME (LOSS)	1.
AMBERBROOK VII, LP - INTEREST INCOME	7,967.
AMBERBROOK VII, LP - DIVIDEND INCOME	492.
AMBERBROOK VII, LP - ROYALTIES	116.
AMBERBROOK VII, LP - OTHER INCOME (LOSS)	6,026.
ARCHLIGHT ENERGY PARTNERS FUND VII, LP - ORDINARY BUSINESS INCOME (LOSS)	47,645.
ARCHLIGHT ENERGY PARTNERS FUND VII, LP - INTEREST INCOME	15,443.
ARCHLIGHT ENERGY PARTNERS FUND VII, LP - DIVIDEND INCOME	36,173.
ARCHLIGHT ENERGY PARTNERS FUND VII, LP - OTHER INCOME (LOSS)	-37,542.
BROAD STREET LOAN PARTNERS IV OFFSHORE, SL - ORDINARY BUSINESS INCOME (LOSS)	997,656.
BROAD STREET LOAN PARTNERS IV OFFSHORE, SL - DIVIDEND INCOME	15,215.
BROAD STREET LOAN PARTNERS IV OFFSHORE, SL - OTHER INCOME (LOSS)	-30,799.
CD&R FUND X ENERGY A, LP - ORDINARY BUSINESS INCOME (LOSS)	-99,258.

CD&R FUND X ENERGY A, LP - OTHER INCOME (LOSS)	13,345.
CD&R FUND X, LP - ORDINARY BUSINESS INCOME (LOSS)	63,706.
CD&R FUND X, LP - INTEREST INCOME	4,956.
CD&R FUND X, LP - OTHER INCOME (LOSS)	-10,096.
CD&R FUND X WATERWORKS B, LP - ORDINARY BUSINESS INCOME (LOSS)	384,646.
COMMONFUND CAPITAL INTERNATIONAL PARTNERS - INTEREST INCOME	4.
COMMONFUND CAPITAL INTERNATIONAL PARTNERS - OTHER INCOME (LOSS)	-47.
COMMONFUND CAPITAL INTERNATIONAL PARTNERS - INTEREST INCOME	1.
COMMONFUND CAPITAL INTERNATIONAL PARTNERS - OTHER INCOME (LOSS)	1.
COMMONFUND CAPITAL NATURAL RESOURCES PARTN - ORDINARY BUSINESS INCOME (LOSS)	10,782.
COMMONFUND CAPITAL NATURAL RESOURCES PARTN - NET RENTAL REAL ESTATE INCOME	6.
COMMONFUND CAPITAL NATURAL RESOURCES PARTN - INTEREST INCOME	12.
COMMONFUND CAPITAL NATURAL RESOURCES PARTN - DIVIDEND INCOME	5.
COMMONFUND CAPITAL NATURAL RESOURCES PARTN - OTHER INCOME (LOSS)	-407.
COMMONFUND CAPITAL NATURAL RESOURCES PARTN - ORDINARY BUSINESS INCOME (LOSS)	97,683.
COMMONFUND CAPITAL NATURAL RESOURCES PARTN - OTHER NET RENTAL INCOME (LOSS)	571.
COMMONFUND CAPITAL NATURAL RESOURCES PARTN - INTEREST INCOME	464.
COMMONFUND CAPITAL NATURAL RESOURCES PARTN - DIVIDEND INCOME	811.
COMMONFUND CAPITAL NATURAL RESOURCES PARTN - ROYALTIES	379.
COMMONFUND CAPITAL NATURAL RESOURCES PARTN - OTHER INCOME (LOSS)	-36,576.
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS - ORDINARY BUSINESS INCOME (LOSS)	10.
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS - ORDINARY BUSINESS INCOME (LOSS)	9,199.
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS - NET RENTAL REAL ESTATE INCOME	-222.
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS - INTEREST INCOME	5.
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS - DIVIDEND INCOME	103.
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS - OTHER INCOME (LOSS)	1,015.
COMMONFUND CAPITAL VENTURE PARTNERS VII, L - OTHER INCOME (LOSS)	-38.
COMMONFUND CAPITAL VENTURE PARTNERS VIII, - ORDINARY BUSINESS INCOME (LOSS)	93.
COMMONFUND CAPITAL VENTURE PARTNERS VIII, - OTHER INCOME (LOSS)	-62.
COMMONFUND CAPITAL VENTURE PARTNERS IX, LP - ORDINARY BUSINESS INCOME (LOSS)	-205.
COMMONFUND CAPITAL VENTURE PARTNERS IX, LP - OTHER INCOME (LOSS)	-19.

GOLUB CAPITAL PARTNERS 11, LP - ORDINARY BUSINESS INCOME (LOSS)	-3,137.
LANDMARK REAL ESTATE PARTNERS VIII, LP - ORDINARY BUSINESS INCOME (LOSS)	-103,327.
LANDMARK REAL ESTATE PARTNERS VIII, LP - NET RENTAL REAL ESTATE INCOME	-44,116.
LANDMARK REAL ESTATE PARTNERS VIII, LP - OTHER NET RENTAL INCOME (LOSS)	1.
LANDMARK REAL ESTATE PARTNERS VIII, LP - INTEREST INCOME	7,803.
LANDMARK REAL ESTATE PARTNERS VIII, LP - DIVIDEND INCOME	5,254.
LANDMARK REAL ESTATE PARTNERS VIII, LP - ROYALTIES	8.
LANDMARK REAL ESTATE PARTNERS VIII, LP - OTHER INCOME (LOSS)	-23,297.
METROPOLITAN REAL ESTATE PARTNERS V, LP - ORDINARY BUSINESS INCOME (LOSS)	-31.
METROPOLITAN REAL ESTATE PARTNERS VI, LP - ORDINARY BUSINESS INCOME (LOSS)	-29.
MONTAUK TRIGUARD FUND IV, LP - ORDINARY BUSINESS INCOME (LOSS)	-3,422.
NEWBURY EQUITY PARTNERS, LP - ORDINARY BUSINESS INCOME (LOSS)	-33.
NEWBURY EQUITY PARTNERS, LP - INTEREST INCOME	6.
NEWBURY EQUITY PARTNERS, LP - OTHER INCOME (LOSS)	2.
NEWLIN ENERGY PARTNERS II, LP - ORDINARY BUSINESS INCOME (LOSS)	37,851.
NEWLIN ENERGY PARTNERS II, LP - OTHER INCOME (LOSS)	-16,172.
NEWLIN ENERGY PARTNERS, LP - ORDINARY BUSINESS INCOME (LOSS)	-59.
ODYSSEY INVESTMENT PARTNERS VI, LP - ORDINARY BUSINESS INCOME (LOSS)	-22,698.
ODYSSEY INVESTMENT PARTNERS VI, LP - OTHER INCOME (LOSS)	-60,571.
QUANTUM ENERGY PARTNERS IV, LP - ORDINARY BUSINESS INCOME (LOSS)	-301.
QUANTUM ENERGY PARTNERS V, LP - ORDINARY BUSINESS INCOME (LOSS)	148,213.
QUANTUM ENERGY PARTNERS VII, LP - ORDINARY BUSINESS INCOME (LOSS)	767,279.
RCP FUND XIII, LP - ORDINARY BUSINESS INCOME (LOSS)	123,010.
WEXFORD PARTNERS 11, LP - ORDINARY BUSINESS INCOME (LOSS)	4,690.
STEPSTONE VC GLOBAL PARTNERS IX-B - ORDINARY BUSINESS INCOME (LOSS)	-150.
STEPSTONE VC GLOBAL PARTNERS IX-B - INTEREST INCOME	2.
STEPSTONE VC GLOBAL PARTNERS IX-B - OTHER INCOME (LOSS)	-813.
STEPSTONE VC GLOBAL PARTNERS X-B - ORDINARY BUSINESS INCOME (LOSS)	-520.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5	2,332,287.

FORM 990-T (A) OTHER DEDUCTIONS STATEMENT 7

DESCRIPTION	AMOUNT
990-T, 926 AND STATE UBI TAX PREPARATION FEES	26,119.
INVESTMENT CUSTODY AND CONSULTANT FEES	52,501.
TOTAL TO SCHEDULE A, PART II, LINE 14	78,620.

FORM 990-T (A) PART X - COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES STATEMENT 8

NAME	TITLE	PERCENT	COMPENSATION
JEFFREY TODD	PRESIDENT AND CEO	1.00%	1,558.
KENNY STANSBURY	CFO AND TREASURER	1.00%	2,672.
PATRICK ALLEN	GENERAL COUNSEL	1.00%	883.
PATRICIA IDAROLA	SENIOR ASSOCIATE VICE PRESIDENT	1.00%	822.
NADINA PAISANO	CFO AND TREASURER	10.00%	1,197.
TOTAL TO FORM 990-T, SCHEDULE A, PART X			7,132.