efile	e GF	RAPHIC	print	Submission Da	te - 2023-05-25				DL	.N: 934	493145013253	
Form	9	90	Re	eturn of O	rganization	Exemp	ot Fre	om In	come Tax		AB No. 1545-0047	
101111			Under		', or 4947(a)(1) of th			•	-	is)	2022	
				Do not ente	r social security numl	bers on this for	m as it m	ay be mad	e public.		pen to Public	
Treas	ury	ent of the		► Go to <u>www.i</u>	<u>rs.gov/Form990</u> for	instructions	and the	latest inf	ormation.		Inspection	
<u>Interr</u> Servite	p <u>al R</u> Byerth	evenue 1e 2022 d	calendar	year, or tax year b	eginning 01-01-202	22 , and end	ling 12-3	31-2022				
		applicable:	C Name	of organization					D Employer i	dentifica	ation number	
		change	/						85-044809	0		
O Nai		hange Hurn	Doing	business as								
		rn/terminated										
		ed return		er and street (or P.O. box x 1635	if mail is not delivered to	o street address)	Room/si	uite	E Telephone n			
Application Pending		.1011	City or	r town, state or province	, country, and ZIP or fore	ign postal code			(575) 736-	3257		
			Artesia	a, NM 882111635					G Gross recei	into ¢ 36/	1 860	
			E Nan	ne and address of pri	ncinal officer:					· · ·	1,009	
			Scott T	āylor .	ncipai onicer.				s this a group returr ubordinates?	i tor	🗌 Yes 🔽 No	
			PO Box Artesia	< 1635 a, NM 88211					re all subordinates			
Tax	-exer	mpt status:			(insert no.) 49	47(a)(1) or	527		ncluded? [:] "No," attach a list.	Soo inc	U Yes UNo	
I W	ehsi	te: 🕨 ww		amainstreet.com		47(a)(1) 01 U	527		Froup exemption nu			
,	2031		w.urcesie									
K Form	ו of o	organization	n: 🔽 Cori	poration 🗆 Trust 🗌	Association 🗍 Other 🕨			L Year of	formation: 1997 M	State of	legal domicile: NM	
		-										
Pa	rt I		mary	, .								
					ion or most significan downtown, stimulati		ally viab	le business	environment in do	wntown	area, and	
Ce					s to residents and vis		,				-	
nan												
Activities & Governance												
60					n discontinued its op						10	
*8	3				erning body (Part VI,					3	19	
les		4 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5								_	19	
INE	5						a)	• •	• •	5	2	
Act	6				f necessary) Part VIII, column (C)		• •	• • •	• •	0 7a	95 0	
	74				e from Form 990-T, Pa			• • •	•	7b	0	
	b	Net unit						<u> </u>	Prior Year		urrent Year	
	8	Contribu	itions and	l grants (Part VIII, lin	e1h)				714,391		355,828	
Revenue	9				e 2g)				8,878		7,592	
evel					(A), lines 3, 4, and 7d				4		1,374	
ά.					ines 5, 6d, 8c, 9c, 10c	•			555		75	
	12				(must equal Part VIII		ne 12)		723,828		364,869	
				-	IX, column (A), lines				0		C	
				•	IX, column (A), line 4)				0		C	
ŝ	15	Salaries,	, other co	mpensation, employ	ee benefits (Part IX, c	olumn (A), line	s 5-10)		60,563		62,038	
Exp enses	16a	a Professio	onal fund	raising fees (Part IX,	column (A), line 11e)				0		C	
рeк	b	Total fund	lraising exp	enses (Part IX, column	(D), line 25) Þ 12,871							
ă	17	Other ex	(penses (Part IX, column (A), I	ines 11a-11d, 11f-24	e)			323,951		463,457	
	18	Total exp	oenses. A	dd lines 13–17 (must	equal Part IX, colum	n (A), line 25)			384,514		525,49	
	19	Revenue	e less exp	enses. Subtract line	18 from line 12				339,314		-160,626	
es								Begin	ning of Current Year		End of Year	
Net Assets or Fund Balances										L		
Bal				X, line 16)			•		6,402,628		6,241,331	
and				art X, line 26)			• •		3,477		2,806	
					line 21 from line 20		•		6,399,151		6,238,525	
	rt II ⁻ nen		nature I		xamined this return, i	ncluding accor	nanvina	schedules	and statements as	nd to the	a hest of my	
knowl	edge	e and beli			plete. Declaration of p							
any ki	nowl	edge.										
									2023-05-25			
Sign		Signat	ture of offic	cer					Date			
Here		Denni	s Kinsey Ti	reasurer								
				me and title								
			Print/Type	preparer's name	Preparer's signa	ture		Date	Check if	1		
Pai	d								self-employed			
		rer	Firm's nam	e 🕨					Firm's EIN 🕨			
··· · · · ·			Firm's addr	ress 🕨					Phone no.			

May the IRS discuss this return with the preparer shown above? (see instructions) $% \left({{{\rm{A}}_{{\rm{B}}}} \right)$.						. (🗆 Yes 🗌	Νο
For Paperwork Reduction Act Notice, see the separate instructions.		Cat. I	No. 1	1128	2Y		Fo	orm 990 (2022)

Form	990 (2022)				Page 2
Pa	t III Statement of Program S	Service Accomplishm	nents		
	Check if Schedule O contains	a response or note to any	line in this Part III .		🗆
1	Briefly describe the organization's mi	ssion:			
Artes NM.	ia MainStreet, Inc. was organized to er	courage, foster and stimu	late the preservation a	nd economic development of h	istoric downtown Artesia,
2	Did the organization undertake any s		•	were not listed on	
	the prior Form 990 or 990-EZ?				🗌 Yes 🗹 No
_	If "Yes," describe these new services				
3	Did the organization cease conductin	5. 5	5	s, any program	
	services?				🗌 Yes 🗹 No
	If "Yes," describe these changes on Se				
4	Describe the organization's program Section 501(c)(3) and 501(c)(4) organ and revenue, if any, for each program	nizations are required to re	for each of its three larg eport the amount of gra	gest program services, as mea ints and allocations to others, t	sured by expenses. he total expenses,
4a	(Code:) (Expenses s	in: 115,659 in:	cluding grants of \$	0) (Revenue \$	0)
	First Street Greenway-Construction & Maint north Highway 285. This main entry into Ar to present a more positive first impression them into our town. Artesia MainStreet is re repairs make up these expenses.	tesia, NM is paralleled by a rai for visitors, Artesia MainStreet	ilway line, a large industrial , Inc. has created a beautifu	complex, a metal scrap yard and a ul screen along this main thoroughf	housing development. In order are to greet visitors and invite
4b	(Code:) (Expenses	165,199 in	cluding grants of \$	0) (Revenue \$	7,592)
	Downtown Events: Artesia MainStreet holds included the downtown Christmas and Hall celebration including food, clubs, and musi businesses can hand out Halloween candy i During the Christmas season, Light Up Arte development.	oween festivities, Red Dirt Bla cal entertainment. For Hallowe to hundreds of local children.	ck Gold concert, and a Car S een, during Trick or Treat Ma There is a DJ and a "4th Stre	Show. The Red Dirt Black Gold even ainStreet, the Main Street road is clo eet Party", a costume contest co-spo	t was an all day long used so that downtown onsored by the Club Scouts.
4c	(Code:) (Expenses s	182 113 in	cluding grants of \$	0) (Revenue \$	0)
	Downtown Maintenance: Artesia, NM area h Floor olifield monument and the Oilpatch Pl History in Bronze series: Sallie Chisum, kno Southwest and the Cattle Rustler, who may the brickwork and landscaping require upke depicting the culture of our area, represent textured floor is an original mural and the e MainStreet is also responsible for maintena located in the roundabout at its corner. AM applicant. Once the application period is cl engraved onto the panel. The panel is then	as a population of approxima aza with its grounds and foun wn as the First Lady of Artesia have been a contemporary o' eep. Artesia's Heritage Plaza a ed in handmade ceramic tiles. nitre area is shaded with decc nce of the grounds surroundin 5 takes applications for inclusi ssed, the panel is removed an	tely 15,000 citizens. The do tain. There are 4 additional , Trail Boss and the Vaquerc f the famed Billy the Kid. All nd Walkway is a beautiful c . The walls of the Walkway I orative trees and provides s ig the Artesia Public Library on on the Baish Veterans' P d transported to have the n	wntown area encompasses 40 city bronze monuments in the downtow o, bringing to life the turn of the cer of the bronzes require periodic was enterpiece in the Downtown Districi- holds a renovated historic mural dej eating areas to encourage visitors t located in the Downtown District as ark Wall of Honor. An engraving fee w veterans' names and service inf	blocks and includes the Derrick n area that are part of the itury cowboys of the xing and patina touch-ups and t containing a 7-fountain river oicting our history, the o stay and enjoy. Artesia s well as the bronze sculpture is collected from each ormation professionally
	(Code:) (Expenses s	5,432 in	cluding grants of \$	0) (Revenue \$	0)
	Facade Improvement: work done on a build	ing on Main Street to improve	the appearance and condit	ion of the building.	
4d	Other program services (Describe in	Schedule O.)			
		including grants of \$	0) (Revenue \$	0)
4e	Total program service expenses	468,403			

Par	t 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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions.	2	Yes	
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		No
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		No
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 .			No
		5		No
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? <i>If</i> " <i>Yes</i> ," <i>complete Schedule D</i> ,Part I.	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
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			No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	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? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i>	11b		No
	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		No
	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	Yes	ļ
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
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		No
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
	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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
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		No
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		No
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		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
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		No

Form **990** (2022)

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Par	t 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		No					
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? <i>If "Yes," complete Schedule J</i>	23		No					
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		No					
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? \ldots .	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		No					
b	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If</i> " <i>Yes</i> ," <i>complete Schedule L</i> , Part I								
26	5 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								
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? <i>If "Yes," complete Schedule L</i> ,Part III								
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):								
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No					
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	200		110					
_		28b		No					
	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								
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .	29		No					
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No					
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No					
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		No					
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		No					
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		No					
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No					
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	5 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								
37	7 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								
38	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.								
Pa	t 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								
1-	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 20		Yes	No					
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable1a201b0								

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

Yes

1c

Page **4**

Form	990 (2022)			Page 5
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country:			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? $\$.	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
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		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
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 9	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		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	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:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	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?	15		No
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		No
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?	17		

	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "N 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.	с .с <i>э</i> р	01150 00	ines
	Check if Schedule O contains a response or note to any line in this Part VI			
Se	ction A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year 19			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 19			
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	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? $$.	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? $$.	5		No
6	Did the organization have members or stockholders?	6		No
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		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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 in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
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	Yes	
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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
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	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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		
Se	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	NM Section 6104 requires an organization to make its Form 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.			

✓ Own website ✓ Another's website ✓ Upon request □ Other (explain in Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶Peyton Yates 101 S 4th Street Suite B Artesia, NM 88210 (575) 736-3257

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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, or 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.

		ganneac		mpe	1150	iccu u		unen onder, uned		
(A) Name and title	(B) Average hours per week (list any hours for						son	from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	organization and related organizations
(1) Elisabeth Jackson	40									
Executive Director	0				х			42,209	0	0
(2) Morgan Fox	40								_	_
Executive Director	0				Х			15,325	0	0
(3) Greg Marrs Director	0 0	х						0	0	0
(4) Ronnie Jackson Director	0 0	х						0	0	0
(5) Lewis Derrick Director	0 0	х						0	0	0
(6) Ken Aaron Director	0	х						0	0	0
(7) Peyton Yates	0									
Director	0	Х						0	0	0
(8) John Ross Null Director	0 0	х						0	0	0
(9) Devyn Garcia Director	0 0	х						0	0	0
(10) Jerry Terpening Director	0 0	х						0	0	0
(11) Robert Wachter Director	0 0	~						0	0	0
(12) Jeremy Kern Director	0 0	х						0	0	0
(13) Tommy Scroggin	0	X		v						
Vice-President, Director	0	Х		х				0	0	0
(14) Jeffrey Bowman Vice-President, Director	0 0	х		x				0	0	0
(15) Dennis Kinsey Secretary/Treasurer, Director	0 0	x		x				0	0	0
(16) Nicole Valencia Director	0	x						0	0	0
(17) Destiny Rojo	0	х						0	0	0
Director	0									Form 990 (2022)

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0

0

0

0

0

No

No

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Part VII (A) (B) (D) (F) (C) (E) Name and title Average Position (do not check more Reportable Reportable Estimated than one box, unless person amount of other hours per compensation compensation week (list is both an officer and a from the from related compensation any hours for director/trustee) organization (Worganizations from the organization and related 2/1099-(W-2/1099-Officer Q Highest compens Former Individual trustee or director employ organizations MISC/1099-NEC) MISC/1099-NEC) related Institutional ley emplo below dotted organizations line) 700)yee Trustee sated (18) Parrish Miller 0 Х 0 0 Director Λ (19) Scott Taylor Ω Х Х 0 0 President/ Director (20) Ray Withers 0 Х 0 0 Director Λ (21) Allyson Joy 0 0 0 Х Director 1b Sub-Total Þ . . c Total from continuation sheets to Part VII, Section A . ► d Total (add lines 1b and 1c) 57 534 0 Þ 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization > 0 Yes No 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule | for such individual 3 No For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the 4 organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

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

Section B. Independent Contractors

. .

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

	(A) Name and business address	(B) Description of services	(C) Compensation					
2	2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 0							

4

5

Form 990 (2022)
Part VIII
Statement of Revenue

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	Check	if Schedule	e O contains	a respo	onse or note to any	line in this Part VIII	<u></u>		🗆
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ທົທ	1a Federated	campaigns	5	1a	0		Tevende		512 - 514
ant	b Membership dues 1b				0				
ъğ	c Fundraisin			1c	0				
fts,	d Related or	-		1d	0				
igi ja	e Government	-		<u> </u>	176,995				
ns,	f All other cor			1e	170,355				
er	and similar	amounts not	included	1f	178,833				
ēŧ	a Noncash coi	ntributions in	cluded in						
Contributions, gifts, grants, and other similar amounts	lines 1a - 1f	:\$		1g	0				
ο e	h Total. Add	l lines 1a-1	f	• •	>	355,828			
					Business Code				
	2a Anniversary	Celebration			900099	1,017	1,017	0	0
ue					_	750	750	0	0
Ven	b Car Show				900099	750	750	Ŭ	0
8	c Christmas					450	450	0	0
vice					900099				
Ser	d Red Dirt Blac	ck Gold			900099	4,893	4,893	0	0
Program Service Revenue	Oth				_	482	482	0	0
ogr	e Other events	5			900099				
Æ					-	0	0	0	0
	f All other p								
	g Total. Add				7,592			I	
	3 Investment similar amou				nterest, and other	1,37	4 (0 0	1,374
	4 Income from				and proceeds		0 (0 0	0
	5 Royalties .						0 (0 0	0
			(i) Re	eal	(ii) Personal				
	C - Crease reach				_				
	6a Gross rents		·	75		0			
	b Less: renta expenses	1 6k	5	(D	0			
	c Rental inco		1			1			
	or (loss)	60		75	5	0	-		
	d Net rental	income or		• •	•	7	5 (0 0	75
	_		(i) Secu	rities	(ii) Other	-			
	7a Gross amour from sales of	f 7 a	4						
	assets other than invento								
	b Less: cost or								
	other basis a sales expens								
	o								
	c Gain or (loss d Net gain c					0			
	8a Gross incom				· · · ►				
ue	(not includin	g \$	0 of	F					
/en		s reported on ', line 18							
Be	b Less: direc	tovnoncoc		8a 8b		-			
er	c Net income	-			ents 🕞				
Other Revenue					-				
•	9a Gross incon	ne from gam /, line 19							
				9a		4			
	b Less: direct c Net income	-		9b					
			ronn ganning		es 🕨				
	10aGross sales								
		d allowance		10a					
	b Less: cost	of goods so	old	10b					
	C Net income	e or (loss) f cellaneous l		f invent					
	MISC 11a	.enaneous I	evenue		Business Code				
	b								
	с								
		WODUC							
	d All other re e Total. Add		••••			1			
				• •			0		
	12 Total reve	enue. See i	nstructions	• •	· · · •	364,86	9 7,592	2 0	1,449

0 1,449 Form **990** (2022)

Pá	art IX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations must co	omplete all columns.	All other organizatior	is must complete col	umn (A).
	Check if Schedule O contains a response or note to an	ny line in this Part IX			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
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		I		
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	57,535	34,521	17,261	5,753
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	4,503	2,702	1,351	450
11	Fees for services (non-employees):				
ā	Management				
ł	Legal				
Ċ	Accounting	8,200		8,200	
C	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	123,409	122,924	485	
12	Advertising and promotion	21,004	11,203	3,133	6,668
	Office expenses	9,327		9,327	
14	Information technology	1,079	820	259	
15	Royalties				
16	Occupancy				
17	Travel	803		803	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	294		294	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	18,411	15,751	2,660	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a First Street Greenway- Construction & Maintenance	106,468	106,468	0	0
	b Downtown Maintenance	30,466	30,466	0	0
	c Events	138,548	138,548	0	0
	d Facade Improvement	5,000	5,000	0	0
	e All other expenses	448		448	
25	Total functional expenses. Add lines 1 through 24e	525,495	468,403	44,221	12,871
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).				Farma 000 (2022)

		Chack if Schedule O contains a response or not	a to any line in this Part IX			
		Check if Schedule O contains a response or not		(A) Beginning of year	• •	(B) End of year
	1	Cash-non-interest-bearing		105,394	1	54,021
	2	Savings and temporary cash investments	[395,629	2	285,961
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		256	4	0
	5	Loans and other receivables from any current or trustee, key employee, creator or founder, subsi controlled entity or family member of any of the		5		
	6	Loans and other receivables from other disquali section $4958(f)(1)$), and persons described in se			6	
s	7	Notes and loans receivable, net			7	
ssets	8	Inventories for sale or use	[8	
Ass	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 443,708			
	b	Less: accumulated depreciation	10b 0	443,708	10c	443,708
	11	Investments—publicly traded securities .			11	
	12	Investments-other securities. See Part IV, line	11		12	
	13	Investments—program-related. See Part IV, line	11		13	
	14	Intangible assets	[14	
	15	Other assets. See Part IV, line 11	5,457,641	15	5,457,641	
	16	Total assets. Add lines 1 through 15 (must equ	al line 33)	6,402,628	16	6,241,331
	17	Accounts payable and accrued expenses	3,477	17	2,806	
	18	Grants payable		18		
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities			20	
ŝ	21	Escrow or custodial account liability. Complete P	art IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or form employee, creator or founder, substantial contri or family member of any of these persons			22	
Ë	23	Secured mortgages and notes payable to unrela	ted third parties		23	
	24	Unsecured notes and loans payable to unrelated	· · ·		24	
	25	Other liabilities (including federal income tax, pa and other liabilities not included on lines 17 - 24 Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25 .		3,477	26	2,806
Assets or Fund Balances	27	Organizations that follow FASB ASC 958, ch complete lines 27, 28, 32, and 33. Net assets without donor restrictions	neck here ► □ and		27	
d Ba	28	Net assets with donor restrictions	[28	
r Fun		Organizations that do not follow FASB ASC complete lines 29 through 33.	958, check here 🕨 🗹 and			
0	29	Capital stock or trust principal, or current funds	· · · · ·	382,510	29	355,362
ets	30	Paid-in or capital surplus, or land, building or eq	· _	5,677,327	30	6,043,789
Ass	31	Retained earnings, endowment, accumulated in	come, or other funds	339,314	31	-160,626
Net /	32	Total net assets or fund balances	· · · · · · · · [6,399,151	32	6,238,525
Z	33	Total liabilities and net assets/fund balances .		6,402,628	33	6,241,331

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Par	t XI Reconcilliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
_		_				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			364,869	
2	Total expenses (must equal Part IX, column (A), line 25)	2			525,495	
3	Revenue less expenses. Subtract line 2 from line 1	3			-160,626	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) $\ .$	4		6,399,15		
5	Net unrealized gains (losses) on investments	5			0	
6	Donated services and use of facilities	6			0	
7	Investment expenses	7			0	
8	Prior period adjustments	8			0	
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10			6,238,525	
Par	t 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 🛛 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		No	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed o separate basis, consolidated basis, or both:	n a				
	□ Separate basis □ Consolidated basis □ Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b		No	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate b consolidated basis, or both:	oasis,				
	□ Separate basis □ Consolidated basis □ 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			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sched	lule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Unif Guidance, 2 C.F.R. Part 200, Subpart F?	form	3a		No	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ed audit	3b			

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efi	le GR/	APHIC pri	nt Subr	nission Dat	e - 2023-05-25			DLN:	93493145013253
					harity Statu organization is a sec 4947(a)(1) nonexe	tion 501(c)(3)	organization or		OMB No. 1545-0047
Depa Trea		t of the	•	Go to www.ir	Attach to Form s.gov/Form990 for in	990 or Form 9	90-EZ.	rmation.	Open to Public
Inter	nal Rev				<u>519 01/1 0111550</u> 101 11				Inspection
ARTES	SIA MAIN	e organizat STREET INC	on					Employer identifica 85-0448090	ation number
	art I				tus (All organization			ee instructions.	
1ne (1	organiz				e it is: (For lines 1 throu	5		A)/:)	
2					ssociation of churches			A)(1).	
					(1)(A)(ii). (Attach Sche				
3		•	•	•	rvice organization desc				
4		A medical i name, city,		inization opera	ted in conjunction with	a hospital desc	ribed in section :	170(b)(1)(A)(iii). En	ter the hospital's
5				d for the bene plete Part II.)	fit of a college or unive	rsity owned or o	operated by a gov	ernmental unit descri	bed in section
6		A federal, s	tate, or local	government o	r governmental unit de	scribed in sect	ion 170(b)(1)(A)	(v).	
7	✓	section 17	0(b)(1)(A)(vi). (Complete			-	nit or from the genera	al public described in
8		A commun	ty trust desc	ribed in sectio	n 170(b)(1)(A)(vi) . (0	Complete Part II	.)		
9		non-land g	ant college o	of agriculture. S	lescribed in 170(b)(1) See instructions. Enter t	the name, city,	and state of the c	ollege or university:	
10		activities re income and	lated to its e unrelated b	exempt function	e income (less section 5	xceptions, and	(2) no more than	33 1/3% of its support	from gross investment
11		An organiza	ition organiz	ed and operate	ed exclusively to test fo	r public safety.	See section 509	(a)(4).	
12		more publi	ly supported	l organizations	ed exclusively for the be described in section 5 the type of supporting o	509(a)(1) or se	ection 509(a)(2).	See section 509(a)	
а		organizatio	n(s) the pow		rated, supervised, or co appoint or elect a majo				
b		manageme	nt of the sup						ing control or nization(s). You must
c					supporting organization must complete Part			d functionally integra	ted with, its supported
d		functionally	integrated.	The organization	d. A supporting organiz on generally must satis rt IV, Sections A and	fy a distribution	n requirement and		
е					ived a written determin supporting organization		IRS that it is a Typ	e I, Type II, Type III fu	nctionally integrated,
f	Enter	the number	of supported	d organizations				<u> </u>	
<u>g</u>					t the supported organiz		na nization lista d	(iii) Amount of	(ad) Amount of
(1) 1	vame o	r supported	organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))		ganization listed ning document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
				l					<u> </u>
Tota For		vork Reduc	tion Act No	tice, see the	Instructions for	Cat. No. 112	35F	Schedu	le A (Form 990) 2022

Sch	edule A (Form 990) 2022						Page 2
P	art II Support Schedule for						
	(Complete only if you ch the organization failed to					nied to quality u	nder Part III. II
	ection A. Public Support	guany under t		leiow, piease co	inplete Fait III.)		
	lendar year		1		1		
	fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.")	258,638	544,607	425,613	714,391	355,828	2,299,077
2	Tax revenues levied for the organization's benefit and either paid	0	0	0	0	0	0
3	to or expended on its behalf The value of services or facilities furnished by a governmental unit to	0	0	0	0	0	0
	the organization without charge						
	Total. Add lines 1 through 3	258,638	544,607	425,613	714,391	355,828	2,299,077
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).						1,062,738
-	Public support. Subtract line 5 from line 4.						1,236,339
-	ection B. Total Support						
	lendar year	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
(0)	fiscal year beginning in) Amounts from line 4.	258.638	544.607	425,613	714,391	355,828	2,299,077
8	Gross income from interest,	250,050	, 544,007	423,013	, 14,551	555,020	2,233,011
U	dividends, payments received on securities loans, rents, royalties and income from similar sources.	5,993	3 17,911	. 317	4	1,449	25,674
9	Net income from unrelated business activities, whether or not the business is regularly carried on.	c	c c	o	0	0	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).	C) с	0	555	0	555
11	Total support. Add lines 7 through 10						2,325,306
12	Gross receipts from related activities,	etc. (see instructio	ons)			12	21,562
13	First 5 years. If the Form 990 is for the	•			-		ation, check
	this box and stop here					►∪	
	ection C. Computation of Publi		-				
	Public support percentage for 2022 (lir					14	53.169 %
15	Public support percentage for 2020 Sc	hedule A, Part II, li	ne 14			15	51.471 %
16 a	33 1/3% support test—2022. If the o	rganization did no	t check the box or	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	ĸ
b	and stop here. The organization quali 33 1/3% support test—2021. If the	ifies as a publicly s organization did n	supported organiz ot check a box on	ation line 13 or 16a, an	d line 15 is 33 1/39	6 or more, check t	. 🕨 🗹 his
17a	box and stop here. The organization 10%-facts-and-circumstances test if the organization meets the "facts-an	-2022. If the org d-circumstances"	anization did not o test, check this bo	check a box on line ox and stop here.	e 13, 16a, or 16b, a Explain in Part VI	and line 14 is 10% how the organizat	or more, and
b	and if the organization meets the "fac	t—2021. If the ore	ganization did not nces" test, check t	check a box on lin his box and stop l	ie 13, 16a, 16b, or here. Explain in Pa	17a, and line 15 i art VI how the orga	anization meets
18	the "facts-and-circumstances" test. The Private foundation. If the organization						• 🖸
	instructions						. ► 🗆

Schedule A	Form	990)	2022
Juneaule A		330)	2022

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.)

36	ction A. Public Support		-	-	-		-
	ndar year	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	iscal year beginning in) 🕨						
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						
5	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. Add lines 7a and 7b.						
8	Public support. (Subtract line 7c						
0	from line 6.)						
Se	ction B. Total Support						
-	ndar year						
	iscal 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.)						L
13	Total support. (Add lines 9, 10c,						
	11, and 12.).		the second shall and	for white the first of the second		501(-)(2)	
14	First 5 years. If the Form 990 is for th						
	box and stop here						. ► 🗆
Se	ction C. Computation of Public	Support Perce	entage				
15	Public support percentage for 2022 (lir	ie 8, column (f) di	vided by line 13, o	column (f))		15	
16	Public support percentage from 2021 S	chedule A. Part III	l, line 15			16	
	ction D. Computation of Invest					10	
	Investment income percentage for 202			ine 13 column (f))	1 1 7	
17	1 5		.,			17	
18	Investment income percentage from 2					18	
19a	33 1/3% support tests-2022. If the o						
	than 33 1/3%, check this box and stop	here. The organiz	zation qualifies as	a publicly suppor	ted organization .	►	
b	33 1/3% support tests—2021. If the	organization did n	ot check a box or	line 14 or line 19	a, and line 16 is m	nore than 33 1/3%	and line 18 is not
~	more than 33 $_{1/3}$ %, check this box and	•					• 🔾
20	_,	•	5	1 9			_
20	Private foundation. If the organization	on did not check a	box on line 14, 1	9a, or 19b, check	this box and see i		
			· · · · · · · · · · · · · · · · · · ·			Schedule A	(Form 990) 2022

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, of Part I, complete Sections A and B. If you checked box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of 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.			
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	1		
	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		
с	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	Зc		
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.			
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 application document outboring up of the bar bar.			
	organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).			
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the			
	organization's organizing document?	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 (defined in	0		
,	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.			
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?							
а								
	governing body of a supported organization?							
b	A family member of a person described on 11a above?	11b						
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part VI .	11c						
Section B. Type I Supporting Organizations								

- 1 Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 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.

Section C. Type II Supporting Organizations

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).

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				
	nts 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).				
	maintainea a ciose ana continuous working relationship with the supported organization(s).				
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in 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.				

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.

 - c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)
- 2 Activities Test. Answer lines 2a and 2b below.

З

а	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.		
	substantially an 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.		
	involvement.	2b	
	Parent of Supported Organizations. Answer lines 3a and 3b below.		
а	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.		
	supported organizations in the state of played by the organization in this regular.	3b	

Yes No

Yes

Yes No

No

1

2

Schedule A (Form 990) 2022

	dule A (Form 990) 2022			Page
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ganizat	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organizat			
	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):	1		
а	Average monthly value of securities	1a		
b	• Average monthly cash balances	1b		
c	: Fair market value of other non-exempt-use assets	1c		
d	1 Total (add lines 1a, 1b, and 1c)	1d		Τ
e	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		T
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 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-int	tegrated	Type III supporting orga	anization (see instructions

Schedule A (Form 990) 2022

Part V Type III Non-Functionally Integrated	509(a)(3) Supporting Or	ganizations (co	ontinued	d)
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 e excess of income from activity	exempt purposes of supported	organizations, in	2	
3 Administrative expenses paid to accomplish exempt put	poses of supported organization	ons	3	
4 Amounts paid to acquire exempt-use assets			4	
5 Qualified set-aside amounts (prior IRS approval required	d - provide details in Part VI)		5	
6 Other distributions (describe in Part VI). See instruction	IS		6	
7 Total annual distributions. Add lines 1 through 6.			7	
8 Distributions to attentive supported organizations to wh details in Part VI). See instructions	ich the organization is respons	ive (<i>provide</i>	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) Underdistributi Pre-2022	ons	(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. . <th< td=""><td></td><td></td><td></td><td></td></th<>				
e From 2021				
f Total of lines 3a through e				
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. If the amount is greater than zero, <i>explain in Part VI</i>. See instructions. 				
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, <i>explain in Part VI</i> . 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				
			50	chedule A (Form 990) (2022)
			30	Circule A (10111 330) (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).

Facts And Circumstances

Return Reference	Explanation
	Income from renting out space behind AMS office - \$405. Sold excess grass seed from Greenway project to City for park - \$150.

Schedule A (Form 990) 2022

efi	le GRAPHIC pri	int	Submission Date - 2023-	05-25					DLN: 9	3493145013253
			Supplement	al F	inanc	ial Statem	nent	S		MB No. 1545-0047
Department of the				rganization answered "Yes," on Form 990, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990. 1990 for instructions and the latest information.					2022 Open to Public Inspection	
	me of the organization of									tion number
Pa	art I Organiz	zatio	ns Maintaining Donor Advi	sed F	unds or C	Other Similar Fu		85-04480 Accour		
			ne organization answered "Ye							
					(a) Dono	or advised funds		(b)	Funds and o	other accounts
1			year							
2			tributions to (during year)							
3		-	nts from (during year)							
4			of year		1	to be defined as		6	th -	
5 6	organization's pr Did the organization	roperty tion in	form all donors and donor adviso y, subject to the organization's ex form all grantees, donors, and do id not for the benefit of the donor	clusive nor adv	legal contro isors in wri	bl?	 s can be	used onl	y for	🗌 Yes 🗌 No
								5		🗆 Yes 🗌 No
Pa			n Easements.		000					
1			ne organization answered "Ye							
1	<u> </u>		ition easements held by the organ and for public use (e.g., recreation			Preservation	a of an bi	istorically	important	and area
	Protection of			or equi	Lation)	Preservation Preservation			•	
	\square							tinea nisi		re
2	Preservatio						the a farma			
2			ugh 2d if the organization held a day of the tax year.	quaime	u conserva	tion contribution in t	the form			End of the Year
а	Total number of c	conser	vation easements					2a		
b	Total acreage res	tricted	by conservation easements					2b		
с	Number of conse	rvatio	n easements on a certified histori	c struct	ure include	d in (a)		2c		
d	historic structure	listed	n easements included in (c) acqui in the National Register					2d		
3	tax year ►	ervatio	n easements modified, transferre	d, relea	sed, exting	uished, or terminate	ed by the	e organiza	ation during	the
4	Number of states	s wher	re property subject to conservatio	n easer	nent is loca	ted 🕨				
5			have a written policy regarding the servation easements it holds? .				ndling of	violations	s, and	es 🗌 No
6	Staff and volunte	eer ho	urs devoted to monitoring, inspec	ting, ha	ndling of vi	iolations, and enforc	cing cons	servation	easements	during the year
7	Amount of exper	nses in	curred in monitoring, inspecting,	handlin	g of violatio	ons, and enforcing c	conserva	tion ease	ments durin	g the year
8			n easement reported on line 2(d) B)(ii)?				tion 170	(h)(4)(B)(i)	es 🗌 No
9	balance sheet, a the organization	nd inc 's acco	by the organization reports conse lude, if applicable, the text of the bunting for conservation easemer	footnot ts.	e to the or	ganization's financia	al statem	ents that	describes	
Pa			ns Maintaining Collections ne organization answered "Ye				or Othe	er Simila	ar Assets.	
1a	If the organization historical treasur	on elec res, or	ted, as permitted under FASB ASG other similar assets held for puble footnote to its financial stateme	C 958, r ic exhib	ot to repor ition, educa	t in its revenue state ation, or research in				
b	If the organizatio historical treasur	on elec res, or	ted, as permitted under FASB ASG other similar assets held for publ ting to these items:	C 958, t	o report in	its revenue stateme				
((i) Revenue include	ed on	Form 990, Part VIII, line 1					. 🕨 \$		0
(i	ii) Assets included	in Fori	m 990, Part X					. ▶\$		3,715,003
2	If the organizatio	on rece	eived or held works of art, historic uired to be reported under FASB A	al treas	ures, or oth	ner similar assets fo		-	rovide the	
а	Revenue include	d on F	orm 990, Part VIII, line 1					. ▶\$		0
b			n 990, Part X							0
For			Act Notice, see the Instruction							D (Form 990) 202

Schedule	D	(Form	990)	2022
Schedule	2	(101111	550,	2022

Sche	dule D (Form 990) 2022								Page 2
Pa	t III Organizations Maintaining Co	ollections of	of Art, Histo	rical Tre	easures, o	or Othe	^r Similar As	sets (continued)	
3	Using the organization's acquisition, accessic items (check all that apply):	n, and other i	records, check a	any of the	e following t	hat are a	significant use	of its collection	
а	Public exhibition		d	🗌 Lo	oan or exch	ange prog	rams		
b	Scholarly research		е	O	therPublic	Educatior	n/Preservation		
с	Preservation for future generations								
4	Provide a description of the organization's co Part XIII.	llections and	explain how the	y further	the organiz	zation's ex	empt purpose	in	
5	During the year, did the organization solicit o assets to be sold to raise funds rather than to							Yes 🗸 No	
Pa	rt IV Escrow and Custodial Arrange Complete if the organization anso line 21.		on Form 990,	Part IV,	line 9, or	reported	an amount o		: X,
1a	Is the organization an agent, trustee, custodi included on Form 990, Part X?							Yes 🗌 No	
b	If "Yes," explain the arrangement in Part XIII	and complete	the following ta	ble:			Am	ount	
с	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fo	orm 990, Part	X, line 21, for e	scrow or	custodial ad	ccount liat	oility? (Yes No	
b	If "Yes," explain the arrangement in Part XIII.	Check here if	the explanatior	has bee	n provided	in Part XII	🗆		
Ра	rt V Endowment Funds.		•						
	Complete if the organization ans								
1-	Beginning of year balance	(a) Current	year (b) P	rior year	(c) Two y	ears back	(d) Three years	back (e) Four years b	back
	Contributions								
					_				
	Net investment earnings, gains, and losses Grants or scholarships								
	Other expenditures for facilities								
е	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the curr	ent year end	balance (line 1g	, column	(a)) held as	s:		k	
а	Board designated or quasi-endowment 🕨								
b	Permanent endowment 🕨		-						
с	Term endowment 🕨								
	The percentages on lines 2a, 2b, and 2c shou	ild equal 100%	6.						
3a	Are there endowment funds not in the posses organization by:	sion of the or	ganization that	are held	and admini	istered for	the	Yes N	No
	(i) Unrelated organizations			• •				3a(i)	
	(ii) Related organizations			• •				3a(ii)	
ь 4	If "Yes" on 3a(ii), are the related organization Describe in Part XIII the intended uses of the				• •			3b	
-	rt VI Land, Buildings, and Equipme	-	s endowment id	nus.					
ra	Complete if the organization answ		on Form 990,	Part IV,	line 11a. S	See Form	n 990, Part X,	, line 10.	
	Description of property (a) Cost or ot (investm		(b) Cost or other	basis (othe	er) (c) Acc	umulated d	epreciation	(d) Book value	
1a	Land	0		173,7	771			17	3,771
b	Buildings	0		189,2	253		0	18	89,253
с	Leasehold improvements	0			0		0		0
d	Equipment	0		3,5	500		0		3,500
е	Other	0		77,1	184		0	7	7,184
	I. Add lines 1a through 1e. (Column (d) must e	qual Form 99	0, Part X, colum	n (B), line	e 10(c).) .	. ►	1	44	3,708

Schedule D (Form 990) 2022

	Form 990) 2022				Pag
Part VII	Investments - Other Securities. Complete if the organization answered "Yes" on Form 990,	Part IV. liı	ne 11b.See Form	990. Part X.	line 12.
	(a) Description of security or category (including name of security)	(b) Boo value	ok	(c) Method of v t or end-of-year	valuation:
(1) Financial		value	005		
(2) Closely-h (3)Other	neld equity interests				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Columi	n (b) must equal Form 990, Part X, col. (B) line 12.)	•			
Part VIII	Investments - Program Related. Complete if the organization answered 'Yes' on Form 990, I	Part IV liv	ne 11c See Form	000 Part X	line 13
	(a) Description of investment		(b) Book value	(c) Me	thod of valuation:
(1)				Cost or end	d-of-year market value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total (Colum	n (b) must equal Form 990, Part X, col.(B) line 13.)				
Part IX	Other Assets.				
	Complete if the organization answered 'Yes' on Form 990, P (a) Description	art IV, lin	e 11d. See Form	990, Part X,	(b) Book value
(1)Oil Patch					1,907,8
	Theater Facade et Gateway (sign @ Brewer)				76,8
. ,	xas Improvements				245,6
	oundabout Sculpture ive Series: Trail Boss, Rustler and Vaquero Sculptures				599,3 1,142,7
(7)Freedom	s Fire Sculpture				65,0
	Memorial Park				719,0
(10)Wayfind	; History Project ling Signage				11,5 25,5
-	eet Gateway				45,4
	/ Learning Center				163,9
	ks Renovations eet Greenway				42,7
	ronze Maquettes				11,7
(16)Office E					4,2
Part X	mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities.			. ►	5,457,6
	Complete if the organization answered 'Yes' on Form 990, P		e 11e or 11f.See	e Form 990, Pa	
1. (1) Federal i	(a) Description of liabilit	LY			(b) Book valu

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

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

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Schedule D (Form 990) 2022

Pa	t XI Reconciliation of Revenue per Audited Financial Staten Return.	nents With Revenue per		
	Complete if the organization answered 'Yes' on Form 990, Part	t IV. line 12a.		
1	Total revenue, gains, and other support per audited financial statements .	1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
с	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a		
b	Other (Describe in Part XIII.)	4b	1	
с	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Pai	t XII Reconciliation of Expenses per Audited Financial State		r Retu	rn.
-	Complete if the organization answered 'Yes' on Form 990, Part			
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1		
а	Donated services and use of facilities	2a	4	
b	Prior year adjustments	2b	_	
С	Other losses	2c	_	
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a		
b	Other (Describe in Part XIII.)	4b		
-				
С	Add lines 4a and 4b		4c	
5	Add lines 4a and 4b		4c 5	

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.

Return Reference	Explanation
	The "History in Bronze" collection contains 4 bronze sculptures that relate the history of the area around Artesia. The Derrick Floor Sculpture is surrounded by plaques explaining the history of the oil industry in the area and the workings of the rig depicted. The "Cattle Drive" series consists of three bronze sculptures that are strategically placed to draw travelers from Highway 285 into the downtown area. The series consists of the Trail Boss, the Vaquero and the Rustler. The three sculptures, using their informative plaques, tell the history of the cattle industry in southeast New Mexico. The Freedom's Fire Sculpture is located at Artesia Baish Veterans' Park where the names, dates and branches of service are listed for area veterans. The bronze sculpture at the Artesia Public Library, located in the roundabout, is titled The Foundation and features enormous renditions of the original first-copy hardbacks of many classics with children in various poses reading books. All sculptures are outdoor displays for the public and there is no admission or fee.

efile GRAPHIC print Submission Date - 2023-05-25 DLN: 93					: 93493145013253		
SCHEDUL (Form 990) Department of t Treasury	he	Form 990 o	vide informatio or 990-EZ or to p Attach to	tion to Fo n for responses t provide any addit Form 990 or 990- r <u>m990</u> for the late	o specific quest ional informatio EZ.	ions on n.	2022 Open to Public Inspection
Name of the org ARTESIA MAINSTRE	anization ET INC					Employer identifi 85-0448090	cation number
Return Reference				Explanatio	n		
Form 990, Part VI, Section A, Line 2	Peyton Yates, board member, is the employer of Destiny Rojo, board member. No other relationships exis						
Form 990, Part VI, Section B, Line 11b	Electronic copies of the tax return and all schedules were provided via e-mail to the officers and directors before the return was filed with the IRS.						
Form 990, Part VI, Section B, Line 12c	At each board meeting, the Conflict of Interest policy is read and board members are asked to notify the President if they become aware of any conflicts, either during the meeting or at anytime thereafter.						,
Form 990, Part VI, Section C, Line 19		ing documents, Conflic MainStreet, Inc. office					n request at the
Form 990, Part IX, Line 11g		aintenance Downtown Cleaning Services for				5	Downtown Events