

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A F	or the	2008 calendar year, or tax year beginning SEP 1, 2008 and ending	AUG 31, 20	09		
B c	heck if oplicable	Please Use IRS C Name of organization	D Employer ide	ntification number		
	Address change	s label or LYDIA PATTERSON INSTITUTE				
	Name change	type Doing Business As		-1142840		
	return Termin- ation	See Specific P.O. BOX 11 Room/s		(915)533-8286		
	Amendo retum Applica	city or town, state or country, and ZIP + 4	G Gross receipts \$ H(a) Is this a grou	2,262,513.		
_	Jtión pending		for affiliates?	·		
		SAME AS C ABOVE	H(b) Are all affiliate			
	ах-ехе	mpt status: X 501(c) (3 ) ◀ (insert no.) 4947(a)(1) or 527		ch a list. (see instructions)		
		E: ► LYDIAPATTERSONINSTITUTE.ORG	H(c) Group exem			
			Year of formation 195	O M State of legal domicile TX		
	rt I	Summary				
9	1 E	Briefly describe the organization's mission or most significant activities: HIGH SCF	OOL CURRICU	LUM AND		
Activities & Governance	]	ENGLISH AS A SECOND LANGUAGE INSTRUCTION				
erni	2 (	Check this box   (if the organization discontinued its operations or disposed of	more than 25% of its a			
Š	3 1	Number of voting members of the governing body (Part VI, line 1a)		38		
8	4 1	Number of independent voting members of the governing body (Part VI, line 1b)	•	4 38		
ies	5 7	Total number of employees (Part V, line 2a)	•	5 68		
ivit		Total number of volunteers (estimate if necessary)		6 0		
Act		Total gross unrelated business revenue from Part VIII, line 12, column (C)		7a 0.		
	1 d	Net unrelated business taxable income from Form 990-T, line 34		7ь 0.		
			Prior Year	3. 893,367.		
ne		Contributions and grants (Part VIII, line 1h)	985,52 1,191,40	5 1 221 544		
Revenue		Program service revenue (Part VIII, line 2g)				
Re		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	86,43			
į		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	47,01 2,310,37			
		Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)	156,45			
		Grants and similar amounts paid (Part IX, column (A), lines 1·3)		0. 179,100.		
		Benefits paid to or for members (Part IX, column (A), line 4)	1,525,27			
Expenses	15 3	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,525,21	1,033,030.		
ĕ	Ioai	Professional fundraising fees Part A column (A) line 11e)  Total fundraising experies (Part X, column (D) rine 25)  20,551.	-			
Ä			633,04	7. 614,231.		
	17	Other expenses (Part IX, column (A), lines 11at 1 of 11f-24f)	2,314,77	<del></del>		
	19	Total expenses Acto lines 13 1 (roust equal Part), column (A), line 25)  Revenue less expenses. Subtract line 18 from line 12	<4,39			
es	10 1	Heveride less expenses. Subtract line 16 and line 1	Beginning of Year			
ets	20	Total assets (Part)X, line (1971)	4,974,10			
Ass		Total liabilities (Palt X Hre 26)	427,93			
Net Assets or Fund Balances	1	Net assets or fund balances. Subtract line 21 from line 20	4,546,16	2. 4,361,486.		
	rt II	Signature Block	-			
7		Under penalties of penury, I declare that I have examined this return, including accompanying schedules and stater and complete Declaration of preparer (other than officer) is based on all information of which preparer has any know	ents, and to the best of my knowledge	owledge and belief, it is true, correct,		
2 2		and complete Dacial and or preparer than officer) stacked on an information of which preparer has any known				
Sig	ո	4 dearn de Ond	3-9	1-10		
A Sign	e	Signature of officer	Date			
		SOCORRO DE ANDA, PRESIDENT				
N R Paid		Type or print name and title				
D		Preparer's Date		Preparer's identifying number see instructions)		
االورو دەيور	arer's		nself- remployed > (			
	Only	Firm's name (or BOCK & ASSOCIATES, L.L.P.	EIN -			
<b>B10</b>	Jy	self-employed), 7320 REMCON CIRCLE				
		ZIP+4 EL PASO, TEXAS /9912	Phone no	▶ 915-544-8984		
<u>May</u>	the IF	RS discuss this return with the preparer shown above? (see instructions)		Yes No		
8320	01 12-1	8-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate	e instructions.	Form <b>990</b> (2008)		

ť

	r		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?	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		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where 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		<u>X</u>
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_		<u>X</u>
9	Did the organization report an amount in Part X, line 21; 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		<u>X</u>
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	37
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity	4-		
	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	40		х
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17 18		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If Yes, Complete Schedule G, Part III	20	<u> </u>	X
20 21	Did the organization operate one or more hospitals? If Yes, complete Scriedule II  Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	<del></del>
23	Did the organization report more than \$3,000 on Factor, colonial (A), line 21 if Fes, "complete schedule J."  Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J.	23		X
	Did the organization answer Tes to Part VII, Section A, questions 3, 4, or 3? If Tes, complete schedule of Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			- <del></del> -
74	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.			
	If "No", go to question 25	24a		Х
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		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X_
ь	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a		-	
	prior year? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
		-	000	mono

ť,

Form 990 (2008) LYDIA PATTERSON INSTITUTE

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee.			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	L	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	<u></u>	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, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
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	<u> </u>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1	
	and that is treated as a partnership for federal income tax purposes? If "Yes." complete Schedule R. Part VI	37	1	X

Form **990** (2008)

ť

	The state of the s		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	`	163	110
	U.S. Information Returns. Enter 0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
Ū	(gambling) winnings to prize winners?	1c	Х	
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	X	
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	if "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			
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
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	ļ	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		Х
	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?	7с	ļ	X
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	<b>-</b> .	1	Х
	benefit contract?	7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g	_	X
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	79 7h		X
п 8	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)			
0	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			
	excess business holdings at any time during the year?	8	İ	Ì
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	]	[
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter: N/A			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter: N/A			
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	ļ	ļ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b		<u> </u>	<u> </u>
		Form	990	(2008)

Page 6

ť

LYDIA PATTERSON INSTITUTE

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

<u>Sec</u>	tion A. Governing Body and Management			
		F	Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O. See instructions			
1a	Enter the number of voting members of the governing body	В		
b	Enter the number of voting members that are independent	8		
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	<u> </u>	<u>X</u>
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	ļ	<u> X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	<b>↓</b>	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	ļ	X
6	Does the organization have members or stockholders?	6	<u> </u>	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		<u>X</u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7ь		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9a	Does the organization have local chapters, branches, or affiliates?	9a	<u> </u>	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	-		
	and branches to ensure their operations are consistent with those of the organization?	9ь		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	1		
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10		_X_
11	Is there any officer, director or 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	11		X
<u>Sec</u>	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	<u> </u>	
13	Does the organization have a written whistleblower policy?	13	ļ	X
14	Does 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:			
а	The organization's CEO, Executive Director, or top management official?	15a		X
b	Other officers or key employees of the organization?	15b	X	<u> </u>
	Describe the process in Schedule O. (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	In joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
<u>Sec</u>	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) availab	e for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fin	ancıal	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	ation:		
	LYDIA PATTERSON INSTITUTE - (915)533-8286		_	
	517 S. FLORENCE, EL PASO, TX 79901-2998			

ď

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not	T .	y of	ficer			or, tr	uste			
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours	100	Position (check all that apply)				dy)	Reportable compensation	Reportable compensation	Estimated amount of
	per	$\vdash$	T	T		αρρίγ)		from	from related	other
	week	Individual trustee or director				_		the	organizations	compensation
		8	2 <u>8</u>			nsafec		organization	(W·2/1099·MISC)	from the
		trust	超		93. O	ощо		(W-2/1099-MISC)		organization and related
	İ	Motua	institutional frustee	콩	Key employee	Highest compensated employee	je j			organizations
		l g	발	eg Bes	Ş.	문등	臣	•		
SEE ATTACHED SCHEDULE										
BOARD OF TRUSTEES								0.	0.	0
SOCORRO DE ANDA					:	Ì				
PRESIDENT	40.00	X	<u> </u>					96,235.	0.	0
		_		<u> </u>	<u> </u>	_	_			
					1					
	<del></del>	┼	-	-	├-		-			
-	<del>   </del>	-	┼	$\vdash$	┢	$\vdash$	_			
					ŀ					
		$\vdash$		├	$\vdash$	-	-			
					İ					
		1	$\dagger -$	T		+	<del>                                     </del>			
				_		<u> </u>	L			
	<del></del>	_	ļ	<u> </u>	<u> </u>	1	<u> </u>			
		l				1				
		+	<del>↓</del> _	$\vdash$	-	╁	<u> </u>			-
		╁╌	┼	╁	<del> </del>	╂—	<u> </u>	<del></del>		 
		1								
		┼┈	╁┈	╁╌	-	╁	<del> </del>		<u> </u>	
		1								
	<del></del>	<del>                                     </del>	+	$\vdash$	t-	+	<del>                                     </del>			
		Ь.	1	1			<u> </u>	<u> </u>		l <u> </u>

ł

(A)  Name and title	(B) Average	mpic		((	C)		est	(D) Reportable	(E)		Es	(F)	 ed
	hours per week	Individual trustee or director		all		Highest compensated Compensate		compensation from the organization (W-2/1099-MISC)	compensatio from related organizations (W-2/1099-MIS	n   I   s	com fro orga	nount other pensa om the anizati d relate	ition e ion ed
						-					ļ <del></del>	<del></del>	
		-	-			<u> </u>							
												_	
							_				<u> </u>		
<del></del>								-					
			_									<del></del>	
1b Total .						<u> </u>		96,235.		0.			0.
Total number of individuals (including the compensation from the organization	ose in 1a) who re	ceiv	ed n	nore	tha	an \$1	00,	000 in reportable		<u> </u>		Yes	0 No
3 Did the organization list any former offic line 1a? If "Yes," complete Schedule J for			e, ke	y er	npic	yee,	or I	highest compensated e	mployee on		3		Х
<ul> <li>For any individual listed on line 1a, is the and related organizations greater than \$</li> <li>Did any person listed on line 1a receive of the second seco</li></ul>	150,000 <i>? If</i> "Yes	," cc	mpl	ete	Sch	edul	e J	for such ındıvidual			4		Х
the organization? If "Yes," complete Sch	edule J for such	pers	son								5		х
1 Complete this table for your five highest the organization. NONE	compensated in	dep	ende	ent o	cont	tract	ors		\$100,000 of con	ıpens		_	
(A) Name and busine	ess address							(B) Description of	services		compe	C) nsatio	n
	-												
		<u></u>	_										
2 Total number of independent contractor from the organization ▶	s (including thos	se In	1) w	ho ı	rece	eived	mo	re than \$100,000 in con	npensation	<del></del>			
					-							000	

832009 02-02-09 Ì

Pa	rt VII	Statement of Rever	nue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a b c d e	Membership dues Fundraising events Related organizations	ions) 1e	06,669.				
Contribut and other	9 h	similar amounts not included above	ve 1f 2	86,698.	893,367.			
	2 a	TUITION & FEES		Business Code 900099 900099		1,181,520. 150,024.		
Program Service Revenue	c d e							
۵	f a	All other program service reve Total. Add lines 2a-2f	nue	<b></b>	1,331,544.			
	3	Investment income (including other similar amounts) Income from investment of tax		<b>&gt;</b>	37,602.	37,602.		
	5 6 a b	,	(i) Real	(ii) Personal				
		Rental income or (loss)  Net rental income or (loss)  Gross amount from sales of	(i) Securities	(ii) Other			· · · · · · · · · · · · · · · · · · ·	
:		assets other than inventory Less: cost or other basis and sales expenses Gain or (loss)						
venue	d	Net gain or (loss) Gross income from fundraisin including \$	of	<b>&gt;</b>				
Other Revenue		contributions reported on line Part IV, line 18 Less: direct expenses Net income or (loss) from fund	a . b					
	9 a b	Gross income from gaming ac Part IV, line 19 Less: direct expenses	ctivities. See a b					
	10 a	Net income or (loss) from gan Gross sales of inventory, less and allowances Less: cost of goods sold						
		Net income or (loss) from sale Miscellaneous Revenu	es of inventory le	Business Code				
		All other revenue						
		Total Revenue. Add lines 11a-11d	4 5 6d 7d 8c 9c 1	Oc and the	2,262,513.	1,369,146.	0 .	. 0

ł

#### 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) but are not required to complete columns (B), (C), and (D).

_	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).								
	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 governments and								
	organizations in the U.S. See Part IV, line 21								
2	Grants and other assistance to individuals in								
	the U.S. See Part IV, line 22	179,108.	179,108.						
3	Grants and other assistance to governments,								
	organizations, and individuals outside the U.S.								
	See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors,								
	trustees, and key employees	104,747.		104,747.					
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 salanes and wages	1,242,099.	1,023,641.	218,458.					
8	Pension plan contributions (include section 401(k)			j					
	and section 403(b) employer contributions)	81,359.	61,019.	20,340.					
9	Other employee benefits	127,364.	95,523.	31,841.					
10	Payroll taxes	98,281.	73,711.	24,570.					
11	Fees for services (non-employees):								
а	Management								
b	Legal	10,000.		10,000.					
С	Accounting	,							
d	Lobbying	-							
е	Professional fundraising services See Part IV, line 17								
f	Investment management fees .				<del></del>				
9	Other	15.005	10 550		252				
12	Advertising and promotion	17,807.	17,557.		250.				
13	Office expenses	4,216.	843.	2,108.	1,265.				
14	Information technology								
15	Royalties	154 500	121 244	20.000	2 000				
16	Occupancy	154,522.	131,344.	20,088.	3,090.				
17	Travel	51,296.	30,778.	10,259.	10,259.				
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials	2 050	<u></u>	2 050	<del> </del>				
19	Conferences, conventions, and meetings	3,858.	3,991.	3,858.	<u></u> _				
20	Interest	4,989.	3,991.	990.	<del></del>				
21	Payments to affiliates	74 627	55,970.	18,657.					
22	Depreciation, depletion, and amortization	74,627.	22,310.	10,057.					
23	Insurance								
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )								
а	FOOD SERVICE	112,490.	112,490.	0.	0.				
b	SUPPLIES	109,151.	81,863.	27,288.					
c	MISCELLANEOUS	38,045.	38,045.	0.	0.				
d	TELEPHONE	18,956.	3,791.	9,478.	5,687.				
е	REPAIRS & MAINTENANCE	14,274.	11,419.	2,855.	0.				
f	All other expenses								
25	Total functional expenses. Add lines 1 through 24f	2,447,189.	1,921,093.	505,545.	20,551.				
26	Joint Costs. Check here ▶ ☐ If following								
	SOP 98-2 Complete this line only if the organization	ļ							
	reported in column (B) joint costs from a combined		•						
	educational campaign and fundraising solicitation								
00004	0 12-18-08				Form <b>990</b> (2008)				

Form 990 (2008)

Part X Balance Sheet (A) Beginning of year End of year 385,187. 608,037. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 941. 3,205. 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key 5 employees, or other related parties. Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 6 Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 52,788. 63,103. Prepaid expenses and deferred charges 9 3,076,714. 10a 10a Land, buildings, and equipment: cost basis b Less: accumulated depreciation Complete 1,869,707. 1,218,818. 1,207,007. 10c Part VI of Schedule D . 10b 11 11 Investments · publicly traded securities 3,080,938. 3,014,844. 12 12 Investments · other securities. See Part IV, line 11 13 13 Investments - program-related. See Part IV, line 11 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 4,974,101. 4,660,767. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 46,587. 63,466. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 154,524. 188,471. 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities Escrow account liability. Complete Part IV of Schedule D 21 21 -iabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 81,291. 192,881. 24 24 Unsecured notes and loans payable 25 25 Other liabilities Complete Part X of Schedule D 427,939. 299,281. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here 

X
and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 4,208,415 4,047,432. 27 Unrestricted net assets . ... 337,747. 314,054. 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 4,546,162. 4,361,486. Total net assets or fund balances . . . . 33 4,660,767. 4,974,101. Total liabilities and net assets/fund balances Part XI Financial Statements and Reporting Yes No X Accrual Other Accounting method used to prepare the Form 990: Cash X 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X **b** Were the organization's financial statements audited by an independent accountant? 2b c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, Х review, or compilation of its financial statements and selection of an independent accountant? 2c 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit X Act and OMB Circular A-133? 3a **b** If "Yes," did the organization undergo the required audit or audits?

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

OMB No 1545-0047

Name of the organization LYDIA PATTERSON INSTITUTE Employer identification number

Schedule A (Form 990 or 990-EZ) 2008

		LYDIA P	ATTERSON INS	TITUT	E				74	4-11428	40
Part I	Reason	for Public Char	ity Status (All organiz	zations mu:	st complet	te this part	.) (see ins	tructions)			
The organ	ization is not a	private foundation	because it is: (Please ch	eck only o	ne organiz	zation.)					
1 🗀	A church, cor	nvention of churche	s, or association of chur	ches desci	nbed in se	ction 170	(b)(1)(A)(i)				
2 X			'0(b)(1)(A)(ii). (Attach Sc								
3	A hospital or	a cooperative hospi	tal service organization	described i	in section	170(b)(1)	( <b>A</b> )(iii). (At	tach Sche	dule H.)		
4	A medical res	search organization	operated in conjunction	with a hos	pital desci	nbed in se	ction 170	(b)(1)(A)(ii	i). Enter t	he hospital's r	name,
	city, and stat		•	,	•				·	•	
5	An organizati section 170 A federal, state An organizati section 170( A community An organizati activities relatincome and to See section An organizati more publicly describes the a Type I	on operated for the (b)(1)(A)(iv). (Complete, or local government on that normally received in some that normally received to its exempt further than the complete on organized and operated organized and ope	ent or governmental uniterves a substantial part site Part II.) section 170(b)(1)(A)(vi). elves: (1) more than 33 anctions - subject to certal axable income (less section the Part III.) perated exclusively to terperated exclusively for the partial organization and compless Type II	t described of its supp (Complete 1/3% of its ain exception 511 taust for public benefit on 509(a)(1 ete lines 1 cm.)	d in section ort from a Part II.) support from such and (% x) from but the safety. Sof, to perfoll or section the through the III - Fund	on 170(b)(1) government rom contrible on more sinesses a See section orm the fur on 509(a)(2) on 11h. etionally int	butions, me than 33 1 acquired beneficions of, 2). See sec	nembershi /3% of its y the orga  I). (see ins or to carr ction 509(	general properties of tructions yout the a)(3). Che	nd gross receiption gross invertee June 30, purposes of oeck the box the	pts from vestment 1975. one or at
e			at the organization is not								
_			han one or more publicly						3(a)(1) or	section 509(a)	(2).
f			ten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III			_
		rganization, check th									
g			organization accepted ar							F	
	· ·	<del>-</del>	lirectly controls, either a	one or tog	ether with	persons o	lescribed	in (ii) and (	iii) below,		es No
	_		upported organization?					•		11g(i)	<del> -</del>
	· ·	<u>-</u>	n described in (i) above?			•-			•	11g(ii)	
	(iii) A 35% d	controlled entity of a	person described in (i)	or (ii) above	€?					11g(iii)	
h	Provide the f	ollowing information	about the organizations	the organ	ızatıon su	oports.					
	of supported inization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section	in col (i) lis governing (	sted in your	(i) of you		(vi) Is organizati (i) organiz U S	on in col ed in the	(vii) Amou suppor	
_			(see instructions))	Yes	No	Yes	No	Yes	No		
							_				
				-				-			
				<u></u>							
										<u> </u>	
							_		<del>                                     </del>		
							_				
Total											

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

<b>D</b>	edule A (Form 990 or 990-EZ) 2008		D	0	·(0)	<del></del>	Page 3
	rt III Support Schedule for C	rganizations	Described in	Section 509(a)	(Complete only	y if you checked the bi	ox on line 9 of Part I
	ction A. Public Support						
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and				į		
	membership fees received. (Do not						
	include any "unusual grants.")					<del> </del>	
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 bus-						
	iness under section 513					ļ., <u></u> .	
4	Tax revenues levied for the organ- ization'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 - 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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)						
	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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						
t	securities loans, rents, royalties	<del></del>					
t	securities loans, rents, royalties and income from similar sources						_
t	securities loans, rents, royalties and income from similar sources Unrelated business taxable income						
	securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses						
c	securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
11	securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on.  Other income. Do not include gain or loss from the sale of capital.						
11	securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain.						
11 12 13	securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	the organization's	s first, second, thu	d, fourth, or fifth ta	ax year as a sect	on 501(c)(3) organi	zation,
11 12 13 14	securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for check this box and stop here			d, fourth, or fifth ta	ax year as a sect	on 501(c)(3) organi	zation,
11 12 13 14	securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for			d, fourth, or fifth to	ax year as a sect	on 501(c)(3) organiz	zation,
11 12 13 14	securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for check this box and stop here	ic Support Pe	rcentage	·	ax year as a sect	on 501(c)(3) organi	zation,
11 12 13 14 Sec 15 16	securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Support percentage for 2008 (Public support percentage from 2007)	ic Support Pe ine 8, column (f) d Schedule A, Part	rcentage livided by line 13, o IV-A, line 27g	column (f))	ax year as a sect		<b>▶</b> □
11 12 13 14 Sec 15 16	securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage from 2007 ction D. Computation of Invection C. Computation of Invection C. Computation of Invection D. Computation of Invection D. Computation of Invection D. Computation of Invection D. Computation of Invection D. Computation of Invection D. Computation of Invection D. Computation of Invection D. Computation of Invection D. Computation of Invection D. Computation of Invection D. Computation of Invection D. Computation of Invection D. Computation of Invection D. Computation of Invection D. Computation of Invection D. Computation of Invection D. Computation of Invection D. Computation D	ic Support Pe Ine 8, column (f) d Schedule A, Part stment Incom	rcentage livided by line 13, o IV-A, line 27g e Percentage	column (f))	ax year as a sect	15	<b>▶</b> □
11 12 13 14 Sec 15 16	securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Support percentage for 2008 (Public support percentage from 2007)	ic Support Pe Ine 8, column (f) d Schedule A, Part stment Incom	rcentage livided by line 13, o IV-A, line 27g e Percentage	column (f))	ax year as a sect	15	% %
11 12 13 14 <u>See</u> 15 16 <u>See</u> 17 18	securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage for 2008 (Public support percentage from 2007 ction D. Computation of Investment income percentage from 2007 investment income 2007 investment income 2007 investment income 2007 investment income 2007 investment income 2007 investment investment invest	ic Support Pe ine 8, column (f) d Schedule A, Part stment Incom 108 (line 10c, colum 2007 Schedule A,	rcentage livided by line 13, o IV-A, line 27g re Percentage mn (f) divided by lin Part IV-A, line 27h	column (f))		15 16 17 18	% % %
11 12 13 14 <u>See</u> 15 16 <u>See</u> 17 18	securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage from 2007 ction D. Computation of Investment income percentage for 20 linvestment income percentage from 203 1/3% support tests - 2008. If the	ic Support Pe ine 8, column (f) of Schedule A, Part stment Incom 108 (line 10c, column 2007 Schedule A, organization did r	rcentage livided by line 13, of IV-A, line 27g re Percentage mn (f) divided by line Part IV-A, line 27h not check the box	ne 13, column (f))	  e 15 is more than	15 16 17 18 33 1/3%, and line	% % %
11 12 13 14 <u>See</u> 15 16 <u>See</u> 17 18	securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here.  Ction C. Computation of Public support percentage from 2007.  Ction D. Computation of Inventivestment income percentage from 203 1/3% support tests - 2008. If the more than 33 1/3%, check this box as	ic Support Pe ine 8, column (f) d Schedule A, Part stment Incom 108 (line 10c, colum 2007 Schedule A, organization did r and stop here. The	rcentage livided by line 13, or IV-A, line 27g le Percentage mn (f) divided by line Part IV-A, line 27h not check the box a organization qual	ne 13, column (f)) on line 14, and line		15 16 17 18 33 1/3%, and line zation	% % % 17 is not
11 12 13 14 <u>See</u> 15 16 <u>See</u> 17 18	securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here.  Ction C. Computation of Public support percentage from 2007. Computation of Investment income percentage from 33 1/3% support tests - 2008. If the more than 33 1/3%, check this box as 33 1/3% support tests - 2007. If the	ic Support Pe ine 8, column (f) d Schedule A, Part stment Incom 108 (line 10c, colum 2007 Schedule A, organization did r and stop here. The organization did r	ivided by line 13, or IV-A, line 27g are Percentage and (f) divided by line 27h and check the box a organization qualitation check a box or	column (f)) ne 13, column (f)) on line 14, and line ifies as a publicly s	e 15 is more than supported organi a, and line 16 is m	15 16 17 18 33 1/3%, and line zation nore than 33 1/3%,	% % % 17 is not .
11 12 13 14 <u>See</u> 15 16 <u>See</u> 17 18	securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here.  Ction C. Computation of Public support percentage from 2007.  Ction D. Computation of Inventivestment income percentage from 203 1/3% support tests - 2008. If the more than 33 1/3%, check this box as	ic Support Pe ine 8, column (f) of Schedule A, Part stment Incom 108 (line 10c, colum 2007 Schedule A, organization did r organization did r organization did r organization did r organization did r	ircentage livided by line 13, or IV-A, line 27g ie Percentage mn (f) divided by line 27h not check the box e organization qual not check a box or top here. The organization organization divided by line 27h not check a box or	column (f)) ne 13, column (f)) on line 14, and line ifies as a publicly solute 14 or line 19a anization qualifies	e 15 is more than supported organi a, and line 16 is m as a publicly sup	15 16 17 18 33 1/3%, and line zation nore than 33 1/3%, ported organization	% % % 17 is not .

### Schedule D

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

LYDIA PATTERSON INSTITUTE

Employer identification number 74-1142840

Schedule D (Form 990) 2008

-	LYDIA PATTERSON INSTITUT		74-1142840
Par		or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.		
	(a)	Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate 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 f	unds
•	are the organization's property, subject to the organization's exclusive le		Yes No
•	Did the organization inform all grantees, donors, and donor advisors in v		. —
6	for charitable purposes and not for the benefit of the donor or donor advisors in v		
Par			
			11, 1110 7.
1	Purpose(s) of conservation easements held by the organization (check a		-ally management land area
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historic	•
	Protection of natural habitat	Preservation of certified h	historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified conservation co	ntribution in the form of a conserv	ation easement on the last day
	of the tax year.		
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic structure inclu	uded in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/0		2d
3	Number of conservation easements modified, transferred, released, exti	nguished, or terminated by the org	ganization during the taxable
	year ▶		
4	Number of states where property subject to conservation easement is lo	ocated >	
5	Does the organization have a written policy regarding the periodic month	oring, inspection, violations, and	
	enforcement of the conservation easements it holds?		Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing	g easements during the year 🕨 _	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing e	asements during the year 🏲 💲	
8	Does each conservation easement reported on line 2(d) above satisfy the	ne requirements of section 170(h)(4	4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation easeme	nts in its revenue and expense sta	atement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization's financial		
	conservation easements.		
Pa	↑ 別 Organizations Maintaining Collections of Art, His	storical Treasures, or Othe	er Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part I		
1a	If the organization elected, as permitted under SFAS 116, not to report	in its revenue statement and balan	nce sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education, o		
	the footnote to its financial statements that describes these items.	r research in formerance or prome	
	If the organization elected, as permitted under SFAS 116, to report in its	royonus statement and halance	cheet works of art, historical treasures
D			
	or other similar assets held for public exhibition, education, or research	in furtherance of public service, pr	ovide the following amounts relating to
	these items:		<b>&gt;</b> 0
	(i) Revenues included in 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 sımılar assets for fınancial ga	in, provide
	the following amounts required to be reported under SFAS 116 relating	to these items:	_
а	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		<b>▶</b> \$

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

b	If "Yes" to 3a(ii), are the related organizations list	ed as required on Sched	ule R?		3b X
4	Describe in Part XIV the intended uses of the org	janization's endowment f	unds.		
Рa	rt VI Investments - Land, Buildings,	and Equipment. See	e Form 990, Part X, line 1	0.	·
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a	Land	3,003.	789,142.		792,145
b	Buildings		1,302,671.	1,135,817.	166,854
С	Leasehold improvements .				
d	Equipment		783,732.	579,215.	204,517
	Other .		198,166.	154,675.	43,491
Tota	1 Add lines 12-1e (Column (d) should equal Form	990 Part X column (B) I	ine 10(c) )	<b></b>	1,207,007

Schedule D (Form 990) 2008

Part VII Investments - Other Securities. Securities.	e Form 990, Part X, line 12			
(a) Description of security or category (including name of security)	(b) Book value	Co	(c) Method of valua est or end-of-year mar	
Financial derivatives and other financial products				
Closely-held equity interests				
Other				
ENDOWMENTS	3,014,844.	COST		·
			<u></u>	
			<del></del>	
	<u> </u>			
				<u> </u>
				. <u> </u>
Total. (Col (b) should equal Form 990, Part X, col (B) line 12 )	3,014,844.			
Part VIII Investments - Program Related. Se				-
		J.	(c) Method of valua	ition:
(a) Description of investment type	(b) Book value	Co	st or end-of-year mar	
			-	
		<u> </u>		
	<u> </u>			
				·
Total. (Col (b) should equal Form 990, Part X, col (B) line 13 ) Part IX Other Assets. See Form 990, Part X, line	15	1		
	Description		<del> </del>	(b) Book value
	<del></del>	<del></del>		
	· ·			
		<del></del>		
Total. (Column (b) should equal Form 990, Part X, col (B) III	ne 15.)	<u> </u>	<b>&gt;</b>	
Part X Other Liabilities. See Form 990, Part X,  (a) Description of liability	line 25.	(b) Amount		
		(b) Amount		
Federal income taxes			-	
		·		
			1	
		.=.	1	
	-		1	
····				
			1	۳
			1	
Total. (Column (b) should equal Form 990, Part X, col (B) III	ne 25.)		·	

In Part XIV, 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. 832053 12-23-08

	dule D (Form 990) 2008 LYDIA PATTERSON INSTITUTE		/4-	1142840	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Stat	ements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		2,262	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		2,447	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		<184	,676.
4	Net unrealized gains (losses) on investments	4			
5	Donated services and use of facilities	5			
6	Investment expenses	6			<u> </u>
7	Prior period adjustments	7			
8	Other (Describe in Part XIV)	8			
9	Total adjustments (net). Add lines 4-8	9			0.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10			,676.
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Reve	nue per l	Return		006
1	Total revenue, gains, and other support per audited financial statements	·	1	2,286	,206.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments		4 1		
b	Donated services and use of facilities		4 1		
C	Recoveries of prior year grants		4 1		
d	Other (Describe in Part XIV)	23,693	-		
e	Add lines 2a through 2d		2e		<u>,693.</u>
3	Subtract line 2e from line 1		3	2,262	<u>,513.</u>
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		_		
b	Other (Describe in Part XIV)		1		_
C	Add lines 4a and 4b	•	4c		0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)		5	2,262	<u>,513.</u>
Pa	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	enses pe			100
1	Total expenses and losses per audited financial statements		1	2,447	, 109.
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		-		
C	Losses reported on Form 990, Part IX, line 25		-		
d	Other (Describe in Part XIV)		- 1		^
е	Add lines 2a through 2d		2e	2,447	100
3	Subtract line 2e from line 1		3	2,447	, 109.
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		-		
b	Other (Describe in Part XIV)		ا ہے ا		0.
	Add lines 4a and 4b		4c	2,447	
5 Da	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)		5	2,441	, 109.
	* XIV Supplemental Information plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; P	ort IV lines	1b and 1	Ob: Dort V. line	4. Dort
	rt XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	art IV, imes	ID all U	zb, Fart V, III e	4, Fait
∧, гс	it Ai, iiile 6, Fait Aii, iiiles 20 and 40, and Fait Aiii, iiiles 20 and 40.				
				<del>-</del>	
PAI	RT XII, LINE 2D - OTHER ADJUSTMENTS:				
CH	ANGE IN TEMPORARILY RESTRICTED ASSETS				
					_
_					
		•			

#### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### **Schools**

To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public Inspection

**Employer identification number** Name of the organization 74-1142840 LYDIA PATTERSON INSTITUTE YES NO 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, X other governing instrument, or in a resolution of its governing body? 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, Х catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes X the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain 3 Does the organization maintain the following? X Records indicating the racial composition of the student body, faculty, and administrative staff? 4a X Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4h c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student Х 4c admissions, programs, and scholarships? X 4d d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: a Students' rights or privileges? 5a 5b **b** Admissions policies? c Employment of faculty or administrative staff? 5c d Scholarships or other financial assistance? 5d 5e e Educational policies? f Use of facilities? 5f g Athletic programs? 5g 5h h Other extracumcular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) 6a X 6a Does the organization receive any financial aid or assistance from a governmental agency? X

Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement.

Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of

b Has the organization's right to such aid ever been revoked or suspended?

Schedule E (Form 990 or 990-EZ) 2008

STATEMENT 1

6b

X

SCHEDULE				0 to 1		•		OMB No 1545-0047
(Form 990)			Governn	ants and Other Assistance to Organizatio Governments, and Individuals in the U.S.	rants and Other Assistance to Organizations, Governments, and Individuals in the U.S.	ő		2008
Department of the Treasury Internal Revenue Service		▼ Compl	► Complete if the organizatio	n answered "Yes," on F  ► Attach to Form 990.	," on Form 990, Pa m 990.	rganization answered "Yes," on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990.		Open to Public inspection
Name of the organization	tion LYDIA PATTERSON INSTITUTE	TERSON IN	STITUTE				E	Employer identification number $74-1142840$
Part : General I	General Information on Grants and Assistance	nd Assistance						
1 Does the organi	Does the organization maintain records to substantiate the amount of	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	y for the grants or assi	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	[
criteria used to	criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	stance?	ornor the use of grant	funds in the Unite	d States.			X Yes No
art II	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Governments and	1 Organizations in the	e United States. C	complete if the orga	anization answered "Y	es" on Form 990, Part I	V, line 21, for any
recipient t	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	\$5,000 Check this	box if no one recipien	nt received more th	ian \$5,000. Use Pa	art IV and Schedule I-1	(Form 990) if additiona	space is needed
1 (a) Name and a or go	1 (a) Name and address of organization or government	( <b>p</b> ) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							ı	
	Enter total number of section 501(c)(3) and government organizations	and government or	ganizations					<b>A</b>
3 Enter total num	Enter total number of other organizations	S						<b>A</b>
LHA For Privacy Ac	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	ction Act Notice,	see the Instructions	for Form 990.				Schedule I (Form 990) 2008

LYDIA PATTERSON INSTITUTE Schedule I (Form 990) 2008

Part III Grants and Othe

Page 2

74-1142840

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIP AWARDS	39	2,680.	0		
SCHOLARSHIP AWARDS	4	1,340,	o		
STIPENDS	5	1,141.	0		
					•
Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	de the informatio	n required in Part I, I	ine 2, and any other	additional information.	
1 0	LYDIA PA	PATTERSON ST	STUDENTS. THE		
	STUDENTS	THAT WERE	AWARDED		
S AND/OR STIPEN	UPDATE	THE LIST	EVERY SIX W	WEEKS,	
	AN AN	D A REPORT CARD	IS GIVEN	TO EACH	
IT. SCHOLARSHIP	MONITORED	CHE	TEACHERS AND	о тне	
RINCIPAL.	:				

#### SCHEDULE O (Form 990)

Supplemental Information to Form 990

Attach to Form 990. To be completed by organizations to provide

Department of the Treasury Internal Revenue Service ► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008 Open to Public Inspection

Name of the organization

LYDIA PATTERSON INSTITUTE

Employer identification number 74-1142840

FORM 990, PART VI, SECTION A, LINE 10: A COPY OF THE FORM 990 IS GIVEN TO
THE PRESIDENT OF THE SCHOOL TO REVIEW, BEFORE PROCESSING. THE PRESIDENT
KEEPS A COPY OF THE RETURN ON FILE. BOARD MEMBERS CAN RECEIVE A COPY UPON
REQUEST. ALL BOARD MEMBERS ARE GIVEN A COPY OF THE AUDITED FINANCIAL.
FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF TRUSTEES EVALUATES KEY
EMPLOYEES AND DETERMINES COMPENSATION.
FORM 990, PART VI, SECTION C, LINE 19: ALL GOVERNING DOCUMENTS, CONFLICT
OF INTEREST POLICIES, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC
UPON REQUEST.
NO CHANGES FROM PRIOR YEAR

# BOARD OF TRUSTEES 2006-2010

	<u>NAME</u>	CONF.REP.JAREA	ADDRESS & TEL.
1.	Bishop Bruce Blake Executive Committee Finance Committee, Chairperson	College of Bishops	3100 Cabrillo Dr. Winfleld, KS 67156 (620) 221-6924 (H) (316) 708-6003 (C) <u>kurbru@cox.net</u>
2.	Mrs. Karen Blake Development Committee	At Large	3100 Cabrillo Dr. Winfield, K\$ 67156 (620) 221-6924 (H) (316) 708-6003 (C) karbru@cox.net
<i>3</i> .	Mr. Raymond Brigham	Northwest Texas	2314 61 <sup>st</sup> Street Lubbock, Texas 79412 (806) 795-4066 <u>rdbrigham@att.net</u>
4.	Dr. William E. Brown, M.D.		7208 Pinetree Place Tyler, Texas 75703 (903) 593-2468 (O) (903) 581-0648 (H) (903) 571-0269 (C) (903) 581-9835 (OF) wbrown@tylerobgyn.com dliver@sol.com (H)
<i>5</i> .	Mrs. Patty Bruce Development Committee	Large	1082 Los Jardines Cir, El Paso, Texas 79912 (915) 584-4614 (H)
	Rev. David A. Burris Finance Committee	Oklahoma	1138 S. Yale Tulsa, OK 74112 (918) 834-0891 (O) (918) 627-0944 (H) (918) 835-6912 X 211 (918) 835-4740 (F) (918) 704-1177 (C) dburris@willrogersumc.org
7.	Ms. Teresa Chairez Academic Concerns Committee	Faculty Representative	P.O. Box 11 El Paso, Texas 79940 (915) 533-8286 (O) (915) 533-5236 (F) tchairez@lydiapattersoninstitute.org

## BOARD OF TRUSTEES 2006-2010

<u>NAME</u>	CONF.REP./AREA	ADDRESS &
8. Dr. Stan Copeland Board Chairperson Executive Committee Nominations Committee	North Texas	882 Camino Lag Irving, Texas 7! (214) 706-9511 ( (214) 549-7830 ( (214) 692-0803 ( scopeland@llum
9. Dr. Socorro Brito de An LPI President Executive Committee Nominations Committee	da El Paso	6404 Pino Real El Paso, Texas (915) 533-8286 ( (915) 833-3420 ( (915) 588-6172 ( (915) 533-5236 ( SDEA@AOL.COM
10. Mr. Charles B. Dedmon Executive Committee Finance Committee Capital Campaign Commit Chairperson Development Committee, Chairperson		5706 Hagen Cor Dallas, Texas 7; (972) 931-7921 ( (214) 649-9999 ( (972) 447-0635 ( chuckdedmon@
11. Mr. Mike Dipp	Él Paso	P.O. Box 55 El Paso, Texas (915) 532-2660 ( (505) 882-3916 ( (915) 543-9624 ( elpasoplaza@ac
12. Bishop James E. Dorff Finance Committee	College of Bishops Southwest Texas and Rio Grande	16400 Huebn San Antonio, To (888) 349-4191 ( (210) 408-4502 ( (505) 291-8885 ( (210) 408-4501 ( bishop@umcsw
13. Mr. Rick Eason Development Committee	At Large	1401 South Coll Georgetown, T; (512) 475-9612 ( (512) 863-7236 ( (512) 869-1694 ( reasonb1209@co

### **BOARD OF TRUSTEES** 2006-2010

NAME	CONF.REP./AREA	ADDRESS & TEL.
14. Rev. Delia Estrada Church Relations Committee	Ex-Officio Northwestern District Superintendent	10732 Lemonade St. El Paso, Texas 79924 (915) 821-0541 (O) (915) 822-2455 (F) (361) 779-5273 (C) decu3@aol.com
15. Rev. Jim Foster Executive Committee Church Relations Committee, Chairperson	Техаз	5830 Bermuda Dunes Houston, TX 77069 (281) 444-2112 (O) (281) 444-4313 (F) <u>ifoster@jwumc.org</u>
16. Rev. Churles Graff Academic Concerns Committee	Central TX	800 W. Fifth St. Fort Worth, TX 76102 (817) 336-7277 (O) (817) 339-5065 (F) (817) 999-6026 (C) cgraff@fumcftw.org
17. Bishop John W. Hardt Development Committee	Emeritus College of Bishops	6309 Crestmont Dallas, Texas 75214 (214) 768-2419 (O) (214) 696-2370 (H) Hardti@sbeglobal.net
18. Rev. Tony F. Hazen Facilities Committee	Kansas East	P.O. Box 63 Lebo, KS 66856 (620) 256-6485 (O) (620) 256-6417 (H) (785) 640-0899 (C) tonyh785@aol.com
19. Mrs. Anne Hearn Church Relations Committee	Emeritus	62 Campeche Cr. Galveston, Texus 77554 (409) 741-0350 (H)
20. Mr. Freddie Henderson Academic Concerns Committee	Lõuisiana	527 North Blvd. Baton Rouge, LA 70802 (225) 346-1646 (O) (225) 383-2652 (F) (225) 803-5137 (C) (888) 239-5286 (TF) fehenderson@laumc.org

## BOARD OF TRUSTEES 2006-2010

<u>NAME</u>	CONF.REP./AREA	ADDRESS & TEL.
21. Ms. Stacy Hunt		4935 Vista Del Monte El Paso, Texas 79922 (915) 845-7580 (H) (915) 309-7875 (C)
22. Rev. Harry G. Kahl Church Relations Committee	Southwest Texas	3280 Gopher Hill San Antonio, TX 78263 (830) 534-8339 (C) (830) 779-2621 (O) (210) 648-3784 (H) (830) 779-4010 (F) hgkahl@umcswtx.org
23. Mrs. Kim Kleberg		4729 Rosinante Rd. El Paso, Texas 79922 (915) 760-5851 <u>kimberlyk@yahoo.com</u>
24. Mrs. Cecilia Levine	El Paso, Texas	1217 Camino Barranca El Paso, Texas 79912 (915) 858-0971 (O) (915) 585-1554 (H) (915) 637-0624 (C) (915) 585-3652 (F) (915) 858-8827 (F) Cecilia.levine@msiintl.com
25. Bishop Joel N. Martinez Finance Committee Nominations Committee	College of Bishops	14710 Kinsem San Antonio, Texas 78248 (210) 764-0167 (H) (210) 618-5362 (C) <u>ioelmartinez@yahoo.com</u>
26. Rev. Steve McElroy	El Paso District Superintendent	6401 Belton Rd. El Paso, Texas 79912 (915) 584-9494 (O) (915) 584-9515 (F)
27. Ms. Nadine Miller	Arkansas	2971 Cliff Dr. Fort Smith, AR 72901 (479) 646-1517 (H) (479) 646-3858 (O) (479) 719-5625 (C) (479) 646-0455 (F) BNCLIFF@SBC./COM

Revised 7/27/2009

To:7604229

### **BOARD OF TRUSTEES** 2006-2010

NAME	CONF.REP./AREA	ADDRESS & TEL.
28. Rev. Larry Moffet Board Secretary Executive Committee Academic Committee	Nebraska	2723 N. 50 <sup>th</sup> Street Lincoln, NE 68504 (402) 466-1906 (O) (402) 465-4774 (H) (402) 466-1908 (F) (402) 770-7355 (C) Pastorlarr@201.com
29. Rev. Scott Moon Academic Concerns Committee Nominations Committee	Missouri	2518 Fairlane Dr. Cape Girardeau, MO 63701 (573) 334-1321 (O) (573) 332-8275 (H) (573) 576-6182 (C) gracepastor@sbcglobul.net
30. Mrs. Carmen Perez Executive Committee Academic Concerns Committee Chairperson	At Large	10454 Jamway El Paso, Texas 79925 (915) 533-6637 (O) (915) 740-8393 (C) (915) 532-7085 (H)&(F) carmenp@publicans.com
31. Dr. Don F. Renshaw, Jr. And Development Committee	t Large	2419 Riverview Dr. McKinney, Texas 75071 (972) 562-3106 (O) (972) 562-3106 (F) (214) 707-4947 (C) drdfrj@att.nct
32. Rev. John Rosenburg Executive Committee Facilities Committee, Chairpers	At Large	2525 Kell Blvd., Suite 413 Wichita Falls, TX 76308 (940) 761-1630 (H) (940) 767-6621 (O) (940) 704-8577 (C) (940) 767-7470 (F) irosenburg@nts-online.net
33. Rev. John Schwarting Church Relations Committee Nominations Committee	New Mexico	801 N. Mesa El Paso, Texas 79902 (915) 533-2674 (O) (915) 276-9913 (H) (915) 533-2690 (F) John@Trinity-First.org

### **BOARD OF TRUSTEES** 2006-2010

	NAME	CONF.REP./AREA	ADDRESS & TEL.
<i>34</i> .	Mr. David Severe Finance Committee	South Central Jurisdiction Executive Director	P.O. Box 61069 Oklahoma City, OK 73146 (405) 208-5610 (O) (405) 202-9846 (C) (405) 943-0222 (F) scidirector@okeu.edu
35.	Mrs. Mary Steger Board Vice Chairperson Executive Committee Finance Committee	At Large	1230 S. Austin Ave. Georgetown, TX 78626 (512) 863-9669 (H) (512) 508-6018 (C) <u>msteger@suddcnlink.net</u>
<i>36</i> .	Ambassador Raymond Telle. Finance Committee	s Emeritus	824 Singing Hills El Paso, Texas 79912 (915) 584-5700 (O)
<i>37.</i>	Mr. Hugo Vargas Facilities Committee	At Large	834 Pueblo Street El Paso, Texas 79903 011526566-133783 (H) (915) 566-6912 (C)
38.	Mr. David Villalobos Facilities Committee	Rio Grande	1667 Robert Wynn El Paso, Texas 79936 (915) 591-3366 (H) (915) 549-8550 (C) davidvelpusu@aul.com
<i>39</i> .	Ms. Della Walkingsky Facilities Committee	Oklahoma Indian Missionary	321 Sesame Drive Mesquite, TX 75149 (972) 636-5055 (H)
40.	Bishop D. Max Whitfield Facilities Committee	College of Bishops Northwest Texas and New Mexico	11816 Lomas Blvd. NE Albuquerque, NM 87112 (505) 255-8786 (O) (505) 255-9738 (H) (505) 265-6184 (F) (508) 255-8738 (F2) dlippitt@n.confum.com

#### Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev 4-2009)

-			
	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box	<b>6</b> ~~~\	. • X
	ou are filing for an <b>Additional (Not Automatic) 3-Month Extension, complete only Part II</b> (on page 2 of this ot complete Part II unless you have already been granted an automatic 3-month extension on a previously fi	-	rm 8868.
Par			
A cor <sub>l</sub> Part I	poration required to file Form 990-T and requesting an automatic 6-month extension - check this box and con only	nplete	▶ □
	her corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar Income tax returns.	n exten	sion of time
noted (not a you m	ronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or construct submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Chanties & Nonprofits.	ically if	(1) you want the additional ated Form 990-T. Instead,
Type print	or Name of Exempt Organization	Emp	loyer identification number
brint	LYDIA PATTERSON INSTITUTE	7	4-1142840
File by to due date filing you return S instruction	our   P.O. BOX 11		
	k type of return to be filed (file a separate application for each return):  Form 990  Form 990-T (corporation)  Form 990-BL  Form 990-T (sec. 401(a) or 408(a) trust)  Form 52		
	Form 990-EZ Form 990-T (trust other than above) Form 60 Form 990-PF Form 1041-A Form 80		
• Th Te	EVDIA PATTERSON INSTITUTE  e books are in the care of ► 517 S. FLORENCE - EL PASO, TX 79901-299  lephone No. ► (915) 533-8286  FAX No. ►  the organization does not have an office or place of business in the United States, check this box  this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the	8 8 	
• Th Te • If t	Form 990-PF	8 0 8  Is is fo memb	ers the extension will cover.
• Th Te • If t • If t	LYDIA PATTERSON INSTITUTE e books are in the care of ▶ 517 S. FLORENCE - EL PASO, TX 79901-299 lephone No. ▶ (915)533-8286 FAX No. ▶ the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If th  □ . If it is for part of the group, check this box ▶ □ and attach a list with the names and EINs of all  I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitary and the organization's return for: ■ □ calendar year or	9 8  Is is fo memberatil above.	ers the extension will cover.
• Th Te • lift • lift bbox ]	LYDIA PATTERSON INSTITUTE e books are in the care of ▶ 517 S. FLORENCE - EL PASO, TX 79901-299 lephone No. ▶ (915)533-8286 FAX No. ▶ the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the lift is for part of the group, check this box ▶ and attach a list with the names and EINs of all  I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unity APRIL 15, 2010 and attach a list with the organization named a list for the organization's return for:  I calendar year or all calendar year or light tax year beginning SEP 1, 2008 and ending AUG 31, 2009  If this tax year is for less than 12 months, check reason. I initial return Final return  If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	98 us is fo memb	The extension  Change in accounting period
• Th Te • lift • lift 1 2	LYDIA PATTERSON INSTITUTE e books are in the care of ▶ 517 S. FLORENCE – EL PASO, TX 79901–299 lephone No. ▶ (915)533–8286 FAX No. ▶ the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If th  □ . If it is for part of the group, check this box ▶ □ and attach a list with the names and EINs of all  I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitary and an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitary and an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitary and an automatic 3-month for:  □ calendar year or □ calendar year or □ X tax year beginning SEP 1, 2008, and ending AUG 31, 2009  If this tax year is for less than 12 months, check reason. □ Initial return □ Final return	9 8  Is is fo memberatil above.	The extension
The Telester of the Telester o	LYDIA PATTERSON INSTITUTE e books are in the care of ▶ 517 S. FLORENCE - EL PASO, TX 79901-299 lephone No. ▶ (915)533-8286 FAX No. ▶ the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If the	98 us is fo memb	The extension  Change in accounting period
• Th Te • If the box I 1	LYDIA PATTERSON INSTITUTE e books are in the care of ▶ 517 S. FLORENCE − EL PASO, TX 79901−299 lephone No. ▶ (915) 533−8286 FAX No. ▶ the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the interpretation is for part of the group, check this box is and attach a list with the names and EINs of all interpretation is for part of the group, the check this box is for the organization's return for:    The pretation is for the group is for a corporation required to file Form 990-T) extension of time united and the pretation is for the organization's return for:   The pretation is for the group is for the group is for the organization greturn for:   The pretation is for form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.   The pretation is for form 990-PF or 990-T, enter any refundable credits and estimated   Pretation is for Form 990-PF or 990-T, enter any refundable credits and estimated   Pretation is for Form 990-PF or 990-T, enter any refundable credits and estimated   Pretation is for Form 990-PF or 990-T, enter any refundable credits and estimated   Pretation is for Form 990-PF or 990-T, enter any refundable credits and estimated   Pretation is for Form 990-PF or 990-T, enter any refundable credits and estimated   Pretation is for Form 990-PF or 990-T, enter any refundable credits and estimated   Pretation is for Form 990-PF or 990-T, enter any refundable credits and estimated   Pretation is for Form 990-PF or 990-T, enter any refundable credits and estimated   Pretation is for Form 990-PF or 990-T, enter any refundable credits and estimated   Pretation is for Form 990-PF or 990-T, enter any refundable credits and estimated   Pretation is for Form 990-PF or 990-T, enter any refundable credits and estimated   Pretation is for Form 990-PF or 990-T, enter any refundable credits   Pretation is for Form 990	3a	The extension will cover.  The extension  Change in accounting period

LHA

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.