

### 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



## Form **990-PF** Department of the Treasury

## EXTENSION GRANTED TO 11/15/10

### **Return of Private Foundation**

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

2009

OMB No 1545-0052

For calendar year 2000, or tax year beginning  G. Check all that apply:    Initial return   Address change   Name change
Name of foundation   LaCO RURAL TELEPHONE
Use the IRS   Rame of foundation   LEACO RURAL TELEPHONE   BDUCATION FOUNDATION   Rumber and street (or PO Dox number if mail is not delivered to street address)   Reconvisuite   B Telephone number (575) 370-5010   City or form, state, and ZIP code   City or form, state, and ZIP c
LeaCO RURAL TELEPHONE
LEACO RURAL TELEPHONE
Number and street (or PC box number (if mail is not delivered to street address)   Room/suite   See Specific (in yor town, state, and ZIP code   HOBBS   NM   88240
Or type.  See Specific City or town, state, and ZIP code Instructions.  HOBBS, NM 88240  H Check type of organization: X Section 501(c)(3) exempt private foundation  Section 4947(a)(1) nonexempt charitable trust.  Other taxable private foundation  Fair market value of all assets at end of year of the foundation (from Part II, col. (c), inne 16).  Fair market value of all assets at end of year of the foundation is in a 60-month term under section 507(b)(1)(8), check here and elizable foundation is in a 60-month term under section 507(b)(1)(8), check here and elizable foundation is in a 60-month term under section 507(b)(1)(8), check here and elizable foundation is in a 60-month term under section 507(b)(1)(8), check here and elizable foundation is in a 60-month term under section 507(b)(1)(8), check here and elizable foundation is in a 60-month term under section 507(b)(1)(8), check here and elizable foundation is in a 60-month term under section 507(b)(1)(8), check here and elizable foundation is in a 60-month term under section 507(b)(1)(8), check here and elizable foundation is in a 60-month term under section 507(b)(1)(8), check here and elizable foundation is in a 60-month term under section 507(b)(1)(8), check here and elizable foundation is in a 60-month term under section 507(b)(1)(8), check here are distanced for the foundation of 60-month term elizable foundation and expenses per books and interest from securities as interest on swings and temporary section 507(b) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1
See Specific Instructions. City or town, state, and ZIP code Instructions. W 88240  H. Check type of organization: X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust  Other taxable private foundation I Fair market value of all assets at end of year (from Part II, col. (c), line 16) S 27, 476. (Part I, col. (c), line 16) Analysis of Revenue and Expenses (the total of amounts in columns (b), (c), and (d) may not expenses the total of amounts in columns (b), (c), and (d) may not expenses the total of amounts in columns (b), (c), and (d) may not expenses the vector of amounts in columns (b), (c), and (d) may not expenses the vector of amounts in columns (b), (c), and (d) may not expenses per books  1 Contributions, gifts, grants, etc., received 2 Check  X I the boundation is of required to attach Sch 8 interest on asvings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income of closs)  7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 0 Gas Net gain or (foss) from sale of assets not on line 10 b cross acides price for all securities of the price of the price of all securities of the price of the price of all securities of the price of the pr
Instructions. Lot you to town, state, and 2 Process H Check type of organization: X Section 501(c)(3) exempt private foundation  Section 4947(a)(1) nonexempt charitable trust  Other taxable private foundation  Fair market value of all assets at end of year  Other (specify)  \$ 27, 476. (Part I, col. ic), line 16)  \$ 27, 476. (Part I, column (c) must be on cash basis.)    Pairtill Analysis of Revenue and Expenses
HOBBS, NM 88240    Check type of organization:
Section 4947(a)(1) nonexempt charitable trust  Other taxable private foundation  I Fair market value of all assets at end of year  (from Part II, col. (c), line 16)  Other (specify)  Other (specify)  If the foundation is in a 60-month term under section 507(b)(1)(A), check here  (a) Revenue and  (b) Net investment  income  (c) Adjusted net  income  (c) Adjusted net  (d) Deab  (c) and (d) may not  not  not required to attach Sch 8
Fair market value of all assets at end of year (from Part II, col. (c), line 16)
Fair market value of all assets at end of year
Analysis of Revenue and Expenses (The total of amounts in columns (b) (c), and (c) may not necessarily equal the amounta in column (e).)  1 Contributions, girls, grants, etc., received 2 Check  X If the foundation is not required to attach Sch 8 interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross eales price for all assets on line 42 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications Cross seles less returns 10a and allowances b Less: Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total, Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits  8 Is a Revenue and (b) Net investment income (d) Division of officers, directors, trustees, etc. 15 Pension plans, employee benefits  (a) Revenue and (b) Net investment income (b) Net investment income (c) Adjusted net income (c) Adjusted net income (d) Division plans, employee benefits
Analysis of Revenue and Expenses (The total of amounts in columns (b) (c), and (d) may not necessarily equal the amounts in column (a).  1 Contributions, gifts, grants, etc., received 2 Check
1 Contributions, girfts, grants, etc., received 2 Check X If the foundation is not required to attach Sch 8 Interest on savings and temporary as intresters on savings and temporary 3 cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b cases an line 6a seets on line 6a seets not on line 10 b capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications Gross sales less returns 10a and allowances b Less: Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total, Add lines 1 through 11 13 Compensation of officers, directors, trustess, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 18 Legal fees
1 Contributions, gifts, grants, etc., received 2 Check X if the foundation is not required to attach Sch 8 Interest on savings and temporary asian investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 6a See go on line 6a seed price for all b assets on line 6a seed price for all copital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications Gross sales less returns 10a and allowances b Less: Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total, Add lines 1 through 11 13 Compensation of officere, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees
2 Check X If the foundation is not required to attach Sch 8 Interest on savings and temporary assh Investments  4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b casette on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications Gross asles less returns 10a and allowances b Less: Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total, Add lines 1 through 11 13 Compensation of officere, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits  28 16a Legal fees
Interest on savings and temporary as as investments  4 Dividends and interest from securities  5a Gross rents  b Net rental income or (loss)  6a Net gain or (loss) from sale of assets not on line 10 b assets on line 6a  7 Capital gain net income (from Part IV, line 2)  8 Net short-term capital gain  9 Income modifications (gross sales less returns)  10a and allowances  b Less: Cost of goods sold c Gross profit or (loss)  11 Other income  12 Total, Add lines 1 through 11  5 Compensation of officers, directors, trustees, etc.  14 Other employee salarres and wages  15 Pension plans, employee benefits  81. 81.  81. STATEM  81. STATEM  81. OSTATEM  9. O
4 Dividends and interest from securities 5a Gross rents  b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 6 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications Gross sales less returns 10a and allowances  b Less: Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total, Add lines 1 through 11 6 , 0 7 3 . 81 . 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 18a Legal fees
5a Gross rents  b Net rental Income or (loss)  6a Net gain or (loss) from sale of assets not on line 10  b Gross sales price for all assets on line da  7 Capital gain net income (from Part IV, line 2)  8 Net short-term capital gain 9 Income modifications Gross sales less returns 10a and allowances  b Less: Cost of goods sold c Gross profit or (loss)  11 Other income 12 Total, Add lines 1 through 11  13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits  16a Legal fees
D Net rental income or (loss)  68 Net gain or (loss) from sale of assets not on line 10
8 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 8a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications Gross sales less returns and allowances b Less: Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total, Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees
B Gross sales price for all assets on line 6a  7 Capital gain net income (from Part IV, line 2)  8 Net short-term capital gain 9 Income modifications Gross sales less returns 10a and allowances  b Less: Cost of goods sold c Gross profit or (loss)  11 Other income 12 Total, Add lines 1 through 11  13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees
9 Income modifications Gross asies less returns 10a and allowances  b Less: Cost of goods sold c Gross profit or (loss)  11 Other income 12 Total, Add lines 1 through 11 13 Compensation of officera, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees
9 Income modifications Gross sales less returns 10a and allowances  b Less: Cost of goods sold c Gross profit or (loss)  11 Other income 12 Total, Add lines 1 through 11 13 Compensation of officera, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees
9 Income modifications Gross asies less returns 10a and allowances  b Less: Cost of goods sold c Gross profit or (loss)  11 Other income 12 Total, Add lines 1 through 11 13 Compensation of officera, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees
108 and allowances  b Less: Cost of goods sold c Gross profit or (loss)  11 Other income 12 Total, Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees
b Less: Cost of goods sold c Gross profit or (loss)  11 Other income 12 Total, Add lines 1 through 11 13 Compensation of officere, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees
c Gross profit or (loss)  11 Other income  12 Total, Add lines 1 through 11  13 Compensation of officers, directors, trustees, etc.  14 Other employee salaries and wages  15 Pension plans, employee benefits  16a Legal fees
11 Other income 12 Total, Add lines 1 through 11 6,073. 81.  13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees
12 Total, Add lines 1 through 11 6,073. 81.  13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees
13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees
14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees
15 Pension plans, employee benefits 16a Legal fees
16a Legal fees
c Other professional fees  PRECEIVED  To linteres  RECEIVED
P C Other protessional lees  17 Interes RECEIVED  18 Taxes
B 18 Taxes
5 10 12.65
19 Depreciation and depletion
20 Occupator NOV 1 8 2010
20 Occupacy 100 1 8 2010 2010 2010 2010 2010 2010 2
\$ 22 Printing and publications At 117
22 Printing and publication EN, UT
24 Total operating and administrative
expenses. Add lines 13 through 23
25 Contributions, gifts, grants paid 4,100.
I NUMBER OF A STREET OF A ST
26 Total expenses and disbursements.  Add lines 24 and 25  4 100 a
Add lines 24 and 25 4,100 . 0 .
Add lines 24 and 25 4, 100. 0.  27 Subtract line 26 from line 12:
Add lines 24 and 25 . 4,100 . 0 .

LEACO RURAL TELEPHONE

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Form 990-PF (2009) 85-6120669 EDUCATION FOUNDATION Page 2 Part | | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. Beginning of year (a) Book Value (b) Book Value (c) Fair Market Value Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts ▶ 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less, accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ▶ 25,503 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Fund Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 45,180 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund ......  $< 19, \overline{677}$ <23,696 29 Retained earnings, accumulated income, endowment, or other funds 25,503 30 Total net assets or fund balances 25,503 31 Total liabilities and net assets/fund balances Partill Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 25,503. (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 Decreases not included in line 2 (itemize)

Form 990-PF (2009)

EDUCATION FOUNDATION

1.82 38 3 3.001	Losses for Tax on Investr		T/b) U	nu anguirad		T
(a) List and describe th 2-story brick warehou	e kind(s) of property sold (e.g., real es se; or common stock, 200 shs. MLC (	state, Co.)	P - D -	ow acquired Purchase Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
la			<b>_</b>			
b NONE			<b>_</b>		<u></u>	<del> </del>
C			<del> </del>			
<u>d</u>			+		<del></del>	<del></del>
e (e) Gross sales price		g) Cost or other basis plus expense of sale			(h) Gain or (los (e) plus (f) minus	
8.						
b	<del></del>		-	<del></del>		
d			$\dashv$		<del></del>	
e			$\dashv$			
Complete only for assets showing gain	in column (h) and owned by the foun	dation on 12/31/69		(	I) Gains (Col. (h) gai	n minus
(i) F.M.V. as of 12/31/69		(k) Excess of col. (i) over col. (j), if any			l. (k), but not less th Losses (from col.	an -0-) or
8						<del> </del>
b						
C						
d			$\Box$			
е				<del>-, -</del>		
Capital gain net income or (net capital le	oss) { If gain, also enter in Part   If (loss), enter -0- in Part		}	2	<u> </u>	
Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, colum			ì			
If (loss), enter -0- in Part I, line 8				3		
Part V Qualification Unde	r Section 4940(e) for Redu	uced Tax on Ne	t Inve	stment In	come	
Vas the foundation liable for the section 45  f "Yes," the foundation does not qualify un  Enter the appropriate amount in each o	der section 4940(e). Do not complete	this part.				Yes X No
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributtor	ns Net value of n	(c) onchari	table-use asset	s (col. (b) c	(d) ibution ratio livided by col. (c))
2008	1,8			25,07		.07179
2007	2,2			25,83		.08671
2006	2,2			27,92		.08199
2005	$\frac{2}{3}$ , $\frac{7}{5}$			20,89		.12923
2004	2,5	00.1		60	<del>/ •  </del>	4.11861
2 Total of line 1, column (d)				. ,,	2	4.48835
Average distribution ratio for the 5-year the foundation has been in existence if			n ∪iyea		3	.89767
4 Enter the net value of noncharitable-use	e assets for 2009 from Part X, line 5				4	25,655
5 Multiply line 4 by line 3					5	23,030
3 Enter 1% of net investment income (1%	of Part I, line 27b)				6	1
7 Add lines 5 and 6					7	23,031
B Enter qualifying distributions from Part	XII, line 4				8	4,100
If line 8 is equal to or greater than line 7 See the Part VI instructions.	•	complete that part usi	ng a 1%	tax rate.		
923521 02-02-10						Form <b>990-PF</b> (2009

LEACO RURAL TELEPHONE

	SOUTH (2005) EDUCATION FOUNDATION		<u>0170</u>			age 4
_	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	- <b>500</b> i	nstru	ction	1S)
1a	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		達地	200		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here   L   and enter 1%	1	eli e		te in the second of	2.
	of Part I, line 27b	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		生活では		47
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	1			17	- ASSET
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3				<u>2.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4_				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				2.
6	Credits/Payments:	- 12	學語語		THE PERSON NAMED IN	州劃
8	2009 estimated tax payments and 2008 overpayment credited to 2009				4 4 6	調制
b	Exempt foreign organizations - tax withheld at source 6b				根据	
C	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld 6d 6d				7.7	
7	Total credits and payments. Add lines 6a through 6d	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			_	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				2.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11.	Enter the amount of line 10 to be: Credited to 2010 estimated tax	11				
Pe	Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	in			Yes	No
	any political campaign?			18		_X_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publishe	d or			光學	
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			1c		<b>X</b> _
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					舞蹈
	(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					影响
	managers. ▶ \$ 0 .					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.				<b>BOOK</b>	監罰
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, of	Γ			影響	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			48		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	I/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.				<b>THE</b>	理解
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					村間
	By language in the governing instrument, or			計		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law				
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7_	X	
	If "Yes," complete Part II, col. (c), and Part XV.			質	<b>東京部</b>	機器
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	NM			100 mg		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				32	
	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar		7.5		
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? n "Yes," attach a schedule listing their names and addresses			10		X

b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could leopardize its charatable purpose that

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2009.)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

Form **990-PF** (2009)

48

N/A

Form 990-PF (2009) EDUCATION FOUNDATION	Form 4700 May Bo F	Dominos de la la	85-6 <u>1</u> 206	69 Page 6
Part-VIEB Statements Regarding Activities for Which	Form 4/20 May Be F	sequirea (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section		•	s X No	
(2) Influence the outcome of any specific public election (see section 4955); (	or to carry on, directly or indire			
any voter registration drive?		• • ==	s 🔀 No 🚆	
(3) Provide a grant to an individual for travel, study, or other similar purposes	37	L <b>X</b> Ye	s 🔲 No 🎉	
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section			<b>新屋車職</b>
509(a)(1), (2), or (3), or section 4940(d)(2)?		L Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f			
the prevention of cruelty to children or animals?		Ye	s 🗶 No 🦉	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	uctions)?		!	5b X
Organizations relying on a current notice regarding disaster assistance check to	here		. ▶□ 🕌	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption (	from the tax because it maintai	ined		
and the same and the life for the ground		[/A, □ Ye	s 🔲 No 🏽	
If "Yes," attach the statement required by Regulations section 53.494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?		Ye	s 🗶 No 🖁	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b X
If "Yes" to 6b. file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	☐ Ye	s 🗶 No	
b. If yes, did the foundation receive any proceeds or have any net income attribute				7b
Information About Officers Directors Trust	ees. Foundation Ma	nagers. Highl	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	<del></del>
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their	compensation.		-	
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
DANNY WATSON	ASST SEC/TREA			
220 WEST BROADWAY		Ţ		
HOBBS, NM 88240	1.00	l 0.	0.	0.
WANDA MUNSON	PRESIDENT	•		
220 WEST BROADWAY				
HOBBS, NM 88240	1.00	0.	0.	0.
LUANN PEARSON	VICE PRESIDEN		•	<u> </u>
220 WEST BROADWAY	ATCH LYMPIDEN	-		
HOBBS, NM 88240	1.00	0.	0.	0.
LEON HEMANN	SECRETARY	-		
220 WEST BROADWAY	DECKEIAKI			
HOBBS, NM 88240	1.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those in				
2 Companies and The Highest Part of the Pa	(b) Title, and average	I	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MONE	devoted to position		compensation	anoviances
NONE	4	1	1	
	<del>  · · </del>	<del></del>		<del></del>
	<del> </del>	<del> </del>	-	<del> </del>
	-	[		1
		<del> </del>		<del></del>
	4	]		
	<del> </del>	<del> </del>		<del> </del>
	-			
- 1 Laurence of About and June 201	<del></del>	<u> </u>		
Total number of other employees paid over \$50,000			🗩 📗	0

Expenses  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  SEE STATEMENT 2  4,100.	Partiville Information About Officers, Directors, Trustees, Foundar Paid Employees, and Contractors (continued)	tion Managers, Highly	
(a) Name and address of each person paid more than \$50,000  NONE  Total number of others receiving over \$50,000 for professional services.  Factorial number of others receiving over \$50,000 for professional services.  Factorial number of others receiving over \$50,000 for professional services.  Expenses  Expenses  Expenses  Expenses  A, 100.  For a service of others receiving over \$50,000 for professional services.  Expenses  Expenses  Expenses  A, 100.  A nount  I N/A  All other program-related investments made by the foundation during the tax year on lines 1 and 2.  All other program-related investments. See instructions.  Total, Add lines 1 through 3.	3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
NONE  Total number of others receiving over \$50,000 for professional services.  PatritixSAI Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  Expenses  Expenses  1  SEE STATEMENT 2  4,100.  PatritixSBI Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount  1 N/A  All other program-related investments. See instructions.  3  All other program-related investments. See instructions.			(c) Compensation
Total number of others receiving over \$50,000 for professional services Data NAM Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.    SEE STATEMENT 2			
Expenses  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.    SEE STATEMENT 2		7	1
Expenses  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.    SEE STATEMENT 2			
Expenses  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.    SEE STATEMENT 2		7	
Expenses  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.    SEE STATEMENT 2			
Expenses  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.    SEE STATEMENT 2			
Expenses  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.    SEE STATEMENT 2			
Expenses  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.    SEE STATEMENT 2		<u> </u>	
Expenses  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.    SEE STATEMENT 2			
Expenses  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.    SEE STATEMENT 2		_ <u>l_</u>	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  SEE STATEMENT 2  4,100.  PRINCIPLE SUMMENT 2  4,100.  PRINCIPLE SUMMENT OF Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount  N/A  All other program-related investments. See Instructions.	Total number of others receiving over \$50,000 for professional services		<u> </u>
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.    SEE STATEMENT 2	Partix A Summary of Direct Charitable Activities		
SEE STATEMENT 2  3  4  Part IX: B! Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount  1	List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers prod	ical information such as the luced, etc.	Expenses
SEE STATEMENT 2  3  4  Part IX: B! Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount  1	1		
2  3  4  Part Describe the two largest program-Related investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total, Add lines 1 through 3			
3  Part DCB Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount  1 N/A  All other program-related investments. See instructions.  3 Total, Add lines 1 through 3	SEE STATEMENT 2		4,100.
All other program-related investments. See instructions.  Total, Add lines 1 through 3	2		
All other program-related investments. See instructions.  Total, Add lines 1 through 3			
All other program-related investments. See instructions.  Total, Add lines 1 through 3			
Pare X:B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  All other program-related investments. See instructions.  Total, Add lines 1 through 3	3		
Pare X:B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  All other program-related investments. See instructions.  Total, Add lines 1 through 3			
Pare X:B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  All other program-related investments. See instructions.  Total, Add lines 1 through 3			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total, Add lines 1 through 3	4		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total, Add lines 1 through 3			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.  Total, Add lines 1 through 3	Dest W.B. Common of Deservery Bolated Investments		<del></del>
1	Describe the two largest program-related investments made by the foundation during the tay year on	lines 1 and 2	Amount
All other program-related investments. See instructions.  Total, Add lines 1 through 3		into Fand 2.	7 in our
All other program-related investments. See instructions.  3  Total, Add lines 1 through 3	1		
All other program-related investments. See instructions.  3  Total, Add lines 1 through 3	<del> </del>		
All other program-related investments. See instructions.  3  Total, Add lines 1 through 3	2		<del></del>
3	•		
3			
3	All other program-related investments. See instructions.		
Total, Add lines 1 through 3	, -		
	Total, Add lines 1 through 3	<b>&gt;</b>	

		1	instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	1	
a	Average monthly fair market value of securities 🛒 👑 👢	1a	0.
b	Average of monthly cash balances	1b	26,046
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	26,046
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0,
3	Subtract line 2 from line 1d	3	26,046.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	391.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	25,655.
6	Minimum investment return. Enter 5% of line 5	6	1,283.
Pε	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here  and do not complete this part.)	nd certain	<u>-</u>
1	Minimum investment return from Part X, line 6	1	1,283
	Tax on investment income for 2009 from Part VI, line 5	12.5	
	Income tax for 2009. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	20	2.
	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,281
	Recoveries of amounts treated as qualifying distributions	4	0.
	Add lines 3 and 4	5	1,281
6	Deduction from distributable amount (see instructions)	6	0.
	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,281
	Cualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	4,100
	Program-related investments - total from Part IX-B	1b	0.
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
	Amounts set aside for specific charitable projects that satisfy the:		
	Surtability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	
	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	4,100
	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0
	Adjusted qualifying distributions. Subtract line 5 from line 4	6	4,100
			section

Form **990-PF** (2009)

Part:XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2008	(c) 2008	( <b>d</b> ) 2009
1 Distributable amount fo	r 2009 from Part XI,				1 201
line 7  2 Undistributed income, if any		N+ 42 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			1,281.
a Enter amount for 2008	•			0.	
<b>b</b> Total for prior years:			是 1000000000000000000000000000000000000		是"大学"。"是是"是"的"是"。"是
	_		0.		
3 Excess distributions car	ryover, if any, to 2009:	TOTAL TELEVISION OF THE	为"对理解"的"是是"的"的	· · · · · · · · · · · · · · · · · · ·	は、は、「中華でいるです
a From 2004	2,470.				
<b>b</b> From 2005	1,659.				
c From 2006	900.				
d From 2007	953.				
e From 2008	549.	Letter The Late of			
f Total of lines 3a throug	he .	6,531.	的第三人称		
4 Qualifying distributions					
Part XII, line 4: ▶ \$	4,100.				
a Applied to 2008, but no		中华美国-1966年	<b>公司,明祖长春世</b> 裔	0.	man the state of t
<b>b</b> Applied to undistributed	· ·		•		
years (Election required	•	第150年来3位。于2016年代 <b>2</b> 00	0.		
c Treated as distributions	•				
(Election required - see		0.			1 201
d Applied to 2009 distribu	•	2,819.			1,281.
e Remaining amount dist	•	2,819.			0
5 Excess distributions carryon (if an amount appears in column (a must be shown in column (a	umn (d), the same amount				
6 Enter the net total of ea	ach column as				
indicated below:					
& Corpus. Add lines 3f, 4o, ar	•	9,350.	2000年1月1日 - 121日 - 1	AND THE PERSON AND TH	在1.550mm2000000000000000000000000000000000
b Prior years' undistribut	ed income. Subtract		0.		
line 4b from line 2b		AND AND PROPERTY OF A			
c Enter the amount of pri undistributed income for deficiency has been iss the section 4942(a) tax assessed	or which a notice of ued, or on which		0.		
d Subtract line 6c from lin	ne 6b. Taxable	CHARLES THE V		BUSET OF FULL	LIPERING PARTY
amount - see instructio	ns		0.	18. 12. 18. 18. 18.	<b>医学生工作</b>
e Undistributed income fo	or 2008. Subtract line	<b>清华兴兴</b> 着			
4a from line 2a. Taxable	e amount - see instr.	中国统计工程。		0.	的研究等的特別學是
f Undistributed income for	or 2009. Subtract				
lines 4d and 5 from line	1. This amount must				
be distributed in 2010		<b>经验证证据证 必然生活</b> 性		· 这种中华基本学科的"静 一个学习一种"	0.
7 Amounts treated as dis					
corpus to satisfy requir		o.			
section 170(b)(1)(F) or					
8 Excess distributions ca not applied on line 5 or		2,470.			
9 Excess distributions of		2, 2/0.			
Subtract lines 7 and 8 f	-	6,880.			
10 Analysis of line 9:		<b>可以不是有事工。</b>		<b>新聞時報刊時間</b>	THE PERSON
a Excess from 2005	1,659.			是美国是重要	
b Excess from 2006	900.				
c Excess from 2007	953.		<b>在一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个</b>		
d Excess from 2008	549.				
e Excess from 2009	2,819.		是是是其他的		學學學學學

m 990-PF (2009) EDUCATION F(	DUNDATION		85-6120	0669 F
Supplementary Information				<del></del> _
Grants and Contributions Paid During the Recipient	If recipient is an individual	ayment		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amoun
Paid during the year	0.0000000000000000000000000000000000000			<del></del>
· ,				
		}		
		ļ	į	
			·	
		ľ		
	1			
SEE STATEMENT 3				
Total			<u>▶ 3a</u>	4,1
Approved for future payment				
NONE				
	}			
		1	J	
		]		
		ľ		
	-			
		{		
Total			_ <del>-</del>	
Tatal			<b>▶</b> 3h	

Form 990-PF (2009)

Part XVI-A	Analysis of	f Income-Producing	Activities
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		I ILIOQUITO I LOGGODINI	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
Enter grow amount amount amount in an area.	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
	-		†		
D			$\dagger -$		
<u> </u>			+		
d			<del>                                     </del>		
e				<u> </u>	<del></del>
			+		
g Fees and contracts from government agencies	-		┼		
2 Membership dues and assessments			_	<del></del>	
3 Interest on savings and temporary cash			۱.,		
investments	ļ		14	81.	
4 Dividends and interest from securities	Stationar Station	ottonimikassiisti 1880 asia kii kii kii kaisa kii ka	C STATE OF THE	Consider and own the real of the contract of	
5 Net rental income or (loss) from real estate:			1000		
a Debt-financed property					ļ <u>.</u>
<b>b</b> Not debt-financed property	<u> </u>				
6 Net rental income or (loss) from personal					
property		<u>-</u>	ļ		
7 Other investment income	<u> </u>	L			
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					<u> </u>
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:		_		_	
8			, .		
b				Ĭ	
c					
d					
A					
12 Subtotal. Add columns (b), (d), and (e)	<b>Transfer</b>	0.		81.	0.
46 T. s. 1 Add Cas 40 as luman (b) (d) and (a)		<u> </u>			81.
(See worksheet in line 13 instructions to verify calculations.)			• •		
	- N A	lishment of E		4 D	
Part XVI-B Relationship of Activities to	o the Acc	omplishment of E	kemp	t Purposes	
Line No. Explain below how each activity for which incor			ontril	buted importantly to the accor	nplishment of
the foundation's exempt purposes (other than l	by providing fu	inds for such purposes).			
		·			
					_ <del></del>

# Form 990-PF (2009) 9) EDUCATION FOUNDATION 85-6120669 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did th	e organization directly or indi	rectly engage	in any of the	followin	g with any oth	er organizatio	n described	l in section	1 501(c) of			Yes	No
	the Co	ode (other than section 501(c	)(3) organiza	tions) or in se	ection 52	7, relating to p	oolitical organ	izations?						
8	Trans	fers from the reporting found	ation to a noi	ncharitable ex	empt or	ganization of:								
	(1) C	ash . ,										1a(1)		X
	(2) 0	ther assets										18(2)		X
b	Other	transactions:												
	(1) S	ales of assets to a noncharita	ble exempt o	rganization								16(1)		X
	(2) P	urchases of assets from a no	ncharitable e	xempt organı	zation							1b(2)		X
	(3) R	ental of facilities, equipment,	or other asse	ets .								16(3)		X
	(4) R	eimbursement arrangements										1b(4)		X
		oans or loan guarantees										1b(5)		X
		erformance of services or me	mbership or	fundraising s	olicitatio	ns						1b(8)		X
C	Shari	ng of facilities, equipment, ma	iling lists, otl	ner assets, or	paid em	ployees						10	X	
		answer to any of the above is					(b) should alv	vays show t	he fair ma	rket value of t	he goods, o	ther ass	ets,	
		vices given by the reporting f			-		• •							
	colum	nn (d) the value of the goods,	other assets,	or services r	eceived.			-		-				
(a)	Line no.	(b) Amount involved	(c)	Name of nonc	haritable	exempt organ	nization	(d) De	escription of	transfers, trans	actions, and s	haring ar	rangeme	entë
-			LEACO	RURAL	TEL	EPHONE	COOP.	. SEE	STAT	EMENT	4			
10			INC.				<u> </u>	7						
_							-							
	-								•					
		<del></del>												
		·										-		
-										· · · · · · · · · · · · · · · · · · ·	_			
			<del>                                     </del>					<del>                                     </del>						
							<del></del>	<del></del>		··· <del>···</del> ···				
						·								
-			<del></del>											
_														
_		<del></del>	<del> </del>		_	_		-						
			<del> </del>											
_	. la tha	foundation dispaths as Indiana	the officient of a	with as raintag	1 to 000	or more tour	vomnt organi	ntione dese	ribad	<del></del>				
28		foundation directly or indirection 501(a) of the Code (other	-				xempt organi	zauons desc	ii ibea		F	Yes		٦.,,
		tion 501(c) of the Code (othe		1 50 1(0)(3)) (	Ji ili Seci	1011 527 7	•				/ <del>-</del> 8	L) Yes	L	∐ No
	<u>o ir tes</u>	s," complete the following sch (a) Name of org			_	(b) Type of	organization		(0)	Description	of relationsh	in		
<del>,</del> ,	B 3 C C	RURAL TELEPH		30B	TNO	501(C)		्रवाच	<del></del>	EMENT !		ıþ		
נע	CALU	KUKAL TELEPH	ONE C	JUP • , .	TIAC .	301(C)	14	SEE :	STATE	PAIRIAT.				
				-									_	
				•			· · · · · · · · · · · · · · · · · · ·						—	
	Linder o	enalties of perjury, I declare that I h	ave examined	this return unclu	idina scco	mnanving sched	ules and statem	ents and to th	ne hest of m	v knowledge an	d belief it is to	ue come	ct	
		nulete Declaration of preparer (Othe								i) kilomiodgo ali	<b>3</b> 561161, 11 13 1	40, 0010	<b></b> ,	
	١.	PAILLA /In	n al 0 (	7		1//	- 17 -17	\ <b>\ 7</b> .		44 11	0/130		N1_	
9	<u> </u>	gnature of officer or trust <b>∮</b> e	ryce		_		D 11	4	YECU	tive Uy	100	n./	VC S	<u> </u>
Sign Here	31		<u> </u>	·		Date		7 11110	Chec		Preparer	g Identis	vina eur	nber
5	φ <u>_</u>	Preparer's	1)	t ~	U		-	ate	l self-	_	-   reparer	S IGOIN!	yary nich	
์ภั	Paid Preparer's Use Only	signature /	K 10%					1/12/	<u>1 0  empi</u>					
	4 8 8		NGER,			ILBERT	AND M	oss r	LP ∐	EIN ►				
	** 3	if self-employed), 8215		/ILLE /		UE			}					
	L	address, and ZIP code LUBB	OCK,	<u>rx 794:</u>	23	<del></del>				Phone no.	(806)			
											For	m <b>990</b>	)-PF (	2009)

85-	6	1	2	0	6	6	9
-----	---	---	---	---	---	---	---

LEACO.RURAL TELEPHONE EDU	CATION FOUN	DATI
---------------------------	-------------	------

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS	STATEMENT	1
SOURCE	AMOUNT	
JEA COUNTY STATE BANK		81.
COTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A		81.
ORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES	STATEMENT	
ACTIVITY ONE		
COLLEGE SCHOLARSHIPS TO ACTIVE MEMBERS OF LEACO RURAL PELEPHONE COOPERATIVE, INC. OR MEMBERS OF THEIR IMMEDIATE FAMILY. DURING THE TAX YEAR 9 STUDENTS RECEIVED SCHOLARSHIPS RANGING FROM \$200.00 - \$500.00.		
	EXPENSES	5
TO FORM 990-PF, PART IX-A, LINE 1	4,1	.00

FORM 990-PF	GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR	STATEMENT 3
		<del></del>

סספחת חוא שאלוא היאשדמדסקס	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	CUVALLE	A MOTINITY
BRYAN NORRIS 208 CHOCTAW ROAD HAGERMAN, NM 88232	SEE PAGE 6; PART IX-A SCHOLARSHIP	N/A	500.
JACOB HOLLER 2433 MORGAN HOBBS, NM 88240	SEE PAGE 6; PART IX-A SCHOLARSHIP	N/A	500.
ADRIAN ORRANTA P.O. BOX 13 MCDONALD, NM 88262	SEE PAGE 6; PART IX-A SCHOLARSHIP	N/A	500.
IRVING AVALOS P.O. BOX 1053 TATUM, NM 88267	SEE PAGE 6; PART IX-A SCHOLARSHIP	N/A	500.
KRISTI BENEDICT P.O. BOX 612 DEXTER, NM 88230	SEE PAGE 6; PART IX-A SCHOLARSHIP	N/A	500.
CRISTINA HERNANDEZ 1520 W. COTTONWOOD AVE LOVINGTON, NM 88260	SEE PAGE 6; PART IX-A SCHOLARSHIP	N/A	500.
A'LORA NORRIS 208 CHOCTAW ROAD HAGERMAN, NM 88232	SEE PAGE 6; PART IX-A SCHOLARSHIP	N/A	200.
ELIAS NIETO 508 CADDO ROAD DEXTER, NM 88230	SEE PAGE 6; PART IX-A SCHOLARSHIP	N/A	500.

TRENT HERMANN SEE PAGE 6; PART IX-A N/A 400. P.O. BOX 976 TATUM, NM 88267 SCHOLARSHIP	LEA	CO.	RURAL	TELEPHO	ONE	EDUCATION	FOUNDATI	-			85-61	20669
				TATUM,	NM	88267		_	IX-A	N/A		400.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

4,100.

990-PF INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS STATEMENT PART XVII, LINE 1, COLUMN (D)

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

LEACO RURAL TELEPHONE COOP., INC.

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

COOPERATIVE STAFF MAINTAINS THE RECORDS OF THE FOUNDATION AT NO COST.

990-PF AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS PART XVII, LINE 2, COLUMN (C)

STATEMENT

5

NAME OF AFFILIATED OR RELATED ORGANIZATION

LEACO RURAL TELEPHONE COOP., INC.

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

DIRECTORS OF THE FOUNDATION ARE ALSO DIRECTORS OF THE COOPERATIVE.

LEACO RURAL TELEPHONE EDUCATION FOUNDATION EIN # 85-6120669 2009 FORM 990-PF SCHOLARSHIP APPLICATION PAGE 10. PART XV. LINE 2



# LEACO Rural Telephone Cooperative Scholarship Qualifications and Instructions

LEACO Rural Telephone Cooperative, Inc, (LEACO) invites graduating high school seniors to apply for one of 10 scholarships being offered for the academic year 2009 – 2010. Ten \$500 scholarships will be awarded to qualifying high school seniors. To qualify, applicants must meet the following requirements:

- 1. Applicants must be enrolled in ANY post-secondary institution having at least a two-year degree program.
- 2. Students must be full-time carrying at least 12 credited hours.
- 3. Application must be typed.
- 4. Applicant must submit high school transcript through the 7<sup>th</sup> semester showing ACT and/or SAT scores.
- 5. Applicant or parent must be a member/customer of LEACO Rural Telephone Cooperative and the account in good standing.
- Applicant must provide two letters of reference (one from teacher or counselor and one from someone not associated with applicant's high school). Letters must have a legal signature and dated.
- 7. Application must be signed and dated by student, parent/guardian, and representative of high school.
- 8. Incomplete applications will not be considered.
- 9. Scholarships will be paid to student upon official proof of enrollment.
- 10. Application and all attachments must arrive to the address below by 5:00 p.m. Mountain on Monday, March 15, 2010.

Return application and all attachments to:
LEACO Rural Telephone Cooperative, Inc.
c/o Jeannie Anderson
220 W. Broadway
Hobbs, NM 88240

# IMPORTANT: INCOMPLETE AND/OR APPLICATIONS RECEIVED AFTER THE DEADLINE STATED ABOVE WILL NOT BE CONSIDERED.

All scholarship applications are confidential and become the property of LEACO Rural Telephone Cooperative.

LEACO RURAL TELEPHONE EDUCATION FOUNDATION
FIN # 85-6120669
2009 FORM 990-PF
SCHOLARSHIP APPLICATION
PAGE 10, PART XV, LINE 2



## Leaco Scholarship Application

1.	Name:							
	· · · ·	(last)	(first)		(MI)			
2.	Social Security I	Number:	<del>-</del>					
3.	Mail Address:							
		(Street or P O Box)	(city)	(state)	(zip)			
4.	Phone Number:	:_()						
5.	Parent(s) or gua	ardian(s) name(s):						
6.	Name of high so	chool from which you gra	duated or will g	raduate:				
7.	Date of Graduation:							
8.	Name and mail	ing address of school you	will be attendin	ng full time in the f	all:			
9.	What will your	area of study be?						
10.	Please write an LEACO.	d attach a 300 word essa	y explaining wh	y you are deservin	g of a scholarship from			
Stu	dent's Signature	-		Dat	te			
Par	ents/Guardian's	Signature		Dat	te			
Nor	no and Assault	No. of LEACO Billing Acco		<del></del>				

LEACO RURAL TELEPHONE EDUCATION FOUNDATION EIN # 85-6120669 2009 FORM 990-PF SCHOLARSHIP APPLICATION PAGE 10, PART XV, LINE 2



#### **TELL US A LITTLE ABOUT YOURSELF**

(Attach additional pages if needed)

Special Awards/Year:
Statement of your career goals:
Employment History:
Extra- Curricular Activities/Both in school and outside of school:

<u>Please attach a minimum 300 word essay explaining why you think we should invest in your education.</u>

LEACO RURAL TELEPHONE EDUCATION FOUNDATION EIN # 85-6120669 2009 FORM 990-PF SCHOLARSHIP APPLICATION PAGE 10, PART XV, LINE 2



#### THE FOLLOWING MUST BE COMPLETED BY HIGH SCHOOL COUNSELOR OR PRINCIPAL

(Complete only if applicant is a high school Senior)

1.	Student's High School GPA (based on 4.0 sc	ale) at the end of the 7 <sup>th</sup> semes	ter:				
2.	Applicant ranks in class of	students.					
3.	Please provide additional information you i	believe we should consider in ev	valuating this applicant:				
Ple	Please enclose a copy of applicant's current transcript, including ACT and/or SAT scores.						
	Signature of School official	Title	Date				

Be sure to complete all requirements of this application. Incomplete applications will not be accepted.

Form 8	868 (Rev. 4-2009)				Page 2		
-	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and				X		
	Only complete Part II if you have already been granted an automatic 3-month extension on a p	reviously filed	Form 886	<b>i8</b> .			
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).						
Pag	Additional (Not Automatic) 3-Month Extension of Time. Only file the	original (no co	pies nee	ded)			
<b>-</b>	Name of Exempt Organization	Employ	Employer identification number				
Туре	LEACO RURAL TELEPHONE						
print	EDUCATION FOUNDATION	85-	6120669				
File by t extende		<b>PROP</b>	For IRS	use only			
due date	™ 220 WEST BROADWAY						
filing the return. S							
instructi	ons. HOBBS, NM 88240						
Check	k type of return to be filed (File a separate application for each return):						
		n 1041-A	Form	5227	Form 8870		
H		n 4720	Form	6069			
			h filad E	· 0000			
31UP	! Do not complete Part II if you were not already granted an automatic 3-month extension	on a previous	siy illed r	OTIII 6006.			
	BRENDA GARCIA						
• The	e books are in the care of $\triangleright$ 220 WEST BROADWAY - HOBBS, NM 88	<u> 240                                    </u>					
Tel	lephone No. ► <u>(575) 370-5010</u> FAX No. ►			<del></del>			
• If t	he organization does not have an office or place of business in the United States, check this bo	×		🕨	. 🗀		
• If t	his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) $\_$	If this	s is for th	e whole group,	check this		
box	. If it is for part of the group, check this box  and attach a list with the names a	nd ElNs of all I	nembers	the extension	is for.		
4	I request an additional 3-month extension of time until NOVEMBER 15, 2010.						
5	For calendar year 2009, or other tax year beginning,	and ending			·		
6	If this tax year is for less than 12 months, check reason: Initial return Fina	l return	Ch:	ange in accoun	ting period		
7	State in detail why you need the extension						
	ADDITIONAL TIME IS NECESSARY TO GATHER THE INFO	RMATION	REQU	JIRED TO	FILE		
	A COMPLETE AND ACCURATE RETURN.			<del>;</del>			
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less	any					
	nonrefundable credits. See instructions.		8a \$	i	0.		
ь	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and es	timated					
	tax payments made. Include any prior year overpayment allowed as a credit and any amount p	r in the state of					
	previously with Form 8868.	8b \$	<b>i</b>	0.			
c	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required	deposit					
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See	8c \$	•	0.			
	Signature and Verification						
Under	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statem ie, correct, and complete and that I am authorized to prepare this form.	ents, and to the					
			D.4. 5	7/281	10		
Signat	ure Make CPA		Date	(1/31			