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#### DLN: 93491182007566

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

#### **Return of Private Foundation** or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its instructions is at  $\underline{www.irs.gov/form990pf}$ .

Open to Public Inspection

For	caler	ndar year 2015, or tax ye	ear beginning 01-0	)1-2015	, and ending 1	2-31-2015	
	e of foun				A Employer ide	entification numbe	er
LL	4 COONT	I CHARTIADEL I OUNDATION			85-0345104		
		•	ot delivered to street address)	) Room/suite	<b>B</b> Telephone nur	nber (see instruction	
PC	O BOX 220	0			(575) 393-2171		
		state or province, country, and ZIP or 882410220	foreign postal code		C If exemption	application is pendin	g, check here 🕨 🦵
G Cł	neck all	that apply   Initial return	Initial return of a fo	ormer public charity	— B. Forougn or	tions shock h	
		Final return	A mended return	, , , , , , , , , , , , , , , , , , ,	2. Foreign or	•	the 85%
Se	ection 4	947(a)(1) nonexempt charitable	le trust 「Other taxable	e private foundation	E If private fou under section	undation status was t	terminated
of y	year <i>(fr</i>	rom Part II. col. (c).	Other (specify)	<u> </u>	F II the lounus		
Pai	rt I	(The total of amounts in columns (b	b), (c), and (d) may not	Revenue and expenses per (a) books	Net investment (b) income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, et	.c , received (attach				
		schedule)		40,830			
ļ	2	Check ► ┌ If the foundation is	s <b>not</b> required to attach				
ļ		Sch B					
	3	Interest on savings and tempo	orary cash investments	15	15		
	4	Dividends and interest from se	ecurities	225,238	225,238		
ļ	5a					<u> </u>	
	b						
\$ !	6a	Net gain or (loss) from sale of	assets not on line 10	103,907			
	ь	329,918					
	7				103,907		
	8					<u> </u>	
ļ	9	treet (or P O box number if mail is not delivered to street address)  treet (or P O box number if mail is not delivered to street address)  treet (or P O box number if mail is not delivered to street address)  treet (or P O box number if mail is not delivered to street address)  treet (or P O box number if mail is not delivered to street address)  treet (or P O box number if mail is not delivered to street address)  treet (or P O box number if mail is not delivered to street address)  treet (or P O box number if mail is not delivered to street address)  treet (or P O box number if mail is not delivered to street address)  treet (or P O box number if mail is not delivered to street address)  C If exemption application  1. Foreign organization  2. Foreign organization  2. Foreign organization  2. Foreign organization  2. Foreign organization  3. Countation  4. If the foundation is not index foundation  4. If the foundation is in under section 507(b)(  4. (2. (a)					
	10a	allowances					
	b						
	С		·			<b></b>	
	11	•				<u> </u>	
	12			370,784	329,160	<u> </u>	
ļ	13					<b></b>	<u> </u>
	14		ŀ			<b></b>	<u> </u>
$\overset{\Phi}{\Delta} =$	15					<b></b>	<del> </del>
sud De	16a					<b></b>	<u> </u>
Expenses	Ь			Í		<u> </u>	
	С	Other professional fees (attack	h schedule)	364		<u> </u>	
ativ I	17	Interest		<u></u>		<u> </u>	
12 I	18	Taxes (attach schedule) (see	ınstructions)	5,292			
	19	Depreciation (attach schedule	) and depletion				
Admını strative	20	Occupancy					
4 4	21	Travel, conferences, and meet	ings				
and	22		ŀ	<u>                                      </u>		<u> </u>	
	23			25,016	25,016		
Operating	24	_	-	30,672	25,016		0
ဝီ	25	_	ŀ	·	·		252,770
	26		ŀ				<del> </del>
			ents.Add intes 24 difd	283,442	25,016	<u> </u>	252,770
	27	Subtract line 26 from line 12					
ļ	a	-		87,342			
	b	·			304,144		
	С	Adjusted net income(If negative	√e, enter-0-)				

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	4	2	2
	2	Savings and temporary cash investments	50,368	71,790	71,790
	3	Accounts receivable -	,	,	,
		Less allowance for doubtful accounts -			
	4	Pledges receivable -			
	7	Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			_
	O	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	,	Less allowance for doubtful accounts			
		Inventories for sale or use			
왍	8	Prepaid expenses and deferred charges			
Assets	9	<u> </u>			
Ā	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	4,105,868	4,171,790	4,859,930
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule)			
	15	O ther assets (describe 🟲)			
	16	Total assets(to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	4,156,240	4,243,582	4,931,722
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ę.	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
コ	22	Other liabilities (describe 🟲)			
	23	Total liabilities(add lines 17 through 22)		0	
		Foundations that follow SFAS 117, check here			
φ		and complete lines 24 through 26 and lines 30 and 31.			
2	24	Unrestricted			
<u>8</u>	25	Temporarily restricted			
	26	Permanently restricted			
Fund Balances		Foundations that do not follow SFAS 117, check here			
or F		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
Ř	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
Assets	29	Retained earnings, accumulated income, endowment, or other funds	4,156,240	4,243,582	
Net	30	Total net assets or fund balances(see instructions)	4,156,240	4,243,582	
Z	31	Total liabilities and net assets/fund balances(see instructions)	4,156,240	4,243,582	
Da	rt III	<u> </u>	.,200,210	.,,,	
1		Total net assets or fund balances at beginning of year—Part II, column (	a) line 20 /must ==	roo I I	
1		with end-of-year figure reported on prior year's return)	, ,		4,156,240
2		Enter amount from Part I, line 27a			87,342
3		Other increases not included in line 2 (itemize)		2	07,342
3 4				_	/ 2/2 E02
		Add lines 1, 2, and 3		4	4,243,582
5 6		Decreases not included in line 2 (itemize)   Total net assets or fund balances at end of year (line 4 minus line 5)—Pa			4,243,582
J		- rotal net assets of fund balances at end of year (line 4 linnus line 5)—Pa	ncii, colullii (D), III		7,273,302

Part	IV Capital Gains and	Losses for Tax on Inves	tment Income	)			
		ind(s) of property sold (e g , rea e, or common stock, 200 shs		How acquired P—Purchase (b) D—Donation	ט ן	ate acquired no , day, yr )	Date sold (d) (mo , day, yr )
1 a	MERRILL LYNCH 68B-04	308		Р			
ь	MERRILL LYNCH 68B-04:	308		Р			
	MERRILL LYNCH 161-75	212		Р			
d	MERRILL LYNCH 161-75	212		Р			
e					<del>                                     </del>		
	e) Gross sales price	Depreciation allowed (f) (or allowable)		t or other basis expense of sale			ı or (loss) (f) mınus (g)
a	239,74	<del>  '' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' </del>	(g) pius	147,37	5	(11) (2) pids	92,370
b	25,7			23	_		19
	89,29				+		11,624
<u>c</u>				77,67	_		-
d	6 2	3		72	9		-106
e					_		
	omplete only for assets shown	ng gain in column (h) and owned			4		(h) gain minus
(i)	)FMV as of 12/31/69	A djusted basis (j) as of 12/31/69		ess of col (1) r col (j), If any	(I) <sup>c</sup>		t less than -0-) <b>or</b> from col (h))
a							92,370
b							19
С							11,624
d							-106
e							
3				in Part I, line 7	3		103,907
Part	V Qualification Unde	r Section 4940(e) for Re	duced Tay on	Net Investme	1	COME	
(For op If secti Was the	tional use by domestic private on 4940(d)(2) applies, leave e foundation liable for the sec	e foundations subject to the sec	ction 4940(a) tax	on net investment	ıncom		┌ Yes ┌ No
<b>1</b> E r	iter the appropriate amount in	each column for each year, see	e instructions befo	ore making any ent	rıes		
Base year (	(a) e period years Calendar (or tax year beginning in)	(b) djusted qualifying distributions	(c) Net value of nonchai			<b>(d)</b> Distributio (col (b) divided	n ratio
	2014	229,892		3,472,087			0 066211
	2013	228,780		4,455,590			0 051347
	2012	172,559		4,197,941			0 041106
	2011	183,245		3,708,447			0 049413
	2010	137,237		3,303,502			0 041543
2	Totalof line 1, column (d).				2		0 249620
3		for the 5-year base period—divi undation has been in existence			3		0 049924
4	Enter the net value of nonc	harıtable-use assets for 2015	from Part X, line 5	;	4		4,973,776
5	Multiply line 4 by line 3.			[	5		248,311

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions

Enter 1% of net investment income (1% of Part I, line 27b). . . . . . .

7

3,041

251,352

252,770

Pell	Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49	7 <del>7</del> 0(e),	, UI 4340—See	page	: 10 OL	the ins	cructio	/IIS <i>)</i>	
1a		· L		)					
	and enter "N/A" on line 1  Date of ruling or determination letter			l					
	(attach copy of letter if necessary-see instructions)								
b	Domestic foundations that meet the section 4940(e) requirements in Part V ,	check			1			:	3,041
	here ► 🔽 and enter 1% of Part I, line 27b			• '					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organiza Part I, line 12, col (b)	itions e	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foun enter -0-)	dation	s only Others	;	2				
3	Add lines 1 and 2				3				3,041
4	Subtitle A (income) tax (domestic section $4947(a)(1)$ trusts and taxable four enter $-0-$ )	ndation	s only Other	5	4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, en	nter - 0			5			:	3,041
6	Credits/Payments								
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	1,	690					
b	Exempt foreign organizations—tax withheld at source	6b							
C	Tax paid with application for extension of time to file (Form 8868)	6с							
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d				7				1,690
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here 🔽 if Form 2220 is attached. 8								43
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .			۲	9				1,394
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount	t over	oaid	F	10				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax		Refunded	<u> </u>	11				
Par	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state	, or loc	al legislation	or dı	d			Yes	No
	it participate or intervene in any political campaign?						. <u>1a</u>		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p			ee In	structı	ons			
	for definition)?					•	1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities	and co	pies of any ma	teria	ls				
	published or distributed by the foundation in connection with the activities.								
	Did the foundation file Form 1120-POL for this year?	• •		•		•	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) impos								
	(1) On the foundation  \$ (2) On foundation managers								
е	Enter the reimbursement (if any) paid by the foundation during the year for poli	tical e	xpenditure tax	ımp	osed				
_	on foundation managers <b>*</b> \$		t- th- IDC2						N.
2	Has the foundation engaged in any activities that have not previously been rep	ortea	to the IRS?	•			. 2		No
_	If "Yes," attach a detailed description of the activities.				41	_			
3	Has the foundation made any changes, not previously reported to the IRS, in it of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a confo</i>	_	_			•	. 3		No
42							4a		<del>                                     </del>
4a b	Did the foundation have unrelated business gross income of \$1,000 or more did If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	_					4a 4b	$\vdash$	No
5	Was there a liquidation, termination, dissolution, or substantial contraction dur						5		No
,	If "Yes," attach the statement required by General Instruction T.	ing the	e year						
6	Are the requirements of section 508(e) (relating to sections 4941 through 494	45)sa	tisfied either						
•	By language in the governing instrument, or	13 / 54	cisiica ciciici						
	By state legislation that effectively amends the governing instrument so the	at no n	nandatory dire	ctio	าร				
	that conflict with the state law remain in the governing instrument?						. 6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	If "Yes	s," complete Pa	rt II,	col. (c	),			
	and Part XV.						. 7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (s	see ins	tructions)						
	<u>► NM</u>			_					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	0-PF	to the Attorne	у					
	General (or designate) of each state as required by General Instruction G? If $^{\prime\prime}$	"No," at	tach explanatio	on .			8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the n	neanın	g of section 4	942	(រ)(3)				
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see	ee inst	ructions for P	art X	IV)?				
	If "Yes," complete Part XIV						. 9	igsquare	No
10	Did any persons become substantial contributors during the tax year? If "Yes,"	" attach	a schedule lis	tıng	their n	ames			
	and addresses.						. 10		No

Pai	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ► <u>N/A</u>			
14	The books are in care of ►MIKE WISCHKAEMPER CPA  Telephone no ►(575)	) 393	-2171	
	Located at ►225 E BENDER HOBBS NM ZIP+4 ►88240			
15				-
13	and enter the amount of tax-exempt interest received or accrued during the year		- 1	
			1	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	l	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
<b>1</b> a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) A gree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ) Yes  No			
Ь	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
·	that were not corrected before the first day of the tax year beginning in 2015?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
_	operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$ )			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes Vo			
	If "Yes," list the years > 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 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, Form 4720, to determine			
	if the foundation had excess business holdings in 2015.)	3b	<del>                                     </del>	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

Pa	rt VII-B	Statements Rega	rdir	ng Activities for	Wh	ich Form 4720	May	Be Required (Cont	inue	:d)
5a	During th	e year dıd the foundatıo	n pay	or incur any amoun	t to					
	<b>(1)</b> Carry	on propaganda, or othe	rwise	attempt to influence	e leg	ıslatıon (section 49	45(e	)) <sup>?</sup>	No	
	<b>(2)</b> Influe	nce the outcome of any	spec	ıfıc publıc election (	see	section 4955), or to	car	ry		
	on, dı	rectly or indirectly, any	vote	registration drive?.				Yes	No	
	<b>(3)</b> Provi	de a grant to an individu	al for	travel, study, or oth	ners	ımılar purposes?		┌ Yes ┌	No	
	<b>(4)</b> Provi	de a grant to an organiza	tion	other than a charita	ble,	etc , organization de	scrib	ped		
	ın sec	tion 4945(d)(4)(A)? (se	(see instructions)						No No	
	<b>(5)</b> Provi	de for any purpose other	thar	religious, charitable	e, sc	ientific, literary, or				
	educa	ational purposes, or for t	he pr	evention of cruelty t	o ch	ıldren or anımals?.		Г Yes 🥫	No No	
ь	If any ans	swerıs "Yes" to 5a(1)–(	5), d	ıd <b>any</b> of the transac	tions	fail to qualify under	the	exceptions described in		
	Regulatio	ns section 53 4945 or i	nac	urrent notice regard	ıng c	lisaster assistance	(see	instructions)?		5b
	O rganıza	tions relying on a curren	t not	ice regarding disast	eras	ssistance check her	e		-	
С	_	wer is "Yes" to question								
								<b>  Yes</b>	- No	
		attach the statement requ								
6a	Did the fo	undation, during the yea	ar, re	ceive any funds, dire	ctly	or indirectly, to pay	prer	niums on		
		al benefit contract?		•					- No	
b								benefit contract?		6b No
		o 6b, file Form 8870.								
7a		ne during the tax year, v	vas tl	ne foundation a party	/ to a	a prohibited tax shel	ter ti	ransaction? <b>TYes F</b>	- No	
ь		= -				•		the transaction?		7b
		Information Abou	t Of	ficers, Directors	s, Tı	rustees, Founda	itio	n Managers, Highly	Paid	Employees,
Pa	rt VIII	and Contractors				<u>,                                      </u>				
_1_	List all off	icers, directors, trustee	s, foi	ındation managers a	nd t	heir compensation (	see i	nstructions).		
				Title, and average	(c)	Compensation( <b>If</b>		(d)		F
	<b>(a)</b> Na	me and address	l	hours per week		not paid, enter	l e	Contributions to mployee benefit plans		Expense account, other allowances
			(ь)	devoted to position		-0-)		deferred compensation		
LEE A	NN SNYDER		PRE	SIDENT		0		0		0
		LLAS LOOP	1 00	)						
	TIN,TX 7	8735								
	TINLEY		-	E PRES		0		0		0
	N LINAM	9340	1 00	)						
	BBS,NM 8: WISCHKAEM		CEC	/TDEAC						
	DRAWER 2		1 00	/TREAS		0		0		0
	BBS, NM 8									
			lemp	oloyees (other than	thos	e included on line 1–	-see	instructions). If none, e	ıter "	NONE."
	-			Title, and aver				Contributions to		
Na	me and add	(a) Iress of each employee ;	oaid	hours per wee		(c) Compensation	n	employee benefit	l , ,	Expense account,
	mo	re than \$50,000		(b) devoted to pos	tıon			plans and deferred (d) compensation	(e)	other allowances
NON	 J E							(a) componential		
	<del></del>									
									<u> </u>	
Tota	<b>I</b> number o	f other employees paid o	ver	\$50,000				🕨	1	

Part VIII Information About Officers, Directors, Trus and Contractors (continued)	tees, Foundation Managers, Hi	ghly Paid Employees,
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "NON	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		<b>&gt;</b>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include re organizations and other beneficiaries served, conferences convened, research papers pro		er of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	(see instructions)	
Describe the two largest program-related investments made by the foundation during	the tax year on lines 1 and 2	A mount
<b>1</b> N/A		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		<u></u>

# Form 990-PF (2015) Part X Minimum Investment Return

ΓŒ	(All domestic foundations must complete this part. Foreign foundations, see instructions	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	4,977,350
b	Average of monthly cash balances	1b	72,169
С	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	5,049,519
e	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	
3	Subtract line 2 from line 1d	3	5,049,519
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ % of line 3 (for greater amount, see		
	ınstructions)	4	75,743
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	4,973,776
6	Minimum investment return. Enter 5% of line 5	6	248,689
Par	Distributable Amount  (see instructions) (Section 4043(1)(2) and (1)(5) private energing foundations and ser		
	(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► ☐ and do not complete this part.)	tain r	oreign organizations
1	Minimum investment return from Part X, line 6	1	248,689
2a	Tax on investment income for 2015 from Part VI, line 5   2a   3,041		· · · · · · · · · · · · · · · · · · ·
ь	Income tax for 2015 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	3,041
3	Distributable amount before adjustments Subtract line 2c from line 1	3	245,648
4	Recoveries of amounts treated as qualifying distributions	4	<u> </u>
5	Add lines 3 and 4	5	245,648
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	245,648
			· · · · · · · · · · · · · · · · · · ·
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	252,770
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions.Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	252,770
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	3,041
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	249,729
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth	er the	foundation qualifies for

Р	art XIII Undistributed Income (see instr	ructions)			
		(a) Corpus	<b>(b)</b> Years prior to 2014	<b>(c)</b> 2014	( <b>d)</b> 2015
1	Distributable amount for 2015 from Part XI, line 7				245,648
2	Undistributed income, if any, as of the end of 2015				
	Enter amount for 2014 only				
b	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2015				
_	From 2010				
	From 2011				
	From 2012				
	From 2013				
	From 2014				
	Total of lines 3a through e	31,960			
	Qualifying distributions for 2015 from Part				
•	XII, line 4 <b>&gt;</b> \$				
а	Applied to 2014, but not more than line 2a				
	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2015 distributable amount				245,648
е	Remaining amount distributed out of corpus	7,122			
5	Excess distributions carryover applied to 2015				
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	39,082			
	Prior years' undistributed income Subtract				
	line 4b from line 2b				
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
a	Subtract line 6c from line 6b Taxable amount —see instructions				
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2016 Subtract				
	lines 4d and 5 from line 1 This amount must be distributed in 2015				0
7	Amounts treated as distributions out of				
•	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
	be required - see instructions)				
8	Excess distributions carryover from 2010 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.	39,082			
4.0	Subtract lines 7 and 8 from line 6a	35,002			
	Analysis of line 9				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess nom 20111				
е	Excess from 2015				

	Private Operating Foundat	•			19)	
1a	If the foundation has received a ruling or determ					
	foundation, and the ruling is effective for 2015,					
	Check box to indicate whether the organization		ting foundation de		1 4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	
	year listed					
<b>b</b> 8	35% of line 2a					
c	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used					
	directly for active conduct of exempt activities					
e	Qualifying distributions made directly					
•	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets		1			
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3		1			
-	of minimum investment return shown in					
	Part X, line 6 for each year listed					
C	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments					
	on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section $4942(j)(3)(B)(iii)$ .					
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplementary Information (C			e organizatio	n had \$5,000 o	r more in
	assets at any time during the	<u>year—see ins</u>	tructions.)			
L a	<b>Information Regarding Foundation Managers:</b> List any managers of the foundation who have co	ontributed more th	nan 2% of the tota	ıl contributions rec	eived by the found	lation
	before the close of any tax year (but only if they					ideloli
b	List any managers of the foundation who own 10				large portion of th	е
	ownership of a partnership or other entity) of wh	ich the loundation	inas a 10% or gre	eaterinterest		
	Total Control Control Control City	Cabalanak	:t- B			
2	Information Regarding Contribution, Grant, Gift					
	Check here ► ✓ If the foundation only makes counsolicited requests for funds. If the foundation					
	other conditions, complete items 2a, b, c, and d		its, etc. (see ilisti)	actions) to marvia	dais of organizatio	iis uiidei
а	The name, address, and telephone number or e	mail address of th	e nerson to whom	annlications shou	ld he addressed	
u	The name, address, and telephone number of el	man address of th	e person to whom	applications shou	ia be addressed	
b	The form in which applications should be submi	tted and informat	ion and materials t	they should includ	e	
C	Any submission deadlines					
_	A					
d	Any restrictions or limitations on awards, such factors	as by geographic	aı areas, charitabl	e neias, kinds of ii	nstitutions, or othe	Γ

Part XV Supplementary Information(continued)

3 Grants and Contributions Paid	l During the Year or App	proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	/////odilc
a Paid during the year UNIV OF THE SOUTHWEST 6610 LOVINGTON HWY HOBBS HOBBS, NM 88240			UNRESTRICTED	252,770
Total	<u> </u>	<del></del>		252,770
<b>b</b> Approved for future payment				

or gross amounts upless otherwise indicated	1	siness income	Excluded by section	1 512 512 or 514	(e)
er gross amounts unless otherwise indicated	(a)	(b)	(c)	(d)	Related or exer function incon
Program service revenue	Business code	A mount	Exclusion code	A mount	(See instructions
a					
b					
Fees and contracts from government agencies					
Membership dues and assessments Interest on savings and temporary cash Investments			14	15	
Dividends and interest from securities			14	15 225,238	
let rental income or (loss) from real estate				,	
Debt-financed property					
Not debt-financed property					
let rental income or (loss) from personal property					
ther investment income					
Gain or (loss) from sales of assets other than					
nventory			14	103,907	
let income or (loss) from special events					
iross profit or (loss) from sales of inventory					
ther revenue <b>a</b> OTHER INCOME			14	794	
<del></del>					
Eubtotal Add columns (b), (d), and (e).				329,954	
			:	L3	329,9
(See worksheet in line 13 instructions to verify rt XVI-B Relationship of Activities to		alichment of	Evomet Burnes		
<b>e No.</b> Explain below how each activity for wh the accomplishment of the foundation	ııch ıncome ıs rej	ported in column	(e) of Part XVI-A c	ontributed importa	
' instructions )					
+					
<del>-  </del>					

Part	XVI	I Information Re Noncharitable				sactions and I	Relationships	With		
		organization directly or i	ndırectly e	engage in any o	f the following wit				V	
		501(c) of the Code (othe	r than se	ction 501(c)(3)	) organizations) o	r in section 527,	relating to politic	al	Yes	No
_		tions?	dation to			ation of				
		s from the reporting four						1a(1		No
		erassets						1a(1	_	No
` '		ansactions						Ia(2		NO
		es of assets to a noncha	ritable exi	emnt organizati	on			1h/1		No
		chases of assets from a							_	No
		tal of facilities, equipme							_	No
		mbursement arrangemen							_	No
		ns or loan guarantees.							_	No
		rmance of services or m							_	No
		of facilities, equipment, i								No
	_	swer to any of the above	_						alue	
ın a	ny tr	ods, other assets, or se ansaction or sharing arr	angement	, show in colum	n (d) the value o	f the goods, other	assets, or servic	es received		
(a) Line	: No	(b) Amount involved	(c) Name	of noncharitable e	xempt organization	(d) Description	of transfers, transact	ions, and sharing ari	angemer	nts
des	cribe	undation directly or indi d in section 501(c) of th complete the following : (a) Name of organization	ne Code (d schedule	ther than secti		in section 527?.		tion of relationship	es 🔽	No
Sign	the	der penalties of perjury, be best of my knowledge a ormation of which prepar	nd belief,	ıt ıs true, corre					ased on	all
Here	)	*****			2016-06-22			return with the prep		
	•	Signature of officer or t	rustee		Date	<b>F</b> Title		(see instr )?	_ Yes[[	No
		Print/Type preparer's MIKE WISCHKAEM		Preparer's Sig	gnature	Date 2016-06-27	Check if self- employed ►	PTIN P00356	086	
Paid Prepa Use	areı	Firm's name F JOHNSON MILLER & Firm's address	CO CPA'	5 PC			Firm's EIN F 8	5-0214336		
Only		PO BOX 220 HOBBS,	NM 882	41			Phone no (575	)393-2171		

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# **TY 2015 Investments Corporate Stock Schedule**

Name: LEA COUNTY CHARITABLE FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
LORD ABETT SHORT	274,314	256,531
LORD ABBETT FLOATING	279,198	257,910
PRINCIPAL GLOBAL	575,391	524,088
THE GROWTH FUND OF AMERICA	369,531	490,154
INVESTMENT COMPANY OF AMERICA	403,591	417,893
NEW PERSPECTIVE FUND	551,804	680,922
WASHINGTON MUTUAL INV. FUND	328,835	400,391
FISHER EQUITIES	1,194,083	1,616,008
FISHER MUTUAL FUNDS	195,043	216,033

# **TY 2015 Other Expenses Schedule**

Name: LEA COUNTY CHARITABLE FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
EMA ACCOUNT FEES	406	406		
FOREIGN TAX PAID	2,863	2,863		
MANAGEMENT FEES	21,747	21,747		

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#### **TY 2015 Other Income Schedule**

Name: LEA COUNTY CHARITABLE FOUNDATION

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OTHER INCOME	794		

#### **TY 2015 Other Professional Fees Schedule**

Name: LEA COUNTY CHARITABLE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL & ACCOUNTING	364			

#### **TY 2015 Taxes Schedule**

Name: LEA COUNTY CHARITABLE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INTERNAL REVENUE SERVICE	5,292			

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DLN: 93491182007566

OMB No 1545-0047

# Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

2015

**Employer identification number** 

LEA C	LEA COUNTY CHARITABLE FOUNDATION						
Organi	ization type (check or	ne)	85-0345104				
Filers	of:	Section:					
Form 990 or 990-EZ		501(c)( ) (enter number) organization					
		☐ 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
		☐ 527 political organization					
Form 9	90-PF	「✓ 501(c)(3) exempt private foundation					
		☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation					
		□ 501(c)(3) taxable private foundation					
Gener	For an organization	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to any one contributor. Complete Parts I and II. See instructions for determining a					
Specia	ıl Rules						
Γ	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 99 Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II						
Γ	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, of for the prevention of cruelty to children or animals. Complete Parts I, II, and III						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc, purposes, but no such contributions totaled more than \$1,000 this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc, purpose Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc, contributions totaling \$5,000 or more during the year							

990-EZ, or 990-PF)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its

Name of organization
LEA COUNTY CHARITABLE FOUNDATION

Employer identification number 85-0345104

Part I	Contributors (see instructions) Use duplicate copies of Part I if	additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
1			Person	r
	ESTATE OF BEN ALEXANDER 3020 MARAVILLAS LOOP	\$ 40,830	Payroll	Γ
	AUSTIN, TX78735		Noncash  (Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
			Person	Г
		\$	Payroll	Г
			Noncash	Γ
			(Complete Part II to contributions )	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
			Person	Г
		\$	Payroll	Г
			Noncash	Γ
			(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
			Person	Г
		\$	Payroll	Г
			Noncash	Г
			(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
			Person	Г
		•	Payroll	Г
		<u>\$</u>	Noncash	Г
			(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
			Person	Γ
		\$	Payroll	Γ
	-	-	Noncash	Г
			(Complete Part II t contributions )	or noncash

Name of organizati		Employer identification number 85-0345104			
EA COUNTY CHA	ARITABLE FOUNDATION				
	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed	·			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		<u> </u>			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		<u> </u>			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
-					
-					

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)
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990-EZ, or 990-PF) (2015)		Page <b>4</b>
TABLE FOUNDATION		Employer identification number
		85-0345104
than \$1,000 for the year from any or For organizations completing Part II or less for the year. (Enter this inform	ne contributor. Complete co II, enter the total of <i>exclusive</i> mation once. See instruction	lumns (a) through (e) and the following ely religious, charitable, etc., contributions
(b) Purpose of gift (c) Use of gift		(d) Description of how gift is held
	(e) Transfer of gif	it
Transferee's name, address, and	ZIP4	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transfered's name address and	(e) Transfer of gif	
-		Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(a) Transfer of out	*
Transferee's name, address, and	· · · · · · · · · · · · · · · · · · ·	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, and	(e) Transfer of gif	t Relationship of transferor to transferee
	y religious, charitable, etc., contribute than \$1,000 for the year from any of For organizations completing Part I or less for the year. (Enter this informate copies of Part III if additional space is recopies of Part III if additional space is recopies.  (b) Purpose of gift  Transferee's name, address, and the purpose of gift  (b) Purpose of gift  Transferee's name, address, and the purpose of gift  (b) Purpose of gift  Transferee's name, address, and the purpose of gift  (b) Purpose of gift	y religious, charitable, etc., contributions to organizations describtan \$1,000 for the year from any one contributor. Complete co For organizations completing Part III, enter the total of exclusive or less for the year. (Enter this information once. See instruction the copies of Part III if additional space is needed  (b) Purpose of gift  (c) Use of gift  (e) Transfer of gift  Transferee's name, address, and ZIP4  (b) Purpose of gift  (c) Use of gift  (c) Use of gift  (d) Transfer of gift  (e) Transfer of gift  (e) Transfer of gift  (f) Use of gift  (g) Use of gift