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Form **990-PF** Department 6 the Treasury Internal Revenue Service

EXTENDED TO AUGUST 15, 203
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 separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

LE EI Numb	e of foundation EACO RURAL TELE DUCATION FOUNDA	PHONE			A Employer identification	on number
EI Numb		PHONE			1	
Numb	DUCATION FOUNDA				1	
_ 22		TION			85-612066	9
	per and street (or P O box number if m	ail is not delivered to street	address)	Room/suite	B Telephone number	
•	20 WEST BROADWA	\Y			(575) 370	-5010
City	or town, state or province, count	ry, and ZIP or foreign pe	ostal code		C if exemption application is	pending, check here
<u> HC</u>	OBBS, NM 88240	<u>) </u>				
G Ch	neck all that apply: 🔲 In	nitial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	ns, check here
	F ₁	nal return	Amended return		2 Foreign organizations n	neeting the 85% test
		ddress change	Name change	<u> </u>	2. Foreign organizations no check here and attach	computation
H_Ch	neck type of organization:	· —	empt private foundation		E If private foundation st	
<u> </u>	Section 4947(a)(1) nonexempt		Other taxable private founda		under section 507(b)(1)(A), check here
1 Fair	r market value of all assets at enc	· —	-	X Accrual	F If the foundation is in	a 60-month termination
	om Part II, col. (c), line 16)	Oti	her (specify)		under section 507(b)(1)(B), check here
کطیہ			mn (d) must be on cash b	pasis)		1 48
Par	(The total of amounts in column	s (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
	necessarily equal the amounts i	in column (a))	expenses per books	income	income	(cash basis only)
1	1 Contributions, gifts, grants,		6,045.		N/A	
1	2 Check X if the foundation is Interest on savings and temporar					(m) m=1/=== 1
1	3 cash investments		29.	29	•	STATEMENT 1
	4 Dividends and interest from	securities				
	5a Gross rents					
	b Net rental income or (loss)		ENTED AS			
e e	6a Net gain or (loss) from sale of ass Gross sales price for all	sets not on line 10				
Revenue	D assets on line 6a		0 2016 (c)	0		
- Be	7 Capital gain net income (from Pai	nt IV, line 2)	3 3 3		•	
~ (26)	8 Net short-term capital gain	131 Ac	150			-
2016	9 Income modifications Gross sales less returns		COEN			
2	10a and allowances	∦ ©	91013			
F-4	b Less Cost of goods sold c Gross profit or (loss)					
	11 Other income					
LUI	12 Total. Add lines 1 through	11	6,074.	29		
	13 Compensation of officers, director		0.	0	•	0.
ANNED	14 Other employee salaries and					
	15 Pension plans, employee be	enefits				
Şes	16a Legal fees					
gens Spens	b Accounting fees	STMT 2	675.	337	•	338.
	c Other professional fees					
Operating and Administrative Expenses	17 Interest					<u> </u>
rati	18 Taxes					
nist	19 Depreciation and depletion				<u> </u>	
<u>'Ē</u>	20 Occupancy					
ĕ	21 Travel, conferences, and me	eetings				
all	22 Printing and publications					
<u>B</u>	23 Other expenses	STMT 3	1,622.	0	•	1,622.
rati	24 Total operating and admin	istrative				
ğ	expenses Add lines 13 thre	ough 23	2,297.	337	•	1,960.
	25 Contributions, gifts, grants		4,500.			4,500.
	26 Total expenses and disbur	sements.	[
_	Add lines 24 and 25		6,797.	337	•	6,460.
l	27 Subtract line 26 from line 13					
	8 Excess of revenue over expense:		<723.			-
İ	b Net investment income (if n			0		-
52350 11-24-	c Adjusted net income (if negation of negation) 1 LHA For Paperwork Red		1		N/A	Form 990-PF (2015)

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LEACO RURAL TELEPHONE EDUCATION FOUNDATION

Form 990-PF (2015)

Ps	ırt	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
	41.6	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
ı		Savings and temporary cash investments	42,011.	41,288.	41,288.
	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			
ł		disqualified persons			
ĺ	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
2	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ځ	10a	Investments - U.S. and state government obligations			
		Investments - corporate stock			
		Investments - corporate bonds			
1		Investments -land, buildings, and equipment basis			
	••	Less accumulated depreciation			
	12	Investments - mortgage loans			-
- 1	13	Investments - other			
- 1		Land, buildings, and equipment: basis			
	14	Less accumulated depreciation			
	45				
- 1		Other assets (describe)		-	
	16	Total assets (to be completed by all filers - see the	40 011	41,288.	41 200
\dashv	47	Instructions. Also, see page 1, item I)	42,011.	41,200.	41,288.
- 1		Accounts payable and accrued expenses			
	18	Grants payable			
.9	19	Deferred revenue		 	
إ ≝	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>ia</u>	21	Mortgages and other notes payable			
-	22	Other liabilities (describe)			
\dashv	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
ر ا		and complete lines 24 through 26 and lines 30 and 31			
Š	24	Unrestricted			
Ē	25	Temporarily restricted	_		
8	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			
ŭ.		and complete lines 27 through 31			
S	27	Capital stock, trust principal, or current funds	88,142.	94,188.	
Net Assets or Fund Balances	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
¥	29	Retained earnings, accumulated income, endowment, or other funds	<46,131.>	<52,900.	>
ş	30	Total net assets or fund balances	42,011.	41,288.	
_			-		
	31	Total liabilities and net assets/fund balances	42,011.	41,288.	
D,	art	Analysis of Changes in Net Assets or Fund Ba	• •		
		net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
-		st agree with end-of-year figure reported on prior year's return)		1	42,011.
2 E	nte	r amount from Part I, line 27a		2	<u> </u>
3 (Othe	r increases not included in line 2 (itemize)		3	0.
4 /	Add	lines 1, 2, and 3		4	41,288.
5 [Decr	eases not included in line 2 (itemize)		5	0.
6	ota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	lumn (b), line 30	6	41,288.
					Form 990-PF (2015)

85-6120669

Page 2

Form 990-PF (2015)

EDUCATION FOUNDATION

Part IV Capital Gains	and Lo	sses for Tax on Ir	nvestment	Income	Last							
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			I. b	low ac - Purc - Don:			acquired day, yr.)	(d) Date sold (mo., day, yr.)				
<u> 1a</u>												
b NC	NE_				-							
C	<u> </u>				-							
_d					 	-						
e	1	<u></u>			⊥.,							
(e) Gross sales price	(1)	Depreciation allowed (or allowable)	(g) Cos plus e	t or other basis xpense of sale					Sain or (loss is (f) minus			
8	ļ											
<u>b</u>	-											
C	1	· · ·	ļ									
<u>d</u>			ļ 									
Complete only for exacts above	DG GOLD ID	column (h) and award by	the foundation	on 12/21/60				1) On on (0-1 (5)			
Complete only for assets show	T		Ţ						Col. (h) gaın not less tha			
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any				Losses	(from col. ()) , .		
8	<u> </u>		_									
<u>b</u>									 			
<u>C</u>	-		 									
d	-		ļ									
<u>e</u>							T					
2 Capital gain net income or (net o	apital loss	$ \begin{cases} \text{ If gain, also ente} \\ \text{ If (loss), enter -C} \end{cases} $	r in Part I, line)- in Part I, line	7 7	}	2						
3 Net short-term capital gain or (lo	oss) as defi	•										
If gain, also enter in Part I, line 8	•		(• /•] [
If (loss), enter -0- in Part I, line 8	3			·		3						
Part V Qualification t	Jnder S	Section 4940(e) for	r Reduced	Tax on Net	t Inv	estn	nent In	come				
(For optional use by domestic priva	te foundati	ons subject to the section	4940(a) tax on	net investment ii	ncome	e.)						
Handton 4040/d\/2\ applian leave	thin nort hi	lank										
If section 4940(d)(2) applies, leave	uns part oi	dir.										
Was the foundation liable for the se	ction 4942	tax on the distributable ar	mount of any ye	ear in the base pe	rıod?					Yes X No		
If "Yes," the foundation does not qu										··-		
1 Enter the appropriate amount in	each colu	mn for each year; see the	instructions be	fore making any e	entries	S		<u>, </u>		70.		
(a) Base period years		(b)		N	(c)				Distril	(d) oution ratio		
Calendar year (or tax year beginn	ing in)	Adjusted qualifying dis		Net value of no	oncna				(col. (b) div	vided by col. (c))		
2014			5,825.				9,64			.146929		
2013			5,000.				1,12			.121592		
2012			2,500.				7,28			.067060		
2011			3,300.				4,06			.096871		
2010			5,699.				8,71	5.	1	.198468		
										60000		
2 Total of line 1, column (d)								2	-	.630920		
3 Average distribution ratio for the			on line 2 by 5,	or by the numbe	r of ye	ears				40640		
the foundation has been in exist	ence if less	s than 5 years						3	-	.126184		
		_								40 545		
4 Enter the net value of noncharita	able-use as	sets for 2015 from Part X,	, line 5					4		40,717.		
5 Multiply line 4 by line 3								5		5,138.		
6 Enter 1% of net investment inco	me (1% of	f Part I, line 27b)						6		0,		
7 Add lines 5 and 6								7		5,138		
										6 460		
8 Enter qualifying distributions fro			- 45			٠.	4-	8	<u> </u>	6,460		
If line 8 is equal to or greater the See the Part VI instructions.	an line 7, c	neck the box in Part VI, lin	e 16, and comp	piete that part usi	ng a 1	% tax	rate.			·		

LEACO RURAL TELEPHONE

	990-PF (2015) EDUCATION FOUNDATION	8	<u> </u>	<u>6120</u>	<u>669</u>	F	age 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e),	or 49	 148	see i	nstru	ctior	ns)
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)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%		1				0.
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	1					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	Ļ	2				0.
3	Add lines 1 and 2		_3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	Ļ	4				<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5				0.
6	Credits/Payments:						
a	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 6a						
b	Exempt foreign organizations - tax withheld at source 6b						
C	Tax paid with application for extension of time to file (Form 8868) 6c						
d	Backup withholding erroneously withheld 6d 6d		1				
7	Total credits and payments. Add lines 6a through 6d	L	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	L	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9				0.
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 2016 estimated tax	d 🖊	11				
Pa	rt VII-A 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 int	ervene i	n			Yes	
	any political campaign?				1a		_X_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the de	finition)	?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials per	ublishe	d or				
	distributed by the foundation in connection with the activities						
C	Did the foundation file Form 1120-POL for this year?				1c		_X_
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
	(1) On the foundation. ▶ \$ (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	n					
	managers. ► \$O.				1		
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.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorpor	ation, oi	•				
	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?				4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N	/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						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state of the state	ne state	law				ŀ
	remain in the governing instrument?				6	X	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and F	Part XV			7	X	 -
							-
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	_					
	NM						
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)					-	
	of each state as required by General Instruction G? If "No," attach explanation				8b	X	ļ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)	tor cale	ndar				
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV				9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	3			10	L	X

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	1990-PF (2015) EDUCATION FOUNDATION	85-6120	669		Page 5
P	art VII-A Statements Regarding Activities (continued)				
	•			Yes	No
- 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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory	orivilenes?			
12		Jittile goo	12		v
	If "Yes," attach statement (see instructions)			¥-	<u>X</u>
13	. , , , , , , , , , , , , , , , , , , ,		13	X	
	Website address ► <u>WWW.LEACO.NET</u>				
14	The books are in care of ▶ BRENDA GARCIA Telephone no.	<u> (575)</u>	370	<u>-50</u>	10_
	Located at ► 220 WEST BROADWAY, HOBBS, NM	ZIP+4 ▶88	240		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here				
	and enter the amount of tax-exempt interest received or accrued during the year	15	N	/A	
40	· · · · · · · · · · · · · · · · · · ·			Yes	No
10	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		40	1 63	ŀ
	securities, or other financial account in a foreign country?		16	l	<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the				1
	foreign country				<u></u>
Pi	art 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
4.	a During the year did the foundation (either directly or indirectly):				
10		'es X No			1
		es LAL NO			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				1
		'es 🗓 No			1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	es X No			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	'es X No			1
	(5) Transfer any income or assets to a disqualified person (or make any of either available				
		es X No			l
		110			ĺ
	(6) Agree to pay money or property to a government official? (Exception. Check *No*				1
	if the foundation agreed to make a grant to or to employ the official for a period after		Ì		1
	, , , , , , , , , , , , , , , , , ,	es X No			1
- 1	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				l
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	ightharpoons			
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
			10		x
_	before the first day of the tax year beginning in 2015?		16	 	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	l .			
	defined in section 4942(j)(3) or 4942(j)(5)):				1
	a 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	ng			
	before 2015?	res X No		1	
	If "Yes," list the years >				
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorre	ct			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attac				1
	, , , , , , , , , , , , , , , , , , , ,				1
	statement - see instructions.)	N/A	2b		├─
1	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		1	•	
	 ,,,,,,				l
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				-
	during the year?	res X No			1
	b if "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons a			1	
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to			}	
			1		
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule		1		
	Form 4720, to determine if the foundation had excess business holdings in 2015)	N/A	<u>3b</u>	1	
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	\vdash	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpo	se that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?		4b		X
_		Fc	orm 99	0-PF	(2015)

LEACO RURAL TELEPHONE				
orm 990-PF (2015) EDUCATION FOUNDATION			<u>85-61206</u>	<u> 9 Page 6</u>
Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be F	Required (continu	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	1 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire			
any voter registration drive?		Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	X Ye	s D No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
4945(d)(4)(A)? (see instructions)		☐ Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo			
the prevention of cruelty to children or animals?	, ,		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described in			
section 53.4945 or in a current notice regarding disaster assistance (see instru				66 X
Organizations relying on a current notice regarding disaster assistance check h	•			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ned		
expenditure responsibility for the grant?		/A 🗀 Ye	s 🖂 No	
If "Yes," attach the statement required by Regulations section 53.494		/A	.s NO	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	pay premiums on		s X No	+ 1
•	arannal hanafit anntrantū	16		Sb X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		-) A
If "Yes" to 6b, file Form 8870.	h . H		s X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6		,
b If 'Yes,' did the foundation receive any proceeds or have any net income attributed by the state of the sta		nagana Highl	,	'b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, roundation Ma	nagers, nigniy	,	
List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address	hours per week devoted	(If not paid,	and deterred	(e) Expense account, other allowances
DANNY WATSON	to position PRESIDENT	enter'-0-)	compensation	allowalices
220 WEST BROADWAY	EVESTDENT			
HOBBS, NM 88240	1.00	0.	0.	0.
	VICE PRESIDEN		0.	<u>U•</u>
220 WEST BROADWAY	AICE LYESIDEN	1		
HOBBS, NM 88240	1.00	0.	0.	0.
	SECRETARY/TRE		- 0.	
	SECKETARI/TRE	ASUKEK		
220 WEST BROADWAY HOBBS, NM 88240	1.00	0.	0.	0.
	ASST SEC/TREA		0.	
	MOSI SEC/IKEM	5		
220 WEST BROADWAY	1.00	0.	0.	0
IOBBS , NM 88240 Compensation of five highest-paid employees (other than those inc			U • 1	0.
Compensation of the highest-paid employees (other than those inc		The None	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE	devoted to position		compensation	anowances
NONE				
				
				
				
		1		
		 		

Total number of other employees paid over \$50,000

LEACO RURAL TELEPHONE EDUCATION FOUNDATION

Form 990-PF (2015) EDUCATION FOUNDATION	85-6	5120669 Page 7
Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	dation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, en		
(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		> (
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant stanumber of organizations and other beneficiaries served, conferences convened, research papers p		Expenses
1		
SEE STATEMENT 4		4,500.
2		
3		
4		
Part IX-B Summary of Program-Related Investments	an lines d and O	Amount
Describe the two largest program-related investments made by the foundation during the tax year 1 N/A	on lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		

Total. Add lines 1 through 3

	990-PF (2015) EDUCATION FOUNDATION	85-6120669	Page 8
Par	TX Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, see instructions)	
1 F	air market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a A	verage monthly fair market value of securities	1a	0.
b A	verage of monthly cash balances	1b 41	,337.
c F	air market value of all other assets	1c	
d T	otal (add lines 1a, b, and c)	1d 41	,337.
e R	eduction claimed for blockage or other factors reported on lines 1a and		
1	c (attach detailed explanation)		
2 A	cquisition indebtedness applicable to line 1 assets	2	0.
3 S	ubtract line 2 from line 1d	3 41	,337.
4 C	ash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	620.
5 N	et value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		<u>,717.</u>
	linimum investment return. Enter 5% of line 5	6 2	<u>,036.</u>
Par	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	id certain	
	foreign organizations check here and do not complete this part.)		
1 N	finimum investment return from Part X, line 6	1 2	,036.
2a T	ax on investment income for 2015 from Part VI, line 5		
b Ir	come tax for 2015. (This does not include the tax from Part VI.)		
c A	dd lines 2a and 2b	2c	0.
3 D	istributable amount before adjustments. Subtract line 2c from line 1	3 2	,036.
4 R	ecoveries of amounts treated as qualifying distributions	4	0.
5 A	dd lines 3 and 4	5 2	,036.
6 D	eduction from distributable amount (see instructions)	6	0.
	istributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 2	,036.
Pai	Qualifying Distributions (see instructions)		
	mounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		460
	xpenses, contributions, gifts, etc total from Part I, column (d), line 26		<u>,460.</u>
	rogram-related investments - total from Part IX-B	1b	0.
	mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
	mounts set aside for specific charitable projects that satisfy the:		
	uitability test (prior IRS approval required)	3a	
	ash distribution test (attach the required schedule)	3b	
	ualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 6	,460.
	oundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	ncome. Enter 1% of Part I, line 27b	5	0.
	djusted qualifying distributions Subtract line 5 from line 4		,460.
N	late. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation i	nualifies for the section	

4940(e) reduction of tax in those years.

LEACO RURAL TELEPHONE EDUCATION FOUNDATION

Undistributed Income (see instructions)

Form 990-PF (2015)

Part XIII

85-6120669

Page 9

(a) (b) (c) (d) Years prior to 2014 2014 Corpus 2015 1 Distributable amount for 2015 from Part XI, 2,036. 2 Undistributed income, if any, as of the end of 2015 0 a Enter amount for 2014 only **b** Total for prior years: 0 3 Excess distributions carryover, if any, to 2015: 4,265 a From 2010 1,598. **b** From 2011 c From 2012 637 2,944. d From 2013 3,843. e From 2014 13,287 f Total of lines 3a through e 4 Qualifying distributions for 2015 from Part XII, line 4: ► \$_ 0 a Applied to 2014, but not more than line 2a b Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) 2,036. d Applied to 2015 distributable amount 4,424 e Remaining amount distributed out of corpus 0. 0. 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: 17,711 & Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0. 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 0 assessed d Subtract line 6c from line 6b. Taxable 0 amount - see instructions e Undistributed income for 2014. Subtract line 0 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must 0. be distributed in 2016 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election 0 may be required - see instructions) 8 Excess distributions carryover from 2010 4,265 not applied on line 5 or line 7 Excess distributions carryover to 2016. 13,446 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2011 1,598 637. b Excess from 2012 2,944. c Excess from 2013 3,843. d Excess from 2014 424 e Excess from 2015

LEACO RURAL TELEPHONE

523601 11-24-15

EDUCATION FOUNDATION Page 10 Form 990-PF (2015) 85-6120669 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(i)(3) or 4942(1)(5) Tax year Prior 3 years 2 a Enter the lesser of the adjusted net (a) 2015 (b) 2014 (c) 2013 (d) 2012 (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% 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 Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 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 Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here Fig. 1 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: LEACO RURAL TELEPHONE EDUCATION FOUNDATION, 575-370-5010 220 W. BROADWAY, HOBBS, NM 88240 b The form in which applications should be submitted and information and materials they should include: SEE ATTACHED APPLICATION c Any submission deadlines: SEE ATTACHED APPLICATION d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: SEE ATTACHED DESCRIPTION OF RESTRICTIONS AND LIMITATIONS.

Form **990-PF** (2015)

Form 990-PF (2015)

Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution show any relationship to Foundation Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year AARON DUMAS SEE PAGE 7; PART SCHOLARSHIP 1500 S AVE IX-A 500. PORTALES NM 88130 ABBY MEDLIN SEE PAGE 7; PART SCHOLARSHIP 234 MEDLIN RD IX-A TATUM, NM 88267 500. BAILEY ROBINSON SEE PAGE 7; PART SCHOLARSHIP 13102 N CALLE ALTO IX-A HOBBS, NM 88240 500. CATHERINE AMUNDSEN SEE PAGE 7; PART SCHOLARSHIP 1205 S FAIRWAY IX-A 500. LOVINGTON, NM 88260 CHANDNI BHAKTA SEE PAGE 7; PART SCHOLARSHIP 805 W AVE D IX-A LOVINGTON NM 88260 500. SEE CONTINUATION SHEET(S) ▶ 3a 4.500. Total b Approved for future payment NONE Total

Part XVI-A ` Analysis of Income-Producing Activities

Form 990-PF (2015)

Catan areas Describe upless atherway indicated	Unrelated	business income	Excluded	by section 512, 513, or 514	(0)
Enter gross amounts unless otherwise indicated. 1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
a	Code		1		
b					
c					
d					
e					
f	_				
g Fees and contracts from government agencies					
2 Membership dues and assessments	-		- 		
3 Interest on savings and temporary cash			14	29.	
investments 4 Dividends and interest from securities			14	49.	
5 Net rental income or (loss) from real estate:			 		
a Debt-financed property			1 -		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
<u> </u>	t I				
d	-				
e		0		29.	_ 0.
13 Total. Add line 12, columns (b), (d), and (e)		<u>_</u>	-1	13	29.
(See worksheet in line 13 instructions to verify calculations	.)				
Part XVI-B Relationship of Activitie	s to the Accor	nplishment of f	Exempt F	Purposes	
				· · · · · · · · · · · · · · · · · · ·	
Explain below how each activity for which is the foundation's exempt purposes (other the			-A contribute	d importantly to the accom	ipiisnment of
the foundation's exempt purposes (other tr	ian by providing fond	10 101 30011 parposes):			
	·-				
					
			 		
		.		· · · · · · · · · · · · · · · · · · ·	
					-
					
					·
					•

orm 990-PF (TION FC								0-01700			ge 13
Part XVII	Information Re Exempt Organ		ransfers	s To aı	nd Trans	actions a	and Re	lationsl	hips With N	Noncharita	ble		
1 Did the o	rganization directly or indi		any of the	following	with any oth	er organizatio	on describ	ed in secti	on 501(c) of		Ī	Yes	No
	(other than section 501(c)		-	-	-	_					Ī		
	from the reporting found		=										ı
(1) Cast	1									18	(1)		X
(2) Othe	r assets									18	(2)		Х
b Other train	nsactions:												
(1) Sale	s of assets to a noncharita	ble exempt orga	anization							<u>11</u>	(1)		X
(2) Puro	chases of assets from a no	ncharitable exei	mpt organız	ation						11	(2)		X
(3) Rent	tal of facilities, equipment,	or other assets								<u> 1</u>	(3)		X
(4) Rein	nbursement arrangements									11	(4)	X	
(5) Loar	ns or loan guarantees									11	(5)		X
(6) Perf	ormance of services or me	mbership or fui	ndraising so	olicitation	S					11	(6)		X
-	of facilities, equipment, ma	•			•						lc	Х	<u> </u>
	swer to any of the above is											ets,	
	es given by the reporting fo				d less than fa	ır market valı	ue in any t	ransaction	or sharing arra	ngement, show	ın		
,	d) the value of the goods,												
(a) Line no	(b) Amount involved				exempt orgai				of transfers, trans		ng arra	angeme	nts
10		LEACO F	CURAL	TELE	SPHONE	COOP.	, SE	E STA	TEMENT	5			
1C	455.		TIDAT	mere	TOUCNIE	COOR	+					-	
B4		LEACO F	COKAL	Tere	PRONE	COOP.				·			
D-#	075.	INC.					+						
							+			·			
									,				
													
	Tel Lord Control	1											
	undation directly or indirect	-	-			xempt organi	izations de	escribed		X	V-0	_] No
	n 501(c) of the Code (other complete the following sch		01(0)(3)) 0	r in secu)II 52/ /					لما	162	Ц	טאו ב
U 11 165, ((a) Name of org			· ·	(b) Type of	organization			(c) Description	of relationship			
LEACO I		ONE COC)P., I		501(C)		SEE		EMENT (
			<u>, </u>		, , , , , , , , , , , , , , , , , , , 					<u> </u>			
						•							
	er penalties of perjury, I declare peliet; It is the, correct, and cor									May the	IRS d	scuss (this
Sign		Q .	A.	other than	ı axpayor, is ba	300 011 811 1110111	Macion or wi	C.F		return w			
Here	Jall	DW			-		<u> </u>	CF	.0.	LXJ	Yes		∟ No
Sig	nature of officer or trustee				Date	/	Title		Charle [==]	.f DTIN			
	Print/Type preparer's na	ame	Prep	arer's sig	nature I		Date		Check X	ıf PTIN			
Paid	Wamm p			$\mathcal{M}_{\mathcal{L}}$		<u>/</u>	07/1	411	self- employed	1	10'	7 4 1	
Preparer	MATT R. WI Firm's name ► BOL		MAT SEGAR		GILBER	IS T AND	07/1 MOSS		Firm's EIN	P004 75-088			
Use Only	1 11111 0 1141110 7 202	TNGEK,	DEGAL	10, C	2T NDGK	ד אוא	TIODD	חווב	THIN S EIN	15-000	2 U .	J /	
	Firm's address ▶ 82	15 NASE	IVIIII	E AVI	ENUE								
		BBOCK,							Phone no.	(806)74	7 – :	380	6
													

Part XV Supplementary Informat 3 Grants and Contributions Paid During th				
` Recipient	If recipient is an individual,	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
CHRISTIAN HINOJOSA	SEE PAGE 7; PART	:	SCHOLARSHIP	
PO BOX 1116	IX-A			
FATUM_ NM 88267				50
KRISTA TURNER	SEE PAGE 7; PART	-	SCHOLARSHIP	
WEST TX A&M CANYON, TX 79016	IX-A			50
11 17V1V				30
MICHAEL BENAVIDES	SEE PAGE 7; PART	:	SCHOLARSHIP	
РО ВОХ 79	IX-A			
TATUM NM 88267				50
OLIVIA AMUNDSEN	SEE PAGE 7; PART		SCHOLARSHIP	
1205 S FAIRWAY LOVINGTON, NM 88260	IX-A			50
Total from continuation sheets				2.00

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	IPORARY	CASH II	NVESTMENTS	STATEMENT 1
SOURCE	(<i>)</i> REVE PER E	NUE		(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOME
LEA COUNTY STATE BANK		29.		29.	
TOTAL TO PART I, LINE 3		29.		29.	
FORM 990-PF	ACCOUNTI	NG FEES	3		STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(P NET IN MENT I	WEST-	(C) ADJUSTED NET INCOM	
ACCOUNTING	675.		337.		338.
TO FORM 990-PF, PG 1, LN 16B	675.		337.		338.
FORM 990-PF	OTHER I	EXPENSES	5		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(I NET II MENT I		(C) ADJUSTED NET INCOM	
OFFICE EXPENSE	1,622	,	0.		1,622.
TO FORM 990-PF, PG 1, LN 23	1,622		0.		1,622.
FORM 990-PF SUMMARY OF	F DIRECT CHA	ARITABLI	E ACTIV	ITIES	STATEMENT 4
ACTIVITY ONE					
COLLEGE SCHOLARSHIPS TO ACTIVE TELEPHONE COOPERATIVE, INC. OF FAMILY. DURING THE TAX YEAR SCHOLARSHIPS IN THE AMOUNT OF	OR MEMBERS (9 STUDENTS	OF THEI	R IMMED		
					EXPENSES
TO FORM 990-PF, PART IX-A, LI	INE 1				4,500.

990-PF INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS STATEMENT 5 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.

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

LEACO RURAL TELEPHONE COOP., INC.

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

THE COOPERATIVE PAYS FOR THE FOUNDATION'S ACCOUNTING FEES RELATED TO THE PREPARATION OF THE FORM 990PF.

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

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 2015 FORM 990-PF SCHOLARSHIP APPLICATION PAGE 10, PART XV



Leaco Rural Telephone Cooperative Scholarship Application

As a cooperative, Leaco Rural Telephone Cooperative (LEACO) is owned by the members we serve. The very nature of LEACO is *for the community, by the community*. This \$1000 scholarship (\$500 for 2 consecutive terms) is just one way for your home-town communications provider to serve you. We hope there are many more opportunities to serve you and your family in the years to come.

OUALIFICATIONS:

- 1. The Applicant or applicant's parent/guardian must be a customer of LEACO and the account must be in 'good standing'. For purposes of this application, 'in good standing' shall be defined as an active account which has not been disconnected for non-payment within 6 months of the scholarship deadline (since September 30, 2015)
- 2. Applicant must be a high school senior.
- 3. Applicants must intend on enrolling full-time (at least 12 credit hours per semester) in any post-secondary institution providing at least a two-year degree program. Proof of full-time enrollment is required before receiving actual funds.

INSTRUCTIONS: (checklist)

1. Application must be completed electronically or typed.
2. Application must be signed by the student, a parent/guardian, and a representative of
the high school.
3. Applicant must submit a high school transcript through the 7 th semester showing ACT
and/or SAT scores.
4. Applicant must provide two letters of reference; one from a teacher, counselor, or
school administrator, and the second from someone not affiliated with the applicant's
high school. Letters must have a legal signature and be dated.
5. Application packets must arrive to the address below by 5:00 pm Mountain time on
Thursday, March 31, 2016.
6. Once approved for the scholarship, applicant will be sent further instructions regarding
providing proof of enrollment to obtain the actual scholarship funds.

Leaco Rural Telephone Cooperative C/O Lisa Pearce 220 W. Broadway Hobbs, NM 88240 LEACO RURAL TELEPHONE EDUCATION FOUNDATION EIN # 85-6120669 2015 FORM 990-PF SCHOZARSHIP APPLICATION PAGE 10, PART XV

Note: Incomplete application packets or packets received after the deadline will not be considered, including but not limited to missing documents, questions left blank, or signatures missing. Once submitted, all scholarship applications become the property of Leaco Rural Telephone Cooperative and are kept confidential. The names are removed from the applications and reviewed by a committee made up of community members for approval.

Leaco Rural Telephone Cooperative Scholarship Application

- 1. Enter Full Name: Click here to enter text.
- 2. Full Mailing Address (including city, state, and zip code): Chek here to enter text.
- 3. Phone Number (including area code): Click here to enter text.
- 4. Parent(s) or guardian(s) name(s): Click here to enter text.
- 5. Name of high school from which you graduated or will graduate: Click here to enter text.
- 6. Date of Graduation: Click here to enter text
- 7. Name and mailing address of school you will be attending full-time in the fall: Click here to enter text.
- 8. Please list your desired major or field of study: Click here to enter text.
- **9. List employment if applicable:** Chek here to enter text.
- 10. List extra-curricular activities both in school/out of school: Click here to enter text.
- 11. List any special awards received and when: Click here to enter text.
- 12. Please list your career goals: Click here to enter text.

Student's Signature	<u>Date</u>
	_
Parent or Guardian Signature	<u>Date</u>

LEACO RURAL TELEPHONE EDUCATION FOUNDATION EIN # 85-6120669 2015 FORM 990-PF SCHOLARSHIP APPLICATION PAGE 10, PART XV

Please type in the text box, or type and attach an essay explaining why LEACO should invest in your education. (300-350 words)

Click here to enter text.

LEACO RURAL TELEPHONE EDUCATION FOUNDATION EIN # 85-6120669 2015 FORM 990-PF SCHOLARSHIP APPLICATION PAGE 10, PART XV

Leaco Rural Telephone Cooperative Scholarship Application

The following information must be completed by a high school counselor or principal. Please print this page and request the following information. (This page may be typed or hand-written)

1. Student's High School GPA (based on 4	4.0 scale) at the end of the 7 th semester:	
2. Applicant ranks in class of students.		<u></u>
 Please provide additional information yo applicant: 	ou believe we should consider in evaluating th	is
,		
**Applicant has been required to obtain and enc semester, including ACT and/or SAT scores.	close a copy of their transcript through the 7 th	
Signature of School Official	Title	Date