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Form **990**

Return of Organization Exempt From Income Tax

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

2008

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

Α	For the	e 2008 calendar year, or tax year beginningJUL1and ending	<u>JUN 30, 2009</u>	
В	Check if applicable	Please use IRS C Name of organization	D Employer identifi	cation number
	Addre	ss label or WEST VIRGINIA BAR FOUNDATION, INC.		
	Name	type	55-0	690434
Ļ	Initial return	See Number and street (or P.O. box if mail is not delivered to street address) Room/s	1 - '	
Ļ	Termi	Instruction 2008A KANAWHA BOULEVARD, EAST	(304	
Ļ	Amen	City or town, state or country, and ZIP + 4	G Gross receipts \$	620,079.
L	Application pendi	CHARLESTON, WV 25311-2204	H(a) Is this a group re	
	pendi	F Name and address of principal officer THOMAS R. TINDER	for affiliates?	Yes X No
		2008a KANAWHA BOULEVARD, EAST, CHARLESTON,	W H(b) Are all affiliates inc	cluded? Yes No
		empt status X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527		list (see instructions)
		te: ► WWW.WVBARFOUNDATION.ORG	H(c) Group exemption	
		- 1	ear of formation: 1988	M State of legal domicile: WV
P	art I	Summary		
ĕ	1	Briefly describe the organization's mission or most significant activities IMPROVE		
auc		JUSTICE AND THE PROVISION OF LEGAL SERVICES		
ern	2	Check this box 🕨 🔛 if the organization discontinued its operations or disposed of n	nore than 25% of its asset	
Š	3	Number of voting members of the governing body (Part VI, line 1a)	3	15
<u>ح</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	15
es	5	Total number of employees (Part V, line 2a)	5	1
蹇	6	Total number of volunteers (estimate if necessary)	6	400
Activities & Governance	7a	Total gross unrelated business revenue from Part VIII, line 12, çolumn (C)	7a	0.
2	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
N)			Prior Year	Current Year
≥ٍو	8	Contributions and grants (Part VIII, line 1h)	694,331.	466,326.
⋛⋛	9	Program service revenue (Part VIII, line 2g)		
Revenue	10	Investment income (Part VIII, cólumn (A), lines 3, 4, and 7d)		1,967.
y	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	105,440.	89,853.
		Total revenue - add Ings 8 through, 11 (must equal Part VIII, column (A), line 12)	799,771.	558,146.
ζ		Grants and similar amounts paid (Part 12), column (A), linés 1-3)	<u> 592,000.</u>	460,892.
9	14	Benefits paid to pr for members (Part IX, cdlumh (A), line 4)		
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	60,399.	90,649.
Expenses	16a	Professional tui/draising fees (Part IX, column (A), line 11e)		
Š	b	Total fundraising expenses (Part IX, column 10), line 25)	=	
ш	17	Other expenses (Pan 1x column (A) Ines 11a 11d, 11f 24f)	55,765.	36,777.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	708,164.	
_	19	Revenue less expenses Subtract line 18 from line 12	91,607.	<30,172.
Net Assets or			` Beginning of Year	End of Year
Set	20	Total assets (Part X, line 16)	1,165,372.	976,779.
A A	21	Total liabilities (Part X, line 26)	484,178.	325,757.
<u> </u>	22	Net assets or fund balances Subtract line 21 from line 20	681,194.	651,022.
<u>P</u>	art II	Signature/Block /		
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and stateme and complete "Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	ents, and to the best of my knowled edge	dge and belief, it is true, correct,
		TO CONTRACTOR OF THE PARTY OF T	سر.ار	1
Sig	jn	Manual Manager		10
He	re	Signature of officer	Date	
		THOMAS R. TINDER, EXECUTIVE DIRECTOR		
_		Type or print name and title	Ohook of	
Pai	d	Preparer's Date		rer's identifying number istructions)
	parer's	signature 1-11-10	employed >	
	only	Firm's name (or yours if HERMAN & CORMANY, CPAS, A.C.	EIN >	
		self-employed), address, and 1031 QUARRIER ST., SUITE 511		
_		ZIP+4 CHARLESTON, WV 25301-2397	Phone no. ► 3	04-345-2320
Ma	y the I	RS discuss this return with the preparer shown above? (see instructions)		X Yes No
832	001 12-	18-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate	instructions.	Form 990 (2008)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form 990 (2008) WEST VIRGINIA BAR FOUNDATION, INC. 55-0690434 Page 3 Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2_	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
_	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			7 .
_	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			Х
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			Х
_	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide	_		v
40	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	9		X
10		10		
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	$\mid \mathbf{x} \mid$	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was		-23	
12	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	x	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	170		
-	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			-
	located outside the United States? If "Yes," complete Schedule F, Part III	16_		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		_X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K			
	If "No", go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
		24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a	l		4.5
	prior year? If "Yes," complete Schedule L, Part I	25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			.
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	_26_		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			v
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27_	000	X
		⊦orm	990 (2008)

55-0690434

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee.			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	X	<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	L	Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х

12a

11b

amounts due or received from them)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

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

Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O. See instructions			
1a	Enter the number of voting members of the governing body	5		
b	Enter the number of voting members that are independent 1b 1	5		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	Х	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following			
а	The governing body?	8a	х	
	Each committee with authority to act on behalf of the governing body?	8b	Х	
9a		9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		X
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
þ	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?			
15		14	X	
	Did the process for determining compensation of the following persons include a review and approval by independent	14	X	
	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision	14		
а		14 15a		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization?			X
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official?	15a		X
b	persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization?	15a		X
b	persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)	15a		x
b 16a	persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	15a 15b		
b 16a	persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	15a 15b		
b 16a b	persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	15a 15b		
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b 16a b Sec	persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	15a 15b		
b 16a b Sec 17	persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Etion C. Disclosure	15a 15b 16a		
b 16a b	persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Etion C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply	15a 15b 16a		
b 16a b Sec 17	persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Etion C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	15a 15b 16a		
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b 16a b Sec 17 18	persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Etion C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply Own website X. Another's website X. Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, statements available to the public	15a 15b 16a 16b	х	

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

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

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

(A)	(B)		(C) Position (check all that apply)		(D)	(E)	(F)			
Name and Title	Average hours	l (c			Reportable compensation	Reportable compensation	Estimated amount of			
	per week	Individual trustee or director	institutional trustee			Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
CHERYL D. RILEY										
BOARD MEMBER	1.00	X					<u> </u>	0.	0.	0.
MICHAEL J. ALOI			ļ							
BOARD MEMBER	1.00	X						0.	0.	0.
STEPHEN R. CRISLIP										
BOARD MEMBER	1.00	X	L.					0.	0.	0.
STEPHEN B. FARMER										
BOARD MEMBER	1.00	X						0.	0.	0,
DEAN J. E. MCCONNELL										
BOARD MEMBER	1.00	X						0.	0.	0.
W. TRACEY WEBER, JR.										
BOARD MEMBER	1.00	X						0.	0.	0 .
J. FRANKLIN LONG										
BOARD MEMBER	1.00	X						0.	0.	0 .
NEVA G. LUSK										
BOARD MEMBER	1.00	X	l		ļ			0.	0.	0 .
C. JANE MORAN										
BOARD MEMBER	1.00	X						0.	0.	0
STEVEN K. NORD										
BOARD MEMBER	1.00	X	1				ļ	0.	0.	0
JANET D. PRESTON										
BOARD MEMBER	1.00	X						0.	0.	0
LARRY L. SKEEN										
BOARD MEMBER	1.00	X]					0.	0.	0.
CARL L. HARRIS								, , , , , , , , , , , , , , , , , , , ,		
PRESIDENT	1.00			X				0.	0.	_ 0.
JOHN H. TINNEY										
VICE PRESIDENT	1.00	_		X	L	_		0.	0.	0
TRACEY A. ROHRBAUGH										
SECRETARY/TREASURER	1.00		1	х				0.	0.	0
THOMAS R. TINDER										
EXECUTIVE DIRECTOR	35.00		J]	X		j	75,000.	ο.	10,000

Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation

from the organization

	1 990 (NDATION, I	.NC.	<u> 55-0690</u>	434 Page 9
Ra	rt VII	Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-11 \$				
2 5	_	Total. Add lines 1a-1f	466,326.			
		Business Code	200/0200			
Š					*****	
Sel			 -			
Program Service Revenue	d					
Par.	e					
4	f	All other program service revenue				
\perp		Total. Add lines 2a-2f	<u> </u>			
	3	Investment income (including dividends, interest, and other similar amounts)	1,967.			1,967.
J	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6 2	(i) Real (ii) Personal (114, 064.				
		Less rental expenses 51,044.				
J		Rental income or (loss) 63, 020.				
		Net rental income or (loss)	63,020.		•	63,020.
ļ		Gross amount from sales of (i) Securities (ii) Other				
1		assets other than inventory				
	b	Less cost or other basis				
		and sales expenses				
	С	Gain or (loss)				
		Net gain or (loss)				
Other Revenue	8 a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See				
P.		Part IV, line 18 a 37,722.				
Ě	b	Less direct expenses b 10,889.	_			
		Net income or (loss) from fundraising events	<u>26,833.</u>			26,833.
ļ	9 a	Gross income from gaming activities. See				
		Part IV, line 19 a				
		Less direct expenses b				
		Net income or (loss) from gaming activities Gross sales of inventory, less returns		 		
İ	io a	· ·				
1	h	and allowances a Less cost of goods sold b				.II
		Net income or (loss) from sales of inventory				
Ì		Miscellaneous Revenue Business Code				
ľ	11 a	THRESHANDES THE THREE STATES				
j	b					
	C					
	d	All other revenue				
	е	Total. Add lines 11a-11d				
2005	12	Total Revenue Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	558,146.	0.	0.	91,820.
83200 02-02	-09 9					Form 990 (2008)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must compl	ete column (A) but are			
	not include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	460,892.	460,892.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members	· · · · ·			
5	Compensation of current officers, directors,				
	trustees, and key employees	85,000.	-	85,000.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	5,649.		5,649.	
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	8,334.		8,334.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	9,666.		9,666.	
14	Information technology				
15	Royalties				
16	Occupancy			_	
17	Travel	4,984.	4,984.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				·
19	Conferences, conventions, and meetings	1,309.	112.	1,197.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance			_	
24	Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	WOMEN AND THE LAW	10,000.	10,000.		
b	INSURANCE	1,520.		1,520.	
C	DUES	799.		799.	•
d	BANK SERVICE CHARGE	140.		140.	
е	TAXES AND LICENSES	25.		25.	
f	All other expenses				
25	Total functional expenses Add lines 1 through 24f	588,318.	475,988.	112,330.	0.
26	Joint Costs. Check here ▶ if following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
					Form 990 (2008)

Par	rt X	Balance Sheet					
			(A) Beginning of year		(B) End of		
•	1	Cash - non-interest-bearing	174,805.	1	12	7,2	76.
	2	Savings and temporary cash investments	315,912.	2			93.
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net		4			
	5	Receivables from current and former officers, directors, trustees, key					
		employees, or other related parties. Complete Part II of Schedule L.		5			
	6	Receivables from other disqualified persons (as defined under section					
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete					
		Part II of Schedule L		6			
ets	7	Notes and loans receivable, net		7	-		
Assets	8	Inventories for sale or use		8			
•	9	Prepaid expenses and deferred charges		9			
	10a		_				
	þ	Less accumulated depreciation Complete	CE0 202		C 2	^ -	6
		Part VI of Schedule D 105, 207.	658,392.		63	9,3	<u>65.</u>
	11	Investments - publicly traded securities	16,263.	11	1	1 7	45.
	12	Investments - other securities See Part IV, line 11	10,203.	12	<u></u> _	4,/	45.
	13	Investments - program-related See Part IV, line 11 Intangible assets		13			
	14	Other assets See Part IV, line 11		14 15			
	15 16	Total assets. Add lines 1 through 15 (must equal line 34)	1,165,372.	16	97	6 7	79.
	17	Accounts payable and accrued expenses	2,722.	17			77.
	18	Grants payable	2,122.	18	·	<u> </u>	• / •
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
S	21	Escrow account liability Complete Part IV of Schedule D		21			
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,					
abil		highest compensated employees, and disqualified persons. Complete Part II					
=		of Schedule L		22			
	23	Secured mortgages and notes payable to unrelated third parties	481,456.	23	32	3,7	90.
	24	Unsecured notes and loans payable		24			
	25	Other liabilities Complete Part X of Schedule D		25			
	26	Total liabilities. Add lines 17 through 25	484,178.	26	32	5,7	57.
		Organizations that follow SFAS 117, check here X and complete					
es]	lines 27 through 29, and lines 33 and 34.					
ğ	27	Unrestricted net assets	504,377.	27			<u> 38.</u>
Fund Balances	28	Temporarily restricted net assets	176,817.	28	<u> </u>	<u>6,5</u>	<u>84.</u>
5	29	Permanently restricted net assets		29			
		Organizations that do not follow SFAS 117, check here					
ğ]	complete lines 30 through 34.]			
sets	30	Capital stock or trust principal, or current funds	ļ	30			
As	31	Paid-in or capital surplus, or land, building, or equipment fund	<u> </u>	31			
Net Assets	32	Retained earnings, endowment, accumulated income, or other funds	CO1 104	32	<u> </u>	1 0	22
	33	Total net assets or fund balances	681,194. 1,165,372.	33			<u>22.</u> 79.
Pa	34 Total liabilities and net assets/fund balances 1,165,372. 34 Part XI Financial Statements and Reporting						
Tu	I XI	Financial Statements and Reporting				Yes	No
	A	ounting method used to prepare the Form 990 X Cash Accrual	Other		1		
1 2a		ounting method used to prepare the Form 990 LX Cash L Accrual L the organization's financial statements compiled or reviewed by an independent	-		2a	Х	
_		e the organization's financial statements compiled or reviewed by an independent accountant?	accountant.		2b	X	
b		es" to lines 2a or 2b, does the organization have a committee that assumes respo	insibility for oversight of the	audit			
U		w, or compilation of its financial statements and selection of an independent acco	•	, audit,	2c	X	
3a	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit						i
		and OMB Circular A-133?		,	 3a		х
b		es," did the organization undergo the required audit or audits?			3b		

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2008
Open to Public Inspection

Name of the organization

WEST VIRGINIA BAR FOUNDATION, INC.

Employer identification number
55-0690434

Part I	Reason	for Public Char	ity Status (All organiz	zations mu	st complet	te this par	t.) (see ins	tructions)			
he organ	ization is not a	a private foundation	because it is (Please ch	neck only o	ne organi	zation)					Т
1 🗀	A church, co	nvention of churches	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)).			
2	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E)				•			
3			tal service organization			170(b)(1)	(A)(iii). (At	tach Sche	dule H)		
4			operated in conjunction							ne hospital's name	
	city, and stat		.,,,	,,,,,,,				(-/(-/(-/(-/(-/(-/(-/(-/(-/(-/(.,.	,	
5	•		benefit of a college or ui	niversity o	wned or or	perated by	a governi	mental uni	t describe	ed in	_
•	_	(b)(1)(A)(iv). (Comple	-			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	u g			•	
6 🗀			ent or governmental uni	t doscribo	d in sectio	n 170(b)/-	IV AVA				
7 🗔		-	eives a substantial part					or from the	goporal p	ublic described in	
<i>'</i>	•	•	•	oi ita aupp	ort nom a	governine	intai uriit C	// IIOIII (IIO	general p	ublic described in	
•		b)(1)(A)(vi). (Comple		(Camplete	Doet II \						
8 <u>X</u>	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) X An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from										
الما و	_	<u> </u>	• •							· ·	
		•	nctions - subject to certa	•	•	-				•	τ
			axable income (less sect	tion 511 ta	x) trom bu	sinesses a	acquirea b	y tne orga	inization a	tter June 30, 1975	
		509(a)(2). (Complete									
10	_	-	perated exclusively to te	-	-			•	•		
11	_	•	perated exclusively for the		•				•	•	
			itions described in secti				?) See sec	ction 509(a)(3). Che	ck the box that	
			organization and compl		-				[
	a Type I		• •	Тур		•	•			Type III - Other	
e		•	t the organization is not		•	•	•		•		
		•	han one or more publicly		-				9(a)(1) or s	ection 509(a)(2)	
f	_		ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III			_
		rganization, check th								L.	_
g			organization accepted ar			•		• •		r	_
	• • •	•	rectly controls, either al	lone or tog	ether with	persons c	lescribed	ın (ıı) and (III) below,	Yes No	_
	the gove	erning body of the si	upported organization?							11g(ı)	
	(ii) A family	member of a persor	n described in (i) above?	•						11g(ii)	_
	(iii) A 35% d	controlled entity of a	person described in (i) o	or (II) above	∍ ?					11g(iii)	_
h	Provide the fo	ollowing information	about the organizations	the organ	ization sup	oports.					
(i) Name	of supported	(ii) EIN	(iii) Type of organization			(v) Did you		(vi) Is organizati	the	(vii) Amount of	
orga	anization		(described on lines 1-9		sted in your document?			(i) organiz U.S	ed in the	support	
			above or IRC section						.——		
			(see instructions))	Yes	No	Yes	No	Yes	No		
									 		_
				ļ							
				<u> </u>							_
								[
									<u> </u>	<u></u>	
					ĺ			[
				<u> </u>					<u> </u>		
					j				1		
					Í			L			
otal									1		

	(Complete only if you checke	d the box on line 5	5, 7, or 8 of Part I)	·			
_	ction A. Public Support		····				
	endar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
2	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge	i					
4	Total. Add lines 1 · 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public Support. Subtract line 5 from line 4						
Se	ction B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
-	Amounts from line 4	·				 	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10						
12		ata (see instructi	L	l		12	· · · · · · · · · · · · · · · · · · ·
	First five years. If the Form 990 is for	•	•	d fourth or fifth t	ax vear as a sectio		
	organization, check this box and stor		3 mot, 0000m a , tim	a, 1001111, 01 111111	an your as a soon	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	▶[_]
Se	ction C. Computation of Publ		rcentage				
14	Public support percentage for 2008 (ine 6, column (f) d	ivided by line 11, o	column (f))		14	%
15	Public support percentage from 2007	Schedule A, Part	IV-A, line 26f			15	%
16a	33 1/3% support test - 2008. If the c	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or i	more, check this bo	x and
	stop here. The organization qualifies		•				▶□
t	9 33 1/3% support test - 2007. If the				l line 15 is 33 1/3%	6 or more, check th	is box
	and stop here. The organization qual	•	• •				▶
178	10% -facts-and-circumstances tes	_					
	and if the organization meets the "fact meets the "facts-and-circumstances"			·	· ·	irt IV how the organ	ization
,	10% -facts-and-circumstances tes	•	•	• •	=	17a, and line 15 is	10% or
•	more, and if the organization meets the	-					
	organization meets the "facts-and-circ				•		▶□
18	Private foundation. If the organization		-		-		s >

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	509,303.	879,580.	948,020.	749,486.	504,048.	3590437.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	102,640.	101,500.	103,517.	122,842.	116,031.	546,530.
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b	102,640.	101,500.	103,517.	122,842.	116,031.	546,530.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on			1			
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11, and 12)				<u> </u>		4136967.
14 First five years. If the Form 990 is fo	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	ation,
check this box and stop here						
Section C. Computation of Publ	ic Support Pe	rcentage				
15 Public support percentage for 2008 (line 8, column (f) d	ivided by line 13, o	olumn (f))		15	<u>86.79 %</u>
16 Public support percentage from 2007	Schedule A, Part	IV-A, line 27g			16	87.93 %
Section D. Computation of Inve	stment Incom	e Percentage				
17 Investment income percentage for 20	008 (line 10c, colur	nn (f) divided by lir	ne 13, column (f))		17	<u>13.21 %</u>
18 Investment income percentage from					18	12.62 %
19a 33 1/3% support tests - 2008. If the	organization did n	ot check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box a	nd stop here. The	organization qual	fies as a publicly s	supported organiz	ation	$\triangleright \mathbf{X}$
b 33 1/3% support tests - 2007. If the						and
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization			•	· · · · ·	_	▶□
					edule A (Form 99	0 or 990-EZ) 200
					•	•
832023 12-17-08						
-						

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number 55-0690434 WEST VIRGINIA BAR FOUNDATION INC.

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accou	nts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6		
		(a) Donor advised funds	(b) Fund	ds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	ised funds	
	are the organization's property, subject to the organization's			Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds may b	e used only	
	for charitable purposes and not for the benefit of the donor of			Yes No
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990,	Part IV, line 7	
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)		
	Preservation of land for public use (e.g., recreation or	pleasure) Preservation of an h	istorically impo	ortant land area
	Protection of natural habitat	Preservation of certi	fied historic sti	ructure
	Preservation of open space			
2	Complete lines 2a-2d if the organization held a qualified cons	servation contribution in the form of a co	nservation eas	ement on the last day
	of the tax year			
	•			Held at the End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
c	Number of conservation easements on a certified historic sti	2c		
d	Number of conservation easements included in (c) acquired	2d		
3	Number of conservation easements modified, transferred, re	ne organization	during the taxable	
	vear▶		J	-
4	Number of states where property subject to conservation ea	sement is located		
5	Does the organization have a written policy regarding the pe		and	
-	enforcement of the conservation easements it holds?	.		Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, a	and enforcing easements during the year	>	
7	Amount of expenses incurred in monitoring, inspecting, and			
8	Does each conservation easement reported on line 2(d) abo			
•	and section 170(h)(4)(B)(ii)?	,		Yes No
9	In Part XIV, describe how the organization reports conservat	tion easements in its revenue and expens	se statement, a	and balance sheet, and
•	include, if applicable, the text of the footnote to the organiza			
	conservation easements			
Pai	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or 0	Other Simil	ar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8		
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and	balance sheet	works of art, historical
	treasures, or other similar assets held for public exhibition, e			
	the footnote to its financial statements that describes these			
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and bala	ance sheet wor	ks of art, historical treasures,
	or other similar assets held for public exhibition, education,			
	these items			
	(i) Revenues included in Form 990, Part VIII, line 1		>	\$
	(ii) Assets included in Form 990, Part X		>	\$ \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financ		
-	the following amounts required to be reported under SFAS		_ · ·	
а	Revenues included in Form 990, Part VIII, line 1	3	>	\$
-	Assets included in Form 990, Part X		.	\$ \$
-	· · · · · · · · · · · · · · · · · · ·		-	
LHA	For Privacy Act and Paperwork Reduction Act Notice, se	e the Instructions for Form 990.		Schedule D (Form 990) 2008

		RGINIA BAR	FOUNDATIO	N, INC	•		<u> 55-06</u>	90434	1 Page 2
Pai	rt III Organizations Maintaining C	Collections of A	rt, Historical Tr	easures, c	or Othe	r Simila	r Asse	ts (conti	nued)
3	Using the organization's accession and other	er records, check any	y of the following tha	at are a signif	cant use	of its colle	ection ite	ms (chec	k all
	that apply)		,						
а	Public exhibition	C	_	hange progra					
þ	Scholarly research	€	e Other						
С	Preservation for future generations								
4	Provide a description of the organization's c			-			se in Par	t XIV.	
5	During the year, did the organization solicit of				er sımılar	assets	_	_	
	to be sold to raise funds rather than to be m							Yes	No
Pai	Trust, Escrow and Custodia	_	Complete if organ	ization answe	ered "Yes	s" to Form	990, Par	t IV, line 9	a, or
	reported an amount on Form 990, Pa								
1a	Is the organization an agent, trustee, custod	lian or other intermed	diary for contribution	ns or other as	sets not	ıncluded	_	٦	_
	on Form 990, Part X?						<u> </u>	」Yes	∟_ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing table						
						 		Amount	
	Beginning balance					1c			
d	Additions during the year					1d			
e	Distributions during the year					1e	 -		
1	Ending balance	000 D 4V I	040			1f		1	<u></u>
	Did the organization include an amount on F		217				I	」 Yes	∟_ No
Pai	If "Yes," explain the arrangement in Part XIV t V Endowment Funds. Complete		arad "Vas" ta Form	000 Port IV I	uno 10				
1 41	Endowment i unus. Complete		1			A) Thron w	are book	(a) Four	warn back
4	Domining of year belongs	(a) Current year	(b) Prior year	(c) Two year	SDACK	d) Three ye	ars back	(e) rour	years back
1a	Beginning of year balance								
D	Contributions								
ن	Investment earnings or losses Grants or scholarships			 					
u	Other expenditures for facilities			 					
e	·								
	and programs Administrative expenses								
١ _	End of year balance			 					
y	•	L		l	<u> l</u> .				
2	Provide the estimated percentage of the year Board designated or quasi-endowment	ir end balance neld a	45 %						
a b	Permanent endowment								
0									
33	Are there endowment funds not in the posse	· ·	ation that are hold a	and administe	red for th	ne organiz	ation		
Ja	by	sssion of the organiz	ation that are neig a	ina agriiinista	100 101 11	io Organiza	20011	Γ	Yes No
	(i) unrelated organizations							3a(i)	105 110
	(ii) related organizations							3a(iı)	
h	If "Yes" to 3a(ii), are the related organization	s listed as required o	on Schedule R?					3b	
4	Describe in Part XIV the intended uses of the	•						(00)	
_	t VI Investments - Land, Building). Part X. line	10				-
	Description of investment	(a) Cost or c		t or other		preciation	,	(d) Book	value
	Social Common	basis (investr	1 7 7	(other)	(0, 0			(=, ====	
	Land	101,						101	1,500.
	Buildings	643,			1	05,20	7.		7,865.
	Leasehold improvements								
	Equipment								
	Other								
	I. Add lines 1a-1e (Column (d) should equal F	orm 990, Part X, colu	ımn (B), line 10(c))					639	365.

Schedule D (Form 990) 2008

under FIN 48

	dule D	(Form 990) 2008 WEST VIRGINIA BAR FOUNDATION (Form 990) 2008 WEST VIRGINIA BAR FOUNDATION (Form 990) 400 (Form			atomer	te	55-(<u>0690434</u>	Page 4
		· · · · · · · · · · · · · · · · · · ·	riiiai	iciai Si		113		550	,146.
1 2		revenue (Form 990, Part VIII, column (A), line 12) expenses (Form 990, Part IX, column (A), line 25)			2				,318.
3		s or (deficit) for the year Subtract line 2 from line 1			3				$\frac{7310.}{172.}$
4		nrealized gains (losses) on investments			4				1 1 1 4 0
5		red services and use of facilities			5				
6		tment expenses			6	-			
7	Prior p	period adjustments			7				
8	Other	(Describe in Part XIV)			8				
9	Total	adjustments (net) Add lines 4-8			9				0.
10		s or (deficit) for the year per financial statements. Combine lines 3 and 9			10				,172.
		Reconciliation of Revenue per Audited Financial Statemer	nts w	ith Rev	enue p	er K	l — г		070
1		revenue, gains, and other support per audited financial statements					1	620	,079.
2		nts included on line 1 but not on Form 990, Part VIII, line 12	ا م	ſ					
a		nrealized gains on investments red services and use of facilities	2a_	 			} }		
b		red services and use of facilities renes of prior year grants	2b 2c	 					
c d		(Describe in Part XIV)	2d		61,9	२ २			
e		nes 2a through 2d	Zu	L	01,5	<u> </u>	2e	61	,933.
3		act line 2e from line 1					3		,146.
4		nts included on Form 990, Part VIII, line 12, but not on line 1:							7-201
a		ment expenses not included on Form 990, Part VIII, line 7b	4a						
b		(Describe in Part XIV)	4b						
С	Add lı	nes 4a and 4b					4c		0.
5_	Total	revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)					5	558	,146.
Par	t XIII	Reconciliation of Expenses per Audited Financial Stateme	ents V	Vith Ex	penses	per	Retu		
1	Total	expenses and losses per audited financial statements					1	650	<u>,251.</u>
2	Amou	nts included on line 1 but not on Form 990, Part IX, line 25	1						
а	Donat	ed services and use of facilities	_2a	<u> </u>					
b	•	year adjustments	2b						
¢	Losse	s reported on Form 990, Part IX, line 25	2c						
d		(Describe in Part XIV)	2d	L	61,9	33.			
е		nes 2a through 2d					2e		<u>,933.</u>
3		act line 2e from line 1					3	588	<u>,318.</u>
4		nts included on Form 990, Part IX, line 25, but not on line 1	1 _	I					
		tment expenses not included on Form 990, Part VIII, line 7b	4a						
		(Describe in Part XIV)	_ 4b	L					0
		nes 4a and 4b					4c	500	<u>0.</u> ,318.
		expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) Supplemental Information					5		, 510.
		his part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,	lines	1a and 4	Part IV III	nes 1	h and 2	Ph Part V line	4 Part
		ne 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b.	, 111103	ra ario 4,	i ditiv, iii	1103 11	0 4114 2	.b, i ait v, iii) -1, 1 Lit
,, . u		to of that the mode and the fall that the mode and the							
PAF	RT X	II, LINE 2D - OTHER ADJUSTMENTS:							
<u>RE1</u>	<u>IAT</u>	EXPENSES NETTED AGAINST INCOME							
<u>FUI</u>	NDRA	<u>ISING EVENTS EXPENSE NETTED AGAINST INC</u>	COME						
			•						
PAF	RT X	III, LINE 2D - OTHER ADJUSTMENTS:							
BEN	ተ ፈጥፒ	EXPENSES NETTED AGAINST INCOME							
<u> </u>	4 T WTT	LAT BROED METTED AGAINST INCOME			_				
<u>FU1</u>	IDRA	ISING EVENTS EXPENSE NETTED AGAINST INC	COME	<u> </u>			C-1: ·	ula D./F	000) 0000
							Sched	ule D (Form	55U) 2008

Schedule D (Form 990) 2008 Part XIV Supplemental Info	WEST VIRGINIA BAR	FOUNDATION,	INC.	55-0690434 Page 5
Part XIV Supplemental Info	rmation (continued)			
PART XIII, LINE 4B	- OTHER ADJUSTMENT	<u>S:</u>		
ROUNDING				
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<u> </u>				

SCHEDULE L

(Form 990 or 990-EZ)

Transactions with Interested Persons

► Attach to Form 990 or Form 990-EZ.

To be completed by organizations that answered

OMB No. 1545-0047

"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, lines 38a or 40b.

Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** WEST VIRGINIA BAR FOUNDATION, INC. 55-0690434 Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only) To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) Corrected? 1 (a) Name of disqualified person (b) Description of transaction Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (f) Approved (a) Name of interested (c) Original principal (b) Loan to or from (g) Written (d) Balance due (e) In by board or agreement? person and purpose the organization? default? ămount cómmittee? To From Yes No Yes No Yes No Total Part III Grants or Assistance Benefiting Interested Persons. To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27

(a) Name of interested person (c) Amount of grant or type (b) Relationship between interested person and of assistance the organization

Business Transactions Involving Interested Persons. To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 28a, 28b, or 28c (e) Sharing of (c) Amount of (d) Description of (a) Name of interested person (b) Relationship between interested òrganızatıön's person and the organization transaction transaction revenues? No 114,063 RENTAL OF ALL BOARD MEMBERS OF THE OBOARD MEMBERS ARE X

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

Schedule L (Form 990 or 990-EZ) 2008

SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS

SCHEDULE O

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service

832211 12-18-08 ➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Employer identification number Name of the organization WEST VIRGINIA BAR FOUNDATION, INC. 55-0690434 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: CITIZENS. FORM 990, PART VI, SECTION A, LINE 2: THE BOARD MEMBERS ARE LAWYERS THAT HAVE ONGOING CASES IN WHICH THEY WORK ON TOGETHER. FORM 990, PART VI, SECTION A, LINE 4: THE BYLAWS WERE AMENDED TO UPDATE CERTAIN OPERATING ASPECTS TO MORE CLOSELY ALIGN WITH THE ORGANIZATIONS MISSION FORM 990. PART VI. SECTION A. LINE 6: THE ORGANIZATION HAS MEMBERS OF THE NOT-FOR-PROFIT CORPORATION. FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS OF THE ORGANIZATION HAVE THE RIGHT TO PARTICIPATE IN THE ELECTION OF THE GOVERNING BODY MEMBERS. FORM 990, PART VI, SECTION A, LINE 7B: THE MEMBERS HAVE THE RIGHT TO ELECT THE GOVERNING BODY MEMBERS WHO MAKE THE NECESSARY DECISIONS. FORM 990, PART VI, SECTION A, LINE 10: FORM 990 IS REVIEWED BY THE AUDIT COMMITTEE AND THEN REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS BEFORE BEING FILED. FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION DISCUSSES ANY POTENTIAL CONFLICTS WITH ITS BOARD MEMBERS AT ITS REGULAR MEETINGS AND LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008

SCHEDULE O

(Porm 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Employer identification number Name of the organization 55-0690434 WEST VIRGINIA BAR FOUNDATION, INC. REQUIRES ANY CONFLICTS TO BE DISCLOSED ON A CONTINUING BASIS. FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS APPROVES THE SALARY AND BENEFITS OF THE EXECUTIVE DIRECTOR BY A BOARD VOTE. FORM 990, PART VI, SECTION C, LINE 19: THE WV BAR FOUNDATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE. FINANCE COMMITTEE OF BOARD OF DIRECTORS SELECTS INDEPENDENT_AUDITOR AND REVIEWS AND APPROVES AUDIT REPORT. SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: ALL BOARD MEMBERS OF THE ORGANIZATION (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: BOARD MEMBERS ARE LAWYERS REQUIRED TO BE MEMBERS OF THE WV STATE BAR (C) AMOUNT OF TRANSACTION \$ 114063. (D) DESCRIPTION OF TRANSACTION: RENTAL OF OFFICE SPACE (E) SHARING OF ORGANIZATION REVENUES? = NO

Employer identification number 55–0690434 2008 Open to Public Inspection OMB No 1545-0047 Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 See separate instructions. Related Organizations and Unrelated Partnerships WEST VIRGINIA BAR FOUNDATION, INC. Identification of Disregarded Entities Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) Part

(A) Name, address, and EIN of disregarded entity	(B) Pnmary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
Part II Identification of Related Tax-Exempt Organizations	ations				
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
WV STATE BAR - 55-6000946 2006 KANAWHA BOULEVARD, EAST CHARLESTON WV 25311-2204	RENTAL OF OFFICE SPACE BY THE WV STATE BAR	WEST VIRGINIA	QUASI GOVERNMENT ORG		THE ORGANIZATIONS SERVE AS INDEPENDENT ENTITIES WITH CERTAIN COMMON MEMBERS,
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions f	uce, see the Instructions for Form 990.	Q.			Schedule R (Form 990) 2008

Part III Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or	(C) (D) Legal domicile Orect controlling entity	(E) Predominant income (related, investment,	(F) Share of total Income	(G) Share of end-of-year	(H) Disproportion-	Code V-UBI	(J) General or managing
		foreign country)	•			assets	Yes No	20 of Schedule K-1 (Form 1065)	Yes No
							_		
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust	ganizations Taxable as a Cor	rporation or	Trust						
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Name, address, and EIN of related organization	ctivity	Legal domicile (state or foreign country)	olling	<u>\$</u> 80	Share of total income	Share of Pend-of-year cassets	Ψ 🛣
		-					
							-
	•			,			
							_
832162 12-23-08						Schedule R (Form 990) 2008	m 990) 2008

Transactions With Related Organizations Part V

Note. Complete line 1 if any entity is listed in Parts II, III, or IV		Yes	2 N
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		×
b Gift, grant, or capital contribution to other organization(s)	1b		×
c Gift, grant, or capital contribution from other organization(s)	10		×
d Loans or loan guarantees to or for other organization(s)	1d		X
e Loans or loan guarantees by other organization(s)	1e		×
f Sale of assets to other organization(s)	#		×
g Purchase of assets from other organization(s)	1g		×
h Exchange of assets	ŧ		×
i Lease of facilities, equipment, or other assets to other organization(s)	Ę	×	
j Lease of facilities, equipment, or other assets from other organization(s)	ij		×
k Performance of services or membership or fundraising solicitations for other organization(s)	¥		×
l Performance of services or membership or fundraising solicitations by other organization(s)	11		×
m Sharing of facilities, equipment, mailing lists, or other assets	1m		×
n Sharing of paid employees	1n		×
o Reimbursement paid to other organization for expenses	9	×	
p Reimbursement paid by other organization for expenses	10		×
q Other transfer of cash or property to other organization(s)	5	\dashv	×
r Other transfer of cash or property from other organization(s)	+		×
9 If the answer to any of the above is "Vas " see the instructions for information on who miles from list complete this line including covered relationshine and transaction thresholds			

(A)	(B)	(C)
Name of other organization(s)	Transaction type (a-r)	Amount involved
(1) WEST VIRGINIA STATE BAR	Н	114,063.
(2) WEST VIRGINIA STATE BAR	0	140,241.
(4)		
(5)		
(9)		
832163 12-23-08	Sch	Schedule R (Form 990) 2008

55-0690434 Page 4

Schedule R (Form 990) 2008 WEST VIRGINIA BAR FOUNDATION, INC.

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

Yes General or managing partner? Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) 9 Dispropor-tionate allocations? Yes No Œ Share of end-of-year assets Are all partners section 501(c)(3) organizations? Yes 0 Legal domicile (state or foreign country) Primary activity Name, address, and EIN of entity

Schedule R (Form 990) 2008

Form **8868** (Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev 4-2009)

	rou are filing for an Automatic 3-Month Extension, complete only Part I and check this box		ightharpoons X
	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this		
Do no	ot complete Part II unless you have already been granted an automatic 3-month extension on a previously fil	ed For	m 8868
Par	Automatic 3-Month Extension of Time. Only submit original (no copies needed)		
\ cor	rporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and com-	plete	
	l only		>
	her corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an	exten	sion of time
	nicome tax returns	CALON	
noted not a rou m	tronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronicautomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or connust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file is gov/efile and click on e-file for Chanties & Nonprofits.	cally ıf nsolıda	(1) you want the additional ated Form 990-T Instead,
ype	or Name of Exempt Organization	Empl	oyer identification number
,,	WEST VIRGINIA BAR FOUNDATION, INC.	5	5-0690434
ile by lue dat ling yo	the te for Number, street, and room or suite no. If a P.O box, see instructions our 2008A KANAWHA BOULEVARD, EAST		
eturn nstruci	See		
Chec	ck type of return to be filed (file a separate application for each return).		
		700	
ېھ	Form 990		
={	Form 990-BL		
\dashv	, , , , , , , , , , , , , , , , , , , ,		
	Form 990-PF		
	THOMAS R. TINDER		
Th	THOMAS R. TINDER ne books are in the care of > 2008A KANAWHA BLVD. EAST - CHARLESTON.	WV	25311-2204
	ne books are in the care of > 2008A KANAWHA BLVD, EAST - CHARLESTON,	WV	25311-2204
Te	ne books are in the care of 2008A KANAWHA BLVD, EAST - CHARLESTON, elephone No (304) 343-9823 FAX No	WV	25311-2204
Te If t	the books are in the care of ► 2008A KANAWHA BLVD, EAST - CHARLESTON, elephone No ► (304) 343-9823 FAX No ► the organization does not have an office or place of business in the United States, check this box		
Te If t	the books are in the care of 2008A KANAWHA BLVD, EAST - CHARLESTON, elephone No (304) 343-9823 The organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	ıs ıs fo	► □ r the whole group, check this
Te If t	the books are in the care of 2008A KANAWHA BLVD, EAST - CHARLESTON, elephone No (304) 343-9823 FAX No the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the	ıs ıs fo	the whole group, check this
Te If to If tox	the books are in the care of 2008A KANAWHA BLVD, EAST - CHARLESTON, elephone No (304) 343-9823 The organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	is is fo	the whole group, check this
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Te If to If tox	the books are in the care of ▶ 2008A KANAWHA BLVD, EAST - CHARLESTON, elephone No ▶ (304) 343-9823 FAX No ▶	is is for memb	r the whole group, check this ers the extension will cover
Te If to If tox	the books are in the care of ▶ 2008A KANAWHA BLVD, EAST - CHARLESTON, elephone No ▶ (304) 343-9823 The organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unterpretation is for the organization's return for: ▶ calendar year or	is is for memb	r the whole group, check this ers the extension will cover
Te If to If to If to	the books are in the care of ▶ 2008A KANAWHA BLVD, EAST - CHARLESTON, elephone No ▶ (304) 343-9823 FAX No ▶	is is for memb	r the whole group, check this ers the extension will cover
Te if 1 ox 1	the books are in the care of ▶ 2008A KANAWHA BLVD, EAST - CHARLESTON, elephone No ▶ (304) 343-9823 The organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unterpretation is for the organization's return for and or	is is for memb	r the whole group, check this ers the extension will cover The extension
Te	The books are in the care of 2008A KANAWHA BLVD, EAST - CHARLESTON, selephone No (304) 343-9823 The organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If it is for part of the group, check this box	is is for memb	r the whole group, check this ers the extension will cover The extension
Te	The books are in the care of ▶ 2008A KANAWHA BLVD, EAST - CHARLESTON, belephone No ▶ (304) 343-9823 The organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the lift it is for part of the group, check this box ▶ and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time united FEBRUARY 15, 2010, to file the exempt organization return for the organization named a is for the organization's return for: ▶ calendar year or calendar year or tax year beginning JUL_ 1, 2008, and ending JUN_ 30, 2009 If this tax year is for less than 12 months, check reason Initial return Final return If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	is is for memb	r the whole group, check this ers the extension will cover
Te	The books are in the care of 2008A KANAWHA BLVD, EAST - CHARLESTON, selephone No (304) 343-9823 The organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If it is for part of the group, check this box I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unterpretation and the organization's return for the organization named a second state of the organization's return for or or calendar year or calendar year or tax year beginning JUL1 , 2008 , and ending JUN 30 , Total return Final return	is is formemb	r the whole group, check this ers the extension will cover The extension Change in accounting period
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