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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public

Department of the Treasury

benefit trust or private foundation)

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<u>A</u> [For the	2009 cal	_	ear, or tax yea						nd en						
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□ A	mended	i return	tions.	PRINCETO	N		W	<u></u>	2474	40-56	64	G Gross	recei	pts \$		656,796
A	pplicatio	on pending	FN	lame and addr	ress of princ	ipal officer:					H(a) is t	this a group	returi	n for affili	ates?Y	es X No
			CHARL	ES T. MATH	IENA HC 7	1 BOX 92.	PRINCETON	I, WV 2	4740		H(b) Are	e ali affiliate	es ındı	uded?	ΓTΥ	es No
I T	ay-eyen	mpt status		01(c) (3) ◀ (inser] 4947(a)(1) o		527			'No," attach			tructions)	
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		rganization		orporation	Trust	Association	Other >			_ Year	of forma	ation 1	992	M Sta	ite of legal domi	cile WV
P	art I		mmary									_				
	1	Briefly d	lescribe	the organiza	ition's miss	sion or mos	t significant a	ctivities	SEE	ATT	ACHE	<u>D</u>				
m																
auc														- -		
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36	2						nued its oper							f its net	t assets.	
Activities & Governance	3			•	_		(Part VI, line	-						3		12
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弃	5												.	5		4
ĕ	6			f volunteers (<u></u> .]	6		30
	7a						AIT COFEMP		12				.	7a		
	b	Net unre	elated bu	usiness taxa	ble income	from Gorn	990-T, line S	3 4	10:1	<u> </u>	<u></u>	· · ·		7b		
						101	JUN 0 7 20	างก	S-080			Prior Ye			Current \	
as	8			nd grants (Pa		, ,,,,,, mt , ,	THM O & St	JIU	%	•				,186		326,815
Š	9			e revenue (P					<u>د ۱</u>		ļ			,873		318,800
Revenue	10			me (Part VIII				IT					204	,875		11,181
Œ	11						c, 9c, 10c, a		.	•						
	12						VIII, column (A						1,303			656,796
	13						(A), lines 1–3						<u>13</u>	,500		11,750
	14		•		•		A), line 4).				 					
8	15						(Part IX, colu				<u> </u>		70	,897		82,704
Expenses	16a						, line 11e) .			•	<u> </u>					C 7 4 6 5
X	b			g expenses (sky Taganika	· 10 10 10 10 10 10 10 10 10 10 10 10 10			- 1	
	17						1d, 11f–24f) .				ļ			,965		884,845
:	18						t IX, column (A), line	25)		ļ			,362		979,299
<u> </u>	19	Revenu	e less e	xpenses. Su	btract line	18 from line	<u> 12</u>	<u></u>	<u> </u>	·	 			,572		-322,503
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See Bala	20										$\vdash \!\!\!\!-$		2,681			2,303,441
Net Assets or Fund Balances	21 22		•		•						 			699		4,910,346
					. Subtract	line 21 from	n line 20	· · · ·	<u> </u>		L		/,/15	,598		<u>7,393,095</u>
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Sig			Signature	e of officer	· · · · · · · · · · · · · · · · · · ·			-					Date		<u>, </u>	
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May	the IF				e preparer	shown aho	ve? (see inst	ructions)			•			. Yes	No
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(HTA)		y Act and	raperw	OIK KEGUCUOI	II ACT NOUC	e, 500 the S	eparate instru	cuons.					-	11	-20 Form	990 (2009)
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		$\overline{}$	
	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,	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			ı
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	Х	***************************************
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			1100
	Schedule D, Part VI.			, 10 g
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
•	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	7.5		-
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that			100
	addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.	1.	囊	
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		***	
	Schedule D, Parts XI, XII, and XIII.	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax Yes No		-	
	, contracting a			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? 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			l
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15_	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	4.0		
47	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
4.5	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		x
20	If "Yes," complete Schedule G, Part III	19 20	 	÷
/ •1	The the colstand the site of the transfer of the colling of the App in Proposition Note of the Colling of the C			. ^

Form 990 (2009)

Part IV **Checklist of Required Schedules** (continued) No Yes Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Х Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated 23 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 lines 24a Х 24b through 24d and complete Schedule K. If "No," go to line 25 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction Х 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 25b Х Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or Х 26 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor, or a grant selection committee member, or to a person related to such an individual? 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b X c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Х 28c 29 Х Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 Х 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Х 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? X 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, Χ 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 Х Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related Х 36 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 Х 37 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and

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

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance		Tv.	·
4.	Fate-the number reported in Day 2 of Form 1006. Applied Summary and Transmitted of		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		, x0x (*	٠, ا
_	U.S. Information Returns. Enter -0- if not applicable		Ψ.	. 1
b	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	- · · ·		
С	gaming (gambling) winnings to prize winners?	40	X	
2-	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	. 1c	 ,,^ _	
2a	Statements, filed for the calendar year ending with or within the year covered by this return .	4	, `	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	. 2b	X	
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	-	1	
	instructions)	1 1	6. 8. 3	14
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	417	18. N	
•	this return?	. 3a	1	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		İ	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			ļ
	account)?	4a		X
b	If "Yes." enter the name of the foreign country: ▶	\$, Q.F. q. 2	1:	5 14 6
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank	λον	.	100
	and Financial Accounts.	2.19	1 4 2	1 .5 .5
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	. <u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		<u> </u>	<u> </u>
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding		İ	
	Prohibited Tax Shelter Transaction?	. <u>5c</u>	ļ	Ļ
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	i		ŀ
	organization solicit any contributions that were not tax deductible?	. <u>6a</u>	<u> </u>	<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	. 6b	4	.
7	Organizations that may receive deductible contributions under section 170(c).	3 2		.
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	. 7a	┿	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	 	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
_	required to file Form 8282?	7c	27-2	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	. بر الله الله الله الله الله الله الله الل	89	
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	7e		X
	benefit contract?		+	x
1	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	. 7g	X	 ^
g h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	· '9	+ ^	1
"	required?	7h	X	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	£ 48 4	(, if) ij	
Ū	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	4 609 '4 1 1		4 y .
	organization, have excess business holdings at any time during the year?	. 8		
9	Sponsoring organizations maintaining donor advised funds.	3.33		
а	Did the organization make any taxable distributions under section 4966?			
b	Did the organization make a distribution to a donor, donor advisor, or related person?			
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:	1 -32	1	
а	Gross income from members or shareholders	- hio .,	٠. ,	'
b	Gross income from other sources (Do not net amounts due or paid to other sources	, , , ,	1	1.
	against amounts due or received from them)	<u>`</u>		·
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	. 12a	ļ	

Part'VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sect	ion A. Governing Body and Management			 -	,
			<u> </u>	Yes	No
1a	Enter the number of voting members of the governing body	1a	12	1	
b	Enter the number of voting members that are independent		12	1246	ľ
2	Did any officer, director, trustee, or key employee have a family relationship or a business rel			-	<u> </u>
_	any other officer, director, trustee, or key employee?		2	X	<u> </u>
3	Did the organization delegate control over management duties customarily performed by or u			1	ļ
	supervision of officers, directors or trustees, or key employees to a management company or	•	3	 	X
4	Did the organization make any significant changes to its organizational documents since the prior Form 9		4		X
5	Did the organization become aware during the year of a material diversion of the organization				X
6	Does the organization have members or stockholders?		6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or r				١
	of the governing body?			├	X
b	Are any decisions of the governing body subject to approval by members, stockholders, or ot		. 7b	W 6 7	X
8	Did the organization contemporaneously document the meetings held or written actions under	rtaken during	745 K	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	9.0%
	the year by the following:		4 - 1- i-		<u> </u>
а	The governing body?		_8a_	X	<u> </u>
þ	Each committee with authority to act on behalf of the governing body?		8b	X	└
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot				
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedul		9a		X
	ion B. Policies (This Section B requests information about policies not required by th	e Internal			
Reve	enue Code.)				
				Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		. 10a	 	X
b	If "Yes," does the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with those of the organization		. 10ь		
11	Has the organization provided a copy of this Form 990 to all members of its governing body to				
	form?	-	. 11		X
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990		6 187 - 1624		٠٠ أما
12a				X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests				
	rise to conflicts?	_	12b	_ '	X
С	Does the organization regularly and consistently monitor and enforce compliance with the po	licy? If "Yes,"		T -	
	describe in 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?			X	
15	Did the process for determining compensation of the following persons include a review and		12 g	, , , , , , , , , , , , , , , , , , ,	
	independent persons, comparability data, and contemporaneous substantiation of the deliber		?		· "
а	The organization's CEO, Executive Director, or top management official			X	
b	Other officers or key employees of the organization		4		Г
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		جي ۾ چين	3 . 4 . 4 .	i4 ^
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar a		Ven - 10	Se mois	1 (2) 14 4 5
	with a taxable entity during the year?	-	16a	1	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization		7	1.5	
-	its participation in joint venture arrangements under applicable federal tax law, and taken ste		1. 0] _ '
	the organization's exempt status with respect to such arrangements?	_	. 16b	1	
Sect	ion C. Disclosure	<u> </u>	1,100		_
17	List the states with which a copy of this Form 990 is required to be filed ► WV				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	nd 990-T (501(c)(3)	s only)		
	available for public inspection. Indicate how you make these available. Check all that apply.	222 . (55.(5)(6)			
	Own website Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing docui	ments conflict of in	terest		
	policy, and financial statements available to the public.	.,orno, commot or m	.5.50		
20	State the name, physical address, and telephone number of the person who possesses the b	noks and records o	of the		
	organization: RICHARD L. DAVIS 91 RUPGESS ST. RRINGETON, MAY 24740		7551		

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. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees See instructions for definition of "key employee."
- 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)			10				(D)	(E)	(F)
		Position (check all that apply)					N)		1	, ,
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee		Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
CHARLES T MATHENA PRESIDENT	2.	Х		X						
RICHARD L. DAVIS TREASURER	1.	Х		x						
KENDRA BOGGESS SECRETARY	02	х		х						
SHERRI B ROSS VICE PRESIDENT	0.2	Х		х						•
BARBARA CLEMSON DIRECTOR	0.2	Х								
JOHN FRAZIER DIRECTOR	0.2	Х								
EARL GOODWIN DIRECTOR	0.2	X								
THOMAS S. LILLY DIRECTOR	0.2	X								
MARQUETTA K. MATHENA DIRECTOR	2.	Х								
KENNETH R. REEVES DIRECTOR	0.2	Х								
SANTINA ST. JOHN DIRECTOR	0.2	Х								
ERNEST TOLLEY DIRECTOR	0.2	Х								
JENNIFER S. TURNER EXECUTIVE DIRECTOR	50.			x		×		36,000		
								-		
	-									

Pa	t VII Section A. Officers, Directors, Tru	ustees, Key Em	ploy	ees,	and	Hig	hest	Co	mpensated Em	ployees (conti	nued)
	(A)	(B)			(0	C)			(D)	(E)	(F)
	Name and title	Average	Po	sition		k all ti	hat ap		Reportable	Reportable	Estimated
		hours per week	o la	Instit	Officer	₹	emp	Former	compensation from	compensation from related	amount of other
			Individual trustee or director	nstitutional	띡	Key employee	est o	<u>ಥ</u>	the organization	organizations (W-2/1099-MISC	
			T tag	al tr		oyee	ª		(W-2/1099-MISC)		organization and related
			8	trustee			Highest compensated employee	ŀ			organizations
			<u> </u>				8	<u> </u>			
								}			
			-				╁				1
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									•		
			_	_	_	-	-				
							1				
			-	<u> </u>			 				
<u>1b</u>	Total							. ▶	36,000		1
2	Total number of individuals (including but no		se lis	ted a	bove	e) wl	ho re	ceiv	ed more than \$1	00,000 in	
	reportable compensation from the organizat	non P									Yes No
3	Did the organization list any former officer,	director or trust	ee, k	ey e	mplo	yee,	, or h	ighe	st compensated		Action to be a
	employee on line 1a? If "Yes," complete Sca	hedule J for suc	h ind	dividu	ual .	•					3 X
4	For any individual listed on line 1a, is the su										A TOTAL AND A STATE
	the organization and related organizations gindividual	greater than \$15	0,00	0? //	"Ye	s," c	ompl	ete :	Schedule J for s	uch	4 X
_			4!	 							18 18 18 18 18 18 18 18 18 18 18 18 18 1
5	Did any person listed on line 1a receive or a services rendered to the organization? If "Y										5 X
Sec	tion B. Independent Contractors	00, 00, 1,010	00								
1	Complete this table for your five highest cor	npensated inde	pend	lent o	contr	acto	rs th	at re	ceived more tha	n \$100,000 of	-
	compensation from the organization.										
	(A) Name and business a	address							(B) Description of ser	vices ((C) Compensation
											<u> </u>
							_				
								-			
2	Total number of independent contractors (in	soluding but not	limit	od to	tho	lic	tod (hov	o) who rocoived		
2	Total number of independent contractors (in more than \$100,000 in compensation from the contractors of the c	-		eu 10	1110	5 U 118	oldu i	aDOA	e, who received	(

All other revenue

Total revenue. See instructions. .

Total, Add lines 11a-11d

329,981

656,796

Part IX Statement of Functional Expenses

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

	All other organizations must complete column not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) but are not red (A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
			expenses	general expenses	expenses
1	Grants and other assistance to governments and	1			" " WAR I I A A I I I
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in	44 ===	44 =50	the constitution of the co	. , , , , , , , , , , , , , , , , , , ,
•	the U.S. See Part IV, line 22	11,750	11,/50	2 -93 - 4 - 7 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5	
3	Grants and other assistance to governments,			the season of th	
	organizations, and individuals outside the			A STATE OF THE PROPERTY OF THE	The state of the second
	U.S. See Part IV, lines 15 and 16			1. 4ml L 2 1. 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
4	Benefits paid to or for members			7. 4	1. 2. 22. 23. 23.
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	70.007	70.007		
7	Other salaries and wages	76,827	76,827		
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	5,877	5,877		
11	Fees for services (non-employees):				II.
a	Management				··
b	Legal				
C	Accounting				
d	Lobbying		A 43 (154 7)		
е	Professional fundraising services. See Part IV, line 17			I be designed from the for	
f	Investment management fees				-
9	Other		- 		
12	Advertising and promotion	21,128	21,128		
13	Office expenses	7,633	7,633		
14	Information technology				
15	Royalties				
16	Occupancy		· · · · · · · · · · · · · · · · · · ·		_
17	Travel			<u> </u>	·
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	203,776	203,776		
21	Payments to affiliates				-
22	Depreciation, depletion, and amortization	282,943			
23	Insurance	17,057	17,057		2361
24	Other expenses. Itemize expenses not	the many factors of eliminates	大 年 9 至 9 1 年 1 日 1 日 1 日 1 日 1 日 1 日 1 日 1 日 1 日		· · · · · · · · · · · · · · · · · · ·
	covered above. (Expenses grouped together	100 T B 100 T B			はきしゃく がら流
	and labeled miscellaneous may not exceed	5 6 6 8 8 8 5 V	a ve was a	2 - 3 - 3 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2	
	5% of total expenses shown on line 25 below.)	e gerte de process	, <u>, , , , , , , , , , , , , , , , , , </u>		
а	CREDIT CARD AND TICKET FEES	16,916			
b	UTILITIES	74,699			
C	PERFORMANCE FEES	161,173	161,173		
d	MAINTENANCE	14,443	14,443		
е	PROFESSIONAL SERVICES	67,623	67,623		<u> </u>
f	All other expenses	17,454	17,454		
25	Total functional expenses. Add lines 1 through 24f	979,299	979,299		
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				
		<u></u>			Form 990 (2009)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 1 2 356.444 2 237,607 3 3 4 4 Receivables from current and former officers, directors, trustees, key Fig. 18 employees, and highest compensated employees. Complete Part II of Receivables from other disqualified persons (as defined under section Thought is a 3. 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 6 7 8 Prepaid expenses and deferred charges . . . 9 9 10a 10a Land, buildings, and equipment: cost or 中部 一個 水平 西 花香柳安 Ser 16 min i a day on a garage to garage to other basis. Complete Part VI of Schedule D 10b 11,147,133 10c Less accumulated depreciation 424.373 10,875,603 1,190,231 Investments—publicly traded securities 1.177,720 11 11 12 12 Investments—other securities. See Part IV, line 11 Investments—program-related. See Part IV, line 11 13 13 14 14 15 15 12,303,441 16 Total assets. Add lines 1 through 15 (must equal line 34) 12.681.297 16 568 17 17 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 By street of the factor of the contract ·李州区中港交通選目上 A 48 Payables to current and former officers, directors, trustees, key 22 18--聚 歌剧员 節外 前 employees, highest compensated employees, and disqualified 22 4,965,131 23 4,910,307 23 Secured mortgages and notes payable to unrelated third parties . . . 24 Unsecured notes and loans payable to unrelated third parties 24 25 25 26 Total liabilities. Add lines 17 through 25. 4,965,699 4,910,346 the graph of the state of the state of Organizations that follow SFAS 117, check here ▶ and 柳 逐点成分。 Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 29 29 काल रशक्ष एवा क्षेत्र हा Organizations that do not follow SFAS 117, check here ► X and complete lines 30 through 34. 7,715,598 30 7,393,095 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds. 32 32 7,393,095 7,715,598 33 12,303,441 Total liabilities and net assets/fund balances . . . 12.681.297 34

Form 990 (2009)

Financial Statements and Reporting Part XI Yes No Accounting method used to prepare the Form 990: X Cash Accrual Other 1 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? 2a 2a 2b If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both. . . . X Separate basis Consolidated basis Both consolidated and separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in 3a X If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. Form 990 (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047
2009

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Employer identification number

Name of the organization

► See separate instructions.

CHA	RLES	ST CHUCK M	MATHENA II c/c	RICHARD L DAVIS						55-0	718341		
Par	t I	Reason	for Public Ch	narity Status (All org	anizatio	ns must	complete	this par	t.) Se <u>e ir</u>	<u>nstructio</u>	ns		
The o	orgar	nization is not	a private founda	ation because it is: (Fo	or lines 1 t	through 1	1, check o	only one b	oox)				
1		A church, co	nvention of chui	rches, or association o	of churche	s describ	ed in sec i	tion 170(b)(1)(A)(i).			
2		A school des	scribed in sectio	on 170(b)(1)(A)(ii). (At	tach Sche	edule E)							
3		A hospital or	a cooperative h	nospital service organi	zation des	scribed in	section '	170(b)(1)	(A)(iii).				
4			search organiza	ation operated in conju	nction wit	h a hospi	tal descrit	bed in se	ction 170	(b)(1)(A)	(iii). Ent	er the	
5		An organizat	ion operated for	the benefit of a collec	ge or univ	ersity own	ed or ope	erated by	a governi	mental ur	nit descr	ibed	
				(Complete Part II.)	atal unit d	ocaribod i	n coction	. 170/b)/4	1)/A)/ ₂ /				
6	H			ernment or governmer y receives a substanti						or from th	e gener	al nubli	ic
7	<u></u>			y receives a substanti (1)(A)(vi). (Complete f		its suppoi	t iioin a y	Jovernine	mai umi c)	e gener	ai puon	
8		A community	y trust described	l ın section 170(b)(1)(A)(vi). (C	omplete F	Part II.)						
9	X	An organizat	tion that normali	y receives: (1) more th	nan 33 1/3	3 % of its	support fr	om contri	butions, r	nembers	hip fees	, and g	ross
		support from	gross investme	ed to its exempt function ent income and unrelated a after June 30, 1975.	ted busine	ess taxabl	e income	(less sec	tion 511 t				S
10	П		•	nd operated exclusive						4).			
11	Ħ	_	•	nd operated exclusive	-	-					rv out th	e	
• •	ш	purposes of	one or more pul	blicly supported organ	izations d	escribed i	in section	509(a)(1) or section	on 509(a)	(2). See	section	on
	509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.												
	a Type I b Type II c Type III-Functionally integrated d Type III-Other												
е	\Box			y that the organization	is not co	ntrolled di	rectly or i	ndirectly	by one or	more dis	qualifie	t	
Ĭ		persons other	er than foundation	on managers and othe	r than on	e or more	publicly s	supported	organiza	itions des	cribed i	n secti	on
		-	section 509(a)(2	=									
f		If the organiz	zation received	a written determinatior	n from the	IRS that	it is a Typ	e I, Type	II, or Typ	e III supp	orting		
			, check this box										L
g				the organization acce	pted any	gift or con	tribution f	from any	of the				
		following per			- 141 1		طفان د سسطه		doooribod	l in (ii)		Yes	No
				or indirectly controls,							11g(i)	X	NO
				verning body of the su person described in (i							11g(ii)	X	
				ty of a person describe							11g(iii)		X
h				ation about the suppor									·
	Name		(ii) EIN	(iii) Type of organization	(iv) Is the c	organization	(v) Did y	ou notify	1 ' '	ls the	1 ' '	Amount	of
	i) Name of supported organization (described on lines 1–9 organization above or IRC section governing document? col (i) of your (i) organization in the organization in col (ii) organization in col (ii) organization in col (iii) else in your col (ii) organization in col (iii) else in your col (iii)												
				(see instructions))	34		sup	port?	U	<u>\$?</u>	4		
					Yes	No	Yes	No	Yes	No	<u> </u>		
							-						
				-						-	 		·- ·-
		· · · · · · · · · · · · · · · · · · ·								_			
			* 2							7 2 1	-		
- -					1 .		l '	ļ	Ι .	}	1		

Schedu	ale A (Form 990 or 990-EZ) 2009 CHARLES T C	HUCK MATHE	NA II c/o RICI	HARD L DAVIS	3	55-071834°	Page 2
Par	Support Schedule for Organi	zations Desc	ribed in Sec	tions 170(b)(1)(A)(iv) and		
	(Complete only if you checked	the box on line	e 5, 7, or 8 of	Part I.)			
	ion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization'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						
4 5	Total. Add lines 1 through 3 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)				から ない ない はい ない		
6	Public support. Subtract line 5 from line 4.	· 聖書 (五四)	4年教皇皇	رَاعُ إِنَّ الْمُواكِمُ اللَّهِ اللَّهِ اللَّهِ اللَّهِ اللَّهِ اللَّهِ اللَّهِ اللَّهِ اللَّهِ اللَّهِ اللَّ	· 100 100 100 100 100 100 100 100 100 10	は、要なる。	
Sect	ion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 8	Amounts from line 4						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10.			母於婚令一五			
12	Gross receipts from related activities, etc. (s					12	
13 Soot	First five years. If the Form 990 is for the o organization, check this box and stop here ion C. Computation of Public Suppor	<u> </u>	<u> </u>				(3)
14	Public support percentage for 2009 (line 6,			column (fl)		14	
15	Public support percentage from 2008 Sched	` '	•			15	
16a	33 1/3% support test–2009. If the organiza						k this box
	and stop here. The organization qualifies a			•			
b 17a	33 1/3% support test–2008. If the organization and stop here. The organization qualifit 10%-facts-and-circumstances test–2009.	ition did not che es as a publicly If the organiza	eck a box on ling supported orgetion did not che	ne 13 or 16a, a ganization . . eck a box on lir	nd line 15 is 33 ne 13, 16a, or 1	3 1/3% or more, 16b, and line 14	check this ▶ ☐
b	or more, and if the organization meets the "the organization meets the "facts-and-circum 10%-facts-and-circumstances test-2008. or more, and if the organization meets the "the organization meets the "facts-and-circum the organization	mstances" test. If the organiza facts-and-circu	The organizat tion did not che mstances" test	ion qualifies as eck a box on lir , check this bo	s a publicly sup ne 13, 16a, 16t x and stop h e	ported organiza o, or 17a, and lir re. Explain in P	ition. ▶ [_] ne 15 is 10% art IV how
18	Private foundation. If the organization did not ch	neck a box on line	e 13, 16a, 16b, 1	7a ,or 17b, chec	k this box and se	e instructions	▶ □

990 or 990-EZ) 2009 CHARLES T CHUCK MATHENA II c/o RICHARD L DAVIS

Support Schedule for Organizations Described in Section 509(a)(2)

	(Complete only if you checked to	<u>he box on line</u>	9 of Part I.)				
	tion A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants.")	1,218,292	1,587,514	325,151	834,186	326,815	4,291,958
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished						
	in any activity that is related to the			[
	organization's tax-exempt purpose						···.
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
5	its behalf						
•	furnished by a governmental unit to the						
	organization without charge	i		1	i	1	
6	Total. Add lines 1 through 5	1,218,292	1,587,514	325,151	834,186	326,815	4,291,958
-	Amounts included on lines 1, 2, and 3	1,210,202	1,001,011	020,10	001,100	920,010	1,20 1,000
	received from disqualified persons	262,203	41,685	131,046	134,884	153,566	723,384
_							
þ	Amounts included on lines 2 and 3 received			}			
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the			:			
_	amount on line 13 for the year	262,203	41,685	131,046	134,884	153,566	723,384
8	Public support (Subtract line 7c from	202,203	41,000		134,004	193,300	123,304
Ŭ	line 6.)	18 1 4	· 1800 - 140 - 2 - 4		t is not be now for but	bed in capitalist grant of	3,568,574
Sec	tion B. Total Support	11	3.7	1,000	S 48 E 27 W Contract	of these by a very	0,000,014
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
							·
9	Amounts from line 6	1,218,292	1,587,514	325,151	834,186	326,815	4,291,958
10a	Gross income from interest, dividends,					·	
	payments received on secunties loans, rents, royalties and income from similar]					
	sources	42,595	51 276	100,182	204,875	11,181	410,209
h	Unrelated business taxable income (less	42,595	<u>51,3</u> 76	100,162	204,073	11,101	410,209
-	section 511 taxes) from businesses			}			
	acquired after June 30, 1975						
С	Add lines 10a and 10b	42,595	51,376	100,182	204,875	11,181	410,209
11	Net income from unrelated business	,,,,,,,					
	activities not included in line 10b,				İ		
	whether or not the business is regularly						
	carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
40	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,	4 000 00=	4 000 000	405 000	4 000 004	007.000	4 700 407
44	and 12.)	1,260,887	1,638,890		1,039,061	337,996	
14	First five years. If the Form 990 is for the org	-	•		•		• •
	organization, check this box and stop here.		<u> </u>		<u> </u>	<u> </u>	<u>···▶</u>
	tion C. Computation of Public Support						
15	Public support percentage for 2009 (line 8, co					15	75.89%
<u>16</u>	Public support percentage from 2008 Schedu	ule A, Part III, li	<u>ne 15</u>	<u></u>	<u> </u>	16	76.87%
	tion D. Computation of Investment Inc			- 	· · · · · · · · · · · · · · · · · · ·		
17	Investment income percentage for 2009 (line					17	8.72%
18	Investment income percentage from 2008 Sc					18	7.09%
19a							
-	not more than 33 1/3%, check this box and s						⊳ <u>X</u>
b	33 1/3% support tests-2008. If the organization d						 -
	line 18 is not more than 33 1/3%, check this box ar	-		-		-	. ▶
20	Private foundation. If the organization did no	ot check a hov	on line 14 10s	or 10h chack	this how and o	eaa instructions	

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047 Open to Public Inspection

Schedule D (Form 990) 2009

Department of the Treasury Internal Revenue Service

(HTA)

► Attach to Form 990. ► See separate instructions.

Name	of the organization		Employer identification number
	RLES T CHUCK MATHENA II do RICHARD	LDAVIS	55-0718341
Pari	Organizations Maintaining Done	or Advised Funds or Other Similar F	unds or Accounts. Complete if
	the organization answered "Yes" to	p Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and d		
_	funds are the organization's property, subject		
6	Did the organization inform all grantees, dor		
	used only for charitable purposes and not for		
_	purpose conferring impermissible private be		
Par	Conservation Easements. Comp	lete if the organization answered "Yes	s" to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held		
	Preservation of land for public use (e.g.	, recreation or pleasure) Preservatio	n of an historically important land area
	Protection of natural habitat	Preservatio	n of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organiza	ation held a qualified conservation contrib	ution in the form of a conservation
	easement on the last day of the tax year.	·	
			Held at the End of the Tax Year
а	Total number of conservation easements .		. 2a
b	Total acreage restricted by conservation ea	sements	2b
C	Number of conservation easements on a ce	rtified historic structure included in (a)	
d	Number of conservation easements include		
3	Number of conservation easements modifie	d, transferred, released, extinguished, or	terminated by the organization
	during the tax year		
4	Number of states where property subject to		
5	Does the organization have a written policy		
	violations, and enforcement of the conserva		
6	Staff and volunteer hours devoted to monito	ring, inspecting, and enforcing conservati	on easements during the year
-	A	increasing and enforcing concentration of	anomanta during the year
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation e	asements during the year
8	Does each conservation easement reported	Lon line 2(d) above satisfy the requiremen	ate of section
0	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	on line 2(u) above satisfy the requirement	Yes No
9	In Part XIV, describe how the organization r	enorts conservation easements in its reve	enue and expense statement, and
•	balance sheet, and include, if applicable, th		
	the organization's accounting for conservati		
Par		ons of Art, Historical Treasures, or Oth	er Similar Assets.
-	Complete if the organization answere		
1a	If the organization elected, as permitted und	der SFAS 116, not to report in its revenue	statement and balance sheet works of
	art, historical treasures, or other similar ass	ets held for public exhibition, education, o	r research in furtherance of public
	service, provide, in Part XIV, the text of the		
b	If the organization elected, as permitted und		
	historical treasures, or other similar assets		search in turtherance of public
	service, provide the following amounts relat	•	~ •
	(i) Revenues included in Form 990, Part VI		
_	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of		assets for financial gain, provide the
_	following amounts required to be reported u		▶ €
a	Revenues included in Form 990, Part VIII, ii Assets included in Form 990, Part X		
b	Assets included in Form 980. P8ff A		- -

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

Schedule D (Form 990) 2009 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): а Public exhibition Loan or exchange programs b Scholarly research Other c Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not Yes | b If "Yes," explain the arrangement in Part XIV and complete the following table: Amount 1c C 1d 1e 6 2a Did the organization include an amount on Form 990, Part X, line 21? Ь If "Yes," explain the arrangement in Part XIV. Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V (a) Current year (b) Prior year (c) Two years back (d) Three years back 1a Beginning of year balance . . . Ь Contributions Net investment earnings, gains, and losses d Grants or scholarships Other expenditures for facilities 小孩 不不 and programs f Administrative expenses . . . End of year balance 2 Provide the estimated percentage of the year end balance held as: Board designated or quasi-endowment a Permanent endowment b Term endowment C Are there endowment funds not in the possession of the organization that are held and administered for the No Yes organization by: 3a(i) 3a(ii) If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIV the intended uses of the organization's endowment funds Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Part VI (a) Cost or other basis (d) Book value Description of investment (b) Cost or other (c) Accumulated (investment) basis (other) depreciation 758.013 758.013 Land 10,041,972 401,630 Buildings 10,443,602 Leasehold improvements C 75,618 98,361 22,743 Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

10,875,603

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CHARLES T CHUCK MATHENA II c/o RICHARD L DAVIS 55-0718341 Schiedule D (Form 990) 2009 Page 3 Part VII Investments—Other Securities. See Form 990, Part X, line 12. (a) Description of security or category (c) Method of valuation (b) Book value (including name of security) Cost or end-of-year market value Financial derivatives . Closely-held equity interests . French His Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments—Program Related. See Form 990, Part X, line 13. (c) Method of valuation: (a) Description of investment type (b) Book value Cost or end-of-year market value Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) 你你不必要說不必以多如此 中国 美国 人名西班牙 医 Part IX Other Assets. See Form 990, Part X, line 15. (a) Description (b) Book value Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.). Part X Other Liabilities. See Form 990, Part X, line 25. (a) Description of liability (b) Amount 5 Federal income taxes

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

Sched	ule D (Form 990) 2009		Page 4
Par	Reconciliation of Change in Net Assets from Form 990 to Audited Financia	Sta	tements
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	656,796
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	979,299
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-322,503
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	1
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-322,503
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	per	Return
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		\$ · ·
а	Net unrealized gains on investments	<u>_</u>	A 40
b	Donated services and use of facilities	Ş	
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV.)		· (, ,)
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.	Γ	
а	Investment expenses not included on Form 990, Part VIII, line 7b		\$1 An
b	Other (Describe in Part XIV.)		ж.,
С	Add lines 4a and 4b	.	4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expens		er Return
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		r (
а	Donated services and use of facilities	,	Ni ru
b	Prior year adjustments		p copy
С	Other losses		F ∰'' 6 . 4. λ
d	Other (Describe in Part XIV.)	1	w **
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3	(-*\C_3)
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		\$ & T
b	Other (Describe in Part XIV.)	*	; # 1
С	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5
Par	t XIV Supplemental Information		
and	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and part to provide any additional information.	1 4 b. <i>i</i>	Also complete
		. 	
		-	

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service Name of the organization CHARLES T CHUCK MATHENA II do RICHARD L DAVIS

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.

▶ Attach to Form 990.

2009 ·

Inspection Employer Identification number

55-0718341

å Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. the selection criteria used to award the grants or assistance? **General Information on Grants and Assistance** Partl

1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash g if applicable	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
2 Enter total number of section 501(c)(3) and government organizations.	n 501(c)(3) and	government organ	izations				
	100000000000000000000000000000000000000					4	

3 Enter total number of other organizations.

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

Schedule I (Form 990) 2009

Page 2

Schedule I (Form 990) 2009

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance Part Line 2 RECIPIENTS ARE REQUIRED TO SUBMIT GRADE REPORTS AFTER EACH SEMESTER 11,750 Use Part IV and Schedule I-1 (Form 990) if additional space is needed. (c) Amount of cash grant 7 (b) Number of recipients (a) Type of grant or assistance SCHOLARSHIP Part IV Part III

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

OMB No 1545-0047 Open to Public Inspection

Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990.

CHARLES T CHUCK MATHENA II C/O RICHARD L DAVIS	55-0718341
Form 990 Part VI Section A Line 2 CHARLES MATHENA & MARQUETTA	MATHENA ARE HUSBAND AND WIFE
Form 990 Part VI Section B Line 11A TREASURER AND PRESIDENT AP	PROVE THE FORM 990
Form 990 Part VI Section B Line 15B BOARD OF DIRECTORS APPROVE	ALL PAYROLL MATTERS
Form 990 Part VI Section C Line 19 UPON REQUEST PUBLIC SHOULD	CONTACT ANY BOARD MEMBER TO MAKE
ARRANGEMENTS	
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CHARLES T. "CHUCK" MATHENA II FOUNDATION, INC.

FORM 990 TAX YEAR 2009 55-0718341

PART III - LINE 4a:

FOLLOWING ARE FOR SCHOLARSHIP GRANTS TO INDIVIDUALS

TIFFANY CARRUTHERS	RELATIONSHIP	AMOUNT
116 BAILEY ST PRINCETON, WV 24740	NONE	\$1,250
JOHN FREDEKING II PO BOX 382 ATHENS, WV 24712	NONE	\$1,000
ALEXANDER HUBBARD 3 DOGWOOD ESTATES BLUEFIELD, WV 24701	NONE	\$1,250
KAYLA HUDGINS 1006 OAKWOOD AVE PRINCETON, WV 24740	NONE	\$1,000
REBECCA KING 241 TEABERRY ST PRINCETON, WV 24740	NONE	\$1,000
CASEY LINEBERRY 601 BUCKEYE HOLLOW RD PRINCETON, WV 24740	NONE	\$1,000
BRYAN STATEN 357 CARDINAL AVE PRINCETON, WV 24740	NONE	\$1,000
CATHERINE STATEN 357 CARDINAL AVE PRINCETON, WV 24740	NONE	\$1,000
JOSEPH SWANNER V 401 UNION DR PRINCETON, WV 24740	NONE	\$1,000
KRYSTAL WOLFORD 510 SHOP VIEW AVE PRINCETON, WV 24740	NONE	\$1,250
LUCAS WOODS 109 MAHOOD AVE PRINCETON, WV 24740	NONE	\$1,000

TOTAL

\$11,750

For the Account of: CHUCK MATHENA CENTER BUILDING FUND

Account Number: 50 00 3792 3 01 Date: DECEMBER 31, 2009

SE FIRST SOUTH BANK

Your First Financial Resource
Trust and Financial Services

Review of Assets

Shares or Par Value		Unit Market	Investment Cost Basis	Total Market Value	Est. Annual Income	Current Yield
	CASH				 - -	
	INCOME CASH	١	0.00	00 0		
	PRINCIPAL CASH		0.00	0.00		
	TOTAL CASH		0.00	00.00		
	CASH EQUIVALENTS					
	MISC CASH EQUIV-TAXABLE					
87,344.86	FEDERATED GOVT OBL FUND 395 INCOME	1.000	87,344 86	87,344.86	26	0 03
218,28489	FEDERATED GOVT OBL FUND 395	1.000	218,284 89	218,284.89	65	0.03
	TOTAL MISC CASH EQUIV-TAXABLE		305,629.75	305,629.75	91	0.03
	OTHER BANK CD'S					
100,000	AMERICAN EXP BK CD 2 5% DUE 5/20/11		100,009 00	100,009.00	2,500	2 50
100,000	BANK OF AMERICA NA 1 05% DUE 05/20/10		100,009 00	100,009 00	1,050	1.05
100,000	GE CAP FINL INC HOLLADAY UT 3.35% DUE 5/20/13		100,009.00	100,009.00	3,350	3.35
100,000	KEY BANK CLEVELAND OH 2 15% DUE 12/19/2011		100,009.00	100,009 00	2,150	2.15
100,000	SONABANK NATL ASSN 1 55% DUE 11/22/2010		100,009.00	100,009 00	1,550	1 55
100,000	WASHINGTON TRUST BK SPOKANE 2 6% DUE 11/22/2011		100,009 00	100,009 00	2,600	2.60
	TOTAL OTHER BANK CD'S	•	600,054.00	600,054.00	13,200	2.20
	TOTAL CASH EQUIVALENTS		905,683.75	905,683.75	13,291	1.47



#CNTI # MMMMMMM 4 10/010404010/18 30 52/02044

For the Account of: CHUCK MATHENA CENTER BUILDING FUND AGENT

Account Number: 50 00 3792 3 01 Date: DECEMBER 31, 2009

SER FIRST
OFFINAL PRINTING BANK
Your First Financial Resource
Trust and Financial Services

Review of Assets

Shares or Par Value	3M	Unit li Market (Investment Cost Basis	Total Market Value	Est. Annual Income	Current Yield
	FIXED INCOME SECURITIES				:	
	U.S. GOVT AGENCY OBLIGATIONS					
100,000	FHLB 1 45% 03/28/12 C 09/28/2010 @ 100	99 844	99,952.10	99,844.00	1,450	1.45
100,000	——FHLB 1.25% 12/2/11 C 06/02/2010 @ 100	99.68810	100,001-13-	00:889:66	1,250	1.25
	TOTAL U.S. GOVT AGENCY OBLIGATIONS	=	199,953.23	199,532.00	2,700	1.35
	TOTAL FIXED INCOME SECURITIES	-	199,953.23	199,532.00	2,700	1.35
	GRAND TOTAL	1,1	1,105,636.98	1,105,215.75	15,991	1.45



#CNTL# 0000000208 5 10/01042010/18 30 52/032/335

SER First
Ommunity Bank
Your First Financial Resource

Account Number: 20 00 2968 0 01 Date: DECEMBER 31, 2009

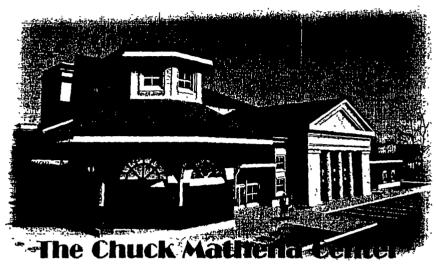
Review of Assets

Shares or Par Value		Unit Market	Investment Cost Basis	Total Market Value	Est. Annual Income	Current Yield
	САЅН					<u> </u>
	INCOME CASH		000	000		
	PRINCIPAL CASH		0.00	00 0		
	TOTAL CASH		00:0	0.00		
	CASH EQUIVALENTS					
	MISC CASH EQUIV-TAXABLE					
43,388.85	FEDERATED GOVT OBL FUND 395 INCOME	1 000	43,388 85	43,388 85	13	0.03
38,382.61	FEDERATED GOVT OBL FUND 395	1 000	38,382 61	38,382 61	12	0.03
	TOTAL MISC CASH EQUIV-TAXABLE		81,771.46	81,771.46	25	0.03
	TOTAL CASH EQUIVALENTS		81,771.46	81,771.46	25	0.03
	EQUITIES					
	COMMON STOCK					
65	AFLAC INC	46.250	2,822 95	3,006 25	73	2.42
	TOTAL EQUITIES		2,822.95	3,006.25	73	2.42
	GRAND TOTAL		84,594.41	84,777.71	86	0.11



The Chuck Mathena Center

A Performing Arts and Multi-Purpose Facility The Chuck Mathena Center is intended to be a facility where all citizens of the community and surrounding areas feel ownership, partnership and welcome through a diverse and active programming schedule.



The Center will include...

A 1,000 seat, multipurpose auditorium for presenting a variety of performing arts programs - concerts, plays, ballets, etc.

The auditorium will provide theatrical quality acoustics.

A lobby/gallery area for circulation and artistic displays and presentation.

Areas for use as classrooms, receptions, conferences, etc.

The Chuck Mathena Center will be available for school presentations, private organizations and community group meetings.

Mission Statement

The Chuck Mathena Center is dedicated to serving Mercer County, West Virginia and the surrounding region for the presentation of the performing and visual arts, for outreach and educational opportunities, and for service to community gatherings and events. The Center is intended to be a facility where all citizens of the community and surrounding areas feel ownership, partnership, and welcome through a diverse and active programming and event schedule.

Once again we are given the opportunity to enrich our lives and broaden our horizons. Our children can gain knowledge, confidence and find encouragement to develop mind and skills. The Chuck Mathena Center will provide all forms of entertainment, conduct workshops and seminars, host community gatherings and provide a meeting place for all who want to dream, grow, produce, learn, share and enjoy "culture" as it applies to each individual.



Reserve your place in The Chuck Mathena Center history! Give special recognition to family or friends - or simply tell people that our business care about our community - by "buying" a seat for the Chuck Mathena Center. A permanent brass plaque will identify each seat that you sponsor.

The Chuck Mathena Performing Arts, Multi-Purpose facility is all about positive growth and preparing for a better tomorrow.