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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 benefit trust or private foundation)

Open to Public

Form **990** (2009)

	al Revenue Se	07/01/00 06/20/1		il et il et il e	
		Alendar year, or tax year beginning 07/01/09 and ending 06/30/10		D 5-1-	was identification number
	neck if applicable	Please C Name of organization WVSOM FOUNDATION (FOUNDATION) use IRS MEDICINE FOUNDATION INCORPORATED		D Emplo	yer identification number
<u>_</u> ^	ddress change	label or MEDICINE FOORDATION, INCORPORATED		51_	0163180
N	ame change	print or Doing Business As	December 1		one number
In	itial return	type.   Number and street (or P O box if mail is not delivered to street address)  See   AOO NORTH TEE STREET	Room/suite		-647-6374
Ħ.	ermination	Specific Spe			<del></del>
_		Instruc- City or town, state or country, and ZIP + 4		G Gross rece	ipis\$ 331,334
^	mended return	tions. LEWISBURG WV 24901		1.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
∐ A	pplication pending	F Name and address of principal officer		1 ' '	a group retum for es? Yes X N
		SALLY COOPER, EXECUTIVE DIRECTOR		affiliate H(b) Are all	affiliates
				include	
	<del></del>			If No,	attach a list (see instructions)
	Tax-exempt sta		<u> </u>	┨	
		WWW.WVSOM.EDU/STUDENTS/FOUND AR.CFM			exemption number
			Year of formation	975	M State of legal domicile W
Pa		ummary			<del>_</del>
		escribe the organization's mission or most significant activities			
e l		PRIMARY PURPOSE IS TO PROMOTE EDUCATIONAL AND FRAT			
au	-	CURRENT STUDENTS AND ALUMNI OF THE WEST VIRGINIA S			
Activities & Governance	MEI	ICINE (WVSOM), LOCATED IN LEWISBURG, WEST VIRGINIA.	ITS MIS	SION IS	S TO
ام	2 Check	his box $lacktriangle$ if the organization discontinued its operations or disposed of more than 2	5% of its net as	sets	
8	3 Numbe	of voting members of the governing body (Part VI, line 1a)		3	13
es	4 Numbe	of independent voting members of the governing body (Part VI, line 1b)		4	13
Σį	5 Total n	ımber of employees (Part V, line 2a)		5	0
to	6 Total n	imber of volunteers (estimate if necessary)		6	
`	7a Total g	oss unrelated business revenue from Part VIII, column (C), line 12		7a	29,06
	<b>b</b> Net un	elated business taxable income from Form 990-T, line 34	<b>-</b>	7b	-13,51
		RECEIVED (	Prior Ye		Current Year
<u>o</u>	8 Contrib	utions and grants (Part VIII, line III)		9,074	195,13
Revenue	9 Progra	n service revenue (Part VIII, line 2g)	17	3,982	155,52
Š	10 Investi	ient income (Part VIII, column (A), lines 3, 4, and 7d)   NOV 1 5 2010   O	<u> </u>	4,889	-21,17
<u>.</u>	11 Other	venue - add lines 8 through 11 (must equal Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,045	1,86
		veriae and lines of through 11 (mast equal 1 at 1 m), detailing		0,212	331,35
	13 Grants	and similar amounts paid (Part IX, column (A), lines 1-3)	<u> 1</u> 2	1,675	52,40
		s paid to or for members (Part IX, column (A), line 4)			
S	15 Saları	s, other compensation, employee benefits (Part IX, column (A), lines 5–10)			
nses	16a Profes	sional fundraising fees (Part IX, column (A), line 11e)			
Expe	b Total f	ndraising expenses (Part IX, column (D), line 25) ▶ 28,895	,5-1_		
Ш	17 Other	xpenses (Part IX, column (A), lines 11a-11d, 11f-24f)		9,721	166,98
	18 Total e	xpenses Add lines 13–17 (must equal Part IX, column (A), line 25)		1,396	219,38
	19 Reven	le less expenses Subtract line 18 from line 12		18,816	111,96
Assets or			Beginning of C		End of Year
Sset	20 Total a	ssets (Part X, line 16)		4,749	2,387,08
Net A Fund E	21 Total I	abilities (Part X, line 26)		37,900	140,49
		sets or fund balances Subtract line 21 from line 20	2,00	6,849	2,246,58
_ <u>P</u>		Signature Block			
		Inder penalties of perjury, I declare that I have examined this return, including accompanying schedule nd belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all in	s and statements,	, and to the be	est of my knowledge
	l l	nd bellet, it is they correct, and compare becaration of preparer (other than officer) is based on all mi	ionnation of which	i III	, ,
Sig		- Xallist. Woker	<del></del>		14/10
He	re	Signature of officer (		Date	
	ļ		JTIVE DI	KECTO	Κ
		Type or print name and the	1 "		1 Process & Just 1
_		Preparer's Date	Chec		Preparer's identifying number (see instructions)
Pa	ia į		6/10 self- empl	oyed ▶ X	234-02-499
	eparer's	MARK COLLINS CPA		EIN	<b>&gt;</b>
Us	e Only	rim's name (or yours self-employed), P.O. BOX 5501		Phone	
	1	BECKLEY, WV 25801-5501			304-255-892
Mar	the IBS die	uss this return with the preparer shown above? (see instructions)			Yes

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. DAA

Form 990 (200)	9) WVSOM	FOUNDATION	(FOORDWITON)	21-0103100						
Part III Statement of Program Service Accomplishments										
4 0 0 1										

Briefly describe the organization's mission SEE SCHEDULE O			
the prior Form 990 or 990-EZ?  If "Yes," describe these new services on S  Did the organization cease conducting, or services?  If "Yes," describe these changes on Scheol Describe the exempt purpose achievement Section 501(c)(3) and 501(c)(4) organization.	make significant changes in how it conducts, any pro	ogram m services by expenses ort the amount of grants and	Yes X No
PURPOSES TO INCLUDE THE GRANTS, THE PROVISION	CHIEVED A NUMBER OF ITS EX E PROVISION OF SCHOLARSHIX OF TWO SEPARATE MULTIPLE IN PROGRAMS, VARIOUS ALUMNI EX	PS OR DAY VENTS, THE	321,599)
4b (Code ) (Expenses \$	including grants of \$	) (Revenue \$	)
4c (Code ) (Expenses \$	including grants of \$	) (Revenue \$	)
4d Other program services (Describe in Sch (Expenses \$		Revenue \$	)
4e Total program service expenses ▶	149,615	<del></del>	Form <b>990</b> (2009)

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

	rt IV: Checklist of Paguired Schedules		<u> </u>	age 3
	irt 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	İ
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		<del></del>
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,"			v
_	complete Schedule D, Part I	6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
۰	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 Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	"	$\vdash$	_ <del></del> -
3	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	1	]	1
	complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or		t —	
	quasi-endowments? If "Yes," complete Schedule D, Part V	10	x	l
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			$\overline{}$
	VII, VIII, IX, or X as applicable	11	X	<u> </u>
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete		12.4	***
	Schedule D, Part VI	- Ē	- , <del>-</del> ;	- 61
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more		Eri'	<u></u>
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	3.83		<u>-</u> -
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	7.4		2.44
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	70g_ 5_	1	3. 4
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets	1 .53	2 A	美
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	- 1843 5	25; 25;	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	1 - 1	104	. Terr
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		- 22 A <sub>p</sub>	= == ===
42	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	-	3	1 ° - 3 I
12	Schedule D, Parts XI, XII, and XIII	12	X	لتتا
12Δ	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No.		1 54	\$ 1.
120	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional  12A X		-7.	3
13	Is the organization a school 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 United States?	14a		X
b	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		X
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	<u> </u>	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	<u> </u>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		1	[
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	├	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	1		
	If "Yes," complete Schedule G, Part III	19	l	L X

_ [	art IV . Checklist of Required Schedules (Continued)	1 1		
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations	24	1	x
12	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the	22	x	
22	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	23		X
24-	employees? If "Yes," complete Schedule J	23	-	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	1		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	24a		x
_	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?	240		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
_	to defease any tax-exempt bonds?	24c 24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	25-		x
L	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
D	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	256		v
	990-EZ? 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			X
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			X
20	If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			1
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions).	200	۔۔۔۔۔	X
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28b		X
_	Schedule L, Part IV  An entity of which a current or former officer, director, trustee, or key employee of the erganization (or a	200		
С	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,	1		
	Part IV	28c		X
29		29		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	25		
30	conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	1 30		
J 1	Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<del>  '</del>	<b>-</b>	
J2	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	J2	<b>-</b>	
55	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,	33	<del>                                     </del>	
J-T	III, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	34	t	
<b>J</b> J	Schedule R, Part V, line 2	35		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	33	<del>                                     </del>	
-	organization? If "Yes," complete Schedule R, Part V, line 2	36	1	x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	130	<del> </del>	
٠,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		ļ	
	Part VI	37	l	x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	31	<del> </del>	<del>  ^</del>
	19? Note. All Form 990 filers are required to complete Schedule O	38	x	
_	10- House All 1 of the 350 meta are required to complete ouried the O		000	

1a Enter the number reponded in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter-0- if not applicable  1b C Did the organization comply with backup withholding rules for reportable payments to wendors and reportable gaming (gambing) without process withholding rules for reportable payments to wendors and reportable gaming (gambing) without process withholding rules for reportable payments to wendors and reportable gaming (gambing) without process withholding rules for reportable payments to wendors and reportable gaming (gambing) without process with process and gambing (gambing) with process process on Form W-3, Transmittal of Wage and Tax.  2c Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax.  Statements, field for the calendary year ending with or within the year covered by this return.  If all least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note, If the sum of finer 5 and 25 is greater than 250, you may be required to -file this rule (see instructions)  3a D dit the organization have unreliated business gross income of \$1,000 or more during the year covered by this return?  1f 'I'ves', has at filed a Form 990-T for this year? If 'No,' provide an explanation in Schedulic O  2 b X and yrime during the cliendar year, did the organization have an interest in, or a significant or or the financial account?  1f 'I'ves', has at the foreign country (such as a bank account, securities account, or other financial accounts?  1f 'I'ves', but the name of the foreign country (such as a bank account, securities account, or other financial accounts?  1f 'I'ves', but the foreign country (such as a bank account, securities account, or other financial accounts?  1f 'I'ves', but the foreign country (such as a bank account, securities accounts?  2 b Uf 'I'ves', come for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts?  2 b Uf 'I'ves', come for except	Pa	rt V .Statements Regarding Other IRS Filings and Tax Compliance				Vaa	No
U.S. Information Returns Enter-0- if not applicable Enter the number of Forms W-12G chickled in line 1a Enter-0- if not applicable Define the number of Forms W-12G chickled in line 1a Enter-0- if not applicable Define the number of Forms W-12G chickled in line 1a Enter-0- if not applicable Define the complex with backup withholding fules for reportable payments to vendors and reportable garming (pamiling) withough so line we entered and provided the control of the page of the complex of the page of the collection of the page of	1a	Enter the number reported in Box 3 of Form 1096. Annual Summary and Transmittal of		1		Yes	No
b Enter the number of Forms W-2G included in line 1 at Enter 0-d not applicable or Did the organization comply with backing withholding dues for reportable payments to vendors and reportable gaming (pambling) wennings to prize winners?  2 Enter the number of emphyses reported on Form W-3. Transmittal of Wage and Tax  2 Statements, filed for the calendar year ending with or within the year covered by this return?  3 It is thesis one is reported on line 22, did the organization file all inquired fideral employment tax returns?  4 Note. If the sum of lines 1 and A2 is greater than 3C5, you may be required to e-file their return (see sins tructions)  5 Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  5 If Y'es, 1 has 4 filed a Form 990-T for this year? If 'No.' provide an explanation in Schedule O  4 A ray time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in offengin country (see financial account)  5 If Yes, 1 has 4 filed a Form 990-T for this year? If 'No.' provide an explanation in Schedule O  5 If Yes, 1 was the did a Form 990-T for this year? If 'No.' provide an explanation in Schedule O  6 If Yes, 2 retire the name of the foreign country (see that a she was count, securities account)?  6 If Yes, 2 retire the name of the foreign country Vestor as a bank account, securities accountry?  7 See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  8 If Yes, 2 retire the name of the foreign country (see the instructions of exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  9 If Yes, 2 retire the name of the foreign country (see the instructions of the state of the comparation of the state of the organization of the state of the comparation of the state of the organization of the state of the organization of the state of the organization of th		·	1 <sub>a</sub>	0	15 T	3	
c Dut the organization comply with backup withholding sules for reportable payming (samhing) winnings to prize winners?  2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  1d If at least one is exported on line 2d, did the organization file all required federal employment tax returns?  Notes. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)  3a Dd the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  3b If "Yes," has a filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  3c At any time drung the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities accountry)  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  3b Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  3c Uses the organization aparty to a prohibited tax shelter transaction?  3c If "Yes," to line 5a of 5b, did the organization file Form 888-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  3c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solici any contributions that were not tax deductible?  3c Different organization in tax deductible and the organization in excess of \$75 made party as a contribution and party for goods and services provided to the paper?  3c Different organization in the paper?  3c Different organization in excess of \$75 made party as a contribution and party for goods and services provided to the paper?  3c Different organization in excess of \$75 made party as a contribution and party for goods and services provid	b			0	±-	1,19	
gamming (gambling) winnings to prize winners?  Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax  Statements, flied for the calendar year ending with or within the year covered by this return  Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)  Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  By If Yes, 1 has of flied 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 over, a financial account in ofenging country (such as a bank account, securities account)?  By If Yes, 1 enter the name of the foreign country (such as a bank account, securities account)?  By If Yes, 2 enter the name of the foreign country (such as a bank account, securities account)?  By If Yes, 2 enter the name of the foreign country (such as a bank account, securities account)?  By If Yes, 2 enter the name of the foreign country (such as a bank account, securities account, or other financial account in offension and the organization and the account of the complex of the such as a state of the foreign country (such as a bank account, securities account, or other financial account in offension accountry)  By If Yes, 2 the name of the foreign country (such as a bank account, securities account, or other financial accountry)  By If Yes, 1 the name of the foreign country (such as a bank account, securities and accountry)  By If Yes, 1 the name of the foreign country (such as a bank account, securities as helier transaction?  By If Yes, 1 the Said Park and the organization that it was or is a party to a prohibited tax sheller transaction?  By If Yes, 1 the Said Park and the organization that the wash or is a party to a prohibited tax sheller transaction?  By If Yes, 1 the the Said Park and the security of the organization organization have annual g		••	portabl	e	. 75	1.5	
2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  I tal least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)  3b. Did the organization have unrelated business gross income of \$1,000 or more during the calendar year, did the organization have an explanation in Schedule O  3c. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account; or a signature or other authority over, a financial account in a fireegn country (such as a bank account, securities account, or other financial account)  5c. Enter the name of the foreign country  5c. If "Ces," to line 5a or 5b, did the organization file form 88881, Disclosure by Tax-Exempt Entity Regarding  6c. If "Ces," to line 5a or 5b, did the organization file form 8889 as required?  5c. If "Ces," did the organization charge or a payment in excess of 575 made partly as a contribution and partly for goods  5c. If "Ces," did the organization entity enter the foreign Enter the payor?  5c.							
Statements, filed for the calendar year ending with or within the year covered by this return  Note. If the sum of lines 1 a and 2a is greater than 250, you may be required to e-file this return  The sum of lines 1 a and 2a is greater than 250, you may be required to e-file this return  Statisticutions)  Joi the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  Joi If Yes, has it filed a Form 990-T for this year? If No,* provide an explanation in Schedule O  John 1 House of the foreign country (such as a bank account, so other authority over, a financial account)?  If Yes,* enter the name of the foreign country   ►  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  As Was the organization and printy to a prohibited tax shelter transaction at any time during the tax year?  So Was the organization and printy to a prohibited tax shelter transaction at any time during the tax year?  So If Yes,* to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  So Does the organization have namulal gross receipts that are normally greater than \$100,000, and did the organization that were not tax deductible?  If Yes,* did the organization interest week yes colication an express statement that such contributions or griss were not tax deductible?  If Yes,* did the organization necked eductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?  If Yes,* did the organization did the organization file form 8812.  If Yes,* did the organization contributions that were not tax deductible?  Did the organization exceive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?  If Yes,* did the organization did the organization file form 8898 as required?  If Yes,* indi	2a		] [		-		
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Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  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?  Tax X  If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  To Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  To Por all contributions of qualified intellectual property, did the organization file a Form 1098-C as required?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, nave excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds  Did the organization make any taxable distributions under section 4966?  Did the organization make any taxable distributions under section 4966?  Did the organization make any taxable distributions under section 4966?  Did the organization make any taxable distributions under section 4966?  Did the organization make any taxable distributions under section 4966?  Did the organization make any taxable distributions under section 4966?  Did the organization make any taxable distributions under section 4966?  Did the organization members or shareholders  Did the organization form membe	С		arding		-		
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b If "Yes," did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  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?  To bid the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  To C X X If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  To Life the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  To all contributions of qualified intellectual property, did the organization file Form 8899 as required?  To all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization and pressure and the pressure of the pressure or related person?  Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?  Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?  Did the organization make any taxable distributions under section 4966?  Did the organization make any taxable distributions under section 4966?  Did the organization make any taxable distributions of constructions of constru	ьа		те		60		v
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Form 990 (2009) WVSOM FOUNDATION (FOUNDATION) 51-0163180 Page 6 .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. Section A. Governing Body and Management No Enter the number of voting members of the governing body **b** Enter the number of voting members that are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? 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?

SEE ATACHED BYLAW REVISION

Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 3 4 Did the organization become aware during the year of a material diversion of the organization's assets? 5 5 6 Does the organization have members or stockholders? Does the organization have members, stockholders, or other persons who may elect one or more members 7a 7a of the governing body? 7b b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8a X 8b Each committee with authority to act on behalf of the governing body? Is there any officer, director, 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a 10a Does the organization have local chapters, branches, or affiliates? b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with those of the organization? 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the X Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give X rise to conflicts? 12b Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this is done 13 Does the organization have a written whistleblower policy? 14 Does the organization have a written document retention and destruction policy? 14 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? 15a The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a 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? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. X Own website 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, and financial statements available to the public State the name, physical address, and telephone number of the person who possesses the books and records of the SALLY COOPER 400 NORTH LEE STREET organization >

304-647-6374

WV 24901

**LEWISBURG** 

Form 990 (2009) WVSOM FOUNDATION (FOUNDATION)

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

Check this box if the organization (A)	(B)			(C	;)	hat ap		(D)	(E) Reportable	( <b>F</b> ) Estimated
Name and Title	hours ner	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
BRENT DAVISON									•	
EX OFFICIO BOARD								0	0	<u></u>
PHILIP MCLAUGHLIN	•					1			•	_
BOARD MEMBER		X						0	0	C
RAYMOND A. HARRON	I, MD	,,	ı					•	0	,
BOARD MEMBER		X				⊢		0	0	C
DARLENE NEWELL		٠,						^	0	
BOARD MEMBER		X				-		0	0	
DANIEL TRENT, D.	γ.							^	•	,
BOARD MEMBER	73.7	X			-	$\vdash$		0	0	(
COLONEL JOHN GWIN	IN	<b> </b>						^	^	,
BOARD MEMBER	2 0	X		_		$\vdash$		0	0	
BELINDA K SMITH,	ט.ט.	3.5				1		^	^	
BOARD MEMBER		X				-		0	0	
ABDUL M. ORRA, D.	0.	v				1		o	o	
BOARD MEMBER RICHARD RAFES		X			$\vdash$	+		<u> </u>		
	1	x	İ					o	o	
EX OFFICIO BOARD DAVID P. ALLEN		^			┝	1			<u> </u>	
BOARD MEMBER		x						o	0	
MATTHEW W. LIVEL	D O	<u> </u>				1	-			
BOARD MEMBER	, D.O.	x						o	0	
LEWIS WHALEY, D.O		A				╁				
BOARD MEMBER	γ.	x					ļ	o	o	
ROBERT HOLSTEIN,	D O		-	-	-	+		-		
EX OFFICIO BOARD	5.0.	x		1				o	0	
MICHAEL ADELMAN,	J.D., D	ō				$\vdash$		<del>-</del>		
EX OFFICIO BOARD	,	X	]	1	1			O	lo	
SALLY COOPER			t	t		1				
EXEC. DIR.	40.00			$\mathbf{x}$				0	l 0	
THOMAS GREENSTRE				<del> </del>		$\top$				
PRESIDENT	T -			x				0	l o	
STEVE TALBOTT		1	1	1	1	$\top$	1	,		
SECRETARY/TREASURER		1	1	X	1		1	0	0	i l

Form 990 (2009) WVSOM FOUNDATION (FOUNDATION) 51-0163180 Page 8 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) . (A) (C) Reportable Position (check all that apply) Reportable **Estimated** Name and Title Average compensation compensation hours per amount of Officer Former Individual trustee or director Institutional trustee Key employee from related from other week ighest compensated inployee the organizations compensation (W-2/1099-MISC) organization from the (W-2/1099-MISC) organization and related organizations DAVID HAMBRICK 0 0 X VICE PRESIDENT 1b Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in 2 reportable compensation from the organization > 0 No Yes Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization (B) Description of services (C) Compensation Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization DAA Form 990 (2009)

Pa	Part VIII 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
တတ	10	Federated campaig	200	1a				Tevenue		12, 010, 01014
		Membership dues	J.15	1b						, i
声		Fundraising events	.	1c						i
		Related organization		1d					-	_
S, E		Government grants (contril	Г	1e						
Sign		All other contributions, gifts		<u> </u>						-
텵		and similar amounts not in		1f		195,135				**.
들임	q	Noncash contributions incl	uded in lines 1a-1			7,000	•			,吴芷
용티	•	Total. Add lines 1a		•		` ▶	195,135		,	
9						Busn. Code	,			
ا <u>چ</u>	2a	CONTINUING	EDUCATION	REVE	NUE		126,464	126,464		
8	b	FACILITY RE				532000	29,061		29,061	_
. છું	С		,							-
န္တြ	d									
Ē	е									
Program Service Revenue Contributions, gifts, grants	f	All other program s	service rever	nue						
ڇ	g	Total. Add lines 2a	a2f			•	155,525			1
	3	Investment income	e (including o	lividend	ls, intere	st, and				
l		other similar amounts)				▶	-21,173			-21,173
	4	Income from inves	tment of tax	-exemp	t bond p	roceeds 🕨				
	5	Royalties				<b>•</b>				
			(ı) Real		(II) P	ersonal	5			
	6a	Gross Rents					-	<del>-</del> -	-	
	þ	Less rental exps								
	C	Rental inc or (loss)							,	
	_d	Coop amount from		<u> </u>						
	7a	sales of assets	(ı) Secunties		(11)	Other			-	, ,
1		other than inventory					- r	-		
	b	Less cost or other								,
		basis & sales exps							- ,	-, '
	С	Gain or (loss)								
	d	Net gain or (loss)		. г			•	-		
e e	8a	Gross income from fu	undraising eve	nts						
Other Revenu	i	(not including \$	4 - 4 1 4 - 4					,		
Rev		of contributions repor	tea on line 1c)	- 1						-
er		See Part IV, line 18		a		· · · · · · · · · · · · · · · · · · ·				
횽		Less direct expen		b_						
		Net income or (los Gross income from g			events	<u></u>				
	9a	See Part IV, line 19	aming activitie				,			
	h	Less direct expen	1000	a b		<del></del>		,		
		Net income or (los			vities					
		Gross sales of inv	-		VILICS	E		÷		
		returns and allowa		a						
	h	Less cost of good		ъľ						
		Net income or (los		of inv	entory	<b></b>				
	Ť		eous Revenue		<u> </u>	Busn. Code				
	11a				•	1	1,867	1,867		
	b		-				,	, , , , , , , , , , , , , , , , , , , ,		
	_ c									<u> </u>
	d	All other revenue								
	е	Total. Add lines 1	1a-11d			<b></b>	1,867			,
	12	Total Revenue. S	ee instructio	ns		•	331,354		29,061	-21,173

### 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 (A) but are not required to complete columns (B), (C), and (D)

not include emousts remarked on lines of	(A) I	(B) l	(C)	(D)
not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	Management and	(D) Fundraising expenses
		expenses	general expenses	CAPCIIGES
_				
· ·				
	52 400	52 400		
· · · · · · · · · · · · · · · · · · ·	32,400	32,400		
_			j	63
· · · · · · · · · · · · · · · · · · ·				5 %
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· · · · · · · · · · · · · · · · · · ·	58.937	21.217	15.913	21,807
	6,306	2,270		2,333
	,	,=:=	,	-1-35
Other expenses Itemize expenses not	•			
•				
5% of total expenses shown on line 25 below.)		1		
	28,313	28,313		
DIRECT COSTS OF FACILITIE	22,477	22,477		
PROFESSIONAL FEES			18,827	·
SUPPORT OF FACULTY AND		17,853		- <del></del>
<del>-</del>			3.969	4,288
				467
		149.615	40.875	28,895
			20,010	
SOP 98-2 Complete this line only if the				
organization reported in column (B) joint costs				
from a combined educational campaign and fundraising solicitation	1		·	-
	DIRECT COSTS OF PROVIDING DIRECT COSTS OF FACILITIE PROFESSIONAL FEES SUPPORT OF FACULTY AND OFFICE SUPPLIES AND EXP All other expenses Total functional expenses. Add lines 1 through 24f Joint costs. Check here Inf following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs	8b, 9b, and 10b of Part VIII.  Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21  Grants and other assistance to individuals in the U.S. See Part IV, line 22  Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16  Benefits paid to or for members  Compensation of current officers, directors, trustees, and key employees  Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)  Other salaries and wages  Pension plan contributions (include section 401(k) and section 403(b) employer contributions)  Other employee benefits  Payroll taxes  Fees for services (non-employees)  Management  Legal  Lobbying  Professional fundraising services. See Part IV, line 17  Investment management fees  Other  Advertising and promotion  Office expenses  Information technology  Royalties  Occupancy  Travel  Payments of travel or entertainment expenses for any federal, state, or local public officials  Conferences, conventions, and meetings  Interest  Payments to affiliates  Depreciation, depletion, and amortization  Insurance  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,  DIRECT COSTS OF FROVIDING  28 , 313  DIRECT COSTS OF FROVIDING  28 , 313  FIEST SUPPORT OF FACULTY AND  OFFICE SUPPLIES AND EXP  All other expenses  Joint costs. Check here ▶  13 , 342  Joint costs. Check here ▶  13 , 342  Joint costs. Check here ▶  16 following SOP 98-2 Complete this line only if the organization reported in coloumn (B) joint costs	8b, 9b, and 10b of Part VIII.  Crants and other assistance to governments and organizations in the U S See Part IV, line 21  Grants and other assistance to individuals in the U S See Part IV, line 22  Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, line 25  US See Part IV, line 26  Benefits paid to or for members  Compensation of current officers, directors, trustees, and key employees  Compensation for current officers, directors, trustees, and key employees  Compensation not included above, to disqualified persons (as defined under section 4958(n)(1)) and persons described in section 4958(n)(1) and persons described	8b, 9b, and 10b of Part VIII.  Crants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 25 and 15 and 15 Benefists paid to off or members  Compensation of current officers, directors, trustess, and key employees  Compensation of current officers, directors, trustess, and key employees  Compensation in included above, to disqualified persons (as defined under section 4586)(1)) and persons described in escend 4586(1) and section 458(3)(8)  Other salanes and wages  Person plan continuous (includes ection 401(k) and section 400(k) employer contributions)  Other employee benefits  Payroll taxes  Faes for services (non-employees)  Management  Legal  Accounting  Lobbyring  Professional fundaming services. See Part IV, line 17 investment management fees  Other  Other employees  Other expenses  Information technology  Royaltes  Concepancy  Travel  Payments of fravel or entertainment expenses for any federal, state, or local public officials  Conferences, conventions, and meetings Interest  Payments to affiliates  Depreciation, depletion, and amortization insurance  Other expenses itemize expenses not covered above (Expenses grouped together and labeled masclaineous may not exceed  5% of total expenses shown on line 25 below)  DIRECT COSTS OF PRCUTLING  17, 853  17,

WVSOM FOUNDATION (FOUNDATION) 51-0163180 Page 11 Form 990 (2009) **Balance Sheet** Part X (B) (A) End of year Beginning of year 282,407 474,352 Cash-non-interest bearing 2 Savings and temporary cash investments Pledges and grants receivable, net 1,369 6,870 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete 6 Part II of Schedule L 22,890 15,930 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 2,317,534 10a other basis Complete Part VI of Schedule D 1,648,525 1,593,822 723,712 10c 10b b Less accumulated depreciation 11 Investments—publicly traded securities 12 Investments-other securities See Part IV, line 11 Investments—program-related See Part IV, line 11 13 13 14 Intangible assets 14 294,651 251,017 15 Other assets See Part IV, line 11 15 2,204,749 2,387,084 16 Total assets. Add lines 1 through 15 (must equal line 34) 9,281 17,340 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D Liabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 123,156 128,619 25 25 Other liabilities, Complete Part X of Schedule D 137,900 140,496 26 Total liabilities. Add lines 17 through 25 26 Net Assets or Fund Balances Organizations that follow SFAS 117, check here  $\blacktriangleright |\overline{\mathbf{X}}|$  and complete lines 27 through 29, and lines 33 and 34. 1,833,059 1,767,519 27 Unrestricted net assets 10,746 69,185 28 Temporarily restricted net assets 28 288,584 344,344 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund

2,387,084 Form 990 (2009)

2,246,588

32

33

34

2,066,849

2,204,749



Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

32

33

b 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)

3b

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support
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. ▶ See separate instructions.

OMB No 1545-0047

Open to Publica

Department of the Treasury Internal Revenue Service Name of the organization

WVSOM FOUNDATION (FOUNDATION)
MEDICINE FOUNDATION, INCORPORATED

Employer identification number 51-0163180

Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. X An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) Я A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type II c Type III-Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the g Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii Provide the following information about the supported organization(s) (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of (i) Name of supported (iii) Type of organization the organization in rganization in col support (described on lines 1-9 in col (i) listed in your organization col (i) of your (i) organized in the above or IRC section governing document? support? (see instructions)) Yes No Yes No Yes No

che	dule A (Form 990 or 990-EZ) 2009 WVS	OM FOUNDA	TION (FOU	NDATION)_	_51	-0163180	Page 2
Pa	rt II Support Schedule for Or				(1)(A)(iv) and	170(b)(1)(A)(vi	)
	(Complete only if you che						
ec	tion A. Public Support						
Cal	endar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
I	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	74,894	100,859	142,742	119,073	195,135	632,703
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	388,336	408,854	422,425	476,293		1,695,908
1	Total. Add lines 1 through 3	463,230	509,713	565,167	595,366	195,135	2,328,611
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)	-	-	. :	-	-	390,761
6	Public support. Subtract line 5 from line 4						1,937,850
	tion B. Total Support			<del></del>			
Ca	lendar year (or fiscal year beginning in) 🕨 📗	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	463,230	509,713	565,167	595,366	195,135	2,328,611
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,487	5,232	14,914	6,478	-21,173	6,938
9	Net income from unrelated business activities, whether or not the business is regularly carried on					0	
0	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	522	1,724	496	2,046		4,788
1	Total support. Add lines 7 through 10	<u> </u>					2,340,337
2	Gross receipts from related activities, etc	•				12	128,331
3	First five years. If the Form 990 is for the		, second, third, fou	irth, or fifth tax yea	ir as a section 501	(c)(3)	▶ □
300	organization, check this box and stop here ction C. Computation of Public Si		togo			<u> </u>	<b>P</b>
_	<del></del>			- (5)		144	00 00 9/
4	Public support percentage for 2009 (line 6		-	n (t))		14	82.80%
5 c-	Public support percentage from 2008 Scho			43 and line 44 is 1	22 4/2 0/ 01		98.43%
6a	33 1/3 % support test—2009. If the organ and stop here. The organization qualifies	as a publicly suppo	orted organization				► X
b	33 1/3 % support test—2008. If the organ				15 is 33 1/3 % or n	nore, check this	
7-	box and stop here. The organization quali	• •	• • •		4Ch and line	44 - 400/	
7a	•	=					
	more, and if the organization meets the "fa				·		▶ [
b	organization meets the "facts-and-circums 10%-facts-and-circumstances test—200		•	•			<b>-</b> L
-	more, and if the organization meets the "fa	=					
	organization meets the "facts-and-circums						▶ [

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

Page 3

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received b from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b С Net income from unrelated business activities not included in line 10b, 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 9, 10c, 11, and 12 ) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 16 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33 1/3 % support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3 % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009 WVSOM FOUNDATION (FOUNDATION)

51-0163180

Page 4

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

PART II, LINE 10 - OTHER INCOME DETAIL

OTHER REVENUE

Ş

4,788

#### **SCHEDULE D** (Form 990) ·

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

	of the organization		Employe	r identification number
	SOM FOUNDATION (FOUNDATION)		F4 ^:	1 621 00
	DICINE FOUNDATION, INCORPORATED			163180
Pa	rt I Organizations Maintaining Donor Advised Fu the organization answered "Yes" to Form 990, I	nds or Other Similar Funds or . Part IV. line 6.	Accoun	ts. Complete if
	the organization anothered to the time of the	(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 donor advisors in writing tha	t the assets held in donor advised		
	funds are the organization's property, subject to the organization's excl	usive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in	writing that grant funds can be		
	used only for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other		
	purpose conferring impermissible private benefit?		<del> </del>	Yes No
<u> Ра</u>	rt II Conservation Easements. Complete if the org	<u>anization answered "Yes" to For</u>	m 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check			
	Preservation of land for public use (e g , recreation or pleasure)	Preservation of an historically im	-	nd area
	Protection of natural habitat	Preservation of certified historic	structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conse	rvation contribution in the form of a conse	ervation	
	easement on the last day of the tax year			Hald at the Ford of the Ton Van
				Held at the End of the Tax Yea
a	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements	1 4-4 - 4-5	2b	
С.	Number of conservation easements on a certified historic structure inc		2c 2d	
a	Number of conservation easements included in (c) acquired after 8/17/			
3	Number of conservation easements modified, transferred, released, ex	dinguished, or terminated by the organiza	ition dumi	J
	the taxable year	located N		
4	Number of states where property subject to conservation easement is			
5	Does the organization have a written policy regarding the periodic mor	illoring, inspection, nandling of		Yes No
	violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enfor	oing consequation easements during the	(ear	1e3 1t0
6	Starr and volunteer nours devoted to monitoring, inspecting, and enior	cing conservation easements during the y	ycai	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing	conceniation excements during the year		
•	Amount of expenses incurred in monitoring, inspecting, and emotoring	conservation easements during the year		
Ω	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section		
0	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	the requirements of section		Yes No
9	In Part XIV, describe how the organization reports conservation easen	nents in its revenue and expense stateme	ent and	
•	balance sheet, and include, if applicable, the text of the footnote to the			
	the organization's accounting for conservation easements			
Pá	art III Organizations Maintaining Collections of Art	, Historical Treasures, or Other	r Similai	r Assets.
	Complete if the organization answered "Yes" to	Form 990, Part IV, line 8.		
1a	If the organization elected, as permitted under SFAS 116, not to repor	t in its revenue statement and balance sh	eet works	of
	art, historical treasures, or other similar assets held for public exhibition			
	provide, in Part XIV, the text of the footnote to its financial statements	that describes these items		
b	If the organization elected, as permitted under SFAS 116, to report in	its revenue statement and balance sheet	works of a	art,
	historical treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	iblic servic	e,
	provide the following amounts relating to 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 treasures, o	r other similar assets for financial gain, pi	rovide the	<b>_</b> _ <b>_</b> .
	following amounts required to be reported under SFAS 116 relating to			
а	Revenues included in Form 990, Part VIII, line 1		•	<b>\$</b>
b	Assets included in Form 990, Part X		•	· \$

<u>Sche</u>	dule D (Form 990) 2009 WVSOM FOUN			21-01					age Z
Pa	rt III Organizations Maintaining C						(contin	nued	)
3	Using the organization's acquisition, accession, collection items (check all that apply)	and other records, check	any of the followin	ig that are a significa	int use of	ıts			
а	Public exhibition	d Loan or e	exchange program	ns					
b	Scholarly research	e Other							
С	Preservation for future generations	-							
4	Provide a description of the organization's colle Part XIV	ctions and explain how the	y further the orga	nization's exempt pu	rpose in				
5	During the year, did the organization solicit or reassets to be sold to raise funds rather than to b	eceive donations of art, his e maintained as part of the	torical treasures, e	or other similar			Ye	s	No
Pa	ert IV Escrow and Custodial Arran				"Yes" to	o Form 9	90, Pa	ırt	
	IV, line 9, or reported an amo						•		
1a	Is the organization an agent, trustee, custodian			ner assets not					
14	included on Form 990, Part X?	or other intermediary for e					Ye	s	No
h	If "Yes," explain the arrangement in Part XIV an	nd complete the following to	ahle						] 110
D	ii res, explain the arrangement in Fait XIV ar	id complete the following to	aDIC		<u> </u>	T.	Amoun	<u> </u>	
_	Pogunning halanga				1	_	7	-	
	Beginning balance				1				
đ	Additions during the year								
е	Distributions during the year				1 1	_			
f	Ending balance				1	<u> </u>	$\overline{}$		T
	Did the organization include an amount on Forr	n 990, Part X, line 21?					Y€	s _	No
	If "Yes," explain the arrangement in Part XIV		1.007 11.0	- 000 D	4 D 7 P	. 40			
Pa	art V   Endowment Funds. Comple						T		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three	years back	(e) Fou	years	back
1a	Beginning of year balance	263,453	241,241				ļ		- '
þ	Contributions	55,315	76,388	1			L	۵	
C	Net investment earnings, gains,				,	-	-	-	
	and losses	23,539	-47,036				<u>'</u>	•	- '
d	Grants or scholarships	-3,000	-7,140			- 1		32.	Á
e	Other expenditures for facilities						r S	ŧ <sub>E</sub>	
	and programs				1	t 1.	,	45	P
f	Administrative expenses	-		ung tigan tur		-	٤,		
g		339,307	263,453	7-1-		. , `.			- e
2	Provide the estimated percentage of the year e			<u> </u>	·				
a		%							
b		"							
C		.a. of the eventuation that	t are held and adm	auniatored for the					
Ja	Are there endowment funds not in the possess	ion of the organization that	t are neid and adn	illistered for the				Yes	No
	organization by						20/0	162	No X
	(i) unrelated organizations						3a(i)		X
	(ii) related organizations						3a(ii)		<u> </u>
b	If "Yes" to 3a(II), are the related organizations I	•					_3b_		
4				10 D 11/1 1					
<u>P</u>	art VI Investments—Land, Buildir								
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or ot basis (other	I	eciation		(d) Book	value	
1a	Land				-				
b	Buildings								
	Leasehold improvements								
	I Equipment					"-			
	Other		2,317	,534	723,7	712	1,5	93.	822
	al. Add lines 1a through 1e (Column (d) must eq	ual Form 990 Part X colu				<u></u>	1,5		
	and it and it the total in the		(=), 10(0)	<u>'</u>				<del></del> /	

Bort VII - Investments Other Securities See Form Of		21-0163160	Page 3
Part VII Investments—Other Securities. See Form 99  (a) Description of security or category	(b) Book value	(c) Method of va	aluation
(a) Description of security or category  (including name of security)	(n) pook value	Cost or end-of-year r	
Financial derivatives	<del>                                     </del>		
Closely-held equity interests			
Other			<del></del>
		<del></del>	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		-	
Part VIII Investments—Program Related. See Form 9	90, Part X, line 13.		
(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year	
	<del>                                     </del>		
	+		
	<del>                                     </del>		<del></del> -
<del></del>	+		
<del></del>	<del>                                     </del>		-
	<del>                                     </del>	<del></del>	
			<del></del>
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, line 15.	<u> </u>		
(a) Description			(b) Book value
ASSETS HELD IN COMMUNI			231,423
RESTRICTED INVEST. (CO			23,311
RESTRICTED CERTIFICATE			20,865
RESTRICTED CASH EQUIVA	LENT		19,052
	· · · · · · · · · · · · · · · · · · ·		004 CE1
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	<u> </u>	<u> </u>	294,651
Part X Other Liabilities. See Form 990, Part X, line		<del> </del>	
1 (a) Description of liability	(b) Amount		
Federal income taxes CUSTODIAL FUNDS	123,156	•	
COSTODIAL FONDS	123,130		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	123,156		-

Sche	dule D (Form 990) 2009 WVSOM FOUNDATION (FOUNDATION) 51-016318		Page <b>4</b>
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Stater	nent	s
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	331,354
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	219,385
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	111,969
4	Net unrealized gains (losses) on investments	4	47,061
5	Donated services and use of facilities	_ 5	
6	Investment expenses	_ 6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV )	8	
9	Total adjustments (net) Add lines 4 through 8	9	47,061
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	159,030
	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements	1	846,732
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments 2a 47,061	-	
b	Donated services and use of facilities 2b 468,317	(	
C	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIV )	-17-17	
e	Add lines 2a through 2d	2e	515,378
3	Subtract line 2e from line 1	3	331,354
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	-	<u></u>
a	Investment expenses not included on Form 990, Part VIII, line 7b	- 1	
b	Other (Describe in Part XIV )	1	
C	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	331,354
	irt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per		
1	Total expenses and losses per audited financial statements	1	687,702
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	-	00,7,02
a	Donated services and use of facilities 23 468, 317	£;	
b	Prior year adjustments 2b		
C	Other losses 2c	1	
d	Other (Describe in Part XIV )		
u	Add lines 2a through 2d	2e	468,317
3	Subtract line 2e from line 1	3	219,385
3	) (	-	219,303
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	١.	
a	Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIV )  4b	٠.	
ט		ا- 40	
	Add lines 4a and 4b	4c	219,385
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	219,363
	art XIV Supplemental Information		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b		
	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 4b Also complete		
เกเร	part to provide any additional information		
<b>-</b>			
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Schedule D (Fe	om 990) 2009	WVSOM	FOUNDATION	(FOUNDATION)	51-0163180	Page <b>5</b>
Part XIV	Suppleme	ntal Informa	FOUNDATION ation (continued)			
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SCHEDULE (Form 990)

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

Overninents, and marriagais in the control owice	plete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22.
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▶ Attach to Form 990.

OMB No 1545-0047	2009	ben to Public Inspection
OMB	7	

**≗** □ 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 (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Employer identification number non-cash assistance (g) Description of 51-0163180 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (d) Amount of cash grant (e) Amount of non-cash (book, FMV, appraisa, assistance other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part IV and Schedule I-1 (Form 990) if additional space is needed INCORPORATED (c) IRC section if applicable WVSOM FOUNDATION (FOUNDATION) General Information on Grants and Assistance (p) EIN Enter total number of section 501(c)(3) and government organizations the selection criteria used to award the grants or assistance? MEDICINE FOUNDATION, (a) Name and address of organization or government Department of the Treasury Internal Revenue Service Name of the organization Part II Part

Schedule I (Form 990) 2009

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Schooling   (Form 990) 2009 WVSOM FOUNDATION (FOUNDAT	ATION (FOUNDA!	ION)	51-0163180		Page 2
Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.	to Individuals in the	e United States. Con	nplete if the organiza	ation answered "Yes" to Fo	irm 990, Part IV, line 22.
	(Form 990) if additio	nal space is needed.			
(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(e) Method of valuation (book, FMV, appraisal, other)
מת דוומת אירטווסט יוסווסתווויי מסייר		007 80			
PASS THROUGH SCHOLLARSHIES					
ACADEMIC ACHIEVEMENT AWAR	3	10,500			
ENDOWED SCHOLARSHIPS	14	10,100			
NEDAT.	17	3 400			
			9		

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. SCHOLARSHIP COMMITTEE THAT DETERMINES THE ENDOWED SCHOLARSHIP AWARDS EACH THE WEST VIRGINIA SCHOOL OF OSTEOPATHIC MEDICINE (THE SCHOOL) HAS A PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS YEAR

THE SCHOOL MONITORS THE ACADEMIC ACHIEVEMENT AWARDS AND UNRESTRICED SCHOLARSHIPS ARE DETERMINED BY THE EXECUTIVE COMMITTEE OF THE THE SCHOLARSHIP COMMITTEE INCLUDES REPRESENTATIVES FROM THE REGISTRAR'S THE ELIGIBILITY OF THE RECIPIENTS AND THE USE OF THE SCHOLARSHIP FUNDS. THE EXECUTIVE DIRECTOR OF THE WEST VIRGINIA SCHOOL OF OSTEOPATHIC MEDICINE FOUNDATION (WVSOMF) SITS ON THAT COMMITTEE. OFFICE AND THE FINANCIAL AID OFFICE.

	THE CHILDER OF THE CHILD BOTTON CONTRACTOR OF THE CHILD BOTTON OF	THON (FOUNDATE	(NC	51-0163180		Page 2
Schedule I (FC	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.	to Individuals in the	e United States. Co	emplete if the organiza	ltion answered "Yes" to Fo	rm 990, Part IV, line 22.
	Use Part IV and Schedule I-1 (Form 990) If additional	(Form 990) If addition	ומ	7		
<u> </u>	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
i						
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	complete this part to	provide the informa	tion required in Part I,	line 2, and any other addit	ional information.

THE SCHOLARSHIPS IN GENERAL ARE MONITIORED BY ALL PARTIES INVOLVED IN THE THROUGH THE SCHOOL. THIS IS PRIMARILY MONITORED BY THE DEAN OF STUDENT ORIGINAL GRANTING PROCESS BY MONITORING THE PROGRESS OF EACH STUDENT AFFAIRS.

WVSOME.

Schedule I (Form 990) 2009

**SCHEDULE 0** 

(Form 990)

### Supplemental Information to Form 990

OMB No 1545-0047
2009
Open to Public

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Inspection
Employer identification number

51-0163180

Name of the organization

WVSOM FOUNDATION (FOUNDATION)
MEDICINE FOUNDATION, INCORPORATED

STAFF OF WVSOM OF CERTAIN GRANRTS OR SCHOLARSHIPS.

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES

ITS PRIMARY PURPOSE IS TO PROMOTE EDUCATIONAL AND FRATERNAL OPPORTUNITIES

FOR CURRENT STUDENTS AND ALUMNI OF THE WEST VIRGINIA SCHOOL OF OSTEOPATHIS

MEDICINE (WVSOM), LOCATED IN LEWISBURG, WEST VIRGINIA. ITS MISSION IS TO

SERVE WVSOM, ITS FACULTY, STUDENTS AND ALUMNI AS AN ADDITIONAL FINANCING

SOURCE THROUGH FUNDRAISING, MANAGING FUNDS, AND OVERSEEING DISTRIBUTION OF

THESE FUNDS TO APPROPRIATE PARTIES. IT ACCOMPLISHES THIS BY ENGAGING IN

THE FOLLOWING PRINCIPAL ACTIVITIES: 1) RENTAL OF AND SERVICES PROVIDED AT

A CONFERENCE/MEETING FACILITY LOCATED ON THE CAMPUS OF WVSOM, 2) PROVIDING

CONTINUING EDUCATION CONFERENCE OPPORTUNITIES, 3) SOLICITATION OF

RESTRICTED AND UNRESTRICTED CHARITABLE CONTRIBUTIONS, 4) INVESTMENT OF

AVAILABLE LIQUID ASSETS, 5) AWARDING TO QUALIFIED STUDENTS, FACULTY OR

FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS EFFECTIVE JUNE 2010 THE BY-LAWS OF THE ORGANIZATION WERE REVISED. A COPY OF THESE ARE ATTACHED TO THIS RETURN.

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990

THE EXECUTIVE COMMITTEE OF THE BOARD, WITH THE ASSISTANCE OF MARK COLLINS,

CPA, THE ORGANIZATION'S IDENPENDENT AUDITOR, REVIEWS THE FORMS 990, DURING

AN EXECUTIVE COMMITTEE FOLLOWING ITS COMPLETION. THE REVIEW IS CONDUCTED

USING CHECKLIST NO. 501, "BOARD REVIEW OF 990", PROVIDED BY PRACTITIONERS

PUBLISHING COMPANY. FURTHER, THIS CHECKLIST IS EMAILED TO ALL BOARD MEMBERS

ALONG WITH AN ELECTRONIC COPY OF THE FORM 990 AND 990T PRIOR TO THEIR

Schedule O (Form 990) 2009

Name of the organization

WVSOM FOUNDATION (FOUNDATION)

Employer identification number 51-0163180

FILING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

GIVEN THE SMALLNESS OF THE COMMUNITY IN WHICH THE ORGANIZATION OPERATES,

BOARD MEMBERS ARE GENERALLY AWARE OF THE ACTIVITIES OF OTHER BOARD MEMBERS

AND THIS SERVES AS AN ADEQUATE METHOD OF MONITORING.

THE ORGANIZATION I SIN THE PROCESS OF DRAFTING A CONFLICT OF INTEREST POLICY, CONSISTENT WITH THAT OF THE WEST VIRGINIA SCHOOL OF OSTEOPATHIC MEDICINE.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL SINCE THE EXECUTIVE DIRECTOR AND ALL STAFF ARE EMPLOYEES OF THE WEST VIRGINIA SCHOOL OF OSTEOPATHIC MEDICINE AND NOT THE FOUNDATIONJ ITSSELF, THEIR RESPECTIVE COMPENSATION PACKAGES ARE NOT SUBJECT TO REIVEW BY THE FOUNDATION BOARD. HOWEVER, THEY ARE SUBJECT TO REVIEW BY THE MANAGEMENT OF THE SCHOOL ITSSELF.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST AT THE ORGANIZATION'S OFFICE. FINANCIAL STATEMENTS ARE POSTED TO WEBSITE.

### West Virginia School of Osteopathic Medicine Foundation, Incorporated By-Laws (Revised June 2010)

#### Article I

- **Section 1. Name.** The name of this Foundation shall be "West Virginia School of Osteopathic Medicine Foundation, Incorporated," which may be abbreviated to "WVSOM Foundation, Inc."
- **Section 2. Office.** The principal office of the Foundation shall be located at Lewisburg, Greenbrier County, West Virginia on the campus of the West Virginia School of Osteopathic Medicine.
- **Section 3. Statement of Mission.** West Virginia School of Osteopathic Medicine Foundation, Incorporated is dedicated to assist and strengthen the advancement of the West Virginia School of Osteopathic Medicine.
- **Section 4. Seal.** The seal of the Foundation shall be a circle with the words "West Virginia School of Osteopathic Medicine Foundation, Incorporated," which may be abbreviated to "WVSOM Foundation, Inc."
- **Section 5. Distribution of Funds.** In the event the West Virginia School of Osteopathic Medicine Foundation, Incorporated should cease to exist in purpose and intent, all funds would be transferred to the Board of Governors, Alumni Association or some other group of the Board of Director's discretion and governed by that Board of Directors.

### Article II General Organization

- **Section 1. Executive Director.** An executive director shall be interviewed, selected by the Board of Directors of the West Virginia School of Osteopathic Medicine Foundation, Incorporated and shall be put forward as recommended by the Board of Directors to the President of the school. The Executive Director shall be paid from state funds; i.e. the executive director will be a state employee for all intents and purposes
- **Section 2. Special Meetings.** Special meetings of the board may be called by the President of the school, or any member of the Executive Committee.
  - **Section 3. Place of Meeting.** Shall be as directed by the Board of Directors
- **Section 4. Notice of Meetings.** Written notice of the Annual Meeting will be mailed to the directors at least thirty (30) days prior to meeting.
- **Section 5. Meeting Schedule.** Regular quarterly meetings of the Board of Directors shall take place in September, December, March and June or the closest possible times to these months in order to have four (4) meetings of the entire Board of Directors a year.

### Article III Board of Directors

**Section 1. General Power.** The entire management of the Foundation and its property is vested in its Board of Directors

The Board of Directors of said Foundation shall have full power, except as prohibited by the terms of any instrument of gift devise, bequest, or other transfer, at its sole discretion, to change the form of any investment and for that or other purposes of the Foundation to dispose of any securities or other property held by said Foundation. The dispensation of the Foundation's assets must be approved by the Executive Committee, who reserves the right to refuse a gift it feels is not in the best interest of the Foundation.

- **Section 2. Number.** The Board of Directors of the WVSOM Foundation, Inc. shall consist of a maximum of fifteen (15.) The Directors shall be elected for terms of office as follows: five (5) directors shall be elected for an initial term of one (1) year, five (5) directors for an initial term of two (2) years, and five (5) directors for an initial term of three (3) years. Thereafter all directors may be elected for a term of three (3) years upon the expiration of the previous term. No Director may serve for more than two (2) consecutive terms of service to the Foundation.
- **Section 3. Quorum.** A majority of the members of the Board shall constitute a quorum for the transaction of business.
- Section 4. Ex Officio Directors. There shall be three (3) Ex Officio Directors. The President of the West Virginia School of Osteopathic Medicine, President of the WVSOM Alumni Association and the Executive Director of the West Virginia School of Osteopathic Medicine Foundation, Incorporated shall serve as Ex Officio members of the Board of Directors. No ex officio member of the board shall have voting privileges. The Executive Director, but no other ex officio member of the board of directors or serve on standing committees, may serve as an officer of WVSOM Foundation.
- **Section 5. Vacancies.** Any vacancy occurring among the Directors or any directorship to be filled by reason of an increase in the number of directors and may be filled with final approval of the Executive Committee. A Director elected to fill a vacancy shall be appointed for the unexpired term of his predecessor in office
- **Section 6. Compensation.** The Board of Directors shall serve without compensation of any kind. No member of the Board of Directors shall benefit financially from any action of the Board of Directors. An institutional employee who is a member of the Board of Directors shall abstain from voting on any issue in which he has a direct or indirect interest.
- **Section 7.** Attendance. It is assumed that any director accepting such a position will be committed to reasonable attendance at all committee and regular meetings. Should a director's attendance be called into question, it will stand that no director shall be absent from more than two (2) consecutive meetings per year. Those missing more than two (2) meetings during any fiscal year may be removed from the Board of Directors or encouraged to take a leave of absence, at discretion of the Board of Directors.

### Article IV Officers

**Section 1. Officers.** The officers of the Foundation shall be a President, a Vice-President, a Secretary, a Treasurer, and Executive Director.

#### Section 2. Duties.

- a) The President. The President shall preside at all meetings of the Board of Directors. He shall have general supervision of the affairs of the Foundation and shall perform such other duties as are incident to this office or are properly required of him by the Board of Directors.
- b.) <u>The Vice-President.</u> The Vice-President shall exercise the functions of the President during the absence or disability of the President. The Vice-President shall have such other duties as are assigned to him from time to time by the Board of Directors.
- c.) The Secretary. The Secretary shall attend all meetings of the Foundation, the Board of Directors and the Executive Committee and shall preserve or charge a designee to record and preserve in books of the Foundation true minutes the proceedings of all such meetings. He shall give all notices or charge a designee to give notice as required by the statute, by law, or resolution. He shall perform such other duties as may be delegated to him by the Board of Directors or by the Executive Committee.
- d.) The Treasurer. The Treasurer shall oversee the Foundation funds and securities and shall keep or cause to be kept full and accurate accounts of receipts and disbursements in books belonging to the Foundation and shall deposit or cause to be deposited all monies and other valuable effects in the name and in the credit of the Foundation in such depositories as shall be designated by the Board of Directors. He shall render to the President and the Board at the regular meeting of the Board or whenever they may require, an account of all transactions as Treasurer, and of the financial conditions of the Foundation. An annual audit shall be called for by the Treasurer. This audit will be conducted by a qualified accountant.
- e.) <u>Executive Director.</u> The Executive Director shall be the operating officer of the WVSOM Foundation, Inc. and shall have the authority and responsibility for transacting the day-to-day business of the Foundation.
  - **Section 3. Vacancies.** A vacancy in any elected office may be filled by a majority vote of a quorum of the Board of Directors for the unexpired term of the predecessor in office.
  - **Section 4. Delegation of Duties.** The Board of Directors for any reason may delegate the powers or duties of any officer or director.
  - **Section 5. Removal.** Any officer elected or appointed by the Board of Directors may be removed by the Board of Directors for any reason whenever in the Board's judgment the best interests of the Foundation would be served thereby. Such removal shall be without prejudice to any contract rights of the officer removed.
  - **Section 6.** Succession. An officer shall be able to succeed himself only once consecutively with a term as an officer being two (2) years, for a total of four (4) years in any one office.

#### Article V Committees

Section 1. The Executive Committee. The Executive Committee is composed of the President, Vice-President, Secretary, Treasurer, Executive Director and the immediate Past President. The Executive Committee may appoint as needed committees including, but not limited to the Nominating Committee, By-Laws Committee, Development Committee, Finance Committee and such Ad Hoc Committees as may be determined from time to time.

**Section 2. Vacancies.** Vacancies in the membership of any committee may be filled by appointments made in the same manner as provided for original appointments.

**Section 3. Quorum.** Unless otherwise provided in the resolution of the Board of Directors designating a committee, a majority of the whole committee shall constitute a quorum and the act of a majority of its members at a meeting at which a quorum is present shall be the act of the committee.

**Section 4. Rules.** Each committee may adopt rules for its own management not inconsistent with these By-Laws or with the rules adopted by the Board of Directors.

### Article VI Finances

**Section 1. Use of Income.** All gifts to the Foundation or other income not otherwise designated by the donor not to include funds allocated to the Foundation from the state as operational money, salaries and benefits and building management shall go into the general fund of the Foundation and shall be used exclusively for the use and benefit of the West Virginia School of Osteopathic Medicine in accordance with the general purposes of the Foundation's mission.

The Foundation may receive, manage, invest and disburse conditional gifts only if such gifts are for the exclusive use and benefit of the West Virginia School of Osteopathic Medicine. The phrase "exclusive use and benefit of the West Virginia School of Osteopathic Medicine" shall include gifts for the benefit of any separate or independent organization which is supportive of or affiliated with the West Virginia School of Osteopathic Medicine or its programs and functions, provided that such organization is (a) organized exclusively for charitable, scientific, or educational purposes and for the exclusive use and benefit of the West Virginia School of Osteopathic Medicine and b qualified as an organization exempt from income tax under Section 501(c)(3) of the Internal Revenue Code of 1954 (or the corresponding provision of any future United States Internal Revenue Law. The Board may from time to time provide procedures for the establishment of special or designated funds to be administered by the Board under the conditions of their creation in accordance with the Articles of Incorporation.

**Section 2. Contributions and Disbursements of Private Monies.** All private contributions received by the Foundation shall be deposited by the Treasurer or his designate in a special account or accounts in such banks, trust companies, or other depositories as the Board of Directors may select. All disbursements shall be made under a proper authority of the Board of Directors. All contributions to and disbursements from

the Foundation shall be recorded by the Treasurer or his designate and such records shall be subject to examination at any reasonable time, upon request, by any director.

**Section 3. Budget.** A statement of proposed operating income and expenditures for the following fiscal year shall be prepared by the Executive Director at the direction of the Executive Committee and shall be submitted to the Board of Directors at the annual meeting. When approved by the Board of Directors, such budget shall be a guideline for expenditures for operating expenses of the Foundation subject to subsequent changes.

Certain monies which may be allocated to the Foundation from the School's state budget are managed and controlled entirely by the School and subject to state authority.

**Section 4. Administration of the Budget**. Checks or vouchers in payment of approved expenditures shall be signed as follows:

- a.) Checks in the amount of \$0.01 \$1,000.00 may be signed by the Executive Director.
- b.) Checks in excess of \$1,000 01 must be (co-) signed by a member of the Executive Committee.

**Section 5. Checks, Drafts, Etc.** All checks, drafts or orders for the payment of money, notes, or other evidences of indebtedness issued in the name of the Foundation shall be signed by such officer or officers or agent or agents of the Foundation as stated in Section 4 above and in such a manner as shall from time to time be provided by resolution of the Board of Directors In the absence of such provision by the board, such instrument shall be signed by the Treasurer or his designated officer.

**Section 6. The Fiscal Year.** The fiscal year of the Foundation shall be July 1, to June 30.

# Article VII Execution of Contracts, Deeds, & Transfers & Representation with Reference to Securities

**Section 1. Execution of Contracts & Deeds.** Except as otherwise provided by resolution of the Board of Directors authorizing the execution thereof, all contracts, deeds, mortgages, pledges, transfers and other written instruments binding upon the Foundation shall be executed on behalf of the Foundation by the President or his designate with approval of the Executive Committee and the corporate seal shall be affixed and attested by the secretary or his designate. Obligations in excess of \$5,000 (five thousand) must receive approval from the Board of Directors.

Section 2. Voting Securities Owned by the Foundation. Unless otherwise ordered by resolution of the Board, the President and Secretary and Treasurer or their designates shall have full authority on behalf of the Foundation to attend, to act and to vote at any meetings of the stockholders, bondholders or other security holders of any Foundation, trust, or association in which the Foundation may hold securities. At any such meeting the President and Secretary and Treasurer or their designates shall possess all of the rights and powers incident to the ownership of such securities, which as owner thereof the Foundation might have possessed if present, including the authority to delegate such authority to a proxy. The Board may, by resolution, confer like authority upon any other person or persons. The Executive Committee may, by resolution, confer authority on any

single of its members to act and to vote at any meetings of stockholders, bondholders or other security holders of any Foundation, as he sees fit in the best interests of the Foundation.

Section 3. Sale of Securities. Unless otherwise ordered by resolution of the Board, the President and Secretary or Treasurer or their designates are authorized and empowered jointly to buy and sell stock held or owned by the Foundation, for such consideration as should meet their approval, and to that end they are further authorized to execute all bills of sale, transfers, assignments, and other writings necessary or convenient for effectuating such purposes. The President of the Board and Secretary or Treasurer or their designates are further authorized to give or have given the proper notices of any such action, have all such dispositions registered and noted on the books and records of this or any other Foundation or partnership where required, and to do all other things necessary or convenient to accomplish such purchases or sale.

The sale, purchase or transfer of land or other real property, including stocks, bonds or other investments for the WVSOM Foundation, Inc. will be done only with a resolution from the Executive Committee and subject to full board approval.

### Article VIII Exculpation of Directors

No director shall be liable to anyone for any acts on behalf of the Foundation or any omissions with respect to the Foundation committed by such director except for his or her own willful neglect or default, nor shall any director be liable to anyone for any act or neglect or default on the part of any one or more of the other directors of the Foundation in the absence of specific knowledge on the part of such director of such neglect or default.

#### Article IX Effective Date

These By-Laws shall become effective upon their approval of the Board.

#### Article X Amendments

These By-Laws may be altered, amended or repealed and new By-Laws may be adopted by a majority of the Board of Directors present at any regular meeting without notice or at any special meeting if at least fifteen (15) days written notice is given of intention to alter, amend, or repeal or adopt new By-Laws at such meeting.

### Article XI Parliamentary Authority

Robert's Rules of Order Revised shall govern all proceedings of the WVSOM Foundation, Inc. and the Board of Directors and all committee meetings not provided for or otherwise inconsistent with these By-Laws.