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Form 99Q-PF

Department of the Treasury

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

2010

OMB No 1545-0052

		ndar year 2010, or tax year beginning	may be able to use a copy of this	, 2010, and en		, 20
G	Che	ck all that apply Initial return	Initial Reti	urn of a former public cha	rity Fii	nal return
		Amended retu	ırn Address c	hange Na	me change	
N	ame	of foundation THE WILLIAM T. HA	NICOCY CUNDIT	ADI E F	A Employer identification 31-174640	
						r (see the instructions)
	umbe	er and street (or PO box number if mail is PO BOX 950 211 FE			304-325-7	151
С	ity or	town, state, and ZIP code			C If exemption application in check here	is pending,
		Bluefield WV 2470			D 1 Foreign organizations	s, check here
Н	Che	ck type of organization 🛮 🔀 Section 501	(c)(3) exempt private fou		2 Foreign organizations test, check here and	
_	Sect	ion 4947(a)(1) nonexempt charitable trust			E If private foundation state terminated under section	
		arrice value of all assets at cita of	Accounting method X	Cash	507(b)(1)(A), check here	
		rom Part II, col (c), line 16)	Other (specify)		F If the foundation is in a 6 termination under section	י ו
▶ \$	· · · · ·	184,318.	(Part I, column (d) must	be on cash basis)	507(b)(1)(B), check here	
		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), & (d) may not necessarily equal the amounts in column (a) (see instr.)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	1,500.			
	2	Check ► I if the foundation is not	.,	1		
		required to attach Sch B				
	3	Interest on savings and temp cash investments	6,640.	6,640.		
	4	Dividends and interest from securities				
	5a					
	b	(Net rental income or (loss))		1		
æ	6a	• . ,	145.			
Revenue	b	Gross sales price for all assets on line 6a				
Š	7	Capital gain net income (from Part IV, line 2)		145.		
	8	Net short-term capital gain				
	9	Income modifications Gross sales less		Ĺ		
	10a	rtns & allowances Less Cost of	-			
	b	Gross profit or (loss) (attach schedule)		1		
	11	Other income (attach schedule)				
	12	_Total. Add lines 1 through 11	8,285.	6,785.		······
	13	CORDEN Sation of Officers, directors, trustees, etc.	828.	828.		
	14	Other employee salaries and wages				-
Ses	Ð	Pension plans, employee benefits				
S V. Operating and Administrative Expenses	164					
ž į	沶	Accounting tees (attach schedule)	400.	400.		
9	US S	Other professional fees (attach schedule)				
E	W	Interest				· ·
<u> </u>	268	Taxes (attach conedule) (see instructions)	129.			
Ē	19 [Depreciation (attach sch.) and depletion				
ĔЦ	20	Остарапсу				
anc	21	Travel, conferences, and meetings				
<u> </u>	22	Printing and publications				
<u>ğ</u> _	23	Other expenses (attach schedule)				
<u> </u>	24	Total operating and administrative	1 257	1 220		
·	25	expenses Add lines 13 through 23	1,357. 8,000.	1,228.		8,000.
	25 26	Contributions, gifts, grants paid	9,357.	1,228.		8,000.
\dashv	27	Total exp & disbursements Add lines 24 and 25 Subtract line 26 from line 12	, ,,,,,,,,	1,220.		<u>0,</u> 000.
	а	Excess of revenue over expenses and disbursements	(1,072.)			
		Net investment income (if neg , enter -0-)		5,557.	-1	
	C	Adjusted net income (if neg , enter -0-)	i		1	

Page 2

Da	et II	Attached schedules and amounts in the Beginning of year End of year		of year		
	ш	Balance Sheets description column should be for end-of-year amounts only (See inst.)	(a) Book Value	(b) Book Valu	е	(c) Fair Market Value
	1	Cash - non-interest-bearing		-		
	2	Savings and temporary cash investments	52,137.	4,14	1.	4,141.
	3	Accounts receivable ▶				
		Less allowance for doubtful accts ▶				
	4	Pledges receivable ▶				
		Less allowance for doubtful accts ▶				
1	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see the instructions)				
- [7	Other notes and loans receivable (attach schedule)				
		Less allowance for doubtful accounts				
g	8	Inventories for sale or use				<u> </u>
Assets	9	Prepaid expenses and deferred charges			-	
As	102	Investments - U S and state govt obligations (attach schedule)				
		Investments - corporate stock (attach schedule)	116,970.	163,89	3	180,177.
		Investments - corporate stock (attach schedule)	110,570.	103,03		
l	11					
	11	Investments - land, buildings, and equipment basis Less accumulated depreciation				
ŀ	42	(attach schedule)		_		
	12	,				
	13	Investments - other (attach schedule)				
	14	Land, buildings, and equipment basis Less accumulated depreciation				
		(attach schedule)				
	15	Other assets (describe)				
	16	Total assets (to be completed by all filers - see the			_	
\rightarrow		instructions Also, see page 1, item I)	169,107.	168,03	4.	184,318.
	17	Accounts payable and accrued expenses				,
	18	Grants payable				
sə	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
jab	21	Mortgages and other notes payable (attach schedule)				
-	22	Other liabilities (describe ►)				
						ı
\Box	23	Total liabilities (add lines 17 through 22)				ı
-		Foundations that follow SFAS 117, check here				í
- 1		and complete lines 24 through 26 and lines 30 and 31.				
es es	24	Unrestricted				
Net Assets or Fund Balances	25	Temporarily restricted				
39,	26	Permanently restricted				
D E		Foundations that do not follow SFAS 117, ck. here ▶ 🏻				
5		and complete lines 27 through 31.				
P	27	Capital stock, trust principal, or current funds	169,107.	168,03	4.	
Ş	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
SSE	29	Retained earnings, accumulated income, endowment, or other funds				
t A		, , ,				
ž	30	Total net assets or fund balances (see the instructions)	169,107.	168,03	4.	
	31	Total liabilities and net assets/fund balances (see the				
		-instructions)	169-, 107	168,03	4	×4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -
Pa	rt III	Analysis of Changes in Net Assets or Fund Bala		200,00		<u> </u>
		net assets or fund balances at beginning of year - Part II, column		with		
		of-year figure reported on prior year's return)	(=),e se (illust agree (1	169.107.
		amount from Part I, line 27a			2	169,107. (1,072.)
		r increases not included in line 2 (itemize)			3	12,0,2.7
		ines 1, 2, and 3	·		4	168,035.
		eases not included in line 2 (itemize) PROUNDING			5	1
		net assets or fund balances at end of year (line 4 minus line 5) - P	Part II column (h) line 20	<u> </u>	6	168,034.
	, otal	net assets of fund balances at end of year (line 4 minus line 5) - P	art ii, columni (b), iiile 30	L.		100,004.

Part IV Capital Gains	and L	osses for Tax on Inve	estme	ent Income				
(a) List and describe t	he kındı	(s) of property sold (e g , rea	ıl estate	·,	(b)How acquired P - Purchase	(c) Date	acquired	(d) Date sold
		common stock, 200 shs ML	.C Co)		D - Donation		lay, yr)	(mo , day, yr)
1a ALTRIA GROUP	INC				P	<u> </u>	/2009	03/05/2010
b FRONTIER COMM	UNIC	CATIONS CO			P	02/17		
c FRONTIER COMM	UNIC	CATIONS CO			P	10/19	/2005	08/30/2010
d						_		
е								
	(f) Depreciation allowed	T	(g) Cost or ot	her basis		(h) Gair	or (loss)
(e) Gross sales price	,	(or allowable)	1	plus expens			(e) plus (f) minus (g)
a 4,085.		· · · · · · · · · · · · · · · · · · ·	T		3,965.			120.
b 370.				-	364.			6.
c 370.			1	•	351.			19.
d			1	•				
e								
Complete only for assets she	owing a	ain in column (h) and owned	l by the	foundation on	12/31/69	(1)	Gains (Co	l (h) gain minus
Complete only for assets sin	Junia a	(j) Adjusted basis	1	(k) Excess			•	less than -0-) or
(i) F M V as of 12/31/69		as of 12/31/69		over col (001 (1	•	rom col (h))
		as 01 12/31/09	-	over cor (), II ally	ļ	L03363 (1	120.
<u>a</u>			†	 · ·				6.
<u>b</u>		···········						19.
<u>c</u>			1			 		
d			+					
<u>e</u>			_L					
2 Capital gain net income or (i	net capit			ter in Part I, Iin				145
		<u> </u>		0- in Part I, lin	e /	2		145.
3 Net short-term capital gain of				(6)	_			
If gain, also enter in Part I, Ii	ne 8, co	olumn (c) (see the instruction	ıs)		>			
If (loss), enter -0- in Part I, li						3		
Part V Qualification	Under	Section 4940(e) for F	Reduc	ed Tax on	Net Investm	ent Inco	me	
(For optional use by domestic pr	ivate for	undations subject to the sect	tion 494	40(a) tax on ne	et investment ind	come)		
If another 4040(d)(2) applies les	، منطق من	and blank						
If section 4940(d)(2) applies, lea	ve mis j	part blank						_
Was the foundation liable for the	section	4942 tax on the distributable	le amoi	unt of any year	r in the base per	rod?		X Yes No
If "Yes," the foundation does not	qualify	under section 4940(e) Do n	not com	plete this part				
1 Enter the appropriate amour					re making any e	ntries		
(a)		(b)			(c)			(d)
Base period years Calendar year (or tax year be	a 10)	Adjusted qualifying distribut	tions		et value of table-use assets	s		ribution ratio ivided by col. (c))
2009	9 "'/			Homenar	itable abe accet		(00: (0) 0	
2008				-				
2007								
2007				-	_			
					. .			
2005	<u></u>							· · · · · · · · · · · · · · · · · · ·
0 Tatal after 4 anti (1)						2		
2 Total of line 1, column (d)					1 44	 	+ -	
3 Average distribution ratio for				line 2 by 5, o	r by the number	1		
of years the foundation has	been in	existence if less than 5 year	rs			3		
4 Enter the net value of nonch	arıtable	-use assets for 2010 from Pa	art X, lu	ne 5		4		
							ľ	
-5-Multiply-line-4-by-line-3								
6 Enter 1% of net investment	ncome	(1% of Part I, line 27b)				6		
		,						
7 Add lines 5 and 6						7		
, Add inies 5 and 6						 		
9 Enter qualifying distributions	from D	art XII line 4				8		
8 Enter qualifying distributions if line 8 is equal to or greate			/L line	th and compl	ata that nart usu	<u> </u>		the Part VI
instructions	i uran III	He 7, CHECK THE DOX III FAIL V	v 1, 1111 C	is, and wind	oto tilat part usii		. 1410 OCC	SHOT WILL YE

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10

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complete Part XIV

names and addresses

4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV in instructions)? If "Yes,"

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

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Х

X

3b

4a

if the foundation had excess business holdings in 2010)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable

orm	990-PF(2010) THE WILLIAM T.	HANCOCK CHAI	RITABLE	31-174	6406	Page 6
Par	t VII-B Statements Regarding Activ	vities for Which F	orm 4720 May Be R	equired (continued	<u>.</u>	
5a	During the year did the foundation pay or incur	any amount to	-			
	(1) Carry on propaganda, or otherwise attemp	t to influence legislation	n (section 4945(e))?	∐ Yes ⊠ No	o	
	(2) Influence the outcome of any specific public	c election (see section	4955), or to carry			
	on, directly or indirectly, any voter registrat	ion drive?		∐ Yes X No	o	
	(3) Provide a grant to an individual for travel, s	study, or other similar p	urposes?	Yes 🛛 No	o	
	(4) Provide a grant to an organization other than	an a charitable, etc., or	ganization described			
	in section 509(a)(1), (2), or (3), or section 4	1940(d)(2)? (see instruc	ctions)	Yes 🛛 No	ا ه	
	(5) Provide for any purpose other than religiou	s, charitable, scientific,	literary, or			
	educational purposes, or for the preventior	of cruelty to children o	or animals?	Yes 🛛 No	0	
b	If any answer is "Yes" to 5a(1)-(5), did any of t	he transactions fail to q	ualify under the exception	s described in		
	Regulations section 53 4945 or in a current no	tice regarding disaster	assistance (see the instruc	ctions)?	5b	
	Organizations relying on a current notice regar	ding disaster assistanc	e check here	▶ []		
Ç	If the answer is "Yes" to question 5a(4), does t	he foundation claim exi	emption from the	_	į	
	tax because it maintained expenditure respons	sibility for the grant?		☐ Yes ☐ No	o	
	If "Yes," attach the statement required by Regu	•	5-5(d)			
6a	Did the foundation, during the year, receive an	y funds, directly or indir	rectly, to pay	_		
	premiums on a personal benefit contract?	•	•	Yes X No	0 .	. –
b	Did the foundation, during the year, pay premit	ums, directly or indirect	ly, on a personal benefit o	ontract?	6b	X
	If "Yes" to 6b, file Form 8870	•	•		, 	
7a	At any time during the tax year, was the found	ation a party to a prohib	oited tax shelter transaction	n? ∏ Yes 🏻 No	0	
	If "Yes," did the foundation receive any procee				7b	İ
	t VIII Information About Officers,				Employ	ees,
	and Contractors	•	•	.		·
1 L	ist all officers, directors, trustees, foundation	n managers and their	compensation (see the	instructions).	-	
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans	(e) Expens	
т	ETDOW COMMINITMY DANK	TRUSTEE	(II Hot paid, effter -0-7	and deferred comp	Other and	
	FIRST COMMUNITY BANK BLUEFIELD WV 24701	IRUSIEE	828.			
	VILLY PIERRE JACOEBEE	TRUSTEE	020.			
	ROANOKE VA	TROSTEE	0			
<u>1</u>	COANORE VA					
		-				
		-				
	Samuelan of five bishart and amplement	- (-4h4h4hi-	aludad an line 4 - aan th	o instructions)		
	Compensation of five highest-paid employee f none, enter ``NONE."	s (other than those in	ciuded on line i - see tii	e msa acaons).		
				(d) Contributions to		
(a	Name and address of each employee paid	(b) Title, and average hours per week	(c) Compensation	employee benefit		se account,
	more than \$50,000	devoted to position	(a) componication	plans and deferred compensation	other all	owances
1	IONE			Compensation		
	10112					
			-			
	·	1 1				
	·					
				·	 	
	I number of other employees and ever 650 000					<u> </u>
ota	I number of other employees paid over \$50,000	-			Form 990-P	E (2010)
					FUIII 330-F	T (2010)

Form 990-PF (2010) THE WILLIAM T. HANCOCK CHARITA		31-17 <u>46406</u> Page 7
Part VIII Information About Officers, Directors, Trustees, Fo	oundation Managers,	Highly Paid Employees,
and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see	the instructions). If none,	enter "NONE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	
NONE		
	<u> </u>	
	_	İ
	<u> </u>	
	<u></u>	
	_	
Total number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		<u> </u>
List the foundation's four largest direct charitable activities during the tax year. In	clude relevant statistical info	such Expenses
as the number of organizations and other beneficiaries served, conferences conv	ened, research papers produ	iced, etc
1 <u>N/A</u>		
		
2		
3		
4		
	the instructions)	
Describe the two largest program-related investments made by the foundation $1-N/A$	during the tax year on lines 1	and 2 Amount
		
2		
All other program-related investments See instructions	<u> </u>	
3		
	· · · · · · · · · · · · · · · · · · ·	· ·
Total Add lines 1 through 3		▶

Part X Minimum Investment Return (All domestic foundations must complete this	s part. Foreign foundations	, see the instructions)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., pu	rposes	
a Average monthly fair market value of securities	1a	166,690.
b Average of monthly cash balances	1b	
c Fair market value of all other assets (see the instructions)	1c	
d Total (add lines 1a, b, and c)	1d	166,690.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	166,690.
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount,		
see the instructions)	4	2,500.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V,	line 4 5	164,190.
6 Minimum investment return. Enter 5% of line 5	6	8,210.
Part XI Distributable Amount (see the instructions) (Section 4942(j)(3) and (j)(5) priv	ate operating foundations	
and certain foreign organizations check here ▶ □ and do not complete this part)		
1 Minimum investment return from Part X, line 6	1	8,210.
2 a Tax on investment income for 2010 from Part VI, line 5	111.	
b Income tax for 2010 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2c	111.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	8,099.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	8,099.
6 Deduction from distributable amount (see the instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line	1 7	8,099.
Part XII Qualifying Distributions (see the instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	; []	
a Expenses, contributions, gifts, etc -total from Part I, column (d), line 26	1a	8,000.
b Program-related investments-total from Part IX-B	1b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., pu	urposes 2 _	.
3 Amounts set aside for specific charitable projects that satisfy the	1 1	
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part X	(III, line 4	8,000.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment inc		
Enter 1% of Part I, line 27b (see the instructions)	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	8,000.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calcu	lating whether the foundati	on
qualifies for the section 4940(e) reduction of tax in those years		

	Onaroundario (coc in				
	Batalanda and for 2010 for a Bat Wi	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1	Distributable amount for 2010 from Part XI,	Colpus	Tears prior to 2005	2003	8,099.
•	line 7				0,055.
2	Undistributed income, if any, as of the end of 2010			117.	
	Enter amount for 2009 only			111.	
	Total for prior yrs 20, 20, 20				
3	Excess distribs carryover, if any, to 2010				
	From 2005 From 2006				
_					
	From 2007				
	From 2008				
	From 2009	Į.			
	Total of lines 3a through e		· · · · · · · · · · · · · · · · · · ·		
4	Qualifying distributions for 2010 from Part XII, line 4 > \$ 8,000.				
_	Applied to 2009, but not more than line 2a			117.	
	Applied to 2009, but not more than line 2a				
D	years (Election required - see the instr.)				
^	Treated as distributions out of corpus				
U	(Election required - see the instructions)				
a	Applied to 2010 distributable amount				7,883.
	Remaining amt distributed out of corpus				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
5					
•	(If an amount appears in column (d), the				
	same amount must be shown in col (a))				
6	Enter the net total of each column as				
•	indicated below:				
а	Corpus Add lines 3f, 4c, & 4e Subtract line 5		}		
	Prior years' undistributed income Subtract		*		
_	line 4b from line 2b		ŀ		
c	Enter the amount of prior years' undistributed				
_	income for which a notice of deficiency				
	has been issued, or on which the section				
	4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount - see the instructions				
е	Undistributed income for 2009 Subtract		<u> </u>		
	line 4a from line 2a Taxable amount -				
	see the instructions				
f	Undistributed income for 2010 Subtract				
	lines 4d and 5 from line 1. This amount				
	must be distributed in 2011				216.
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see the				
	instructions)		<u> </u>		<u> </u>
8	Excess distributions carryover from 2005				
	not applied on line 5 or line 7 (see the				
	instructions)				
9	Excess distributions carryover to 2011.				
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
а	Excess from 2006				
b	Excess from 2007				
	Excess from 2008				
	Excess from 2009				
е	Excess from 2010	<u> </u>			

WEST VIRGINIA

PRIMARILY RESIDENTS OF MERCER OR MCDOWELL COUNTIES,

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Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to **Amount** status of any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year 8,000. SEE ATT SCHEDULE 8,000. ▶ 3a Total **b** Approved for future payment NONE Total ▶ 3b

Par	XVI-A Analysis of Income-Product	ing Activi	ties			
	gross amounts unless otherwise indicated		ed business income	Excluded	by section 512, 513, or 514	(e)
	5			· ·	(d)	Related or exempt
		(a)	(b)	(c)		function income
		Business	Amount	Excl	Amount	(See the
1	Program service revenue	code		code		instructions)
а						
b				1		
				+		
С				_		
d				l		
е						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments			14	6,640.	
4	Dividends and interest from securities					
-				-		
5	Net rental income or (loss) from real estate			-		
а	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal propert	V	•	Ì		
7	Other investment income	1		1		
					145	
8	Gain or (loss) from sales of assets other than inventory			14	145.	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a			1		
	Other revenue a			+		
þ						
С						
_						
d				+		
				1		
е				<u> </u>	6 795	
e 12	Subtotal Add columns (b), (d), and (e)				6,785.	6 705
e 12 13	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)				6,785. 13	6,785.
e 12 13	Subtotal Add columns (b), (d), and (e)	ons)			6,785. 13	6,785.
e 12 13 (See	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculati		omplishment of E	xempt F	13	6,785.
e 12 13 (See Par	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to	the Acco			13	
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Page 13

_	art XV				ansfers To a	nd Transac	tions a	nd Relatio	nships With No	ncharit		
1	Did the	orga	nization directly or		n any of the foll	owing with any	other ord	anızatıon de:	scribed in section		Yes	No
•			Code (other than									
а			m the reporting fo					·	-			
	(1)				·	_				1a(1)		X
	(2)	Other	assets							1a(2)		Х
b	Other t	ransa	ctions									
	(1) 5	Sales	of assets to a non	charitable exemp	t organization					1b(1)		X
	(2) F	urcha	ases of assets from	m a noncharitable	exempt organiza	ition				1b(2)		X
	(3) F	Rental	of facilities, equip	ment, or other as	sets					1b(3)		X
	(4) F	Reimb	ursement arrange	ements						1b(4)		X
	(5) L	oans.	or loan guarantee	es						1b(5)		X
	(6) F	Perfor	mance of services	or membership o	or fundraising soli	citations				1b(6)		X
C	Sharing	g of fa	icilities, equipmen	t, mailing lists, otl	ner assets, or paid	d employees				1c		X
d	If the a	nswe	r to any of the abo	ove is "Yes," comp	lete the following	schedule Co	lumn (b) s	hould always	show the fair market	t value of	the	
	goods,	other	assets, or service	es given by the re	porting foundation	n If the founda	ation recei	ved less than	fair market value in	any trans	action	
	or shar	ing a	rangement, show	ın column (d) the	value of the good	ds, other asset	ts, or serve	ices received				
_												
<u>(a)</u>	Line no	(b)	Amount involved	(c) Name of non	charitable exemp	t organization	(d)Desc	of transfers,	transactions, and sh	arıng arra	ingem	ents
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	le the	four	dation directly or i	ndroeth effiliator	Lwith or rolated t		1 tov ovor	nt organizati	one described in			
La			1(c) of the Code (•	•	-	tax-exem	ipi organizati	ons described in	Y	es 🛚	l No
b			emplete the follow		1 301(0)(3)) 01 111 3	50011011 527				U .	- E	j
_	.,		Name of organiza		(b) Type	of organizatio	n		(c) Description of re	lationship	-	
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Si	gn		Under penalties of	f perjury, I declare	that I have exam	nined this retur	n, includir	ng accompan	ying schedules and s	tatement	s, and	to the
	ere		best of my knowle on all information	dge and belief, it	is true, correct, ai	nd complete [Declaration	n of preparer	other than taxpayer	or fiducia	ry) is l	based
			- (or writer preparer	,	ige		/				
	-	1	Setting	X SM	Mer		5/11/1	·/ I	V.P. Sr. Tra	est Admi	1.04	4.
		Su	nature of officer of	or trustee			Date		Title			<u> </u>
	aid		Print/Type prepa		Preparer's sig	nature		Date	Check If	PTIN		
		.		WLESS	MARK E L		05	5/05/20	11 self-employed	P0068	079	
	eparei		Firm's name	▶ANDERSO	V & LAWLE	SS, CPA	S		Firm's EIN ▶ 55 -	07433	18	

Firm's address , ▶PO BOX 1537 BLUEFIELD WV 24701

Form 990-PF (2010)

Phone no 304-325-6157

Use Only

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, 990-EZ, and 990-PF.

OMB No 1545-0047

2010

Employer identification number

THE WILLIAM T. HANCOCK CHARITABLE 31-1746406 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or Form 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or Form 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or Form 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

THE WILLIAM T. HANCOCK CHARITABLE

Employer identification number 31-1746406

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	WILLY PIERRE JACOEBEE 1147 WASENA AVENUE SW	\$\$.	Person X Payroll Noncash
	ROANOKE VA 24015-5311		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II If there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		s	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II If there is a noncash contribution)

US 990 Investments: Corporate Stock as of Year End						
Description	Book value	FMV				
AT&T INCORPORATED	5,091.	5,876.				
BAC CAPITAL TR II 7%	5,008.	4,880.				
AC CAPITAL TR III 7%	15,008.	14,592.				
ANK OF AMERICA CORP	7,822.	2,668.				
RISTOL-MYERS SQUIBB	4,917.	5,296.				
ITIGROUP CAP VII 7	5,004.	4,970.				
ONOCOHILLIPS	15,301.	20,430.				
ORN PRODUCTS NATL	4,661.	9,200.				
UKE ENERGY CORP	6,470.	9,350.				
LOWERS FOODS, INC.	5,575.	5,382.				
ENERAL ELECTRIC CO	7,831.	7,316.				
OHNSON CONTROLS, INC.	8,808.	17,190.				
RAFT FOODS, INC.	5,840.	6,302				
ORFOLK SOUTHERN CORP	4,920.	6,282.				
UVEEN QUALITY PREF	15,379.	7,400.				
FIZER, INC.	6,052.	3,502				
PROCTER & GAMBLE CO.	7,670.	8,878				
OUTHERN CO.	5,732.	7,646				
PECTRA ENERGY CORP	5,882.	7,497				
NILEVER PLC	5,713.	6,176				
ERIZON COMMUNICATIONS	10,798.	14,312				
ESTAR ENERGY, INC.	4,411.	5,032				
	163,893.	180,177				
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TI	HE WILLIAM T HANCO	OCK CHAR	ITABLE FOUNDATION 31-1746406						
	P	AGE 11, PA	ART XV-2010						
GRANTS AND CONTRIBUTIONS PAID DURING YEAR									
NAME AND ADDRESS	FOUNDATION STATUS OF	F RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT					
ASFC LEARNING DAY CAMP	NONE		SCHOLARSHIPS	450					
MERCER COUNTY WE CAN PROGRAM	NONE		GENERAL OPERATION SUPPORT	500					
COMMUNITY CHRISTMAS TREE FUND	NONE		GIFTS FOR CHILDREN	500					
BLFD SHRINE CLUB	NONE		HELP WITH TRANSPORTATION FOR KIDS	750					
APPALACHIAN TEEN CHALLENGE	NONE		HELP PURCHASE VAN	500					
BLFD UNION MISSION	NONE		PROVIDE RX FOR CHILDREN	500					
WELCH COMMUNITY HOSPITAL	NONE		PEDIATRIC FLOOR GIFTS FOR CHRISTMAS	300					
WADE CENTER	NONE		WADE SCHOOL AFTER SCHOOL PROJECT!	500					
MERCER CO HEALTH DEPT	NONE	i	IMMUNIZATION AND CARE PROGRAMS	900					
MERCER CO FELLOWSHIP HOME	NONE		GIFTS FOR CHILDRENS PROGRAMS	1200					
GREATER BLFD COMM CENTER	NONE		PROVIDE MEMBERSHIPS FOR ELDERLY	900					
DIABETES CAMP OF WV	NONE		SPONSOR KIDS TO CAMP	<u>1000</u>					
				8000					

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