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Form **990-PF**

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

OMB No 1545 0052

2010

Department of the Treasury Internal Revenue Service

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements

For Gal	endar year 2010, or tax year beginning	, 2010,	and ending	,	
G Che	eck all that apply 🔲 Initial return 🔲 Init	ial Return of a former pu	· · · · · · · · · · · · · · · · · · ·		nal return
	Amended return	X Address c		e change	
	foundation LA FULLER SETTLEMENT, INC.			A Employer identification in 55-6000847	umber
	and street (or PO box number if mail is not delivered to st	reet address)	Room/suite	B Telephone number (see the	ie instructions)
РО В	OX 97			(304) 634-94	170
City or to	own			C If exemption application	is pending, check here 🕨 📗
	INGTON			D 1 Foreign organizations, ch	
H C	theck type of organization X Section 50 Section 4947(a)(1) nonexempt charitable	1(c)(3) exempt private for	rivate foundation	2 Foreign organizations me here and attach computa	
1 F:		counting method X Ca		E If private foundation stat	us was terminated
	from Part II, column (c), line 16)	Other (specify)		under section 507(b)(1)(F If the foundation is in a	
▶ \$, column (d) must be on	cash basis)	under section 507(b)(1)(
Part	Analysis of Revenue and Expenses (The total of amounts in	(a) Revenue and	(b) Net investmen		(d) Disbursements
	columns (b), (c), and (d) may not neces-	expenses per books	ıncome	income	for charitable purposes
	sarily equal the amounts in column (a) (see the instructions))				(cash basis only)
•	1 Contributions, gifts, grants, etc, received (att sch)	100,802.			
	2 Ck Inf the foundn is not req to att Sch B				
	3 Interest on savings and temporary cash investments	202.	202		
	4 Dividends and interest from securities	17,170.	17,170	0.	
	5a Gross rents b Net rental income				
R	or (loss) 6a Net gain/(loss) from sale of assets not on line 10	-68.			
E V	b Gross sales price for all assets on line 6a 393,330.				
É	7 Capital gain net income (from Part IV, line 2)		(o.	
N U	8 Net short-term capital gain 9 Income modifications				
E	10 a Gross sales less returns and				
	allowances h Less Cost of				
	c Gross profit/(loss) (att sch)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc	118,106.	17,372	2.	
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
8 A	16a Legal fees (attach schedule)				
	b Accounting fees (attach sch) L-16b Stmt	703.			703.
N N	c Other prof fees (attach sch)			-	
SI	18 Faxes (ettach schedule) (see instr.) See(Line 18 Stm	5,343.			5,343.
A A	19 Depreciation (attach Sch) and depletion 11			-	
€	ု ့တု∮sch) ၉၈d depletioု၅၂1 O 20:∮Occupancy				
Ğ É	21 Travel, conferences, and meetings				
X E	22 Printing and publications 23 Other expenses (attach schedule)				
ANGUERANDAL 2. 2011	See Line 23 Stmt	-208.			-208.
S S	24 Total operating and administrative		· · · · · · · · · · · · · · · · · · ·		
š	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid	5,838. 3,000.			5,838. 3,000.
	26 Total expenses and disbursements.	3,000.			
	Add lines 24 and 25	8,838.			8,838.
	27 Subtract line 26 from line 12: a Excess of revenue over expenses				
	and disbursements	109,268.	<u> </u>		
	b Net investment income (if negative, enter -0)		17,372	2.	
RAA E	c Adjusted net income (if negative, enter 0) or Paperwork Reduction Act Notice, see the	instructions		EEA0301 07/23/10	Form 990-PF (2010)
	., , apel moin neudedon met Nudec 366 lile		,		

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

708,705.

6

Pa		osses for Tax on Investmen		(b) How acq	ured	(C) Date acquired	(d) Date sold
	2-story brick warehous	the kind(s) of property sold (e.g., ree, or common stock, 200 shares MI	car estate,	P — Purch D — Donat	ase	(month, day, year)	(month, day, year)
	FEDL FARM CREDIT BA	NK BOND]	P		03/17/09	03/10/10
<u>t</u>	FEDL HOME LOAN BANK	BOND		P		05/12/09	05/28/10
	FEDL HOME LOAN BANK			<u> </u>	$\overline{}$	04/03/09	07/01/10
	SUMMIT STATE BANK C	D		P		12/31/08	07/07/10
	See Columns (a) thru (d)						<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basi plus expense of sale	,		(h) Gain or (e) plus (f) m	
a				,008.			
				,008.			-8.
				,008.			-8.
				,007.			
<u>e</u>				,367.			
	(i) Fair Market Value as of 12/31/69	ng gain in column (h) and owned by (j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if an			l) Gains (Column (F) In minus column (F) n -O-) or Losses (fr	(), but not less
		as 01 12/31/09	Over Column (j), ii an	y			-8.
<u>t</u>		7-44					
							-8. -8. -7.
<u>c</u>		· - <u>-</u>					-/· -37.
	Capital gain net income or (net	capital loss) If gain, also	enter in Part I, line 7 ter -0- in Part I, line 7				
_	,	_	 -	}	2		-68.
3	Net short-term capital gain or (I	oss) as defined in sections 1222(5)	and (6)	}	ļ		
	If gain, also enter in Part I, line in Part I, line 8	8, column (c) (see the instructions)	If (loss), enter -0-]	3		
Par		Section 4940(e) for Reduce	d Tay on Net Investme	nt Incon			
	es, the foundation does not quali	ion 4942 tax on the distributable an fy under section 4940(e). Do not co	mplete this part			Yes	X No
<u>1</u>		each column for each year, see th		any entri	es		
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse	ets	(colu	(d) Distribution imn (b) divided	
	2009	89,125.	505	,863.			0.176184
	2008	100,144.		,550.			0.197698
	2007	122,350.		,492.			0.239671
	2006	106,573.		,130.		 	0.204112
	2005	90,561.	515	<u>,648.</u>			0.175626
2	Total of line 1, column (d)				2		0.993291
	•	e 5-year base period – divide the to	tal on line 2 by 5, or by the	1			
•	number of years the foundation	has been in existence if less than 5	years	-	3	 -	0.198658
4	Enter the net value of noncharit	able-use assets for 2010 from Part	X, line 5	-	4		659,792.
5	Multiply line 4 by line 3			}-	5		131,073.
6	Enter 1% of net investment inco	ome (1% of Part I, line 27b)			6		174.
7	Add lines 5 and 6				7		131,247.
8	Enter qualifying distributions fro	m Part XII, line 4			8		8,838.
	If line 8 is equal to or greater the	an line 7, check the box in Part VI,	line 1b, and complete that p	art using a	a 1%	tax rate See th	пе

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the	ne instructions	s)	
1 a Exempt operating foundations described in section 4940(d)(2), check here			
Date of ruling or determination letter (attach copy of letter if necessary — see instr.)			
b Domestic foundations that meet the section 4940(e) requirements in Part V,	1		347.
check here Land enter 1% of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
3 Add lines 1 and 2	3		0. 347.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		347.
6 Credits/Payments	-		347.
a 2010 estimated tax pmts and 2009 overpayment credited to 2010 [6a] 475.			
b Exempt foreign organizations — tax withheld at source			
c Tax paid with application for extension of time to file (Form 8868) 6c 0.	1		
d Backup withholding erroneously withheld			
7 Total credits and payments Add lines 6a through 6d	7		475.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8		
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		128.
	11		
Part VII-AT Statements Regarding Activities			
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	
participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes	1	<u>a</u>	X
(see the instructions for definition)?	1	b	Х
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials publicated by the foundation in account of the activities.	shed		
or distributed by the foundation in connection with the activities		_	
 c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year 	1	-	X
(1) On the foundation \$ (2) On foundation managers \$			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
foundation managers \$			
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	4—	<u> </u>
If 'Yes,' attach a detailed description of the activities			
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4		<u> </u>
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	4		+
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	+-	X
If 'Yes,' attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or 			
 By state legislation that effectively amends the governing instrument so that no mandatory directions that confusion with the state law remain in the governing instrument? 	flict 6		
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	- 	+-
8a Enter the states to which the foundation reports or with which it is registered (see the instructions)	<u> </u>	+^	+-
WV - West Virginia			
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
(or designate) of each state as required by <i>General Instruction G² if 'No,' attach explanation</i>	342(1)(5)	b X	1-
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 49 for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete F	Part XIV 9	 	X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their nan	nes 10		x
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the tax year beginning in 2010?

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b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of

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Part VII-B Statements Regarding Activiti	ies for Which Form	1 4720 May Be Req	uired (continued)		
5a During the year did the foundation pay or incur	•				
(1) Carry on propaganda, or otherwise attemp	t to influence legislation	n (section 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific publion, directly or indirectly, any voter registra	ic election (see section tion drive?	4955), or to carry	Yes X	No	
(3) Provide a grant to an individual for travel,	•	·	Yes X	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, ord 4940(d)(2)? (see instru	ganization described ictions)	Yes X	No	
(5) Provide for any purpose other than religious educational purposes, or for the prevention			Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of t described in Regulations section 53 4945 or in (see instructions)?	a current notice regard	ling disaster assistance	ons	5 b	
Organizations relying on a current notice regains	rding disaster assistanc	e check here	▶∐		
c If the answer is 'Yes' to question 5a(4), does t tax because it maintained expenditure response	he foundation claim exe sibility for the grant?	emption from the	Yes	No	
If 'Yes,' attach the statement required by Regu	ılatıons section 53 4945	i-5(d)			
6a Did the foundation, during the year, receive an on a personal benefit contract?			∐ Yes X		
b Did the foundation, during the year, pay premi	ums, directly or indirect	lly, on a personal benef	it contract?	6b	X
If 'Yes' to 6b, file Form 8870	lation o montri to o muchi	hitad tay abaltar transas	ction? Yes X	No	
7a At any time during the tax year, was the found				7b	
b If yes, did the foundation receive any proceeds Part VIII Information About Officers, D					\ }-
and Contractors	irectors, rrustees,	Touridation manag	gers, riiginiy r ala z	-inployees	-,
1 List all officers, directors, trustees, foundatio	n managers and their c	ompensation (see instr	uctions).		
	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense	
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allo	wances
JAMES_MORGAN	!				
535 13TH AVENUE	PRESIDENT	_	_		_
HUNTINGTON WV 25701	1.00	0.	0.		0.
CAROLYN AGEE					
160 WOODLAND DRIVE	SECT/TREAS				0
HUNTINGTON WV 25705	1.00	0.	0.		0.
ROBERT AGEE					
61 N. BRADLEY FOSTER DRIVE	BOARD MEMBER				•
HUNTINGTON WV 25701	1.00	0.	0.		0.
See Information about Officers, Directors, Trustees, Etc					
					^
2 Compensation of five highest-paid employee		0.	0.	tor 'NONE '	0.
	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense	account
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	other allo	
NONE			<u> </u>		
0					
0					
0					
0	<u> </u>			 	
Total number of other employees paid over \$50,000	<u> </u>	<u> </u>	<u> </u>		None
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Part IX-B Summary of Program-Related Investments (see Instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 2

All other program-related investments See instructions

3

Total. Add lines 1 through 3

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Part X Minimum Investment Return (All domestic foundations must complete this see instructions.)	part. Foreign fo	undations,
		
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities	S 1a	593,422.
b Average of monthly cash balances	1 b	76,418.
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b, and c)	1 d	669,840.
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	669,840.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	10,048.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	659,792.
6 Minimum investment return. Enter 5% of line 5	6	32,990.
Part:XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) priva	ite operating for	ındatıons
and certain foreign organizations check here ▶ □ and do not complete	this part.)	
1 Minimum investment return from Part X, line 6	1	32,990.
2a Tax on investment income for 2010 from Part VI, line 5	347.	
b Income tax for 2010 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2c	347.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	32,643.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	32,643.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	32,643.
Part XII Qualifying Distributions (see 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	1 a	8,838.
b Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purpose	s 2	
3 Amounts set aside for specific charitable projects that satisfy the 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 XIII, line	e 4 4	8,838.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	8,838.
, , , ,	' '	
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years	whether the founda	±000

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Part XIII Undistributed Income (see instructions)

			(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 D	Distributable amount fo	r 2010 from Part XI,				20.642
	ne 7	as of the and of 2010				32,643.
	ndistributed income, if any, Enter amount for 2009				0.	
	otal for prior years 20	· ·		. <u>-</u>		-
	xcess distributions carryover	1				
	rom 2005	65,258.				
	rom 2006	80,968.				
	rom 2007	122,595.				
	rom 2008	50,002.				
e F	rom 2009	66,135.				
f T	otal of lines 3a throug	h e	384,958.			
4 C	Qualifying distributions	for 2010 from Part	-			
X	(II, line 4 🕨 💲	8,838.				
a A	applied to 2009, but no	t more than line 2a			0.	_
b A (f	applied to undistributed Election required — se	d income of prior years e instructions)		0.		
	reated as distributions		_			
•	Election required — se applied to 2010 distribu	, , , , , , , , , , , , , , , , , , ,	0.			8,838.
	Remaining amount dist		0.			0,030.
	xeens distributions carryover	' '	23,805.	<u></u>		23,805.
(1	If an amount appears	ın column (d), the	23,003.			23,003.
S	ame amount must be	shown in column (a))				
		t t				
	inter the net total of eandicated below:	ach column as				
a Co	orpus Add lines 3f, 4c, and	4e Subtract line 5	361,153.			
	Prior years' undistribute	ed income. Subtract		0.		
сE	Inter the amount of pri	or years' undistribut-			· .	<u> </u>
e	d income for which a i	notice of deficiency				
	942(a) tax has been p			0.		
	Subtract line 6c from lii					
а	mount - see instruction	ons		0.		
	ndistributed income for 2009 ne 2a Taxable amount — se				0.	
		0010 0 11				
4	Indistributed income fo d and 5 from line 1 Tl istributed in 2011	or 2010 Subtract lines his amount must be				0.
	mounts treated as dis					
b	orpus to satisfy require y section 170(b)(1)(F) see instructions)					
•	ŕ	rryover from 2005 not				
a	pplied on line 5 or line	e 7 (see instructions)	41,453.			
	xcess distributions caubtract lines 7 and 8 f		319,700.			·
	nalysis of line 9					
	xcess from 2006	80,968.				
	xcess from 2007	122,595.				
	xcess from 2008	50,002.				
	xcess from 2009	66,135.				
e E	xcess from 2010	0.[

orm 990-PF (2010) STELLA FULLER SE			\/\	55-6000847	
Part XIV Private Operating Foundation					N/A
1a If the foundation has received a ruling or our is effective for 2010, enter the date of the	determination lette rulino	r that it is a private	operating foundation	, and the ruling	
b Check box to indicate whether the foundate	•	erating foundation o	fescribed in section	4942(j)(3) or	4942(1)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years	77	- () (-)
income from Part I or the minimum investment return from Part X for each year listed	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 					
Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization		-			
(4) Gross investment income			1		
Supplementary Information assets at any time during the	(Complete this e year – see ir	part only if the structions.)	organization ha	d \$5,000 or more	e in
Information Regarding Foundation Manag				***	
a List any managers of the foundation who had close of any tax year (but only if they have	ave contributed me contributed more	ore than 2% of the than \$5,000) (See	total contributions re section 507(d)(2))	ceived by the founda	tion before the
NONE					
b List any managers of the foundation who capartnership or other entity) of which the NONE	own 10% or more of foundation has a 1	of the stock of a corp 0% or greater intere	ooration (or an equal est	lly large portion of the	e ownership of
Information Regarding Contribution, Gran	t. Gift. Loan, Scho	plarship etc Progra	ms:		
Check here In the foundation only makes complete items 2a, b, c, and d	nakes contributions	s to preselected cha	ritable organizations	and does not accept nizations under other	unsolicited conditions,
a The name, address, and telephone numbe	·				
BOARD OF DIRECTORS, STELLA PO BOX 97	FULLER SET	TLEMENT, INC	•		
HUNTINGTON	WV 2570	6-0097 (30	04) 523-6120		
b The form in which applications should be s VARIOUS	ubmitted and infor	mation and materia	Is they should includ	e	
c Any submission deadlines					
,					
d Any restrictions or limitations on awards, s NONE	uch as by geograp	phical areas, charital	ble fields, kinds of in	stitutions, or other fa	ctors

3 Grants and Contributions P			ar or Approved for Futi	ire Payment	<u> </u>	
Recipient			If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home	or busine	ess)	substantial contributor	recipient	Contribution	
a Paid during the year NEW BAPTIST CHURCH 610 28TH STREET HUNTINGTON		25702			ASSISTANCE TO NEEDY INDIVIDUALS AND FAMILIES.	3,000.
Total					<u>▶ 3a</u>	3,000.
b Approved for future payment	t				► 3b	

Dount	(e) Related or exempt function income (see the instructions)
	_
202.	-
-68.	
	 -
17 204	
17,304.	17. 204
13 -	17,304
· · · ·	
d importantly	y to the le instructions)
	
	17,304.

Form 990-PF (2010) STELLA FULLER SETTLEMENT, INC. 55-6000847 Part XVII, Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

									Yes	No
1 Did the	organization directly ed in section 501(c) o	or indirectly each	ngage in any of the her than section 50.	following with	i any oth zations)	er organization	on 527			
relating	to political organizati	ions?	ner than section so	r (c)(c) organi	24(10110)	01 111 30001011	527,			
a Transfe	rs from the reporting	foundation to	a noncharitable exe	mpt organiza	tion of]		
(1) Cas								1a(1)		<u>X</u>
(2) Oth	er assets							1a (2)		<u> </u>
	ransactions									
	es of assets to a none							1 b (1)		<u>x</u>
*	chases of assets fron		, ,	ation				1 b (2)		X
1.5	ntal of facilities, equip	•	assets					1 b (3)		X
	mbursement arranger							1b (4)		X
	ins or loan guarantee:							1b (5)		<u>X</u>
	formance of services		-					1b (6)		X
c Snaring	of facilities, equipme	ent, mailing lis	ts, other assets, or	paid employe	es			1 c		_X
the goo	nswer to any of the at ds, other assets, or s nsaction or sharing ar	ervices given	by the reporting foui	ndation if the	e foundat	ion received	less than fair market	value in	e of	
(a) Line no	(b) Amount involved	T	of noncharitable exempt of				ansfers, transactions, and		ngement	
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							· · · · · · · · · · · · · · · · · · ·			
	******		 -							
describe	oundation directly or it ed in section 501(c) o complete the followin	of the Code (ot	ited with, or related her than section 50	to, one or mo 1(c)(3)) or in	ore tax-e section 5	xempt organi 27?	zations	Yes	X	No
) Name of organization		(b) Type of	organization		(c) Description of rela			
	· · · · · · · · · · · · · · · · · · ·									
						_				
Under	penalties of perjury, I declare , and complete Declaration	e that I have exami	ned this return, including a	accompanying scl	edules and	statements, and	to the best of my knowledg	e and belief, i	t is true	
Sign (, and complete population)				1	Ω			
Here L	James 1	WI A	MXOUL		- I L	ulvdu	, hos			
	anature of officer or trustee	47 .	9,940		Date	11.3 1.1	Title			
	Prin/Type preparer's name	ne	Preparer's signa	iture ,		Date	Check if If	PTIN		
Daid	DANIEL J. WA		251	Da Luc	CAA	10/411	self employed			
Paid Propaga			ALL PLLC	7	+ · •		Firm's EIN	L		
Preparer		O. BOX		`_						
Use Only	Firm's address	UNTINGTON		W	V 257	12	Phone no (304) 525-7	7202	
BAA	1 110	<u> </u>					11.10.10.10	Form 990		2010
UAA								1 01111 331	• • • (_010)

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545 0047

2010

Name of the organization		Employer identification number			
STELLA FULLER SETTLEMENT, INC	55-6000847				
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	a private foundation			
	527 political organization				
5 000 05	W 504440				
Form 990-PF	X 501(c)(3) exempt private foundation	aka farina dake e			
	4947(a)(1) nonexempt charitable trust treated as a pri	vate foundation			
	501(c)(3) taxable private foundation				
Charles (and Bulance Consideration				
Check if your organization is covered by the Ge Note . Only a section 501(c)(7), (8), or (10) organization	anization can check boxes for both the General Rule and a	Special Rule See instructions			
General Rule					
For an organization filing Form 990, 990-EZ contributor (Complete Parts I and II)	, or 990-PF that received, during the year, \$5,000 or more	(in money or property) from any one			
contributor (Complete Parts Land II)					
ConstDi					
Special Rules					
For a section 501(c)(3) organization filing F	orm 990 or 990-EZ, that met the 33-1/3% support test of th d from any one contributor, during the year, a contribution o	e regulations under sections 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 a	nd II			
	ation filing Form 990 or 990-EZ, that received from any one				
aggregate contributions of more than \$1,000 the prevention of cruelty to children or anim	0 for use <i>exclusively</i> for religious, charitable, scientific, liter	ary, or educational purposes, or			
_	ation filing Form 990 or 990-EZ, that received from any one	contributor, during the year			
contributions for use exclusively for religious	s, charitable, etc. purposes, but these contributions did not	aggregate to more than \$1,000			
If this box is checked, enter here the total controls. Do not complete any of the parts of	ontributions that were received during the year for an excluinless the General Rule applies to this organization becaus	sively religious, charitable, etc, se it received popexclusively			
religious, charitable, etc, contributions of \$5,000 or more during the year					
	•	shodulo R (Form 990, 990, EZ or			
Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it must answer 'No' on Part IV, line 2 of their 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	g requirements of Schedule B (Form 990, 990-EZ, or 990-P	F)			
BAA For Paperwork Reduction Act Notice, se	e the Instructions for Form 990, Schedule B	(Form 990, 990-EZ, or 990-PF) (2010			
990EZ, or 990-PF.					

	B (Form 990, 990-EZ, or 990-PF) (2010)	Page 1	of 1 of Part I
Name of org	A FULLER SETTLEMENT, INC.	1	r identification number
	Contributors (see instructions)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_1	TRUST UNDER WILL OF LYDIA ANNE CARVER 909 FIFTH AVENUE HUNTINGTON WV 25701	\$100,102.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(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) Number	(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) Number	(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) Number	(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) Number	(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)

Form 990-PF, Page 1, Part I, Line 18

Line 18 Stmt

Taxes (see the instructions)	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
PAYROLL TAXES	2,555.			2,555.
EXCISE TAX	2,788.			2,788.
				·

Total ______5,343.

5,343.

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
OFFICE SUPPLIES & EXPENSE	212.			212.
INSURANCE	575.			
UTILITIES	30.			30.
LICENSES	125.			125.

Total ________

-208.

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (a) thru (d)

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)	(b) How acquired P-Purchase D-Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
FEDL HOME LOAN BANK BOND	P	04/06/09	07/14/10
FEDL HOME LOAN BANK BOND	P	03/17/09	08/09/10
FEDL HOME LOAN MTG CORP	P	02/24/09	08/10/10
FEDL HOME LOAN BANK BOND	P	01/08/10	08/10/10
FEDL HOME LOAN BANK BOND	P	02/01/10	08/24/10
FEDL HOME LOAN BANK BOND	P	07/12/10	10/29/10
FEDL HOME LOAN MTG CORP	P	11/30/09	12/15/10
FEDL HOME LOAN MTG CORP	P	12/07/09	12/15/10
FEDL HOME LOAN MTG CORP	P	12/08/09	12/15/10

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (e) thru (h)

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
25,000.		25,008.	-8.
25,000.		25,008.	-8.
15,033.		15,004.	29.
6,154.		6,162.	
7,143.		7,152.	
25,000.		25,009.	-9.
25,000.		25,008.	-8.
40,000.		40,008.	-8.
45,000.		45,008.	

Total

213,367.

<u>-37.</u>

Form 990-PF,	Part IV,	Capital	Gains	and	Losses	for	Tax	on	Investment	Income	9
Columns (i) tl	nru (l)										

Complete only for asset by the foundation on 12	(I) Gains (column (h) gain minus column (k)			
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	but not less than -0-) or losses (from column (h))	
			-8. -8. 29. -8. -9. -9. -8.	

Form 990-PF, Page 6, Part VIII, Line 1 Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person X Business SARA BLETHEN 902 13TH AVENUE HUNTINGTON WV 25701	BOARD MEMBER	0.	0.	0.
Person X Business ROBERT CARPENTER 328 6TH AVENUE HUNTINGTON WV 25701	BOARD MEMBER	0.	0.	0.
Person X Business DAVID GLICK 333 9TH AVENUE HUNTINGTON WV 25701	BOARD MEMBER	0.	0.	0.
Person X Business DAVID JUSTICE 2445 3RD AVENUE	BOARD MEMBER			
HUNTINGTON WV 25703 Person X Business STEVE GOLDER PO BOX 2688	1.00 BOARD MEMBER	0.	0.	0.
HUNTINGTON WV 25726	1.00	0.	0.	0.

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	11

0.	0.	0.

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
WARE & HALL, PLLC	ACCOUNTING	703.			703.
Total		703.			703.

Form 990-PF, Page 2, Part II, Line 10a

L-10a Stmt

Line 10a - Investments - US and State Government Obligations:	End o State and Local Obligations Book Value	f Year State and Local Obligations FMV		of Year US Government Obligations FMV
HILLIARD LYONS GOVT FUND		:	12,629.	12,629.
FED HOME LOAN BANK BOND			25,009.	24,978.
FEDL HOME LOAN MTG CORP NOTE			25,008.	25,022.
FEDL HOME LOAN MTG CORP NOTE			20,009.	20,017.
FEDL HOME LOAN MTG CORP NOTE			35,009.	35,184.
FEDL HOME LOAN MTG CORP NOTE			16,009.	16,000.
FEDL HOME LOAN MTG CORP NOTE			5,009.	4,807.
FEDL HOME LOAN BANK BOND			45,018.	45,355.
FEDL HOME LOAN MTG CORP NOTE			25,009.	25,040.
FEDL FARM CREDIT BANK BOND			25,008.	25,506.
FEDL HOME LOAN MTG CORP NOTE			35,009.	34,837.
FEDL HOME LOAN MTG CORP NOTE			25,009.	24,878.
FEDL HOME LOAN MTG CORP NOTE			25,009.	24,851.
FEDL HOME LOAN MTG CORP NOTE			40,011.	40,284.
FEDL FARM CREDIT BANK BOND			25,009.	25,045.
FEDL HOME LOAN MTG CORP NOTE			25,009.	25,026.
FEDL HOME LOAN MTG CORP NOTE			50,009.	47,469.
FEDL HOME LOAN MTG CORP NOTE			25,009.	24,252.
FEDL HOME LOAN MTG CORP NOTE			25,009.	23,623.
FEDL HOME LOAN MTG CORP NOTE			25,009.	23,193.
FEDL NATL MTG ASSN NOTE			15,009.	14,012.
				

Total

548,818. 542,008.

Form 990-PF, Page 2, Part II, Line 13 L-13 Stmt

	End of Year			
Line 13 - Investments - Other:	Book Value	Fair Market Value		
STATE BANK OF INDIA CD	85,009.	85,000.		
INVESTORS COMMUNITY BANK CD	25,009.	25,065.		
Total	110,018.	110,065.		

Form **8868** (Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev 1-2011)

Department of the Treasury Internal Revenue Service

	e filing for an Automatic 3-Month Extension, coi				► X			
	e filing for an Additional (Not Automatic) 3-Mont				_			
Do not comp	olete Part II unless you have already been grante	d an autom	atic 3-month extension on a previously fi	led Form 8868				
corporation r request an e Associated V	ling (e-file). You can electronically file Form 8868 required to file Form 990-T), or an additional (no xtension of time to file any of the forms listed in With Certain Personal Benefit Contracts, which ming of this form, visit www.irs.gov/efile and click.	t automatic) Part I or Paust be Sust be sent) 3-month extension of time You can ele art II with the exception of Form 8870, In to the IRS in paper format (see instructi	ctronically file Form	8868 to			
Part I A	utomatic 3-Month Extension of Time.	Only subn	nit original (no copies needed).					
	n required to file Form 990-T and requesting an			complete Part I only	→			
All other corp income tax r	porations (including 1120-C filers), partnerships, eturns	REMICS, a	nd trusts must use Form 7004 to request	t an extension of tim	ne to file			
Type or print File by the due date for alling your eturn. See	Name of exempt organization			Employer identification i	Employer identification number			
		•						
	STELLA FULLER SETTLEMENT, INC.	•		55-6000847				
	Number, street, and room or suite number. If a P O box, see instructions							
	PO BOX 117							
nstructions	City, town or post office, state, and ZIP code For a foreign address, see instructions							
	HUNTINGTON WV 25706-0117							
	· · · · · · · · · · · · · · · · · · ·	,						
Enter the Re	turn code for the return that this application is fo	or (file a sep	parate application for each return)		04			
Application		Return	Application		Return			
s For		Code	is For		Code			
Form 990		01	Form 990-T (corporation)		07			
orm 990-BL		02	Form 1041-A		08			
orm 990-EZ		03	Form 4720		09			
orm 990-PF		04	Form 5227		10			
		05	Form 6069		11			
Form 990-T (section 401(a) or 408(a) trust) Form 990-T (trust other than above)		06	Form 8870		12			
-01111 990-1 (trust other than above)	1 00	FOITH 8870		12			
Telephon If the org If this is the check this the exten	is are in the care of JIM MORGAN The No. (304) 523-6120 The anization does not have an office or place of but for a Group Return, enter the organization's four show If it is for part of the group, check ision is for	digit Group k this box	e United States, check this box Exemption Number (GEN) If and attach a list with the names a					
	st an automatic 3-month (6 months for a corpora							
The ext	tag 15, 20 11_, to file the exempt organization is for the organization's return for calendar year 20 10_ or tax year beginning, 20							
▶ []	tax year beginning, 20	, and endir	ng , 20					
2 If the ta	ax year entered in line 1 is for less than 12 mont ange in accounting period			al return				
nonrefu	pplication is for Form 990-BL, 990-PF, 990-T, 47 indable credits See instructions			3a \$	0.			
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made include any prior year overpayment allowed as a credit 3b					0.			
EFTPS	e due. Subtract line 3b from line 3a Include you (Electronic Federal Tax Payment System). See	instructions	<u> </u>	3c \$	0.			
Caution. If yo	ou are going to make an electronic fund withdraw ructions	wal with this	s Form 8868, see Form 8453-EO and For	m 8879-EO for				

BAA For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev 1-2011) STELLA FULLER SETTLEMENT, INC. 55						Page 2		
• If you.a	are filing for an Additional (Not Automatic) 3-Mont	h Extension	i, complete only Part II and check th	ns box		► 🗓		
Note. Only	complete Part II if you have already been granted	an automat	tic 3-month extension on a previous	ly filed Forr	n 8868	_		
• If you a	are filing for an Automatic 3-Month Extension, con	plete only	Part i (on page 1)		_			
Part II	Additional (Not Automatic) 3-Month Exte	ension of	Time. Only file the original (r	no copies	needed)).		
<u> </u>	Name of exempt organization Empl							
T								
Type or print	STELLA FULLER SETTLEMENT, INC. 5			55-6000	847			
F	Number, street, and room or suite number. If a P O box, see instructions							
File by the extended								
due date for filing the	PO BOX 117							
return See	City, town or post office, state, and ZIP code For a foreign address, see instructions							
instructions	HUNTINGTON WV 25706-0117							
	Indianation							
Enter the F	Return code for the return that this application is fo	r (file a sep	arate application for each return)			04		
Application	2	Return	Application	Retu		Return		
Application Is For		Code	Is For			Code		
Form 990		01						
Form 990-E	3L	02	Form 1041-A	n 1041-A				
Form 990-8		03	Form 4720					
Form 990-F	· · · · · · · · · · · · · · · · · · ·	04	Form 5227					
	(section 401(a) or 408(a) trust)	05	Form 6069			11		
Form 990-T (trust other than above)		06	Form 8870		12			
	not complete Part II if you were not already grante	d an autom	<u> </u>	usly filed F	orm 8868.	'		
	oks are in care of ► JIM MORGAN							
		FAX No						
	rganization does not have an office or place of bus					▶ □		
	s for a Group Return, enter the organization's four				lf t	his is for the		
			k this box ► and attach a list wit	th the name	es and EIN:	s of all		
	he extension is for	g. 0 p , 0						
	uest an additional 3-month extension of time until	Nov 15	20 11					
5 For c	alendar year 2010 or other tax year beginning	<u> </u>	20 and ending		. 20)		
5 For calendar year 2010, or other tax year beginning, 20, and ending, 20 6 If the tax year entered in line 5 is for less than 12 months, check reason. Initial return Final return								
Change in accounting period 7 State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO COMPILE ALL								
INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.								
TNE	ORMATION NECESSARI TO TIME A CO	<u> </u>	1mb 100011111 10101111 -					
					<u> </u>			
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, on nonrefundable credits. See instructions				8a	\$	0.		
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously								
with Form 8868						0.		
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions						0.		
			d Verification					
Under penaltie	s of perjury, I declare that I have examined this form, including accomplete, and that I am authorized to prepare this form	ompanying scho	edules and statements, and to the best of my kr	nowledge and b	elief, it is true	•		
Signature	gnature Danifflike Title CPA C				ate - 8/	7/4		
BAA	\mathcal{O}	FIFZ0502	11/15/10		Form 8868	3 (Rev 1-2011)		