

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990-PF

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

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

OMB No 1545-0052

2010

40	r cal	endar year 2010, or tax y	year begi	nning		, ar	nd endir	ng				
G	Che	ck all that apply	Initial	return	Initial retur	n of a for	mer pub	lic char	ity	Final re	eturn	
			Amen	ded return [Address	change		☐ Nar	ne c	change		
Na	me of	foundation		·· · · · · · · · · · · · · · · · · · ·					A Employer identification number			
Alŀ	ert J	Humphreys Memorial C	orporation	1						55-6023	681	
	Number and street (or P O box number if mail is not delivered to street				dress)		Room	/suite	В	Telephone number (see pag		
PC	O Box 169								(304) 343-5503			
	_	wn, state, and ZIP code				-			C If	exemption application is pe	ending, check here	
Ch	arles	ton			WV		25321			1. Foreign organizations, check here		
Н	Che	ck type of organization	X Sectio	n 501(c)(3) exe	mpt private	foundation	on		2	. Foreign organizations me	eting the 85% test,	
] Sec	ction 4947(a)(1) nonexem	pt charital	ble trust 🔲 C	ther taxable	e private	foundati	on	_ 14	check here and attach con f private foundation status w	mputation •	
ī	Fair	market value of all asset	s at end	J Accounting r	nethod	☐ Cash	ПА	ccrual		inder section 507(b)(1)(A), o		
		ear (from Part II, col (c),		Other (sp	ecify)		<u> </u>		-	f the foundation is in a 60-m		
_		16) ▶ \$	33,519	(Part I, column (c	d) must be on	cash bas	is)		u	inder section 507(b)(1)(B), o	,	
Pa	ırt l	Analysis of Revenue a	•	1	(a) Reven	ue and	(b) No	t investm	ont	(c) Adjusted net	(d) Disbursements for charitable	
		amounts in columns (b), (c), ar			expense			ncome	ent	income	purposes	
_		the amounts in column (a) (see	e page il ori	me instructions))	book						(cash basis only)	
	1	Contributions, gifts, grants, etc	; received (a	ttach schedule)		58,661						
	2	Check I if the foundation	•				 -				<u> </u>	
	3	Interest on savings and te				0				0	 	
	4	Dividends and interest from	m securities	5		0				ol		
	i.	a Gross rents	١	0						J		
ne	اءا	b Net rental income or (loss) a Net gain or (loss) from sal			, <u>.</u>	0				-		
en	"	b Gross sales price for all assets		0								
Revenue	7	Capital gain net income (fi							(o		
Œ	8	Net short-term capital gair		,						C		
	9	Income modifications			`							
	10	a Gross sales less returns and a	illowances	0								
		b Less Cost of goods sold		0								
		c Gross profit or (loss) (attac	ch schedule	e)		0						
	11	Other income (attach sche				0				0 0)	
_	12	Total. Add lines 1 through	h 11 ————			58,661			- (00)	
es	13	Compensation of officers,		rustees, etc		0				<u> </u>		
Expenses	14	Other employee salaries a	•		- (C)	7				-		
De	15	Pension plans, employee a Legal fees (attach schedu	11	RECE	VED	U 0				0	0	
		b Accounting fees (attach so	- ()			8 0				0 0		
<u>≤</u>		C Other professional fees (a	ittach sched	ille) may of	2011	8 0		-		0 0	+	
rat	17	Interest	i i		, , , , , , ,							
ist	18	Taxes (attach schedule) (see p	age 14 of the	instructions)		0				0 (0	
ij	19	Depreciation (attach sche-	dule) and d	epletion	10, 01	0				0 ()	
Administrative	20	Occupancy										
		Travel, conferences, and i	meetings									
and	22	Printing and publications										
Ď	23	Other expenses (attach so				273				0 (0	
atir	24	Total operating and adm	iinistrative	expenses.		273				ol		
Operating	25	Add lines 13 through 23 Contributions, gifts, grants	bien s			59,000	-			ų (59,000	
O	26	Total expenses and disburse		ines 24 and 25						0 0		
_	27	Subtract line 26 from line		mos 27 dilu 20	<u> </u>	59,273	· · · · ·			0 0	59,000	
	1	a Excess of revenue over expe		hursements		-612						
	1	b Net investment income (512	<u> </u>			0		
	1	c Adjusted net income (if i		•						(

SCANNED MAY 27

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year
 		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
•	1	Cash—non-interest-bearing	34,004	33,451	33,451
	2	Savings and temporary cash investments	128	69	69
	3	Accounts receivable 0			
		Less allowance for doubtful accounts	0	0	0
	4	Pledges receivable ▶ 0			
		Less allowance for doubtful accounts	0	0	0
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see page 15 of the	_		_
	l _	instructions)	0	0	0
	7	Other notes and loans receivable (attach schedule)			
sts		Less allowance for doubtful accounts	0	0	0
Assets	8	Inventories for sale or use			
ĕ	9	Prepaid expenses and deferred charges			
	10 a	Investments—U S and state government obligations (attach schedule)	0	0	0
	1	b Investments—corporate stock (attach schedule)	0	0	0
	(Investments—corporate bonds (attach schedule)	0	0	0
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)	0	0	0
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	0	0	0
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule) 0	0	0	0
	15	Other assets (describe)	0	0	0
	16	Total assets (to be completed by all filers—see the			!
	ļ	instructions Also, see page 1, item I)	34,132	33,520	33,520
	17	Accounts payable and accrued expenses			
Ģ	18	Grants payable			
tie	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0	0	
<u>.a</u>	21	Mortgages and other notes payable (attach schedule)	0	0	
_	22	Other liabilities (describe)	0	0	
	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			•
nces		and complete lines 24 through 26 and lines 30 and 31.			
	24	Unrestricted	34,132	33,520	
<u> </u>	25	Temporarily restricted			
ä	26	Permanently restricted			
밑		Foundations that do not follow SFAS 117, check here			
Net Assets or Fund Bala		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds		0	
ţ	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
Se	29	Retained earnings, accumulated income, endowment, or other funds		·	
Ä	30	Total net assets or fund balances (see page 17 of the			
et		instructions)	34,132	33,520	
Z	31	Total liabilities and net assets/fund balances (see page 17			
		of the instructions)	34,132	33,520	
	đЩ	Analysis of Changes in Net Assets or Fund Balances			
1		net assets or fund balances at beginning of year—Part II, column (a), line	30 (must agree with		_
_		of-year figure reported on prior year's return)	1	34,132	
		amount from Part I, line 27a		2	-612
					0
		ines 1, 2, and 3		4	33,520
		eases not included in line 2 (itemize)	aluma /b> t	5	0
0	rotal	net assets or fund balances at end of year (line 4 minus line 5)-Part II, c	olumn (b), line 30	6	33 520

		nd(s) of property sold (e g , real est or common stock, 200 shs MLC C	•	(b) How acquired P—Purchase D—Donation	(c) Date ac (mo , day	•	(d) Date sold (mo , day, yr)
1a							
b							
<u>c</u>							
<u>d</u>							
<u>e</u>	· · · · · · · · · · · · · · · · · · ·						
(e) Gross sa		(f) Depreciation allowed (or allowable)		or other basis ense of sale			n or (loss) f) minus (g)
<u>a</u>	0	0		0			
<u>b</u>	0	0		0			
<u>c</u>	0	0		0			
e d	0	0		<u>0</u> 0			
			d by the foundate				
Complete only	ioi assets showing	gain in column (h) and owner					(h) gain minus
(ı) FMV aso	f 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (i) ol (j), if any			less than -0-) or rom col (h))
a	0	0		0			C C
<u>b</u>	0	0		0			
c	0	0		0			
d	0	0		0			
е	0	0		0			(
2 Candal nam		If gain, a	also enter in Pa	art I, line 7		·	
2 Capital gain i	net income or (ne		enter -0- in Pa		2		C
		(loss) as defined in section					
If gaın, also €	enter in Part I, lin	e 8, column (c) (see pages	13 and 17 of	the }			
instructions)	If (loss), enter -0)- ın Part I, line 8		J	3		
Part V Quali	fication Under	Section 4940(e) for Re	educed Tax o	on Net Investm	ent Incom	e	
(For optional use	by domestic private	vate foundations subject to	the section 49	40(a) tax on net	nvestment	ncome)
If section 4940(d	V2) applies leav	ve this part blank					
		section 4942 tax on the dis	stributable amo	wint of any waar ir	i tha haca n		
	idation does not i			• •	r tile base p	erioa	Yes No
1 Enter the a		qualify under section 4940	(e) Do not con	nplete this part			
	ppropriate amoui	qualify under section 4940 nt in each column for each	(e) Do not con	nplete this part			g any entries
(;	ppropriate amoui	nt in each column for each	(e) Do not con year, see page	nplete this part e 18 of the instruc (c)	ctions before	makın	g any entries
(a Base per	ppropriate amoui	• •	(e) Do not con year, see page	nplete this part e 18 of the instruc	ctions before	e makını Dist	g any entries
(i Base per Calendar year (or ta 20	opropriate amoui a) iod years ix year beginning in) 09	nt in each column for each	(e) Do not con year, see page	nplete this part e 18 of the instruc (c)	ctions before	e makını Dist	g any entries (d) tribution ratio divided by col (c)) 0 000000
Base per Calendar year (or ta 20 20	ppropriate amoui a) riod years ix year beginning in) 09 08	nt in each column for each	(e) Do not con year, see page	nplete this part e 18 of the instruc (c)	ctions before	e makını Dist	g any entries (d) tribution ratio divided by col (c)) 0 000000
Base per Calendar year (or ta 20 20	ppropriate amoui a) iod years iix year beginning in) 09 08	nt in each column for each	(e) Do not con year, see page	nplete this part e 18 of the instruc (c)	ctions before	e makını Dist	g any entries (d) tribution ratio divided by col (c)) 0 000000 0 0000000
Base per Calendar year (or ta 20 20 20	ppropriate amoui a) nod years ix year beginning in) 09 08 07	nt in each column for each	(e) Do not con year, see page	nplete this part e 18 of the instruc (c)	ctions before	e makını Dist	g any entries (d) tribution ratio divided by col (c)) 0 000000 0 000000 0 000000
Base per Calendar year (or ta 20 20 20	ppropriate amoui a) iod years iix year beginning in) 09 08	nt in each column for each	(e) Do not con year, see page	nplete this part e 18 of the instruc (c)	ctions before	e makını Dist	g any entries (d) tribution ratio divided by col (c)) 0 000000 0 000000 0 000000
Base per Calendar year (or ta 20 20 20 20 20	ppropriate amoui a) nod years ex year beginning in) 09 08 07 06	nt in each column for each	(e) Do not con year, see page	nplete this part e 18 of the instruc (c)	issets	e makını Dist	g any entries (d)
Base per Calendar year (or ta 20 20 20 20 20 20 20 20 20 20 20 20 20	ppropriate amoui a) iod years ix year beginning in) i09 i08 i07 i06 i05	nt in each column for each (b) Adjusted qualifying distribution	year, see page	nplete this part e 18 of the instruct (c) of noncharitable-use a	etions before	e makını Dist	g any entries (d)
Base per Calendar year (or ta 20 20 20 20 20 20 20 3 Average disti	ppropriate amoui a) nod years ax year beginning in) 109 108 107 106 105 1, column (d) ribution ratio for t	t in each column for each (b) Adjusted qualifying distribution (b) Adjusted qualifying distribution (c) (c) (d)	year, see page ons Net value	nplete this part e 18 of the instruct (c) of noncharitable-use a	etions before	e makını Dist	g any entries (d)
Base per Calendar year (or ta 20 20 20 20 20 20 20 3 Average disti	ppropriate amoui a) nod years ax year beginning in) 109 108 107 106 105 1, column (d) ribution ratio for t	nt in each column for each (b) Adjusted qualifying distribution	year, see page ons Net value	nplete this part e 18 of the instruct (c) of noncharitable-use a	etions before	e makını Dist	g any entries (d)
Base per Calendar year (or ta 20 20 20 20 20 20 20 3 Average districted in the number of	ppropriate amount a) nod years ax year beginning in) 09 08 07 06 05 1, column (d) ribution ratio for to	t in each column for each (b) Adjusted qualifying distribution (b) Adjusted qualifying distribution (c) (c) (d)	year, see page ons Net value vide the total of the less than \$	nplete this part e 18 of the instruc- (c) of noncharitable-use a	etions before	e makını Dist	g any entries (d) tribution ratio divided by col (c)) 0 000000 0 000000 0 000000 0 000000
Base per Calendar year (or ta 20 20 20 20 20 20 20 4 Total of line Average districte number of	ppropriate amount a) iod years ix year beginning in) i09 i08 i07 i06 i05 1, column (d) ribution ratio for to of years the found	t in each column for each (b) Adjusted qualifying distribution the 5-year base period—distribution has been in existence	year, see page ons Net value vide the total of the less than \$	nplete this part e 18 of the instruc- (c) of noncharitable-use a	etions before ussets 2 y 3 4	e makını Dist	g any entries (d) tribution ratio divided by col (c)) 0 000000 0 000000 0 000000 0 000000
Base per Calendar year (or ta 20 20 20 20 20 20 20 3 Average districted number of	ppropriate amount a) iod years ix year beginning in) i09 i08 i07 i06 i05 1, column (d) ribution ratio for to of years the found	t in each column for each (b) Adjusted qualifying distribution the 5-year base period—distribution has been in existence	year, see page ons Net value vide the total of the less than \$	nplete this part e 18 of the instruc- (c) of noncharitable-use a	etions before	e makını Dist	g any entries (d) tribution ratio divided by col (c)) 0 000000 0 000000 0 000000 0 000000
Base per Calendar year (or ta 20 20 20 20 20 20 20 4 Total of line Average districthe number of the number of Multiply line	ppropriate amount a) iod years ix year beginning in) i09 i08 i07 i06 i05 1, column (d) ribution ratio for the second years the found a value of nonchars 4 by line 3	t in each column for each (b) Adjusted qualifying distribution the 5-year base period—distribution has been in existence	vide the total of the less than so from Part X, II	nplete this part e 18 of the instruc- (c) of noncharitable-use a	etions before ussets 2 y 3 4	e makını Dist	g any entries (d) tribution ratio divided by col (c)) 0 000000 0 000000 0 000000 0 000000
Base per Calendar year (or ta 20 20 20 20 20 20 20 4 Enter the net Multiply line 4	popropriate amount a) iod years ix year beginning in) i09 i08 i07 i06 i05 i1, column (d) ribution ratio for the found a value of nonchar if by line 3 inet investment in	tin each column for each (b) Adjusted qualifying distribution the 5-year base period—distribution has been in existence and the column for each of the column	vide the total of the less than so from Part X, II	nplete this part e 18 of the instruc- (c) of noncharitable-use a	etions before ussets 2 y 3 4 5	e makını Dist	g any entries (d) tribution ratio
Base per Calendar year (or ta 20 20 20 20 20 20 20 20 20 4 Total of line Average districte number of Enter the net Multiply line Factor of the control of th	ppropriate amount a) 10d years 10x year beginning in) 109 108 107 106 105 1, column (d) 10b years the found 10 years the found 11 years the found 12 years the found 13 years the found 14 by line 3 16 years the found 17 years the found 18 years the found 19 years the found 19 years the found 10 years the found 10 years the found 10 years the found 11 years the found 12 years the found 13 years the found 14 by line 3	tin each column for each (b) Adjusted qualifying distribution the 5-year base period—distribution has been in existence and the column for each of the column	vide the total of the less than so from Part X, II	nplete this part e 18 of the instruc- (c) of noncharitable-use a	etions before sissets 2 y 3 4 5 6	e makını Dist	g any entries (d) tribution ratio divided by col (c)) 0 000000 0 000000 0 000000 0 000000

0111	Albert J Humphreys Memoria		rporation						5-602	3081	Page	0
Pa	rt VII-B Statements Regarding Activitie	es fo	or Which Form	47	720 May Be R	equired	(continued)				_
ā	During the year did the foundation pay or incur any	amo	unt to									
	`(1) Carry on propaganda, or otherwise attempt to	o influ	ience legislation (s	ect	tion 4945(e))?		Yes	Х	No			
	(2) Influence the outcome of any specific public	electi	on (see section 49	(55	, or to carry							
	on, directly or indirectly, any voter registration	n driv	e ^၇				Yes	Х	No			
	(3) Provide a grant to an individual for travel, stu	dy, o	r other similar purp	ose	es?		Yes	X	No			
	(4) Provide a grant to an organization other than	•	, .					_	'			
	in section 509(a)(1), (2), or (3), or section 49-						Yes	X	No			
	(5) Provide for any purpose other than religious, educational purposes, or for the prevention of		•			Yes		No				
b	If any answer is "Yes" to 5a(1)-(5), did any of the t		•			ns descri			, 140			
_	Regulations section 53 4945 or in a current notice				•					5b	N/A	
	Organizations relying on a current notice regarding				· · · · · ·	0, 1,10 1,10					1,117	
С	If the answer is "Yes" to question 5a(4), does the fo							J	;			
	tax because it maintained expenditure responsibilit						Yes		No			
	If "Yes," attach the statement required by Regulation	•	•	d)					,			
àa	Did the foundation, during the year, receive any funds, directly or indirectly, to pay							ŀ				
premiums on a personal benefit contract?				,	, , ,		Yes	X	No.	ŀ		
b	Did the foundation, during the year, pay premiums.	direc	ctly or indirectly, or	n a	personal benefit of	contract?	,,,,	نت	,	6b		
	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870										_	
7a	At any time during the tax year, was the foundation	n a pa	rty to a prohibited	tax	shelter transaction	n?	Yes	Тх	No			
	If "Yes," did the foundation receive any proceeds of								,	7b		_
	art VIII Information About Officers,							Pai	d Em		998	_
	and Contractors	D v	cotors, music	Ç,	, i oundation	manag	cis, inginy	ı aı	G L!!!	picy	ees,	
1	List all officers, directors, trustees, found	ation	managers and	l th	eir compensat	ion (see	page 22 of	the i	instru	ction	ns).	_
	(a) Name and address	(b)	Title, and average nours per week	(0	c) Compensation f not paid, enter	(d) emplo	Contributions to byee benefit plan	s	(e)	Expen	se account, lowances	
-d	Grant		voted to position		-0-)	and dei	erred compensa	LION	<u> </u>	•		_
	Box 866 Charleston WV 25313		00		0			0				0
	rid H Rollins	Sec	retary									
	Box 169 Charleston WV 25321		00		o			0				0
												_
			00		0			0				0
			00		0			0				0
2	Compensation of five highest-paid employ If none, enter "NONE."	ees	(other than tho	se	included on li	ne 1—s	ee page 23 d	of the	e inst	ructio	ons).	
	· · · · · · · · · · · · · · · · · · ·		(b) Title, and average	ne.		(d) Contributions	to				
(a)	Name and address of each employee paid more than \$50,	000	hours per week devoted to position	•	(c) Compensation	on I	employee benef plans and deferre compensation	ed			se account, lowances	
ЙŌ	ŊĘ.		-				соттретвацот					
									\vdash		· · · · · ·	
							<u>-</u> ,					
		 .										
				-					-			
	al number of other employees hald over \$50.0		- · · · · · · · · · · · · · · · · · · ·		<u> </u>				├			

Form 990-PF (2010) Albert J Humphreys Memorial Corporation	55-6023681 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers	, Highly Paid Employees,
and Contractors (continued)	
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions	s). If none, enter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	0
	0
	0
	0
	0
Total number of others receiving over \$50,000 for professional services	▶ 0
Part IX-A Summary of Direct Charitable Activities	
Summary of Direct Charitable Activities	·
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as	Expenses
the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	
1 Schedule Attached	
	59,000
2	
3	
<u>, </u>	
4	
Det IV D	
Part IX-B Summary of Program-Related Investments (see page 24 of the instruction	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 All Grants are for Building and Improvements	
<u>-</u>	59,000
2	
All other program-related investments. See page 24 of the instructions	
3	

Total. Add lines 1 through 3

59,000

2

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

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 page 26 of the instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

59,000

59.000

4

5

rai	Ondistributed income (see page 20 or	(a)	(b)	(c)	(d)
1`	Distributable amount for 2010 from Part XI, line 7	Corpus	Years prior to 2009	2009	2010
2	Undistributed income, if any, as of the end of 2010				
а	Enter amount for 2009 only			0	
t	Total for prior years 20 , 20 , 20		0		
3	Excess distributions carryover, if any, to 2010				-
a					
t	From 2006	5			
c		5			
		<u> </u>			
ě		1			
f	Total of lines 3a through e	<u>،</u> ا			
4	Qualifying distributions for 2010 from Part				
7	XII, line 4 > \$ 59,000				
	Applied to 2009, but not more than line 2a		İ	ol	
	Applied to undistributed income of prior years				·-·
•			0		
	(Election required—see page 26 of the instructions)		U		
•	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)	0			0
	Applied to 2010 distributable amount				0
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2010	0			0
	(If an amount appears in column (d), the				
	same amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:				
		0			
ŀ	Prior years' undistributed income Subtract				
	line 4b from line 2b		0		
(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				
(Subtract line 6c from line 6b Taxable				
	amount—see page 27 of the instructions		0		
•	Undistributed income for 2009 Subtract line				
	4a from line 2a Taxable amount—see page 27 of the				
	instructions		1	o	
1	Undistributed income for 2010 Subtract				
	lines 4d and 5 from line 1. This amount must		1		
	be distributed in 2011		1		a
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see page 27 of				
	the instructions)	1			
8	Excess distributions carryover from 2005				
-	not applied on line 5 or line 7 (see page 27 of the	1			
	instructions)	0	J		
9	Excess distributions carryover to 2011.		1		
-	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				,
-	Excess from 2006 35,36	6			
		-			
	Excess from 2007 2,49	- 4			
	Excess from 2008 5,52	-			
	Excess from 2009 -17,54				
•	Excess from 2010	OI.	I	l .	

factors
Southern WV

Part XV- Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

<u> </u>	Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
	Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a See	Paid duning the year e Attached				59,000
	Total			. ▶ 3a	59,000
b	Approved for future payment				
	Total			► 3b	l

Part XVI-A Analysis of Income-Producing Acti	vities				
Enter gross amounts unless otherwise indicated	Unrelated busi	ness income	Excluded by section	n 512, 513, or 514	(e)
4.0	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
1 Program service revenue					the instructions)
a L		0		0	0
D		0		0	0
t d		0		0	0
u o		0		0	0
f				0	0
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					-
a Debt-financed property				· · · · · · · · · · · · · · · · · · ·	
b Not debt-financed property	<u> </u>				
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory				0	
9 Net income or (loss) from special events		•			
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a		0		0	0
b		0		0	0
c		0		0	0
d	-	0		0	.0
e	-	0		0	
12 Subtotal Add columns (b), (d), and (e)		0		0	·
13 Total. Add line 12, columns (b), (d), and (e)	1.1			13	0
(See worksheet in line 13 instructions on page 29 to verify calc					
Part XVI-B Relationship of Activities to the Ac	•				
Line No. Explain below how each activity for which income the accomplishment of the foundation's exempt					
page 29 of the instructions)	purposes (other tha	n by providing tu	nas ioi such purp	0562) (266	
page 20 or the metrodicky					
					- +
				_	

Albert J Humphreys Memorial Corporation 55-6023681 Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

1		organization directly n 501(c) of the Code tions?	•	• • •	•	•	•			Yes	NO_
а	Transfers	s from the reporting	foundation to	a noncharitable	exempt organiz	zation of					
	(1) Cash			•			•		1a(1)		X
	(2) Othe								1a(2)		_X_
b		nsactions	-11-1-1						41.44		
		s of assets to a non							1b(1)		- 2
		hases of assets fror al of facilities, equip			inization		•		1b(2) 1b(3)		X
		al of facilities, equipates arrange		assets	• •		•		1b(3)		Ŷ
	• •	is or loan guarantee		•					1b(5)		$\frac{\hat{x}}{x}$
		ormance of services		hip or fundraising	solicitations				1b(6)		$\frac{\hat{x}}{x}$
С		of facilities, equipme				ees			1c		$\frac{\hat{x}}{x}$
	value of t	swer to any of the al the goods, other as any transaction or s	sets, or service	es given by the r	eporting founda	ation If th	ne foundation re	ceived less than	n fair m	narket	t d
(a)	Line no	(b) Amount involved	† ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	of noncharitable exem	pt organization	(d) Des	cription of transfers,	transactions, and sh	aring ari	rangem	ents
		0	†			+					
_		0	t .			 			 .		
_		0									
_											
_		0	<u> </u>								
		0									
		0									
		0									
		0					,				
		0	 								
		0	 			-					
		0				_					
		0			-			· · · · · · · · · · · · · · · · · · ·			
_		0									—
	describe	undation directly or it d in section 501(c) complete the follow	indirectly affiliof the Code (or ing schedule	other than section			527?		res] No	
	<u></u>	-, S. S. gornzottori		(2, . ,)			(6)		p		
_											
					· ·						
	gn belief.	penalties of perjury, I dec it is true, correct, and cor	nplete Declaration		an taxpayer or fiduo						
		Print/Type preparer's n	ame	Preparer's signature	1./70		Date		PTIN		
Pa	iid			101	HAM.	M		Check if			
Pr	eparer	David H Rollins		14MM /	1 your		5/20/2011	self-employed			
Us	e Only			nger and Róllins				Firm's EIN 🕨			
_		Firm's address P(D Box 169 Ch	arleston, WV 253	321		·		1) 343-		
								Fo	orm 99 0	0-PF	(2010)

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, or 990-PF.

OMB No 1545-0047

2010

Employer identification number

Albert J Humphreys Memoria		55-6023681							
Organization type (check one	e)								
Filers of:	Section:								
Form 990 or 990-EZ	501(c)() (enter number) organization								
	4947(a)(1) nonexempt charitable trust not treated as a pro-	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization	327 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private foundation								
instructions General Rule), (8), or (10) organization can check boxes for both the Genera	······································							
General Rule									
	ling Form 990, 990-EZ, or 990-PF that received, during the yeallie contributor. Complete Parts I and II	r, \$5,000 or more (in money or							
Special Rules									
sections 509(a)(1) an	3) organization filing Form 990 or 990-EZ that met the 33 1/3% d 170(b)(1)(A)(vi), and received from any one contributor, durin % of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 9	g the year, a contribution of the greater							
the year, aggregate c	7), (8), or (10) organization filing Form 990 or 990-EZ that receisontributions of more than \$1,000 for use <i>exclusively</i> for religious, or the prevention of cruelty to children or animals. Complete F	us, charitable, scientific, literary, or							
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use <i>exclusively</i> 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 <i>exclusively</i> 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	t is not covered by the General Rule and/or the Special Rules d	loes not file Schedule B (Form 990							

990-EZ, or 990-PF), but it **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)

Schedule B (F	Form 990, 990-EZ, or 990-PF) (2010)		Page 1_ of 1_ of Part
Name of or			Employer identification number
	umphreys Memorial Corporation		55-6023681
Part I	Contributors (see instructions)		
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
1	A.J Humphreys T/W J P Morgan Trust, 707 Virginia Street Charleston WV 25301 Foreign State or Province Foreign Country	\$58,661	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
2	Foreign State or Province Foreign Country	\$0	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
3	Foreign State or Province Foreign Country	\$0	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
4	Foreign State or Province Foreign Country	\$0	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
5	Foreign State or Province Foreign Country	\$	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
6			Person Payroll

Foreign State or Province

Foreign Country

Noncash

(Complete Part II if there is

a noncash contribution)

ALBERT J. HUMPHREYS MEMORIAL CORPORATION CASH STATEMENT JANUARY 1, 2010 TO DECEMBER 31, 2010

RECEIPTS

	Cash in Bank and Savings - January 1, 2010	\$	34 131 97		
	Receipts - January 1, 2010	Ψ	34 131 <i>31</i>		
	to December 31, 2010		58 660 55		
	Total Receipts			\$	92 792 52
	DISBURSEMENTS.				
	Lizemore UMV	\$	10 000 00		
ľ	Community Development Outreach		10 000 00		
ı	Mt Juliet UMC		3 000 00		
ı	UMC Foundation		7 000 00		
I	East Bank UMC		7 000 00		
i	Canaan UMC		4 000 00		
ļ	Winfield UMC		4 000 00		
	Malden UMC		3 000 00		
ļ	Fairview UMC		2 500 00		
I	Montgomery UMC		3 000 00		
١	Dunbar UMC		3 000 00		
I	Brunston UMC		2 500 00		
	Bank Fees		273 41		
	Total Disbursements				59 273 41
	Balance - December 31, 2010			<u>\$</u>	33 519 11
į	Cash in Bank	\$	33 451 00		
	Cash ın Savings		<u>68 11</u>		
	Total	<u>\$</u>	<u>33 519 11</u>		

ALBERT J. HUMPHREYS MEMORIAL CORPORATION FORM-PF PART IX-A (Page 7) DECEMBER 31, 2010

DISBURSEMENTS:

Lizemore, UMC	\$ 10 000 00
Community Development Outreach	10 000 00
Mt. Juliet UMC	3 000 00
UMC Foundation	7 500 00
East Bank UMC	7 000 00
Canaan UMC	4 000 00
Winfield UMC	4 000 00
Malden UMC	3 000 00
Fairview UMC	2 500 00
Montgomery UMC	3 000 00
Dunbar UMC	3 000 00
Brunston UMC	 2 500 00

Total <u>\$ 59 000 00</u>

ALBERT J. HUMPHREYS MEMORIAL CORPORATION FORM-PF PART XV (Page 11) DECEMBER 31, 2010

DISBURSEMENTS:

Lizemore UMC	\$ 10 000 00
Community Development Outreach	10 000 00
Mt. Juliet UMV	3 000 00
UMC Foundation	7 000 00
East Bank UMC	7 000 00
Canaan UMC	4 000 00
Winfield UMC	4 000 00
Malden UMC	3 000 00
Fairview UMC	2 500 00
Montgomery UMC	3 000 00
Dunbar UMC	3 000 00
Brunston UMC	 2 500 00

Total <u>\$ 59 000 00</u>