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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 2010

Open to Public Inspection

	<u> </u>	For the 2010	calendar year, or tax year beginning $07/01/10$, and ending $06/30/12$	L		
	B (Check if applicabl	C Name of organization WV UNIVERSITY ALUMNI ASSOCIATION		D Emplo	yer identification number
		Address change	LOYALTY PERMANENT ENDOWMENT FUND			
	٦ı	Name change	Doing Business As WVU ALUMNI ASSOC LPEF		55-	0450592
j	i [nitial return	Number and street (or P O box if mail is not delivered to street address) P.O. BOX 4308	Room/suite	E Teleph	one number
		Terminated	City or town, state or country, and ZIP + 4		_	
	$\overline{\Box}_{i}$	Amended return	Morgantown WV 26504-4308		G Gross rece	upts\$ 3,065,157
			F. Name and address of second officers			
	∟,	Application pendi	BB&T Trust Dpt.	H(a) Is this a g	roup return for	affiliates? Yes X No
			496 High St.	H(b) Are all a	ffiliates includ	ed? Yes No
			Morgantown WV 26505	If "No	o," attach a lı:	st (see instructions)
	1	Tax-exempt st	atus X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527]		
	J	Website: 🕨	N/A	H(c) Group e		nber 🕨
		Form of organiza	tion Corporation X Trust Association Other ▶ L Y	ear of formation 1	937	M State of legal domicile WV
	P	art I	Summary			
			describe the organization's mission or most significant activities			
	æ	PR	OVIDE SCHOLARSHIPS TO WEST VIRGINIA UNIVERSITY STUDEN:	rs		
	Jan					
	Activities & Governance		. —			
	ĝ		this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of the organization discontinued its operations or disposed of more than 25% of the organization discontinued its operations or disposed of more than 25% of the organization discontinued its operations or disposed of more than 25% of the organization discontinued its operations or disposed of more than 25% of the organization discontinued its operations or disposed of more than 25% of the organization discontinued its operations or disposed of more than 25% of the organization discontinued its operations or disposed of more than 25% of the organization discontinued its operations or disposed of more than 25% of the organization discontinued its operations or disposed of more than 25% of the organization discontinued its operations of the organization discontinued its operation discontinued its operations of the organization discontinued its operation dis	of its net assets	1 1	
	∞5		er of voting members of the governing body (Part VI, line 1a)		3	3
	ties		er of independent voting members of the governing body (Part VI, line 1b)		4	0
	ťivi		number of individuals employed in calendar year 2010 (Part V, line 2a)		5	0
	A		number of volunteers (estimate if necessary)		6	
			inrelated business revenue from Part VIII, column (C), line 12		7a 7b	0
		b Net ui	related business taxable income from Form 990-T, line 34	Prior Yea		Current Year
	_	8 Contri	outions and grants (Part VIII, line 1h)		5,560	100,677
	nce		ım service revenue (Part VIII, line 2g)	=		
	Revenue	_	ment income (Part VIII, column (A), lines 3, 4, and 7d)	62	8,866	632,634
	œ		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
			evenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	69	4,426	733,311
			and similar amounts paid (Part IX, column (A), lines 1–3)	44	9,670	504,008
		14 Benef	ts paid to or for members (Part IX, column (A), line 4)			
	S	15 Salan	ss, other compensation, employee benefits (Part IX, column A) Thes 5401D sional fundraising fees (Part IX, column (A), line 11e)			_
	penses	16a Profes	sional fundraising fees (Part IX, column (A), line 1e)			
		b Total	undraising expenses (Part IX, column (D), line 25			
	ũ	17 Other	undraising expenses (Part IX, column (D), line 25 expenses (Part IX, column (A), lines 11a–11d, 11f–24)		1,282	83,273
		18 Total	expenses. Add lines 13–17 (must equal Part IX, country (A), line 25)		0,952	587,281
	- 15	19 Rever	ue less expenses Subtract line 18 from line 12		3,474	146,030
2012	ts or nces	00 T / I		Beginning of Cur		End of Year
	\8se Bala		assets (Part X, line 16)	10,39	3,711 0	11,818,121
ෙ	ng/		abilities (Part X, line 26)	10,59		11,818,121
~			sets or fund balances Subtract line 21 from line 20 Signature Block	10,39	<i>5,1</i> 11	11,010,121
MAR			of perjury, I declare that I have examined this return, including accompanying schedules and statements, and	t to the best of my	knowlodgo	nd holiof it is
2		•	complete. Prefair that have examined this return, including accompanying scriedules and statements, and complete.		Kilowieuge a	na beller, it is
믊			V Allestre		1	
SCANNED	Sia	n 🏲	Signature of officer	· · · · · · · · · · · · · · · · · · ·	Date.	<u>al - 1</u>
Z	Hei	e L	Y PATRICIA L. WATSON, VICE PROSIDENT		Date . C	9/15/2012
ठ		` P	Type or print name and title			
S		Pnnt	Type preparer's name Preparer's signature	Date	Check	f PTIN
	Paid		perly A. Gutta, CPA Kimberly A. Gutta, CPA	02/11	/12 self-em	ployed P00293407
	Prep	200	s name > LAMBRIGHT & GUTTA, P.L.L.C.		ırm's ElN ▶	55-0761217
	Use	Only	1199 VAN VOORHIS ROAD			
		Firm	s address MORGANTOWN, WV 26505		hone no	304-599-3185
			uss this return with the preparer shown above? (see instructions)			X Yes No
	For	Paperwork	Reduction Act Notice, see the separate instructions.		7	Form 990 (2010)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	1 2	$\frac{\mathbf{x}}{\mathbf{x}}$	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	-		
-	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-		_	
	endowments? If "Yes," complete Schedule D, Part V	10	X	,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	ł	I	
	VII, VIII, IX, or X as applicable		-	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more		ŀ	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	l	1	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			7.5
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			v
12a	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
124	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	425		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	12a		
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	\dashv	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	174		
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	_	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		一	
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some	I		
	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		
		_	OOO.	

Form 990 (2010) WV UNIVERSITY ALUMNI ASSOCIATION Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		103	,,,,
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	x	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	⁻ 26		- X -
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			.,
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	١.,		•
22	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			x
22	complete Schedule N, Part II	32		_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	,,		x
34	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		-
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
a	Did the organization receive any payment from or engage in any transaction with a	 "		 -
-	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,			
	Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	<u> </u>		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	<u> </u>		Ė
-	19? Note . All Form 990 filers are required to complete Schedule O	38	x	
				(0040)

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Form 990 (2010) WV UNIVERSITY ALUMNI ASSOCIATION Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part	/					\prod
						Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a					
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b		0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and						
	reportable gaming (gambling) winnings to prize winners?				1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		1	_			
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	L	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?				2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)					ı	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?				3a		<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O				3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other author	•					
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	al			١. ا		7.7
	account)?				4a		X
b	If "Yes," enter the name of the foreign country						
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Acc	counts			F- 1	1	v
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				5b 5c		
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?				50		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				-6a		- X
h	organization solicit any contributions that were not tax deductible?	vr.			- Ua		
b	gifts were not tax deductible?)i			6ь		
7	Organizations that may receive deductible contributions under section 170(c).				OB		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	e					
a	and services provided to the payor?	•			7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was						
·	required to file Form 8282?				7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	l				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contra		·		7 _e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	-			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8	899 as	rec	quired?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization				7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting						
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring						
	organization, have excess business holdings at any time during the year?				8		
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the organization make any taxable distributions under section 4966?				9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?				9b		
10	Section 501(c)(7) organizations. Enter:						
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	┖				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	L				
11	Section 501(c)(12) organizations. Enter						
а	Gross income from members or shareholders	11a	╄		4		
b	Gross income from other sources (Do not net amounts due or paid to other sources						
	against amounts due or received from them)	11b					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10		r		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			4		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				<u> </u>	ļ	<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?				13a		ļ
	Note. See the instructions for additional information the organization must report on Schedule O						
b	Enter the amount of reserves the organization is required to maintain by the states in which	1					
	the organization is licensed to issue qualified health plans	13b	╀-		-		
С	Enter the amount of reserves on hand	13c					
14a	Did the organization receive any payments for indoor tanning services during the tax year?				14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O				14b		

10a	Does the organization have local chapters, branches, or affiliates?	10a		_ A
b	If "Yes," does the organization have written policies and procedures governing the activities of such			
	chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the		:	
	form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a_		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure None 17 List the states with which a copy of this Form 990 is required to be filed > 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, 19 and financial statements available to the public 20 State the name, physical address, and telephone number of the person who possesses the books and records of the BB&T TRUST DEPARTMENT 496 HIGH ST. organization > MORGANTOWN WV 26505

304-285-2361

Form 000 (2010)	WT/	INTURDSTIV	AT.ITMNIT	ASSOCIATION
-orm 990 (2010)	WV	ONTAFKSTII	ALCHINI	WOOOCTATION

55-0450592

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees; highest compensated employees; and former such persons

(A) Name and Title	(B) Average	Pos	rtion ((Chec	C) kallt	hat ap	nlv)	(D) Reportable	(E) Reportable	(F) Estimated
Name and Thie	hours per week (describe hours for related organizations in Schedule O)	Individual trustee		Officer	Key employee	Highest compensated employee	Former	compensation fromtheorganization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) STEPHEN DOUGLAS	0.00	x		x				0	0	
(2) BB&T TRUST DEPAR			x					42,868	0	
(3)	0.00		^					42,000		
(4)										
(5)		 								
(6)										
(7)				_						
(8)										
(9)		1								
10)		\vdash								
11)								-		
12)										
13)				-	_					
14)		+								
15)										
16)		\vdash	_							

Pa	rt VII Section A. Officers	, Directors, Trus	tees	, Ke	y En	nplo	yees	, an	d Highest Compensated E	mployees (continued)			
	(A) Name and Title	(B) Average	Pos	ition (C) k all t	hat ap	oply)	(D) Reportable	(E) Reportable		(F) Estimated	d
		hours per week (descnbe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	CC O	amount o other ompensati from the organizatio and relate rganizatio	on on d
(17)													
(18)					-	-							
(19)													
(20)													
(21)										_			
(22)													-
(23)													 .
(24)				- —				_					
(25)	· ·												
(26)													
(27)													
(28)													
1b	Sub-total	1	<u>. </u>	L	.			>	42,868				
c d	Total from continuation she Total (add lines 1b and 1c)	ets to Part VII, S	ectio	n A				>	42,868				
2	Total number of individuals (in	cluding but not lim	uted	to the	ose I	stec	abo	ve) v			1		
	reportable compensation from	the organization	<u> </u>	0									
2	Did the ergenization list only fe	uman officer direct		6		leas.		رم رما	o or highest componented		f	Y	es No
3	Did the organization list any for employee on line 1a? If "Yes,"							юуе	e, or highest compensated		ĺ	3	x
4	For any individual listed on line organization and related organi									the			
	individual	zations greater th	αIIΨ	130,	,000	" '	C3,	COIII	piete ochedule o for such		ĺ	4	X
5	Did any person listed on line 1a for services rendered to the org									vidual	ŀ	5	x
Sec	tion B. Independent Contract		<u>, , , , , , , , , , , , , , , , , , , </u>	лпра	<u>.</u>	CITIC	Jule C	, 10,	addit person	·			
1	Complete this table for your five compensation from the organization	e highest compen	sate	d ind	eper	iden	t con	tract	ors that received more than	\$100,000 of			
		(A) d business address						_	Descrip	(B) tion of services		Comp	C) ensation
2	Total number of independent or received more than \$100,000 i							ose I	listed above) who	0			
DAA	13301104 Hidre triait \$100,000 f	ii <u>vomponadioi1 </u>	J.111 (guil	Latit						Form 9	90 (2010)

Pa	nt V	III Statement of Reve	nue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
တ္ တ	12	Federated campaigns	1a	_	-	revenue		312, 313, 01 314
aut		Membership dues	1b					
₽ξ		Fundraising events	1c					
ifts ar a		Related organizations	1d					
S, Bill	u _	Government grants (contributions)	1e					
ion	f	All other contributions, gifts, grants,						
첉	•	and similar amounts not included above	1f	100,677				
gg.	g	Noncash contributions included in lines 1a-						
Contributions, gifts, grants and other similar amounts	h		,	•	100,677			
		. Gran / too mice ita ii	-	Busn. Code				
eu	2a							
Şe	b							
<u>.</u>	C							
ě	d					-		
Ē	е							,
Program Service Revenue	f	All other program service revenu	ıе					
ď	g	Total. Add lines 2a-2f						
	3	Investment income (including di	vidends	s, interest,				
		and other similar amounts)			337,944		— — — —	- 337 [.] ,944 ⁻
	4	Income from investment of tax-e	exempt	bond proceeds				
	5	Royalties		•				
		(ı) Real		(II) Personal				
	6a	Gross Rents						
	b	Less rental exps						
	С	Rental inc or (loss)						
	d	Net rental income or (loss)						
	7a	sales of assets (i) Securities (ii)		(II) Other				
		other than inventory 2,579	653	46,883				
	b	Less cost or other						
		basis & sales exps 2,331,						
	С	Gain or (loss) 247	807	46,883				
	d	Net gain or (loss)	_	<u> </u>	294,690			294,690
en e	8a	Gross income from fundraising ever	nts					
- E		(not including \$	ľ					
ě		of contributions reported on line 1c)						
Other Reven		See Part IV, line 18	a					
동		Less direct expenses	ь					
		Net income or (loss) from fundr		vents				
	9a	Gross income from gaming activities	S					
		See Part IV, line 19	a					
		Less. direct expenses	ь[
		Net income or (loss) from gamir	ng activ F	ities •				
	10a	Gross sales of inventory, less						
		returns and allowances	a	 				
		Less cost of goods sold	bί					
	<u> </u>	Net income or (loss) from sales						
	44	Miscellaneous Revenue		Busn Code				
	11a							
	b			<u> </u>				
	С	All attendance -		-				
	d	All other revenue		L	· - · - · · - · · · · · · · ·			
	e	Total. Add lines 11a-11d	_	P	733,311	0	0	632,634
	12	Total revenue. See instruction	5	<u> </u>	133,311	ı	ı	032,634

Part IX **Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	not include amounts reported on lines 6b,	(A)		(C)	(D)
	8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and			<u> </u>	
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U S. See Part IV, line 22	504,008	504,008		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
-	persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages Pension plan contributions (include section 401(k)				
0	and section 403(b) employer contributions)				
9	Other employee benefits				
10_	· •				
- <u></u> 11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	1,200		1,200	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	31		31	
g	Other				
12	Advertising and promotion				
13	Office expenses	14,577		14,577	
14	Information technology				
15	Royalties	10 000	. 	12,000	
16	Occupancy	12,000		12,000	-
17	Travel				
18	Payments of travel or entertainment expenses				
19	for any federal, state, or local public officials Conferences, conventions, and meetings	2,658	2,658		
20	Interest	2,000	2,000		
21	Payments to affiliates	-			
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered			-	
	above (List miscellaneous expenses in line 24f If				
	line 24f amount exceeds 10% of line 25, column	1			
	(A) amount, list line 24f expenses on Schedule O)				
а	Trustee Fees	42,868		42,868	
b	Administrative Fees	9,600		9,600	
C	Foreign Tax on Investment	339		339	
d					
e	All officers and analysis				<u> </u>
f o-	All other expenses	587,281	506,666	80,615	0
25	Total functional expenses. Add lines 1 through 24f Joint costs. Check here ▶ ☐ if following	301,261	300,000	00,613	0
26	Joint costs. Check here ► if following SOP 98-2 (ASC 958-720) Complete this line				
	only if the organization reported in column				
	(B) joint costs from a combined educational campaign and fundraising solicitation				
DAA		· <u>-</u>			Form 990 (2010)

	rt X	Balance Sheet					rage <u>i i</u>			
					(A) Beginning of year		(B) End of year			
	1	Cash—non-interest bearing			191	1	-1			
	2	Savings and temporary cash investments			320,945	2	347,261			
	3	Pledges and grants receivable, net				3	-			
	4	Accounts receivable, net				4				
	5	Receivables from current and former officers, directors	, trustees, key							
		employees, and highest compensated employees Com-	plete Part II of							
		Schedule L				5				
	6	Receivables from other disqualified persons (as defined	d under section							
		4958(f)(1)), persons described in section 4958(c)(3)(B)), and contributing							
		employers and sponsoring organizations of section 501	(c)(9) voluntary							
		employees' beneficiary organizations (see instructions)				6				
뚫ㅣ	7	Notes and loans receivable, net				7				
Assets	8	Inventories for sale or use				8				
⋖	9	Prepaid expenses and deferred charges				9	5,020			
- [-	10a	Land, buildings, and equipment cost or								
		other basis Complete Part VI of Schedule D	10a	20						
	b	Less accumulated depreciation	10b		9,608	10c	20			
- -	11	Investments—publicly traded securities	<u> </u>		10,262,967	11	11,465,821			
- [.	12	Investments—other securities See Part IV, line 11				12				
_ .	13_	Investments—program-related See Part IV, line 11-				- 13				
·	14	Intangible assets				14				
·	15	Other assets See Part IV, line 11				15				
- [.	16	Total assets. Add lines 1 through 15 (must equal line	34)		10,593,711	16	11,818,121			
T.	17	Accounts payable and accrued expenses		·		17				
- [-	18	Grants payable				18				
- [-	19	Deferred revenue				19				
	20	Tax-exempt bond liabilities				20				
န္တ	21	Escrow or custodial account liability Complete Part IV	of Schedule D			21	-			
<u>ĕ</u> :	22	Payables to current and former officers, directors, trust								
Liabilities		employees, highest compensated employees, and disq	ualified persons							
12		Complete Part II of Schedule L				22				
	23	Secured mortgages and notes payable to unrelated thir	d parties			23				
:		Unsecured notes and loans payable to unrelated third p				24				
- [:	25	Other liabilities Complete Part X of Schedule D				25				
	26	Total liabilities. Add lines 17 through 25			0	26	0			
es		Organizations that follow SFAS 117, check here ▶	X and complete							
Fund Balances		lines 27 through 29, and lines 33 and 34.	_	1						
緩님	27	Unrestricted net assets			10,550,728	27	11,768,928			
či <u>2</u>	28	Temporarily restricted net assets				28	49,193			
밀	29	Permanently restricted net assets	•							
ᇎᅵ		Organizations that do not follow SFAS 117, check	here ▶ 🔲 and							
6		complete lines 30 through 34.								
နှုံ့	30	Capital stock or trust principal, or current funds		-		30				
Se	31	Paid-in or capital surplus, or land, building, or equipment	nt fund			31				
Assets	32	Retained earnings, endowment, accumulated income, of	or other funds			32				
<u>ا ن</u>	33	Total net assets or fund balances			10,593,711	33	11,818,121			
Set	34	Total liabilities and net assets/fund balances			10,593,711	34	11,818,121			

om	1 990 (2010) WV UNIVERSITY ALUMNI ASSOCIATION 55-0450592				Pag	ge 12
Pa	art XI Reconciliation of Net Assets		_			
	Check if Schedule O contains a response to any question in this Part XI					\Box
		ı	1			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			33,	
2	Total expenses (must equal Part IX, column (A), line 25)	2				281
3	Revenue less expenses Subtract line 2 from line 1	3				030
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4				711
5	Other changes in net assets or fund balances (explain in Schedule O)	5	1	<u>, 07</u>	78 ,:	380
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,					
	column (B))	6	11	<u>, 81</u>	L8 ,:	121
Pa	ert XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					
				ļ	Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other		[1		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			- 1		į
	Schedule O			- 1		ĺ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
b	Were the organization's financial statements audited by an independent accountant?			2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight					
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in					ĺ
	Schedule O.			- 1	1	ĺ
$_{ m d}$	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		[Ė
	issued on a separate basis, consolidated basis, or both					ĺ
	Separate basis Consolidated basis Both consolidated and separate basis					Ė
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			İ		
	the Single Audit Act and OMB Circular A-133?		L	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		<u> </u>
_				Form	990	(2010)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

WV UNIVERSITY ALUMNI ASSOCIATION LOYALTY PERMANENT ENDOWMENT FUND

55-0450592

Employer identification number

P	art l	Reas	on for Public Charity	Status (All organizations	s must	comple	te this	part.)	See ir	nstruc	tions.		
The	orgai	nization is not a	a private foundation because i	t is (For lines 1 through 11, chec	k only one	e box)							
1	\Box	A church, cor	nvention of churches, or asso	ciation of churches described in	section 1	70(b)(1)(<i>A</i>	\)(i).						
2	П	A school des	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E.)									
3	П			organization described in sectio	n 170(b)(1)(A)(iii).							
4	П			n conjunction with a hospital des			70(b)(1)(A)(iii). E	nter the	hospita	al's name.		
	_	city, and state	•	,						·	•		
5		An organization	on operated for the benefit of	a college or university owned or o	perated b	y a govern	mental ι	unit desc	ribed in				
			b)(1)(A)(iv). (Complete Part I	•	•	, ,							
6		•		ernmental unit described in sect i	ion 170(b)(1)(A)(v)							
7	X		- · · · · · · · · · · · · · · · · · · ·	bstantial part of its support from	•			the aene	eral publ	IC			
	Ч	_	section 170(b)(1)(A)(vi). (Co		J								
8				0(b)(1)(A)(vi). (Complete Part II.	.)								
9	П	•		more than 33 1/3% of its support	•	tributions.	member	ship fee	s. and c	ross			
	L			t functions—subject to certain ex				-					
		· ·	•	unrelated business taxable incor	•								
			_	1975 See section 509(a)(2). (C	•		•						
<u></u>	\Box			clusively to test for public safety	-	•							
11	П			clusively for the benefit of, to perf				arry out	the				
		purposes of o	ne or more publicly supported	d organizations described in secti	on 509(a)	(1) or sect	tion 509(a)(2) S	ee secti	on			
		509(a)(3). Ch	eck the box that describes the	e type of supporting organization	and comp	lete lines	11e thro	ugh 11h					
		a Type	I b Type II	c Type III–Functiona	ılly ıntegra	ted	d [Тур	e III–Otl	ner			
е		By checking t	his box, I certify that the organ	nization is not controlled directly o	or indirectl	y by one o	r more d	lısqualıfı	ed perso	ons			
		other than fou	indation managers and other t	than one or more publicly support	ted organi	zations de	scribed	ın sectio	n 509(a)(1)			
		or section 509	9(a)(2)										
f		If the organiza	ation received a written determ	nination from the IRS that it is a T	уре І, Тур	e II, or Ty	pe III su	pporting					
		organization,	check this box										
g		Since August	17, 2006, has the organization	on accepted any gift or contribution	on from an	y of the							
		following pers	sons?										
		(i) A persor	who directly or indirectly con	trols, either alone or together with	n persons	described	ın (ıı) ar	nd				Yes	No
		(III) belov	v, the governing body of the s	upported organization?							11g(i)		
		(ii) A famıly	member of a person describe	d ın (ı) above?							11g(iı	1	
		(iii) A 35% c	ontrolled entity of a person de	scribed in (i) or (ii) above?							11g(iı	<u>) </u>	<u> </u>
h		Provide the fo	ollowing information about the	supported organization(s)					,				
(ı)		e of supported	(ii) EIN	(III) Type of organization		organization		ou notify		s the		nount of	
	org	anization		(described on lines 1–9 above or IRC section		sted in your document?		nization in of your	organızat (i) organı	ion in coi zed in the	sup	port	
				(see instructions))	<u> </u>		supp	oort?	—	3 7			
					Yes	No	Yes	No	Yes	No			
(A)													
(B)													
					ļ			ļ					
(C)													
(D)													
					ļ	 							
(E)													
				······································	 	ļ		ļ	ļ	ļ	<u></u>		
Tota	l				1	1		L	L				

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support				-	•	
Caler	dar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	282,922	84,541	95,954	65,560	100,677	629,654
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	282,922	84,541	95,954	65,560	100,677	629,654
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						629,654
_	tion B. Total Support						
Caler	dar_year (or fiscal year beginning in) 🛌 🗔	– – (a) 2006 -	— (b) 2007	-(c) 2008	(d)-2009	(e) 2010	- (f) -Total
7	Amounts from line 4	282,922	84,541	95,954	65,560	100,677	629,654
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	480,975	569,774	407,036	628,867	632,634	2,719,286
9	Net income from unrelated business activities, whether or not the business is regularly carned on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						3,348,940
12	Gross receipts from related activities, etc. (s	ee instructions)				12	
13	First five years. If the Form 990 is for the o	organization's first, s	econd, third, fourth	i, or fifth tax year as	s a section 501(c)(3	3)	
	organization, check this box and stop here						>
<u>Sec</u>	tion C. Computation of Public S	upport Percen	tage				
14	Public support percentage for 2010 (line 6, o	column (f) divided b	y line 11, column (f))		14	18.80%
15	Public support percentage from 2009 Scheo	lule A, Part II, line 1	4			15	43.96%
16a	33 1/3% support test—2010. If the organiz				3% or more, check	this	
	box and stop here. The organization qualified		•				▶ [
b	33 1/3% support test—2009. If the organiz check this box and stop here. The organiza				33 1/3% or more,		▶ X
17a	10%-facts-and-circumstances test—2010	•	• • •	•	or 16b, and line 14 is	6	
	10% or more, and if the organization meets i	-					
	Part IV how the organization meets the "fact	s-and-circumstance	es" test. The organi	zation qualifies as a	a publicly supported	1	
	organization		_				▶ □
b	10%-facts-and-circumstances test—2009	. If the organization	did not check a bo	x on line 13, 16a, 1	6b, or 17a, and line	,	<u>,</u>
	15 is 10% or more, and if the organization m	eets the "facts-and-	-cırcumstances" te:	st, check this box a	nd stop here.		
	Explain in Part IV how the organization meet	s the "facts-and-cire	cumstances" test	The organization qu	ualifies as a publicly		
	supported organization						▶ 🗌
	Delicate forcedation of the assessmention and	not check a hov on I	ina 13 16a 16h 1	7a or 17h check ti	his box and see		
18	Private foundation. If the organization did	IOL CHECK & DOX OIL	ilie 15, 10a, 10b, 1	ra, or trb, check to	ino box and occ		

Page 3

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

	tion A Bublic Support	quality under	the tests liste	u below, pleas	e complete Pa	art II.)	
	tion A. Public Support dar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(a) 2009	(4) 2000	(2) 2010	(f) Tetal
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	grants ")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
Sec	tion B. Total Support						
Caler	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6						
I0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support . (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the o	organization's first,	second, third, fourt	h, or fifth tax year a	s a section 501(c)(3)	
	organization, check this box and stop here						
Sec	tion C. Computation of Public S						
15	Public support percentage for 2010 (line 8, o	* *	•	f))		15	<u>%</u>
16 200	Public support percentage from 2009 Sched					16	%
7	tion D. Computation of Investme Investment income percentage for 2010 (line			dump (f\)		17	%
8	Investment income percentage for 2010 (into	` '	•	ium (i))		18	
о 9а	33 1/3% support tests—2010. If the organi			l, and line 15 is moi	re than 33 1/3% ar		70
	17 is not more than 33 1/3%, check this box						▶□
b	33 1/3% support tests—2009. If the organi		•	· · · · · · · · · · · · · · · · · · ·	•		· L
	line 18 is not more than 33 1/3%, check this						▶ [
20	Private foundation. If the organization did		=		•		▶

Schedule A (Form 990 or 990-EZ) 2010 WV UNIVERSITY ALUMNI ASSOCIATION

55-0450592

Page 4

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

	e of the organization		Employe	r identification number
	V UNIVERSITY ALUMNI ASSOCIATION			
-	OYALTY PERMANENT ENDOWMENT FUND			450592
Pa	organizations Maintaining Donor Advised Fu organization answered "Yes" to Form 990, Part	nds or Other Similar Funds or A IV, line 6.	Accour	nts. Complete if the
		(a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that the	e assets held in donor advised		
	funds are the organization's property, subject to the organization's exclusive	e legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in write	ting that grant funds can be used		
	only for chantable purposes and not for the benefit of the donor or donor a	dvisor, or for any other purpose		
	conferring impermissible private benefit?			Yes No
Pa	rt II Conservation Easements. Complete if the organic	anization answered "Yes" to Form	<u> 990, I</u>	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check all	that apply)		
	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically import	tant land	area
	Protection of natural habitat	Preservation of a certified historic st	ructure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conservat	ion contribution in the form of a conservation		
	easement on the last day of the tax year			
				Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
C	Number of conservation easements on a certified historic structure include	ed in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06,	and not on a		
	historic structure listed in the National Register		2d	<u> </u>
3	Number of conservation easements modified, transferred, released, exting	uished, or terminated by the organization dur	ing the	
	tax year ▶			
4	Number of states where property subject to conservation easement is local			
5	Does the organization have a written policy regarding the periodic monitori	ng, inspection, handling of		
	violations, and enforcement of the conservation easements it holds?			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing	conservation easements during the year		
_				
7	Amount of expenses incurred in monitoring, inspecting, and enforcing con	servation easements during the year		
_	> \$			
8	Does each conservation easement reported on line 2(d) above satisfy the	requirements of section 170(h)(4)(B)		□ v □ N-
•	(i) and section 170(h)(4)(B)(ii)?			∐ Yes ∐ No
9	In Part XIV, describe how the organization reports conservation easements	•	a tha	
	balance sheet, and include, if applicable, the text of the footnote to the orga- organization's accounting for conservation easements	anization's illiancial statements that describe	s tile	
- Ps	art III Organizations Maintaining Collections of Art,	Historical Treasures or Other	Simila	 r Δeeρte
• •	Complete if the organization answered "Yes" to	Form 990. Part IV. line 8.	Jiiiiia	n Assetts.
12	If the organization elected, as permitted under SFAS 116 (ASC 958), not t		shoot	
,,	works of art, historical treasures, or other similar assets held for public ext	·		
	public service, provide, in Part XIV, the text of the footnote to its financial s			
ь	If the organization elected, as permitted under SFAS 116 (ASC 958), to re		eet	
_	works of art, historical treasures, or other similar assets held for public ext			
	public service, provide the following amounts relating to these items	, , , , , , , , , , , , , , , , , , , ,		
	(i) Revenues included in Form 990, Part VIII, line 1		•	\$
	(ii) Assets included in Form 990, Part X		•	\$
2	If the organization received or held works of art, historical treasures, or oth	er similar assets for financial gain, provide th	ie -	•
_	following amounts required to be reported under SFAS 116 (ASC 958) rela	•		
а	Revenues included in Form 990, Part VIII, line 1		•	\$
b	Assets included in Form 990, Part X		•	\$
<u> </u>	Penantuark Reduction Act Nation and the Instructions for Form 000			Schodule D (Form 900) 2010

4	Describe in Part XIV	the intended uses of	f the organization's	endowment funds
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4 Describe in Fait XIV the intended uses of the ord	garlization s endowinent run	us		
Part VI Land, Buildings, and Equip	oment. See Form 99	0, Part X, l <u>ine 10.</u>	· ·	
Description of investment	(a) Cost or other basis	(b) Cost or other basis	(c) Accumulated	(d) Book value
	(investment)	(other)	depreciation	
1a Land		20		20
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e. (Column (d) must equa	al Form 990, Part X, column	(B), line 10(c))	•	20

Schedule D (Form 990) 2010

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

(9) (10) (11)

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

che	dule D (Form 990) 2010 WV UNIVERSITY ALUMNI ASSOCIAT	ION	55-045059	2	Page 4
Pa	rt Xi Reconciliation of Change in Net Assets from Form 990 to	o Audite	ed Financial Stater	nent	s
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3	
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4 through 8			9_	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Statem	ents Wi	th Revenue per Re	eturn	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c	·		
	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d		-	2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	-4b -			
c	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial Staten	nents W	ith Expenses per	Retu	ırn
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
C	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	_		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	
	rt YIV Supplemental Information				

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Schedule D (Form 990) 2010 WV UNIVERSITY ALUMNI ASSOCIATION

55-0450592

Page 5

Part XIV Supplemental Information (continued)

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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

▶ Attach to Form 990.

OMB No 1545-0047

2010 Open to Public Inspection

Name of the organization WV UNIVERSITY ALUMNI ASSOCIATION	INI ASSOCIA	TION			Employer	Employer identification number ちちこの4ちのちの3	9.	l
		200.7						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	samount of the grant se? tonng the use of gran	s or assistan	ice, the grantees' eligi	bility for the grants or a	ssistance, and		N Ses X	0
Part If Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed	iovernments ar ecipient that re-	nd Organ ceived m	izations in the U ore than \$5,000.	Inited States. Co Check this box if	mplete if the or f no one recipie	ganization ans	wered "Yes" to bre than \$5,000. Part II	, 🗆
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
(1)				- ·	-			1
(2)								
(3)								I
(4)								1
(5)								
(9)								1
(2)								
(8)								
(6)								
 Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations 	rganizations							
For Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA	or Form 990.						Schedule I (Form 990) (2010)	6

Page 2 (f) Description of non-cash assistance . Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance 55-0450592 504,008 (c) Amount of cash grant WV UNIVERSITY ALUMNI ASSOCIATION Part III can be duplicated if additional space is needed (b) Number of recipients 871 (a) Type of grant or assistance Schedule I (Form 990) (2010) SCHOLARSHIPS ~

- Procedures for Monitoring the Use of Grant Funds Part I, Line 2

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

APPLICANTS FILL OUT SCHOLARSHIP APPLICATION, AND THE COMMITTEE GRANTS

SCHOLARSHIPS TO THOSE THAT QUALIFY.

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010 Open to Public Inspection

OMB No 1545-0047

Name of the organization

WV UNIVERSITY ALUMNI ASSOCIATION LOYALTY PERMANENT ENDOWMENT FUND

Employer identification number 55-0450592

Form 990, Part III, Line 4a - First Achievement

VIRGINIA UNIVERSITY AND TO PROVIDE SCHOLARSHIPS AT WEST VIRGINIA UNIVERSITY

TO STUDENTS SELECTED BY THE TRUST COMMITTEE.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
UPON REQUEST