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OMB No 1545-0052

**Return of Private Foundation** Form 990-PF or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter Social Security numbers on this form as it may be made public. Department of the Treasury Information about Form 990-PF and its separate instructions is at www.irs gov/form990pf. Internal Revenue Service For calendar year 2013 or tax year beginning and ending Name of foundation A Employer identification number THE ELLIOT FOUNDATION, INC. 26-2253829 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 240 CAPITOL STREET, SUITE 500 (304)344-1623City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here CHARLESTON, WV 25301 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation H Check type of organization: Ellf private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 3,077,538. (Part I, column (d) must be on cash basis) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements (b) Net investment (a) Revenue and (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income ıncome 310,000 1 Contributions, gifts, grants, etc., received N/A2 Check It the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 87 87 STATEMENT 64,237. 64,237 STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) <6,567. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 589,160. 0. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 367.757 64,324 12 Total Add lines 1 through 11 0. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees RECEIVED **b** Accounting fees c Other professional fees DEC 15 2018 17 Interest 18 Taxes 19 Depreciation and depletion OGDEN. UT 20 Occupancy

21 Travel, conferences, and meetings 22 Printing and publications 6,857. 6,857. 23 Other expenses STMT 3 0. 24 Total operating and administrative 6,857 6,857 expenses Add lines 13 through 23 45,950 45,950. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 52,807 6.857 45,950.

27 Subtract line 26 from line 12:

314,950 a Excess of revenue over expenses and disbursements 57,467. b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2013)

N/A

For	m 99	00-PF (2013) THE ELLIOT FOUNDATION,	INC.	26-2	26-2253829 Page 2		
P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	<del></del>		
_		Colonial Shooth de for end-dryear amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing					
	l	Savings and temporary cash investments	2,762,563.	3,077,538.	3,077,538.		
	3	Accounts receivable ► 1,780.		4 500			
		Less: allowance for doubtful accounts	1,780.	1,780.			
	4	Pledges receivable >					
	۱.	Less: allowance for doubtful accounts					
	ľ	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
	,	disqualified persons					
	7	Other notes and loans receivable  Less: allowance for doubtful accounts					
		Inventories for sale or use					
Assets		Prepaid expenses and deferred charges					
Ass	l	Investments - U.S. and state government obligations					
		Investments - corporate stock					
	1	Investments - corporate bonds					
		investments - land, buildings, and equipment basis					
	' '	Less accumulated depreciation		}			
	12	Investments - mortgage loans					
	13	Investments - other		<del></del>			
		Land, buildings, and equipment: basis					
		Less accumulated depreciation					
	15	Other assets (describe ▶					
		Total assets (to be completed by all filers - see the					
		instructions Also, see page 1, item 1)	2,764,343.	3,079,318.	3,077,538.		
	17	Accounts payable and accrued expenses	209.	234.			
	18	Grants payable					
Ś	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
abi	21	Mortgages and other notes payable					
	22	Other liabilities (describe )					
	23	Total liabilities (add lines 17 through 22)	209.	234.			
		Foundations that follow SFAS 117, check here					
10		and complete lines 24 through 26 and lines 30 and 31					
ĕ	24	Unrestricted	2,764,134.	3,079,084.			
lan	25	Temporarily restricted					
Ä	26	Permanently restricted					
Ĕ		Foundations that do not follow SFAS 117, check here					
Net Assets or Fund Balances		and complete lines 27 through 31					
ţ	27	Capital stock, trust principal, or current funds					
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
¥	29	Retained earnings, accumulated income, endowment, or other funds	0.764.134	2 000 004			
ž	30	Total net assets or fund balances	2,764,134.	3,079,084.			
		** 18 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 764 242	2 070 210			
_	31	Total liabilities and net assets/fund balances	2,764,343.	3,079,318.			
P	art	III Analysis of Changes in Net Assets or Fund E	Balances				
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30				
1		st agree with end-of-year figure reported on prior year's return)	. 30	1	2,764,134.		
2	•	r amount from Part I, line 27a		2	314,950.		
		r increases not included in line 2 (itemize)		3	<u> </u>		
_		lines 1, 2, and 3		4	3,079,084.		
		eases not included in line 2 (itemize)		5	0.		
-		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	olumn (b), line 30	6	3,079,084.		

Form **990-PF** (2013)

(a) List and des	cribe the l	osses for Tax on Ir	., real estate,	t Income	Ι Р.	low acquire Purchase	d (	c) Date acquired	
		; or common stock, 200 sh	<u>.</u>		D	- Donation	<u> </u>	(mo., day, yr.)	(mo., day, yr.)
1a PUBLICLY TRAD			HORT-T		-	<u>P</u>		ARIOUS	VARIOUS
b PUBLICLY TRAD	פט ספ	CURITIES - L	ONG-TE	KM	┼	P	-+`	ARIOUS	VARIOUS
	· <del>-</del>		<del></del>		<del> </del>				<del> </del>
e									
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or (lo (e) plus (f) minu	ss) s (g)
a 505,554		·		511,44					<5,887.
b 83,606	•			84,28	36.				<680.
<u>C</u>			<u> </u>						
<u>d</u>	<del> </del> -								
Complete only for assets show	ino oain in	column (h) and owned by	the foundation	on 12/31/60				Paras (Cal (b) as	
Complete only for assets show		(j) Adjusted basis	<del>,</del>	cess of col (i)			(I) ( col. (	Gains (Col. (h) ga k), but not less tl	in minus han -0-) or
(i) F.M.V. as of 12/31/69		as of 12/31/69		col. (j), if any		Losses (from col. (h))			l. (h))
a		<del></del>							<5,887.
b	1								<680.
С								·	
d		-							
е						,			
2 Capital gain net income or (net	canital loss	(If gain, also enter of If (loss), enter -0	r in Part I, line	7	1	2			<6,567.
, , ,	•	`		<b>'</b>	7		-		
3 Net short-term capital gain or (I If gain, also enter in Part I, line 8			10 (6):		٦ [				
If (loss), enter -0- in Part I, line	8				<u> </u>	3		N/	A
Part V   Qualification	Under S	Section 4940(e) for	Reduced	Tax on Net	Inve	estment	Inco	me	
(For optional use by domestic priva	te foundat	ions subject to the section 4	4940(a) tax on	net investment ir	ncome	.)			
If section 4940(d)(2) applies, leave	this part b	lank.							
Was the foundation liable for the se	otion 4040	) tay on the distributable am	aunt of any w	ar in the base no	-1040				
If "Yes," the foundation does not qu				•	riour				Yes X No
1 Enter the appropriate amount in					entries.	<del></del>		··-·	
(a)		(b)			(c)				(d)
Base periód years Calendar year (or tax year begini	ning in)	Adjusted qualifying dis	tributions	Net value of no	nchar	rtable-use a	ssets	(col. (b)	(d) ribution ratio divided by col. (c))
2012		11	6,210.				0.		.000000
2011			0,884.				0.		.000000
2010			6,457.				0.		.000000
2009			2,942.				0.		.000000
2008		35	0,000.	<u> </u>			0.	ļ	.000000
2 Total of line 1, column (d)								2	.000000
3 Average distribution ratio for the	-	•	on line 2 by 5,	or by the number	of yea	ars		_	00000
the foundation has been in exist	ence it less	s than 5 years						3	.000000
4 Enter the net value of noncharita	ibla-uca ac	ecate for 2012 from Part V	lina F						
- Litter the net value of nonchark	ibie-use as	55615 101 20 15 HUIH FAIL A,	iiie 3					4	
5 Multiply line 4 by line 3								5	0.
•									
6 Enter 1% of net investment inco	me (1% o	f Part I. line 27b)						6	575.
	•	•							
7 Add lines 5 and 6								7	575.
8 Enter qualifying distributions fro								8	45,950.
If line 8 is equal to or greater that See the Part VI instructions.	ın line 7, c	heck the box in Part VI, line	1b, and comp	lete that part usin	ng a 1%	% tax rate.			
Coo the fact of mondenone.									

	1990-PF(2013) THE ELLIOT FOUNDATION, INC.						<u> 26-</u>	2253	829		Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940					e), or 4	948	- see i	nstru	ctio	าร)
1a	Exempt operating foundations described in section 4940(d)(2), check here  and en	nter "N//	/A <b>"</b> o	n line 1		)					
	Date of ruling or determination letter: (attach copy of letter if nece							]			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	<b>X</b>	and	d enter	1%	•	1_1_			5	<u>75.</u>
	of Part I, line 27b					1		1			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% $$	of Pari	rt I, I	lıne 12,	col. (b).	J		ļ			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other	thers en	nter	-0-)			2	ļ			0.
3	Add lines 1 and 2						3			5	75.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	thers er	enter	· -0-)			4	<u> </u>			0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-						5_			5	75.
6	Credits/Payments:							ļ			
а	2013 estimated tax payments and 2012 overpayment credited to 2013	6a	<u> </u>								
þ	Exempt foreign organizations - tax withheld at source	6b	1					ļ			
C	Tax paid with application for extension of time to file (Form 8868)	6c						1			
đ	Backup withholding erroneously withheld	6d									
7	Total credits and payments. Add lines 6a through 6d						7_				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack.	ched					8				7.
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed SEE	ST	ran	TEMI	ENT 4	<b>!</b> ▶	9	<u> </u>		5	82.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid						10	ļ			
	Enter the amount of line 10 to be: Credited to 2014 estimated tax				Refu	nded 🛌	11	<u> </u>	,		
	rt VII-A Statements Regarding Activities								1		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legisle	lation o	or di	d it par	ticipate or	ıntervene	ın			Yes	
	any political campaign?								1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos								1b		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	d copi	ies d	of any	materials	publishe	ed or				
	distributed by the foundation in connection with the activities										
C	Did the foundation file Form 1120-POL for this year?								1c		<u> </u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the										
	(1) On the foundation. $\blacktriangleright$ \$ (2) On foundation managers.	. <b>▶</b> \$	·			0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendit	iture tax	x im	posed	on founda	tion					
	managers > \$O.									,	
2	Has the foundation engaged in any activities that have not previously been reported to the IR	RS?							2		<u>X</u>
	If "Yes," attach a detailed description of the activities										
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in		nent,	, article	s of incorp	oration, o	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change								3		<u>X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year	ır'y							4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?						N	I/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	,							5		<u>X</u>
_	If "Yes," attach the statement required by General Instruction T	41									
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied en	itner;									
	By language in the governing instrument, or					h 46 1-4					
	By state legislation that effectively amends the governing instrument so that no mandatory     The second of	y airect	tions	s that c	ontilet wit	n the state	e law			37	
-	remain in the governing instrument?		-	!!	1 (-)		,		6	X	
′	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," com	npiete	Par	п н, сс	or (c), and	a Part XV	,		7	X	
0-	Enter the states to which the foundation reports as with which it is registered ( instruction	no) 🕨									
oa	Enter the states to which the foundation reports or with which it is registered (see instruction <b>WV</b>	115)	_								
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	Hornor	, Co	noral /a	r doctore	to\					
ט	of each state as required by General Instruction G? If "No," attach explanation	шонеу	y uti	neidi (C	ucsiyild	16)			0.	v	
٥	Is the foundation claiming status as a private operating foundation within the meaning of sec	iction At	10/12	)(1)(3) v	r 49491N	5) for calc	nder		8b	<u>X</u>	
J	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," co			****		oj iui cale	iiuai		0		Х
10	Did any persons become substantial contributors during the tax year? It "yes," attach a schedul					C	тмт	י ק	10	×	

	n 990-PF (2013) THE ELLIOT FOUNDATION, INC. 26-225  art VII-A   Statements Regarding Activities (continued)	<u> 3829</u>	Page	5
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	$\top$	$\overline{}$	-
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	х	
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			_
	If "Yes," attach statement (see instructions)	12	x	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	_
	Website address ► N/A	<u> </u>		_
14	The books are in care of ► THE FOUNDATION Telephone no. ► (304)	344-	1623	_
	Located at ▶ 240 CAPITOL STREET, SUITE 500, CHARLESTON, WV ZIP+4 ▶2			_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			Ī
	and enter the amount of tax-exempt interest received or accrued during the year	N,	/A	-
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank,		Yes No	_ S
	securities, or other financial account in a foreign country?	1 16	x	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			_
	country			
Pa	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	<del></del>		_
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes No	<u> </u>
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
þ	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? $N/A$	1b		_
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2013?	1c	X	_
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1		
	defined in section 4942(j)(3) or 4942(j)(5)):	1 1		
a	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2013?			
	If "Yes," list the years 🕨,,,,,,,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1 1		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			_
	<b></b>	1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2013 ) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	Х	
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			_
	had not been removed from leopardy before the first day of the tax year beginning in 2013?	l 4h	l x	

orm 990-PF (2013) THE ELLIOT FOUNDATION, I			<u> 26-22538</u>	<u>29</u> Pag	e 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be R	equired (contin	ued)		_
5a During the year did the foundation pay or incur any amount to.		_			_
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?		s X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	ctly,			
any voter registration drive?		Y6	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y6	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		. 🔲 🔀	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo	or			
the prevention of cruelty to children or animals?		Y6	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described in	n Regulations			
section 53 4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	ere				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it maintain	ned			
expenditure responsibility for the grant?	N	/A 🔲 🔀	s No		
If "Yes," attach the statement required by Regulations section 53 494.	5-5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?			s X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b 3	Κ
If "Yes" to 6b, file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y <sub>6</sub>	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu	utable to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	/		
			<del></del>		
1 List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	( ) [ ( ) [ ( ) ]	_
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expens account, oth	ie her
	to position	enter -0-)	compensation	allowance	<u>s</u>
JOHN R. ELLIOT	DIRECTOR/PRES	IDENT			
240 CAPITOL STREET, SUITE 500		•			
CHARLESTON, WV 25301	1.00	0.	0.		<u>).</u>
FONDA J. ELLIOT	DIRECTOR/VICE	PRESIDEN	T	ļ	
240 CAPITOL STREET, SUITE 500	1 00			}	_
CHARLESTON, WV 25301	1.00	0.	0.		<u>).</u>
GREGORY J. ELLIOT	DIRECTOR/VICE	PRESIDEN	T		
240 CAPITOL STREET, SUITE 500	1 00			ر ا	_
CHARLESTON, WV 25301	1.00	0.	0.	ļ <u>_</u>	<u>).</u>
ANDREW M. ELLIOT	DIRECTOR/SECR	ETARY/TRE	ASURER		
240 CAPITOL STREET, SUITE 500					_
CHARLESTON, WV 25301  Compensation of five highest-paid employees (other than those inc	1.00	0.	0.	<u></u>	<u>O.</u>
2 Compensation of five ringuest-paid employees (other than those inc		enter NUNE."	(d) Contributions to	(a) Evnens	<u> </u>
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens account, oth allowance	ner s
NONE	COVOLOGIC POCINION		compensation		
-1/412	†				
			-	<del> </del>	
.					
					_
***	]	1			
	1				
			<del></del>		
	1				
Cotal number of other employees paid over \$50,000	•			t	$\overline{}$

Form 990-PF (2013) THE ELLIOT FOUNDATION, Part VIII Information About Officers, Directors, Tr Paid Employees, and Contractors (continue	INC. rustees, Foundation Mai	26-2 nagers, Highly	2253829	Page 7
3 Five highest-paid independent contractors for professional ser (a) Name and address of each person paid more than \$50		(b) Type of service	(a) Com	pensation
NONE	,,000	(b) Type of Service	(0) 00111	pensation
Total number of others receiving over \$50,000 for professional services			<b>&gt;</b>	0
Part IX-A Summary of Direct Charitable Activities		<del></del>		
List the foundation's four largest direct charitable activities during the tax year number of organizations and other beneficiaries served, conferences convened	. Include relevant statistical informa d, research papers produced, etc.	tion such as the	Expenses	3
1 N/A				
2				····
3				
	<del></del>			
4			· ·	
Part IX-B Summary of Program-Related Investment	ts			
Describe the two largest program-related investments made by the foundation $\mathbf{N/A}$	ouring the tax year on lines 1 and 1	Z.	Amount	
1N/A	· · · · · · · · · · · · · · · · · · ·			
2				
<u> </u>				
All other program-related investments. See instructions.				<u>.</u>
3				
Total Add lines 1 through 3				0

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

Form 990-PF (2013)

6

Adjusted qualifying distributions Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI.	001700			2010
line 7				0.
2 Undistributed income, if any, as of the end of 2013		<del> </del>		
a Enter amount for 2012 only			0.	
b Total for prior years:			.==	
, ,		0.		
3 Excess distributions carryover, if any, to 2013:		**.**		
a From 2008 350,000.				
b From 2009 432,942.				
c From 2010 556,500.				
d From 2011 501,000.				
e From 2012 116,500.				
f Total of lines 3a through e	1,956,942.			
4 Qualifying distributions for 2013 from		*****		
Part XII, line 4. $\triangleright$ \$ 45,950.				
a Applied to 2012, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2013 distributable amount				0.
e Remaining amount distributed out of corpus	45,950.			
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
	2,002,892.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,002,092.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	;	0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2012. Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008				
not applied on line 5 or line 7	350,000.			
9 Excess distributions carryover to 2014				
Subtract lines 7 and 8 from line 6a	1,652,892.			
10 Analysis of line 9:				
a Excess from 2009 432,942.				
b Excess from 2010 556,500.				
c Excess from 2011 501,000.			1	
d Excess from 2012 116,500.				1
e Excess from 2013 45,950.			L	

Form 990-PF (2013) THE ELL Part XIV   Private Operating F	IOT FOUNDAT	ION, INC.	I.A. guestian O		53829 Page 10
			I-A, question 9)	N/A	·
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo		<del>-</del>		40.40(.)(0) - 4	240(1/5)
b Check box to indicate whether the found		ig foundation described		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2013	(b) 2012	Prior 3 years (c) 2011	(d) 2010	(a) Tatal
income from Part I or the minimum	(8) 2013	(0) 2012	(6) 2011	(0) 2010	(e) Total
investment return from Part X for					
each year listed				-	
b 85% of line 2a				<u> </u>	
c Qualifying distributions from Part XII,					
line 4 for each year listed				<u> </u>	
d Amounts included in line 2c not					ļ
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.		:			
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter:					
<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying</li></ul>					
under section 4942(j)(3)(B)(i)  b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					<del> </del>
(3) Largest amount of support from					
an exempt organization			ļ		
(4) Gross investment income	<u> </u>		'6 th	1 05 000	L <u>.</u>
Part XV Supplementary Info at any time during t			if the foundation	nad \$5,000 or m	ore in assets
Information Regarding Foundation     List any managers of the foundation why ear (but only if they have contributed in NONE)	o have contributed more	than 2% of the total con ection 507(d)(2).)	tributions received by the	foundation before the clo	se of any tax
b List any managers of the foundation who ther entity) of which the foundation ha			(or an equally large porti	on of the ownership of a p	artnership or
NONE					
2 Information Regarding Contribut			_	not accept unsolicited requ	uests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	riduals or organizations i	under other conditions, c	omplete items 2a, b, c, an	
a The name, address, and telephone num	ber or e-mail address of t	he person to whom appl	lications should be addre	ssed:	•
SEE STATEMENT 8			<del> </del>		<del></del>
<b>b</b> The form in which applications should b	e submitted and informat	tion and materials they s	hould include.		
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographica	al areas, charitable fields	, kınds of institutions, or	other factors:	

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or Foundation show any relationship to Amount contribution any foundation manager status of Name and address (home or business) or substantial contributor recipient a Paid during the year HOLZ ELEMENTARY SCHOOL N/A PUBLIC SCHOOL SUPPORT 1505 HAMPTON ROAD CHARLESTON, WV 25314 1,000. CAMC FOUNDATION SUPPORT PRIVATE N/A 3412 STAUNTON AVENUE FOUNDATION CHARLESTON, WV 25304 25 000 FUND FOR THE ARTS PUBLIC CHARITY SUPPORT N/A 803 QUARRIER STREET, SUITE 100 CHARLESTON, WV 25301 2,500. CHARLESTON CENTRAL LITTLE LEAGUE N/A PUBLIC CHARITY SUPPORT CHARLESTON, WV 25301 2,500. HOSPICE CARE PUBLIC CHARITY SUPPORT N/A 1606 KANAWHA BLVD., WEST CHARLESTON WV 25387 1 000. SEE CONTINUATION SHEET(S) ➤ 3a Total 45 950. b Approved for future payment NONE Total **▶** 3b

=	ess otherwise indicated.	Unrelated b	usiness income		ed by section 512, 513, or 514	(e)
		(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service reve	nue:	code	Amount	code	Amount	function income
a	<del></del>					
	· · · · · · · · · · · · · · · · · · ·					
e		_				
f		_				
g Fees and contracts	s from government agencies		<del></del>			·
2 Membership dues and						
3 Interest on savings an	id temporary cash					
investments						87 64,237
4 Dividends and interes		<u> </u>				64,237
5 Net rental income or (						
a Debt-financed proj	•					·
b Not debt-financed	· · · ·		<del> </del>			
6 Net rental income or (	loss) from personal					
property			<del></del>	1		
7 Other investment inco	*****			<del>  </del>		
8 Gain or (loss) from sa	les of assets other					6 565
than inventory				$\vdash$		<6,567
9 Net income or (loss) f				<del>  </del>		<del></del>
O Gross profit or (loss) to Other revenue:	from sales of inventory			+		
		I I		+-+		······································
	- · · - · · · · · · · · · · · · · · · ·			+ +		
				1		····
е		-				
2 Subtotal. Add column	s (b), (d), and (e)	-	0.		0.	57,757
3 Total. Add line 12, col		<del></del>		<del></del>		57,757
<u>=</u>	instructions to verify calculations.)	)				3,1,3,
	elationship of Activities		unlichment of Ex	vomnt	Durnoses	
Lairval. Di III	——————————————————————————————————————	to the Accon	ipiisiiiieiit oi L	Kempt	. rui poses	
	elow how each activity for which in	come is reported in c	olumn (e) of Part XVI-A	\ contrib	uted importantly to the accom	plishment of
Line No Explain be	lation's exempt purposes (other tha					
Line No Explain by the found 3, 4, THIS I	lation's exempt purposes (other that NCOME IS FROM II	NVESTMENTS		COM	E IS TO BE DI	STRIBUTED TO
Line No Explain by the found 3, 4, THIS I	lation's exempt purposes (other tha	NVESTMENTS		COMI	E IS TO BE DI	STRIBUTED TO
Line No Explain by the found 3, 4, THIS I	lation's exempt purposes (other that NCOME IS FROM II	NVESTMENTS		ICOMI	E IS TO BE DI	STRIBUTED TO
Line No Explain by the found 3, 4, THIS I	lation's exempt purposes (other that NCOME IS FROM II	NVESTMENTS		COM	E IS TO BE DI	STRIBUTED TO
Line No Explain by the found 3, 4, THIS I	lation's exempt purposes (other that NCOME IS FROM II	NVESTMENTS		COMI	E IS TO BE DI	STRIBUTED TO
Line No Explain by the found 3, 4, THIS I	lation's exempt purposes (other that NCOME IS FROM II	NVESTMENTS		ICOMI	E IS TO BE DI	STRIBUTED TO
Line No Explain by the found 3, 4, THIS I	lation's exempt purposes (other that NCOME IS FROM II	NVESTMENTS		ICOMI	E IS TO BE DI	STRIBUTED TO
Line No Explain by the found 3, 4, THIS I	lation's exempt purposes (other that NCOME IS FROM II	NVESTMENTS		СОМІ	E IS TO BE DI	STRIBUTED TO
Line No Explain by the found 3, 4, THIS I	lation's exempt purposes (other that NCOME IS FROM II	NVESTMENTS		СОМІ	E IS TO BE DI	STRIBUTED TO
Line No Explain by the found 3, 4, THIS I	lation's exempt purposes (other that NCOME IS FROM II	NVESTMENTS		ICOMI	E IS TO BE DI	STRIBUTED TO
Line No Explain by the found 3, 4, THIS I	lation's exempt purposes (other that NCOME IS FROM II	NVESTMENTS		ICOMI	E IS TO BE DI	STRIBUTED TO
Line No Explain by the found 3, 4, THIS I	lation's exempt purposes (other that NCOME IS FROM II	NVESTMENTS		ICOMI	E IS TO BE DI	STRIBUTED TO
Line No Explain by the found 3, 4, THIS I	lation's exempt purposes (other that NCOME IS FROM II	NVESTMENTS		ICOMI	E IS TO BE DI	STRIBUTED TO
Line No Explain by the found 3, 4, THIS I	lation's exempt purposes (other that NCOME IS FROM II	NVESTMENTS		ICOM	E IS TO BE DI	STRIBUTED TO

Pa	rt XVII	Information Re Exempt Organ		nsfers To	and Transactions	and Relati	onships With Nonch	aritable	9	<u> </u>
1	Did the oi			v of the follows	ng with any other organiza	tion described in	section 501(c) of		Yes	No
					27, relating to political org		7 30011011 00 1(0) 01			110
		from the reporting found						1		
	(1) Cash			•	•			1a(1)		Х
	(2) Othe	r assets						1a(2)		X
b	Other tran	isactions;								
	(1) Sales	s of assets to a noncharita	ıble exempt organız	ation				16(1)		Х
	(2) Purc	hases of assets from a no	ncharitable exempt	organization				1b(2)		Х
	(3) Rent	al of facilities, equipment,	or other assets					1b(3)		Х
	(4) Reim	bursement arrangements						1b(4)		Х
	( <b>5</b> ) Loan	s or loan guarantees						1b(5)		Х
		ormance of services or me		-				1b(6)		X
		f facilities, equipment, ma						1c		X
	or service	s given by the reporting f	oundation. If the fo	undation receiv	ed less than fair market va		fair market value of the good action or sharing arrangement		sets,	
(a) Lii		(b) Amount involved			e exempt organization	(d) p				
(4/5	16 110	(b) Amount involved	(c) Name		e exempt organization	(u) Desc	cription of transfers, transactions, a	nd sharing ar	rangeme	nts
		<del></del>		N/A		·····			-	
	<del> </del> -	<del></del>								<del></del> -
					· · ·					
							· · · · · · · · · · · · · · · · · · ·			
				<del></del>						
							· · · · · · · · · · · · · · · · · · ·	-	·	
					·					
		<del></del>								
		, ,·								
		ndation directly or indirect 501(c) of the Code (other	•	•	or more tax-exempt orga tion 527?	nizations descri	bed	Yes	X	] No
<u>b</u>	If "Yes," co	omplete the following sch			· · · · · · · · · · · · · · · · · · ·					
		(a) Name of org	anization		(b) Type of organization	1	(c) Description of relatio	nship		
		N/A	<del></del>	····						
		<del> </del>								
						ļ			_	
	<u> </u>			<del></del> -			<del> </del>			
	Under				<u> </u>	<del></del>				
Sig Her	n and be				ng accompanying schedules ar in taxpayer) is based on all info		reparer has any knowledge	May the IRS of eturn with the shown below	e prepare (see inst	er
	<b>S</b> figr	Million of the Africa			Date / / '	Title				
		P/int/Type preparer's na	ime	Preparer's s	ignature '	Date	Check If PTII	V		
г.	. [	/		<b>/</b> _ (	OC 10 H 201	رامل و را	self- employed			
Pai		ROGER A. G		Hasey	anthor a	475/8/		01299		
	parer Only	Firm's name ► GRA	Y, GRIFF	ITH & M	AYS, `A.C.	_ ' (	Firm's EIN ► 55-	06214	82	
			7 VIRGIN		ET, EAST, SUI	TE 400	Phone no. (304	) 3/5	_91	

### 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, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs.gov/form990. OMB No 1545-0047

Employer identification number

2013

THE ELLIOT FOUNDATION, INC. 26-2253829 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does 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 its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

Employer identification number

	THE	ELLIOT	FOUNDATION,	INC.
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26-2253829

Part I	Contributors (see instructions) Use duplicate copies of Part I if addit	tional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOHN R. ELLIOT  240 CAPITOL STREET, SUITE 500  CHARLESTON, WV 25301	\$\$	Person X Payroll  Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Ocomplete Part II for noncash contributions )

Name of organization

Employer identification number

# THE ELLIOT FOUNDATION, INC.

26-2253829

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if	f additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - - - - -	

ame of organ	orm 990, 990-EZ, or 990-PF) (2013)		Pag Employer identification number
unic or organi			Employer Identification number
HE ELL	IOT FOUNDATION, INC.		26-2253829
art III	the total of exclusively religious, charitable, et	the following line entry. For organizations co ic., contributions of \$1,000 or less for the y	8), or (10) organizations that total more than \$1,000 for the mpleting Part III, enter
a) No.	Use duplicate copies of Part III if addition	nal space is needed	
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
] =			
		(e) Transfer of gift	
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
-			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

Transferee's name, address, and ZIP + 4

Transferee's name, address, and ZIP + 4

(c) Use of gift	(d) Description of how gift is hel

#### (e) Transfer of gift

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

### (e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

Relationship of transferor to transferee

Relationship of transferor to transferee

(a) No. from Part I THE ELLIOT FOUNDATION, INC.

Part XV | Supplementary Information

26-2253829

3 Grants and Contributions Paid During the	e real (Continuation)	T		<del> </del>
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
WCA WOMEN OF ACHIEVEMENT	N/A	PUBLIC CHARITY	SUPPORT	
1426 KANAWHA BOULEVARD, EAST				
CHARLESTON, WV 25301				3,75
CHARLESTON BALLET	N/A	PUBLIC CHARITY	SUPPORT	
100 CAPITOL STREET				
CHARLESTON, WV 25301				20
CAMC FOUNDATION	N/A	PRIVATE	SUPPORT	
3412 STAUNTON AVENUE		FOUNDATION		
CHARLESTON, WV 25304				10,00
				,
Total from continuation sheets				13_9

FORM 990-PF INTERES	ST ON SAVING	GS AN	D TEMPOR	ARY	CASH IN	VESTMENTS	SI	PATEMENT	1
SOURCE			(A) REVENUE PER BOOK		NET IN	(B) VESTMENT COME	N	(C) ADJUSTED VET INCOME	3
CITY NATIONAL BANK		87.		· · · · ·	87.		······································		
TOTAL TO PART I, LII	NE 3			87.		87.			
FORM 990-PF	DIVIDENDS	AND	INTEREST	FRO	M SECUR	ITIES	SI	PATEMENT	2
SOURCE	GROSS AMOUNT	G	PITAL AINS IDENDS	RE	(A) VENUE BOOKS	(B) NET INVE MENT INC		(C) ADJUSTI NET INCO	
AMAZON.COM INC 2.5% DUE 11/29/22 - INTEREST AMGEN INC NOTE 3.45% DUE 10/1/20	625.		0.		625.	6:	25.		
- INTEREST BANK OF AMERICA NOTES 5.625% DUE	31.		0.		31.	:	31.		
10/14/16 - BARCLAYS BANK PLC 2% 8/15/14 -	5,625.		0.		5,625.	5,6	25.		
INTEREST BARCLAYS BANK PLC MED NOTE 3.25% DUE	1,000.		0.		1,000.	1,0	00.		
9/30/17 - INTEREST BB&T CORP MED TERM NOTE 2.05% DUE	1,463.		0.		1,463.	1,4	63.		
6/19/18 - INTEREST BURLINGTN NORTH SANTA FESR 3.05%	248.		0.		248.	24	48.		
3/15/22 - INTEREST CB BANK OF AMERICA CORP BD 2% DUE	1,525.		0.		1,525.	1,5	25.		
1/11/18 CB GOLDMAN SACHS GROUP NTS 3% DUE	411.		0.		411.	4:	11.		
9/5/21 - INTEREST CELGENE CORP SR NOTE 1.9% DUE	52.		0.		52.	!	52.		
8/15/17 CITIGROUP INC 2.65% DUE 3/2/15 -	483.		0.		483.	4:	83.		
INTEREST	2,650.		0.		2,650.	2,6	50.		

<u> </u>					
DODGE & COX INCOME				_	,
FD 147 - DIVIDENDS	1,389.	0.	1,389.	1,389.	
DOW CHEMICAL	·		•	·	
INTERNOTES 3.05%					
DUE 2/15/19 -	3,050.	0.	3,050.	3,050.	
ENTERGY LOUISIANA	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	• •	7	.,	
LLC PFD 5.25% DUE					
7/1/52 - DIVIDENDS	984.	0.	984.	984.	
FANNIE MAE 3.5%	301.	•	3011	3010	
DUE 9/25/41 -					
INTEREST	1,445.	0.	1,445.	1,445.	
FEDERAL FARM	1,443.	•	1,445.	1,113.	
CREDIT BANK 1.42%					
DUE 12/24/18 -	197.	0.	197.	197.	
FEDERAL NATL MTG	197.	0.	137.	137.	
ASSN 2.1% DUE	EDE	Λ	E 2 E	ESE	
11/23/21 -	525.	0.	525.	525.	
FEDERATED GNMA					
TRUST SH BEN	CO.C	^	CO.C	C0 C	
INT-FUND 16 -	606.	0.	606.	606.	
FEDERATED GOV'T					
ULTRA SHORT	4.55	^	4.5~	4.6-	
DURATION #626 -	467.	0.	467.	467.	
FEDERATED INCOME					
TRUST SH BEN INT -					
FUND 36 -	763.	0.	763.	763.	
FEDERATED PRIME					
VAL OBL FD #856 -					
DIVIDENDS	19.	0.	19.	19.	
FEDERATED TOTAL					
RETURN ULTRA SHORT					
BD #108 -	3,366.	0.	3,366.	3,366.	
FNMA SER 3.5%					
8/25/41 - INTEREST	1,757.	0.	1,757.	1,757.	
FORD MOTOR CREDIT					
CO LLC 4.25% DUE					
9/20/22 - INTEREST	27.	0.	27.	27.	
FORD MOTOR CREDIT					
COMPANY 3% DUE					
11/20/20 -	613.	0.	613.	613.	
GE CAP CORP 4.875%		• •	ÿ <b>– •</b> •	4 <b>- 4</b> ·	
PFD SR NT DUE					
10/15/52 -	1,236.	0.	1,236.	1,236.	
GENERAL ELECTRIC	£ / 230 •	•	_,	-, <del>-</del>	
CAP CORP 3.1% DUE					
1/9/23 - INTEREST	357.	0.	357.	357.	
GENERAL ELECTRIC	337.	٠.	357.	557.	
CAP NT 1.2% DUE	400	^	402	403	
4/13/15 - INTEREST	493.	0.	493.	493.	
GINNIE MAE 3% DUE					
12/20/42 -		_			
INTEREST	523.	0.	523.	523.	
GNMA 3% 10/16/41 -		_			
INTEREST	2,680.	0.	2,680.	2,680.	

GOLDMAN SACHS					
GROUP INC 5.25%					
DUE 7/27/21 -	2,625.	0.	2,625.	2,625.	
GOLDMAN SACHS MED					
NOTE 3.7% DUE					
8/1/15 - INTEREST	3,700.	0.	3,700.	3,700.	
HEINZ H J CO SR					
1.5% DUE 3/1/17 -					
INTEREST	1,194.	0.	1,194.	1,194.	
HEWLETT PACKARD CO					
SR NT 3.75% DUE					
12/1/20 - INTEREST	2,563.	0.	2,563.	2,563.	
JPMORGAN CHASE &	• • • •		,	•	
CO 1.625% DUE					
5/15/18 - INTEREST	202.	0.	202.	202.	
JPMORGAN CHASE &		• •		2020	
CO SER P PERP					
5.45% PFD -	1,120.	0.	1,120.	1,120.	
KAYNE ANDERSON MLP	1,120.	•	1,120.	1,120	
INVEST CO PDF 3.5%					
- DIVIDENDS	289.	0.	289.	289.	
LESS: ACCRUED	2051	•	203.	203.	
INTEREST PAID &					
COLLECTED	<24.>	0.	<24.>	<24.>	
METLIFE INC 1.756%	\44.>	0.	\23.×	<24.>	
DUE 12/15/17 ~					
INTEREST	115.	0.	115.	115.	
MORGAN STANLEY SR	113.	0.	117.	113.	
NOTE 4% DUE					
7/24/15 - INTEREST	4,000.	0.	4,000.	4,000.	
MURPHY OIL CORP	4,000.	0.	4,000.	4,000.	
2.5% DUE 12/1/17 -					
INTEREST	875.	0.	875.	875.	
ONEOK PARTNERS L P	0/3.	0.	0/5.	6/5.	
2% DUE 10/1/17 -	1	0	1	1	
INTEREST	1.	0.	1.	1.	
PENNSYLVANIA ST					
HGR EDU REV 4% DUE	406.	0.	406.	406.	
6/15/23 - INTEREST PHILLIPS 66 4.3%	400.	0.	400.	400.	
DUE 4/1/22 -					
	99.	0.	99.	99.	
INTEREST	33.	0.	<b>33</b> •	33.	
PUERTO RICO					
COMWLTH 4% DUE	1 244	0	1 244	1 244	
7/1/21 - INTEREST	1,244.	0.	1,244.	1,244.	
PUERTO RICO					
COMWLTH 4.125% DUE	1 000	0	1 202	1 202	
7/1/22 - INTEREST	1,283.	0.	1,283.	1,283.	
SCE TRUST II 5.1%					
PFD SECS PERP -	1 100	^	1 100	1 100	
DIVIDENDS	1,102.	0.	1,102.	1,102.	
STAPLES INC 4.375%					
DUE 1/12/23 -	1 446	0	1 440	1 440	
INTEREST	1,446.	0.	1,446.	1,446.	

TEXAS INSTRS INC NT 1.65% DUE					
8/3/19 - INTEREST TORTOISE ENERGY	818.	0.	818.	818.	
PFD STOCK CAP CORP 3.95% - DIVIDENDS VERIZON	1,810.	0.	1,810.	1,810.	
COMMUNICATION 2.45% DUE 11/1/22 WELLPOINT INC NOTE	582.	0.	582.	582.	
3.125% DUE 5/15/22 - INTEREST WELLS FARGO & CO	781.	0.	781.	781.	
1.25% DUE 2/13/15 - INTEREST WELLS FARGO & CO	625.	0.	625.	625.	
PFD 5.2% - DIVIDENDS WEST VA UNIV REVS RFDG 3.619% DUE	1,300.	0.	1,300.	1,300.	
10/1/28 - INTEREST WESTERN UNION CORP 2.875% DUE	1,146.	0.	1,146.	1,146.	
12/10/17	325.	0.	325.	325.	
TO PART I, LINE 4	64,237.	0.	64,237.	64,237.	

FORM 990-PF	OTHER E	XPENSES	STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LICENSES & FEES TRUST DEPARTMENT FEES BANK CHARGES	25. 6,796. 36.	25. 6,796. 36.		0. 0. 0.	
TO FORM 990-PF, PG 1, LN 23	6,857.	6,857.		0.	

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS STATEMENT 5
PART VII-A, LINE 10

NAME OF CONTRIBUTOR

ADDRESS

JOHN R. ELLIOT

240 CAPITOL STREET, SUITE 500
CHARLESTON, WV 25301

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

JOHN R. ELLIOT 240 CAPITOL STREET, SUITE 500 CHARLESTON, WV 25301

TELEPHONE NUMBER

(304)344-1623

#### FORM AND CONTENT OF APPLICATIONS

LETTER APPLICATIONS WHICH INCLUDE: NAME, MISSION, & AMOUNT REQUESTED, AND PURPOSE OF EACH ENTITY AS WELL AS VERIFICATION OF TAX EXEMPT STATUS.

#### ANY SUBMISSION DEADLINES

N/A

#### RESTRICTIONS AND LIMITATIONS ON AWARDS

THE FOUNDATION WILL MAKE QUALIFYING DISTRIBUTIONS TO ESTABLISHED PUBLIC CHARITIES, COLLEGES AND UNIVERSITIES, MEDICAL INSTITUTIONS AND OTHER QUALIFYING RECIPIENTS, PRIMARILY LOCATED IN THE STATE OF WEST VIRGINIA. THE FOUNDATION WILL MAKE SUCH CONTRIBUTIONS BASED UPON ANALYSIS AND DETERMINATIONS BY ITS BOARD OF DIRECTORS AS TO WORTHY AND DESERVING RECIPIENTS IN EACH YEAR. THE FOUNDATION WILL ALSO REVIEW AND CONSIDER REQUESTS FOR GRANTS OR CONTRIBUTIONS FROM ANY QUALIFYING RECIPIENT ORGANIZATIONS, AND IN CONSIDERING AND MAKING SUCH GRANTS IT WILL PRIMARILY FOCUS ON CULTURAL, ARTS, ENVIRONMENTAL AND EDUCATIONAL ASPECTS.

# Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

● If you ar	e filing for an Automatic 3-Month Extension, complet	te only Pa	art I and check this box			
ii you ar	e filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form).		
Do not coi	mplete Part II unless you have already been granted a	an automa	itic 3-month extension on a previous	sly filed For	m 8868	
Electronic	filing (e-file). You can electronically file Form 8868 if y	ou need a	3-month automatic extension of tir	ne to file (6	months for a c	orporation
	ofile Form 990-T), or an additional (not automatic) 3-mor					
	file any of the forms listed in Part I or Part II with the exc					
	Benefit Contracts, which must be sent to the IRS in pap					
	rs gov/efile and click on e-file for Charities & Nonprofits		,			,
Part I	Automatic 3-Month Extension of Time		submit original (no copies ne	eded).		
A corporat	ion required to file Form 990-T and requesting an auton				<del></del>	
Part I only				- Pierre		
•	orporations (including 1120-C filers), partnerships, REM	ICs. and ti	rusts must use Form 7004 to reques	st an exten:	sion of time	
	me tax returns				r's identifying	number
Type or	Name of exempt organization or other filer, see instruc	ctions			identification n	
print		21.01.0		=p.o,o.		a501 (a.i. v) 01
	THE ELLIOT FOUNDATION, INC.				26-2253	829
File by the	by the				curity number (	
due date for filing your	240 CAPITOL STREET, SUITE			Cociai sc	santy namber (	3011)
eturn See nstructions	City, town or post office, state, and ZIP code. For a fo		ress see instructions	J		
i i i i i i i i i i i i i i i i i i i	CHARLESTON, WV 25301	neigh add	ress, see instructions			
	CHARDEDION, WV 25501					
Enter the E	Return code for the return that this application is for (file	a conara	te application for each return)			0 4
LINE INE P	return code for the return that this application is for the	a separa	te application for each return,			(A)
Annliantia		Datura	Application			Return
Applicatio	n	Return				_
s For	ov Cover 000 F7	Code	Is For			07
	or Form 990-EZ	01	Form 990-T (corporation) Form 1041-A			08
Form 990-E		02				09
	) (individual)	03 04	Form 4720 (other than individual)			10
Form 990-F		05	Form 5227			11
	T (sec 401(a) or 408(a) trust)	06	Form 6069	<del></del>		12
-orm 990-	T (trust other than above)	06	Form 8870		<del></del>	
	THE FOUNDATION	मन्द्र र	SUITE 500 - CHARL	E C⊕ON	WT7 253	n1
	oks are in the care of $\triangleright$ 240 CAPITOL STE	(PPI,	Fax No.	POLON	, WV 233	01
-	one No ► (304)344-1623		·			$\blacksquare$
If the or	ganization does not have an office or place of business for a Group Return, enter the organization's four digit (			If this is for	the whole are	in check this
lf this is	TOF A Group Return, enter the organization's four digit v	GIOUP EXE	SIIDUOII NUISIDEI (GEIV)		tile wilde giot	1D, CHECK 11113
_		1				
oox 🕨 🗌	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs o	of all memb		
oox ▶ ☐	. If it is for part of the group, check this box  uest an automatic 3-month (6 months for a corporation	and atta	ch a list with the names and EINs on the file Form 990-T) extension of time	of all memb e until	ers the extension	
oox ▶ ☐ 1 I requ	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs o	of all memb e until	ers the extension	
oox ▶ ☐ 1 I required is for	. If it is for part of the group, check this box usest an automatic 3-month (6 months for a corporation AUGUST 15, 2014 , to file the exempted the organization's return for:	and atta	ch a list with the names and EINs on the file Form 990-T) extension of time	of all memb e until	ers the extension	
oox ▶ ☐ 1 I required is for	. If it is for part of the group, check this box usest an automatic 3-month (6 months for a corporation AUGUST 15, 2014, to file the exempt the organization's return for:  K calendar year 2013 or	and atta required t t organiza	ich a list with the names and EINs of to file Form 990-T) extension of time tion return for the organization name	of all memb e until	ers the extension	
1 I required is for	. If it is for part of the group, check this box usest an automatic 3-month (6 months for a corporation AUGUST 15, 2014 , to file the exempted the organization's return for:	and atta required t t organiza	ch a list with the names and EINs on the file Form 990-T) extension of time	of all memb e until	ers the extension	
1 I require is for	. If it is for part of the group, check this box uest an automatic 3-month (6 months for a corporation AUGUST 15, 2014, to file the exempted the organization's return for:  X calendar year 2013 or tax year beginning	and atta required torganiza	ch a list with the names and EINs of to file Form 990-T) extension of time tion return for the organization named ending	of all memb e until ed above	ers the extension The extension	
1 I required in the state of th	. If it is for part of the group, check this box uest an automatic 3-month (6 months for a corporation AUGUST 15, 2014, to file the exempted the organization's return for:  K. calendar year 2013 or tax year beginning.	and atta required torganiza	ch a list with the names and EINs of to file Form 990-T) extension of time tion return for the organization named ending	of all memb e until	ers the extension The extension	
1 I required in the state of th	. If it is for part of the group, check this box usest an automatic 3-month (6 months for a corporation AUGUST 15, 2014, to file the exempter the organization's return for:  K. calendar year 2013 or tax year beginning  etax year entered in line 1 is for less than 12 months, concept the control of the cont	and atta required torganiza , an heck reas	ich a list with the names and EINs of to file Form 990-T) extension of time tion return for the organization named ending	of all memb e until ed above	ers the extension The extension	
1 I required in the state of th	. If it is for part of the group, check this box usest an automatic 3-month (6 months for a corporation AUGUST 15, 2014, to file the exempted the organization's return for:  K. calendar year 2013 or tax year beginning  e tax year entered in line 1 is for less than 12 months, concluding the control of the	and atta required torganiza , an heck reas	ich a list with the names and EINs of to file Form 990-T) extension of time tion return for the organization named ending	of all member until led above	ers the extension The extension	on is for
1 I required in the second of	. If it is for part of the group, check this box usest an automatic 3-month (6 months for a corporation AUGUST 15, 2014, to file the exempted the organization's return for:  K. calendar year 2013 or tax year beginning  e tax year entered in line 1 is for less than 12 months, color change in accounting period application is for Forms 990-BL, 990-PF, 990-T, 4720 efundable credits.	and atta required torganiza , an heck reas , or 6069,	ich a list with the names and EINs of to file Form 990-T) extension of time tion return for the organization named ending	of all memb e until ed above	ers the extension The extension	on is for
1 I required in the state of th	. If it is for part of the group, check this box usest an automatic 3-month (6 months for a corporation AUGUST 15, 2014, to file the exempted the organization's return for:  K. calendar year 2013 or tax year beginning  e tax year entered in line 1 is for less than 12 months, color conditions in accounting period is application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6068 application is for Forms 990-PF, 990-T, 4720, or 6068	and atta required torganiza , an heck reas , or 6069,	ich a list with the names and EINs of to file Form 990-T) extension of time tion return for the organization named and ending	of all memb e until led above Final return	ers the extension The extension	on is for
1 I required in the section of the s	. If it is for part of the group, check this box uest an automatic 3-month (6 months for a corporation AUGUST 15, 2014, to file the exemple the organization's return for:  K. calendar year 2013 or tax year beginning  e tax year entered in line 1 is for less than 12 months, concluding the control of the co	and atta required torganiza , an heck reas , or 6069, or enter an payment a	ich a list with the names and EINs of to file Form 990-T) extension of time tion return for the organization named ending	of all member until led above	ers the extension The extension	on is for
1 I required in the section of the s	. If it is for part of the group, check this box usest an automatic 3-month (6 months for a corporation AUGUST 15, 2014, to file the exempted the organization's return for:  K. calendar year 2013 or tax year beginning  e tax year entered in line 1 is for less than 12 months, color conditions in accounting period is application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6068 application is for Forms 990-PF, 990-T, 4720, or 6068	and atta required torganiza , an heck reas , or 6069, enter an eayment a hyment with	to file Form 990-T) extension of time tion return for the organization named and ending	of all memb e until led above Final return	ers the extension The extension	

Form 8	868 (Rèv 1-2014)						Page 2
<ul><li>If yo</li></ul>	u are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	box		<b>&gt;</b>	X
Note.	Only complete Part II if you have already been granted an a	automatic	3-month extension on a previously fi	led Form	8868		
	are filing for an Automatic 3-Month Extension, comple						
Part	II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies ne	eded).	
Enter filer's ide				identifyir	ntifying number, see instructions		
Type o	or Name of exempt organization or other filer, see instructions				nployer identification number (EIN) or		
print							
File by th					26-2253829		
due date filing you:	Number, street, and room or suite no in a P.O. box, see instructions			Social se	cial security number (SSN)		
return Se	240 CAPITOL STREET, SUITE 500						
instructio	City, town of post office, state, and zir code For a fi	oreign add	lress, see instructions				
	CHARLESTON, WV 25301						
Enter th	ne Return code for the return that this application is for (file	e a separa	te application for each return)				0 4
Application			Application				Return
ls For		Code	is For				Code
Form 990 or Form 990-EZ							ļ
Form 990-BL			Form 1041-A				08
Form 4720 (individual)			Form 4720 (other than individual)				09
Form 990-PF		04	Form 5227				10
Form 990-T (sec 401(a) or 408(a) trust)			Form 6069				11
Form 990-T (trust other than above)			Form 8870				12_
STOP!	Do not complete Part II if you were not already granted	an autor	natic 3-month extension on a prev	iously file	d Form 88	68	
	THE FOUNDATION						
	books are in the care of $\triangleright$ 240 CAPITOL STI	REET,	SUITE 500 - CHARL	ESTON	, WV :	<u> 25301</u>	·
	phone No ► (304)344-1623		Fax No. ▶				
	e organization does not have an office or place of business						
• If th	s is for a Group Return, enter the organization's four digit	1	· · · · · · · · · · · · · · · · · · ·			-	
póx 🕨				all memb	ers the ext	ension is	for
	I request an additional 3-month extension of time until NOVEMBER 15, 2014						
	For calendar year 2013, or other tax year beginning, and ending						
6 If	If the tax year entered in line 5 is for less than 12 months, check reason Initial return Final return						
l	Change in accounting period						
	State in detail why you need the extension						
	ADDITIONAL TIME IS REQUESTED TO GATHER THE BANKING INFORMATION THAT IS						
Ī	EEDED TO FILE A COMPLETE AND	ACCU	RATE RETURN.				
				<del></del>			
	this application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any				_
_	onrefundable credits See instructions			8a	\$		0.
	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated			İ			
	tax payments made Include any prior year overpayment allowed as a credit and any amount paid						_
_	previously with Form 8868			8b_	\$		0.
	alance due. Subtract line 8b from line 8a. Include your pa		th this form, if required, by using				_
E	FTPS (Electronic Federal Tax Payment System) See instru			8c	\$		0.
			st be completed for Part II o	-			
Jnder p	enalties of perjury, I declare that I have examined this form, includ , correct, and complete, and that I am authorized to prepare this fo	ing accomp	panying schedules and statements, and to	the best o	f my knowle	dge and b	ehef,
	0 0 1 >	ин. /	DA		X	17/19	P
Sanatur	on the said hard took	L.	/ <b>/</b>	Doto	<b>-</b> 11/	111 /	/

Form 8868 (Rev. 1-2014)