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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

FOI	calen	dar year 2013 or tax year b <u>e</u>	ginning	, 201	3, and ending		, 20
Na	me of fo	undation	<del>-</del>		A Emplo	yer identification numb	er
Hu	ntinato	n Clinical Foundation, Inc. c/o J	lames H. Morgan, Jr.			31-0979390	
Number and street (or P O box number if mail is not delivered to street address)  Room/suite					v/suite B Teleph	one number (see instructi	ons)
PΩ	st Offic	e Box 117		(304) 523-612	0		
		n, state or province, country, and ZIP of	or foreign postal code		C If even	nption application is pend	
	, 	n, West Virginia 25706-0117	• ,		O II EXEII	iption application is perio	ing, oncor nace
		all that apply:   Initial retu	ırn 🔲 İnitıal return	of a former public	Charity D 4 Fam	باهمواه وجوياتوسودوسو	ham
G	CHECK	☐ Final retu		•	Citatity D 1. Fore	ign organizations, check	here . ▶ 🔝
		☐ Address	···· =			ign organizations meetin	
	0 1	<del></del>	<u> </u>	<u> </u>		ck here and attach compo te foundation status was	
		type of organization: Se			section	507(b)(1)(A), check here	_
_		n 4947(a)(1) nonexempt charit		_			
		arket value of all assets at	J Accounting method	: [✓] Cash 📋 A		oundation is in a 60-mont	
		year (from Part II, col. (c),	Other (specify)		under	section 507(b)(1)(B), chec	k here ▶∐
	line 16	361,472.09	(Part I, column (d) must be	on cash basis.)	<u> </u>	~	<del></del>
P	art I	Analysis of Revenue and Ex		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for chantable
		amounts in columns (b), (c), and (d)		expenses per books	income	income	purposes
		the amounts in column (a) (see instr	uctions).)	22310			(cash basis only)
_	1	Contributions, gifts, grants, etc.,	-	58,518.87			
	2	Check ▶ ☐ if the foundation is n	ot required to attach Sch. B				
	3	Interest on savings and temp	orary cash investments	1.81	1.8	0.00	
	4	Dividends and interest from s	securities	11,285.95	11,285.9	0.00	
	5a	Gross rents		0.00	0.0	0.00	
	b	Net rental income or (loss)	0.00				
<b>∞</b>	6a	Net gain or (loss) from sale of	f assets not on line 10	(2,800.46)			
% <b>₹</b>	Ь	Gross sales price for all assets on					
	7	Capital gain net income (from	n Part IV, line 2)		0.0	0	
₫~	8	Net short-term capital gain .	·			0.00	
Revenue	9	Income modifications				0.00	
	10a	Gross sales less returns and allow	wances 0.00				
AIIR	ь	Less: Cost of goods sold .	0.00				
	ြင	Gross profit or (loss) (attach s	schedule)	0.00		0.00	
<b>.</b>	11	Other income at lach schedu	- <b>,</b>	0.00	0.0	0.00	
2	12	Total. Add lines 1 through 11		67,006.17			
<u> </u>	13	Compensation of officers, dir	ectors, trustees, etc.	0.00	<del></del>		0.00
2 6	14	Other en plyee salaries and	Wades O	0.00	0.0	0.00	0.00
Expenses Expenses	15	Pension plans, employee ber		0.00	0.0	0.00	0.00
ğ	16a			307.03	0.0	0.00	307.03
	b	Legal fees (attach schedule) Accounting fees (attach sche	dule)	0.00	1		0.00
<u>ĕ</u> .	С	Other professional fees (attac		0.00			0.00
at	17	Interest		0.00			0.00
str	18	Taxes (attach schedule) (see ins		245.65			_
Ξ	19	Depreciation (attach schedule		0.00		1	
Ę	20	Occupancy		0.00			† · · · · · · · · · · · · · · · · · · ·
Operating and Administrati	21	Travel, conferences, and mee		2,757.55	·		
2	22	Printing and publications .	-	0.00			<del></del>
a	23	Other expenses (attach sche		792.04			
Ĕ	24	Total operating and adm	•	7.52.04	<del>                                     </del>	3.00	752.04
rat	- '	Add lines 13 through 23		4,102.27	0.0	0.00	4,102.27
be	25	Contributions, gifts, grants pa		65,900.00		0.00	65,900.00
Õ	26	Total expenses and disburseme		70,002.27		0.00	70,002.27
_	27	Subtract line 26 from line 12:		10,002.21	<del> </del>	0.00	70,002.27
	l			/2 000 4°	1		
	a	Excess of revenue over expen		(2,996.10)			
	b	Net investment income (if n	•		11,287.7		<del></del>
	<u>C</u>	Adjusted net income (if neg	ative, enter -U-)		L	0.00	<u> </u>

D	art II	Attached schedules and amounts in the description column	Beginning of year	End o	f year
4		Balance Sheets should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-bearing	341.03	23,017.04	23,017.04
	2	Savings and temporary cash investments	26,743.05	5,726.82	5,726.82
	3	Accounts receivable ▶ 0.00			
	l	Less: allowance for doubtful accounts ▶ 0.00	0.00	0.00	0.00
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶ 0.00	0.00	0.00	0.00
	5	Grants receivable	0.00	0.00	0.00
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)	0.00	0.00	0.00
	7	Other notes and loans receivable (attach schedule) ▶ 0.00	5,00		
	•		0.00	0.00	0.00
(C)	8	Less: allowance for doubtful accounts   0.00  Inventories for sale or use	0.00	0.00	0.00
Assets	9	Prepaid expenses and deferred charges	0.00	0.00	0.00
Ş	10a	Investments—U S. and state government obligations (attach schedule)	162,097.11	209,786.11	197,931.98
	Ь	Investments—corporate stock (attach schedule)	98,025.38	98,025.38	134,796.25
	C	Investments—corporate stock (attach schedule)	52,563.08	0.00	<u>134,796.25</u> 0.00
	11		52,563.08	0.00	0.00
	' '	Investments — land, buildings, and equipment: basis ▶ 0.00  Less: accumulated depreciation (attach schedule) ▶ 0.00	0.00	0.00	
	12		0.00	0.00	0.00
	12	Investments—mortgage loans	0.00	0.00	0.00
	13		0.00	0.00	0.00
	14	Land, buildings, and equipment: basis ► 0.00  Less, accumulated depreciation (attach schedule) ► 0.00			
			0.00	0.00	0.00
	15	Other assets (describe > 0.00 )	0.00	0.00	0.00
	16	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)			
_	4-		339,769.65	336,555.35	361,472.09
	17	Accounts payable and accrued expenses	0.00	0.00	
es	18	Grants payable	0.00	0.00	
ij	19	Deferred revenue	0.00	0.00	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0.00	0.00	
Lia	21	Mortgages and other notes payable (attach schedule)	0.00	0.00	
	22	Other liabilities (describe ▶ 0.00 )	0.00	0.00	
	23	Total liabilities (add lines 17 through 22)	0.00	0.00	
Se		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.			
Balances	04		0.00	0.00	
<u>ā</u>	24	Unrestricted	0.00	0.00	
Ba	25	Temporarily restricted	0.00	0.00	
힏	26	Permanently restricted	0.00	0.00	
Fun	) 	Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.			
orl	27	Capital stock, trust principal, or current funds	0.00	0.00	
S	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.00	0.00	
Net Assets	28		0.00	0.00	
As	29	Retained earnings, accumulated income, endowment, or other funds	0.00	0.00	
et /	30	Total net assets or fund balances (see instructions)	339,769.65	336,555.35	
Ž	31	Total liabilities and net assets/fund balances (see	200 700 05	200 05	
Do	III	instructions)	339,769.65	336,555.35	
	rt III	Analysis of Changes in Net Assets or Fund Balances at net assets or fund balances at beginning of year—Part II, colur	nn (a) line 30 (must	agree with	
•		of year eported on prior year's return)		-	
_				<del>  </del>	339,769.65
2		er amount from Part I, line 27a			(2,996.10)
3	Othe	er increases not included in line 2 (itemize)   0.00		3	0.00
4		lines 1, 2, and 3			336,773.55
5	Deci	reases not included in line 2 (itemize)   218.20 (Unknown)  I net assets or fund balances at end of year (line 4 minus line 5)—F	Opt II polyma (b) !!-	5	218.20
	lota	il net assets or fund dalances at end of year (line 4 minus line 5)—F	art II, column (b), lin	e 30   <b>6</b>	336,555.35

Part	IV ` Capital Gains and	d Losses for Tax on Investmen	t Income			•	
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)						ite acquired , day, yr)	(d) Date sold (mo , day, yr )
1a	See Attached Schedule.			Р			
b						<del></del> .	
<u> </u>		· · · · · · · · · · · · · · · · · · ·					
<u>d</u>							
<u>e</u>	·	(f) Depreciation allowed	(a) Cost or	other basis		(h) Gai	n or (loss)
	(e) Gross sales price	(or allowable)		nse of sale			f) minus (g)
а		0.00					
ь							
С							
d							
е	Complete only for assets sho	owing gain in column (h) and owned by t	he foundation	on 12/31/69		m 0 (0	
	(i) F M V as of 12/31/69	(i) Adjusted basis	(k) Exces	s of col (i)	,	col (k), but no	l (h) gain minus t less than -0-) <b>or</b> rom col (h))
		as of 12/31/69	over col	(j), if any		LUSSES (I	
<u>а</u> Ь	0.00	0.00		0.00			0.00
C							
d							
е							
2	Capital gain net income o		enter in Parter -0- in Par				4
2	Not short-torm capital gai	in or (loss) as defined in sections 12		· 1	2		(2,800.46)
3		1, line 8, column (c) (see instruction					
					3		0.00
Part	V Qualification Und	ler Section 4940(e) for Reduce	d Tax on N	et Investment	Incor	ne	
Was t		e this part blank. section 4942 tax on the distributab qualify under section 4940(e). Do n			oase pe	eriod?	☐ Yes ☐ No
1	<u>`.' ' '                                </u>	ount in each column for each year; s	ee the instru	uctions before ma	akıng a	ny entries.	
Cale	<b>(a)</b> Base penod years endar year (or tax year beginning in	(b) Adjusted qualifying distributions	Net value of	(c) f noncharitable-use as	ssets		(d) tribution ratio divided by col (c))
	2012	73,997.5	0	333,3	34.79		0.22199
	2011	87,283.8		329,6			0.26479
	2010	101,634.7		337,1			0.30145
	2009 2008	39,839.4 96,699.7		315,7 <u>9</u> 286,98			0.12616 0.33695
	2000	30,033.7	<u>'I</u>	200,90	53.10	·	0.33033
2	Total of line 1, column (d)	)			.	2	1.25134
3	•	for the 5-year base period—divide		• •	the		
	number of years the found	dation has been in existence if less	than 5 years		· [	3	0.250268
4	Enter the net value of non	ncharitable-use assets for 2013 from	Part X, line	5	.	4	342,218.52
5	Multiply line 4 by line 3				.	5	85,646.34
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)			.	6	112.88
7	Add lines 5 and 6				.	7	85,759.22
8		ons from Part XII, line 4			. L	8	70,002.27
	If line 8 is equal to or great Part VI instructions.	ater than line 7, check the box in Pa	ırt VI, line 1b	, and complete t	hat pa	rt using a 1	% tax rate. See the

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instru	CTION	is)				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.  Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)							
b								
	here ▶ ☐ and enter 1% of Part I, line 27b							
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).							
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0.	00				
3	Add lines 1 and 2		225.	76				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0.	00				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		225	76				
6	Credits/Payments: 2013 estimated tax payments and 2012 overpayment credited to 2013   6a   245.   65   65   65   65   65   65   65							
a b	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 245. 65 Exempt foreign organizations—tax withheld at source 6b 0. 00							
c	Tax paid with application for extension of time to file (Form 8868) . 6c 0. 00							
d	Backup withholding erroneously withheld 6d 0. 00	11.40						
7	Total credits and payments. Add lines 6a through 6d		245.	65				
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached		0.	00				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9		0.	00				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10		19.	89				
11	Enter the amount of line 10 to be: Credited to 2014 estimated tax ▶ 19. 89 Refunded ▶ 11		0.	00				
	VII-A Statements Regarding Activities  During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Vac	No				
1a	participate or intervene in any political campaign?	1a	165	<del>10</del>				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		<b>✓</b>				
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		**					
C	Did the foundation file Form 1120-POL for this year?	1c		✓				
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. ▶ \$							
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$	3.74 3.3						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	3.72	<b>√</b>				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3						
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	-	<u> </u>				
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		<b>√</b>				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		1				
	If "Yes," attach the statement required by General Instruction T.							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	1		1				
	<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?</li> <li></li></ul>	6	1	ć 35				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	1					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶							
b	West Virginia  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each attorney by Constant (or designate) of each attorney or required by Constant (or designate) and or designate of each attorney or required by Constant (or designate) and or designate or required by Constant (or designate) and or designation.			4				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	<b>√</b>	( <del>(2</del> 5)				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes,"	× 15	7					
	complete Part XIV	9		1				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		<u> </u>				
		<del></del>		<u> </u>				

Page 5	

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		✓
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		✓
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address   N/A	13		✓_
14		4) 523-	6120	
		5701-53	308	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the year <b>15</b>		. )	<b>\</b>
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority	/	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		1
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of			
	the foreign country ▶			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
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? Yes No			
	(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.)			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)?		:	
	Organizations relying on a current notice regarding disaster assistance check here	1b		
С	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		✓
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		1	
а	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?	4		
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	· ·		
Ь	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)	1		
	(relating to incorrect 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.)	Ob		
	•	2b		_
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  • 20, 20, 20, 20, 20, 20, 20, 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	!		
-	at any time during the year?			
h	If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or			
D	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.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		✓
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		✓

Part	VII-B	Statements Regarding Activities	for W	Vhich Form	4720	May Be R	equire	d (contin	ued)		
5a	During	the year did the foundation pay or incur a	iny amo	ount to:						F 17 %	
	(1) Car	ry on propaganda, or otherwise attempt tuence the outcome of any specific public	o influe	ence legislatio				☐ Yes	<b>☑</b> No		
		ectly or indirectly, any voter registration dr		•			-	☐ Yes	✓ No		
	(3) Pro	vide a grant to an individual for travel, stu	dy, or o	other similar	purpos	es?		☐ Yes	✓ No		
		vide a grant to an organization other than tion 509(a)(1), (2), or (3), or section 4940(c			-	ation desc		Yes	✓ No		
		vide for any purpose other than religious poses, or for the prevention of cruelty to o				ary, or educ			— √ No		
h		answer is "Yes" to 5a(1)–(5), did any of the							_		4
_	Regula	tions section 53.4945 or in a current notice	regardi	ng disaster a	ssistano	e (see instr				5b	3 +21 23 ml
_		zations relying on a current notice regardi inswer is "Yes" to question 5a(4), does t					tha tay	· · ·		Agon de	. 12 S.
С	becaus	se it maintained expenditure responsibility	for the	grant?				Yes	☐ No		
<b>C</b> -		" attach the statement required by Regula									
<b>6</b> a		foundation, during the year, receive any ersonal benefit contract?	iunus,		uirectiy	, to pay pre		Yes	✓ No		
ь	•	foundation, during the year, pay premiun	ns. dire	ctly or indire	ctlv. on	a personal	benefi		_	6b	
-		' to 6b, file Form 8870.	,	,	·,, ·	<b>P</b> -7-2-11-11			-	1 1 1	
	At any t	ime during the tax year, was the foundation did the foundation receive any proceed						☐ Yes	_	7b	
	VIII	Information About Officers, Direc									 5,
		and Contractors	•	•			•				
1	List all	officers, directors, trustees, foundation	n mana	agers and th	eir con	npensation	ı (see i	nstruction	ıs).		
		(a) Name and address	hou	e, and average irs per week ed to position	(If r	mpensation not paid, iter -0-)	emplo	Contributions byee benefit perred competer	olans	(e) Expense other allow	
See At	tached S	chedule.									
	<del></del>										
						0.00					
2	Compo	ensation of five highest-paid employed"	es (oth	er than tho	se incl	uded on li	ne 1—:	see instru	ıction	s). If none	, enter
(	(a) Name a	and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	veek	(c) Comper	nsation	(d) Contributemployee to plans and documents	enefit eferred	(e) Expense other allow	
Not Ap	plicable	- No Paid Employees.									
						-					
						-				<del></del>	
		-fth		L			0.00				
Total	tal number of other employees paid over \$50,000										

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Er and Contractors (continued)	npioyees,
3 Fiv	e highest-paid independent contractors for professional services (see instructions). If none, enter "NOI	NE."
_	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None.		
Total num	ber of others receiving over \$50,000 for professional services	
Part IX-	A Summary of Direct Charitable Activities	
	oundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ions and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 Not A	Applicable.	
2		
з —		<del> </del>
•	······································	
4		
Part IX-	· · · · · · · · · · · · · · · · · · ·	1
	the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 Not A	Applicable.	
2		
<b>-</b>		
All other p	program-related investments. See instructions.	
3		
T-1-1 4 :		<u> </u>
i otai. Add	I lines 1 through 3	Form <b>990-PF</b> (201:
		Form 33U-PF (201)

Part	see instructions.)	ign tounda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	334,602.44
a b	Average of monthly cash balances	1b	12,827.53
C	Fair market value of all other assets (see instructions)	1c	0.00
d	Total (add lines 1a, b, and c)	1d	347,429.97
e	Reduction claimed for blockage or other factors reported on lines 1a and	10	347,429.97
·	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.00
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see	3	347,429.97
4	instructions)	4	- 044 45
_		5	5,211.45
5 6	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 Minimum investment return. Enter 5% of line 5	6	342,218.52
			17,110.93
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations check here ► □ and do not complete this part.)	ouridations	<b>,</b>
1	Mınımum investment return from Part X, line 6	1	17,110.93
2a	Tax on investment income for 2013 from Part VI, line 5 2a 225.76		
b	Income tax for 2013. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	225.76
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	16,885.17
4	Recoveries of amounts treated as qualifying distributions	4	0.00
5	Add lines 3 and 4	5	16.885.17
6	Deduction from distributable amount (see instructions)	6	0.00
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		0.00
	line 1	7	16,885.17
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	70,002.27
b	Program-related investments—total from Part IX-B	1b	0.00
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0.00
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	0.00
b	Cash distribution test (attach the required schedule)	3b	0.00
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	70,002.27
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		, 0,002.21
-	Enter 1% of Part I, line 27b (see instructions)	5	0.00
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	70,002.27
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualifies for the section 4940(e) reduction of tax in those years.	y whether t	ne iounuation

Part	XIII Undistributed Income (see instru	ctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2013 from Part >	(), Corpus	Years prior to 2012	2012	2013
	line 7				16,885.17
2	Undistributed income, if any, as of the end of 201	3:			
a	Enter amount for 2012 only			0.00	
b	Total for prior years: 20 ,20 ,20		0.00	0.00	
3	Excess distributions carryover, if any, to 2013	3.	- 0.00		
а	From 2008 82,522				
b		<del></del>			
		<del></del>			
C					
ď	From 2011	<del></del>			
e		<del></del>			
f	Total of lines 3a through e	320,217.98			
4	Qualifying distributions for 2013 from Part X line 4: ► \$ 70,002,27	''',			
	10,00E.ET		ļ		
	Applied to 2012, but not more than line 2a .			0.00	
b	Applied to undistributed income of prior year	rs			
	(Election required—see instructions)		0.00		
С	Treated as distributions out of corpus (Electic				
	required—see instructions)	0.00			
d	Applied to 2013 distributable amount				16,885.17
e	Remaining amount distributed out of corpus	53,117.10			
5	Excess distributions carryover applied to 201				0.00
	(If an amount appears in column (d), the san	ne			
	amount must be shown in column (a).)				
6	Enter the net total of each column a	as			
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e Subtract line	5 373,335.08			
b	Prior years' undistributed income. Subtra	ct			
	line 4b from line 2b		0.00		
С	Enter the amount of prior years' undistribute	ed			
	income for which a notice of deficiency has	as			
	been issued, or on which the section 4942	a)			
	tax has been previously assessed		0.00		
d	Subtract line 6c from line 6b. Taxab	le	· · ·-		
	amount-see instructions		0.00		
е	Undistributed income for 2012. Subtract lin	ne			
	4a from line 2a. Taxable amount-se	ee			
	instructions			0.00	
f	Undistributed income for 2013. Subtract line	es			
	4d and 5 from line 1. This amount must t	pe			
	distributed in 2014				0.00
7	Amounts treated as distributions out of corporate	ıs			
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions) .	0.00			
8	Excess distributions carryover from 2008 n				
	applied on line 5 or line 7 (see instructions) .	82,522.45	ļ		
9	Excess distributions carryover to 201				
	Subtract lines 7 and 8 from line 6a	290,812.63			
10	Analysis of line 9:	200,012.00			
а	Excess from 2009   24,158	1.26	1	ļ	
b	Excess from 2010 84,970				
C	Excess from 2011 70,990				
d	Excess from 2012 57,576	<del> </del>			
ë	Excess from 2013 53,117		ł		
Ç					

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Pane	7	
Page		

• • • • • • •	5 T (25 TS)					
Part	XIV Private Operating Founda	<b>tions</b> (see instru	ctions and Part \	VII-A, question 9	9)	
1a						
	foundation, and the ruling is effective for	r 2013, enter the da	ate of the ruling .	▶	_	
b	Check box to indicate whether the four	ndation is a private	operating foundat	ion described in se	ection 🗌 4942(j)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2013	<b>(b)</b> 2012	(c) 2011	(d) 2010	(e) Ioan
	each year listed					
h	85% of line 2a					
C	Qualifying distributions from Part XII,					
•	line 4 for each year listed					
a	Amounts included in line 2c not used directly				-	<del>  -</del>
đ	for active conduct of exempt activities					
	•					
е	Qualifying distributions made directly				1	
	for active conduct of exempt activities.					
_	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter:					
	(1) Value of all assets					ļ
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-enter 2/3	-				
	of minimum investment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test—enter.					
•	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public	_				
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
Part		n (Complete th	is part only if th	ne foundation h	ad \$5.000 or m	ore in assets at
	any time during the year-				•	
1	Information Regarding Foundation		•			
а	List any managers of the foundation		ited more than 2%	of the total cont	ributions received	by the foundation
	before the close of any tax year (but o					
None.						
b	List any managers of the foundation	who own 10% or	r more of the stoc	k of a corporation	n (or an equally la	arge portion of the
	ownership of a partnership or other en	ntity) of which the	foundation has a 1	10% or greater into	erest.	
None.						
2	Information Regarding Contribution	, Grant, Gift, Loa	n, Scholarship, e	tc., Programs:		
	Check here ▶ ☐ if the foundation	only makes contr	ributions to presel	ected charitable	organizations and	I does not accept
	unsolicited requests for funds. If the f					
	other conditions, complete items 2a,	b, c, and d.				
а	The name, address, and telephone nu	ımber or e-mail ac	dress of the perso	n to whom applic	ations should be	addressed:
	•		•			
No par	ticular individual designated.					
	The form in which applications should	be submitted and	d information and i	materials they sho	ould include:	
Applic	ant must submit budget or breakdown of	amount required.	A description of pro	oject is also require	ed.	
С	Any submission deadlines:				·	
None.						
d	Any restrictions or limitations on av	vards, such as b	y geographical ar	eas, charitable fi	elds, kinds of ins	stitutions, or other
	factors:					

Awards to be used for study, research, and treatment of human disease.

Part	Supplementary Information (conti	nued)		_	
3	Grants and Contributions Paid During t	he Year or Approve	ed for Fut	ure Payment	
	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
		or substantial contributor	recipient		
а	Paid during the year				
See A	ttached Schedule.				65,900.00
	Total			▶ 3a	65,900.00
	Approved for future payment				03,900.00
_	, , , , , , , , , , , , , , , , , , , ,				
Not A	pplicable.				
			1		
					}
			<u> </u>		
	Total		·	b 3b	

Pa	πx	VI-A Analysis of Income-Producing Ac	uvides				
Ente	r gro	ess amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by sector	on 512, 513, or 514	(e)
			(a)	(b)	(c)	(d)	Related or exempt function income
			Business code	Amount	Exclusion code	Amount	(See instructions.)
1	Pro	gram service revenue:					·
	а						
	b						
	C						_
	d						
	е						
	f						
	g	Fees and contracts from government agencies			†           †		_
2	-	mbership dues and assessments			<u> </u>		· · ·
_		rest on savings and temporary cash investments	·-		14	1.81	
3		idends and interest from securities				11,285.95	
4					14	11,200.90	
5		rental income or (loss) from real estate:	<u> </u>	<u></u>			
		Debt-financed property	<del></del>				
_		Not debt-financed property					
6		rental income or (loss) from personal property					
7	_	er investment income				(2,800.46)	
8		n or (loss) from sales of assets other than inventory					
9		income or (loss) from special events					
10	Gro	ess profit or (loss) from sales of inventory					
11	Oth	er revenue: a					
	b				]		
	C						
	d						
	e				Ī		
	_						
12	_	ototal. Add columns (b), (d), and (e)				8,487.30	
	Sul	ototal. Add columns (b), (d), and (e)					8.487.30
13	Sul	al. Add line 12, columns (b), (d), and (e)				8,487.30 13	8,487.30
<b>13</b> (Sec	Sul Tot	al. Add line 12, columns (b), (d), and (e)	 ıs.)				8,487.30
13 (See Pa	Sul Tot wor	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Sul Tot wor rt X	ksheet in line 12, columns (b), (d), and (e)  ksheet in line 13 instructions to verify calculation  VI-B  Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 is.) accomplishm	ent of Exemp	t Purposes	13	

Part	XVII		n Regarding Trar	nsfers To and Trai	nsactions and	Relationsh	ips With Nonch	naritable
1	in sec organ	ne organization on tion 501(c) of the dizations?	directly or indirectly be Code (other than	engage in any of the section 501(c)(3) org	anizations) or in	section 527,		
а	Trans	fers from the rep	porting foundation to	o a noncharitable exe	empt organization	on of:		
	(1) C	ash						1a(1) ✓
	(2) 0	ther assets .						1a(2) ✓
b	Other	transactions:						
	(1) S	ales of assets to	a noncharitable exe	empt organization				1b(1) ✓
	(2) P	urchases of asse	ets from a noncharite	able exempt organiza	ation			1b(2) ✓
	(3) R	ental of facilities,	, equipment, or othe	er assets				1b(3) ✓
	(4) R	eimbursement ai	rrangements					1b(4) ✓
	(5) Lo	oans or loan gua	rantees					1b(5) ✓
	(6) P	erformance of se	ervices or membersh	nip or fundraising sol	icitations			1b(6) ✓_
С	Shari	ng of facilities, e	quipment, mailing li	sts, other assets, or p	oaid employees			1c
d				s," complete the foll				ow the fair market
	value	of the goods, of	ther assets, or servi	ices given by the rep	orting foundation	n. If the found	dation received le	ss than fair market
	value	in any transaction	on or sharing arrang	ement, show in colu	mn <b>(d)</b> the value	of the goods,	other assets, or	services received.
(a) Line	no (	b) Amount involved	(c) Name of nonc	hantable exempt organizat	ion (d) Des	scription of transfe	ers, transactions, and	sharing arrangements
				<del></del>				
			==					
						<u>.                                      </u>		
		-						
							. <u></u>	
				<del></del>	1			
	descr	ibed in section 5		filiated with, or related the than section 50 s.				☐ Yes 🗸 No
		(a) Name of organ	zation	(b) Type of or	ganization		(c) Description of rela	tionship
		penalties of perjury, I	declare that I have examine	ed this return, including acco an taxpayer) is based on all i	mpanying schedules a	and statements, and	to the best of my know	rledge and belief, it is true,
Sign Here		ature of officer or trus	Nescen	Date	Secretary/		May th with th	e IRS discuss this return e preparer shown below structions)?   Yes \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	J Sign	Print/Type preparer		Preparer's signature	10.	Date /	, <u> </u>	PTIN
Paid	Y		•	1 / 1 /	X Jeaker	8 /12/	Check I if self-employed	
Prep		Stephen J. Golde		Viphen,	Jo 100 00 1			101400101
Use (	Only		Jenkins Fenstermake	er, PLLC I, Huntington, West Vii	rginia 25726-260		Firm's EIN ▶ Phone no	55-0483426 (304) 523-2100
		1 mm 3 audi 655 P	. VOL CHILE DUX 2000	THE PROPERTY OF THE PROPERTY O	Mund FA150-5000	•	1. 1.01.01.0	

#### Schedule B

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

#### Schedule of Contributors

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► 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.

Name of the organization **Employer identification number** Huntington Clinical Foundation, Inc. c/o James H. Morgan, Jr. 31-0979390 Organization type (check one): Section: Filers of: ☐ 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations

#### **Special Rules**

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 <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of 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).

property) from any one contributor. Complete Parts I and II.

Name of organization Employer identification number
Huntington Clinical Foundation, Inc. c/o James H. Morgan, Jr. 31-0979390

Part I	Contributors (see instructions). Use duplicate co	ppies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1_	Rufus Switzer Trust  c/o JP Morgan Chase Bank, NA, Trustee  1000 Fifth Avenue, Huntington, West Virginia	\$\$58,518.87	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization
Huntington Clinical Foundation, Inc. c/o James H. Morgan, Jr.

Employer identification number

31-0979390

art II	Noncash Property (see instructions). Use duplicate co	pies of Part II if additional space	ce is needed.
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		\$	
No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	
No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
No. om irt I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
·   · -   ·		  \$	
No. om ort I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	
-		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	

Employer identification number

Name of òrganization

	on Clinical Foundation, Inc. c/o James H. Morgan, Jr. 31-0979390							
Part III	Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc.,							
	contributions of \$1,000 or less for th	-	ation once. Se	e instructions.) > \$				
7-1AI-	Use duplicate copies of Part III if add	itional space is needed.						
(a) No. from	(b) Purpose of gift	(c) Use of gif	ft	(d) Description of how gift is he	id			
Part I								
	(e) Transfer of gift							
1	<b>T</b>	Dalation						
-	Transferee's name, address, an	0 ZIP + 4	Relations	ship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gif	ft	(d) Description of how gift is he	ld			
Part I	(1)							
	(e) Transfer of gift							
	Transfered's name address and ZID : 4							
L	Transferee's name, address, an	ship of transferor to transferee						
(a) No. from	(b) Purpose of gift	(c) Use of git	Ft .	(d) Description of how gift is he	ld			
Part I	(5) i dipose di giit			(4) 2 6 6 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6				
		(e) Transfer of	f gift					
	Transferee's name, address, ar	d ZIP + 4	Relation	ship of transferor to transferee				
-								
(a) No.	(b) Purpose of gift	(c) Use of git	F4	(d) Description of how gift is he	ld.			
(a) No. from Part I	(b) Fulpose of gift	(0) 03c 01 gill		(d) Description of now gire is no				
-	(e) Transfer of gift							
		••	-					
	Transferee's name, address, ar	d ZIP + 4	Relation	ship of transferor to transferee				
Γ								

## HUNTINGTON CLINICAL FOUNDATION, INC. EMPLOYER IDENTIFICATION NO 31-0979390 2013 FORM 990-PF

# PART XV, LINE 3

Name	Relationship of Recipient to Manager	Foundation Status	Purpose	7	Amount
1 Wayne County Health Department	N/A	Public	Funding for cholestorol screening	∽	5,000 00
2 Cabell Huntington Hospital Foundation	N/A	Public	Funding for breast screening aid for under insured	ςs	9,400.00
3 American Federation for the Blind	N/A	Public	Funding for insulin pumps	Ś	2,500.00
4 Mountaineer Spina Bifida Camp	N/A	Public	Funding to sponsor camp for children with disease	s	7,500.00
5 Cabell Wayne Association of the Blind	N/A	Public	Funding for eye exams and eyeglasses for the needy	₩	2,500.00
6 Healing Place of Huntington	N/A	Public	Funding for alcohol and addiction treatment	s	7,500 00
7 St Marys Medical Center Foundation	N/A	Public	Funding for medical imaging training program	₩	2,750.00
8 Cabell Huntington Hospital Foundation	N/A	Public	Funding for drug addicted babies theraputic unit	s	2,750.00
9 Ebenezer Medical Outreach	N/A	Public	Funding for diabetic testing and drugs	s	6,000.00
10 Marshall University School of Medicine	N/A	Public	Funding for two first-year student scholarships.	s	20,000 00

65,900.00

TOTAL:

#### HUNTINGTON CLINICAL FOUNDATION, INC. 2013 AVERAGE VALUE CALCULATIONS FORM 990-PF, PART X-LINE 1b

#### **Cash and Cash Equivalents**

Business IDA/								
	ney Rate Savings		<u>Total</u>					
January	\$	304.63	\$	15,284.46	\$	15,589.09		
February	\$ \$ \$ \$	119.81	\$	284.51	\$	404.32		
March	\$	119.81	\$	15,338.27	\$	15,458.08		
April	\$	119.81	\$	15,338.65	\$	15,458.46		
May		2,954.76	\$	1,838.85	\$	4,793.61		
June	\$	454.76	\$	16,327.33	\$	16,782.09		
July	\$	404.76	\$	16,327.75	\$	16,732.51		
August	\$	761.23	\$	1,327.85	\$	2,089.08		
September	\$	15,247.12	\$	1,325.38	\$	16,572.50		
October	\$ \$ \$ \$ \$	14,528.65	\$	1,325.41	\$	15,854.06		
November	\$	8,528.65	\$	1,325.44	\$	9,854.09		
December	\$	23,017.04	\$	1,325.47	<u>\$</u>	24,342.51		
TOTAL:	\$	66,561.03	\$	87,369.37	\$	153,930.40		
AVERAGE:	\$	5,546.75	\$	7,280.78	\$	12,827.53		
<u>Securities</u>								
Market Value of Invest		\$	332,075.29					
Market Value of Investments as of 12/31/2013:						337,129.58		
AVERAGE MARKET VALUE OF INVESTMENTS: \$ 334,602.44								

#### HUNTINGTON CLINICAL FOUNDATION, INC. EMPLOYER IDENTIFICATION NO. 31-0979390 2012 IRS FORM 990-PF

#### PART VIII, LINE 1

#### **DIRECTORS AND OFFICERS**

Mr. Carroll Justice
2445 Third Avenue
Huntington, WV 25703
(304) 529-4135

Mr. James H. Morgan, Jr., Sec./Treas. 93 Copper Glen Drive Huntington, WV 25701 (304) 523-6120

Dr. Torin Walters 336 Woodland Drive Huntington, WV 25701 (304) 638-3377

Dr. Thomas F. Scott P. O. Box 3127 Huntington, WV 25702 (304) 637-7072

Mr. Henry M. Kayes Post Office Box 2688 Huntington, WV 25726 (304) 523-2100 Dr. S. Kenneth Wolfe 6000 Longwood Road Huntington, WV 25705 (304) 733-1621

Dr. Jack Steel Post Office Box 3127 Huntington, WV 25702

Mr. Richard E. Thompson 3615 Piedmont Rd Huntington, WV 25704 (304) 429-1311

Mr. Don Ray, President 100 N. Altamont Road Huntington, WV 25701 (304) 697-4780

Mr. Thomas E. Miller 7 Fairway Drive Huntington, WV 25705 (304) 633-3522 Mr. Staige Davis, Vice President 146 Ridgewood Road Huntington, WV 25701 (304) 544-5885

Mr. Earl W. Heiner, Jr. 16 Bradley Foster Drive E. Huntington, WV 25701 (304) 525-1882

Mr. Frank Norton Post Office Box 2085 Huntington, WV 25721 (304) 638-7445

Mr. James R. Bailes Suite 500 – St. James Bldg. Huntington, WV 25701 (304) 697-4700

Mr. Paul Jacobson 549 N. Inwood Road Huntington, WV 25705 (304) 634-5155

### HUNTINGTON CLINICAL FOUNDATION, INC. EMPLOYER IDENTIFICATION NO. 31-0979390 2013 IRS FORM 990-PF

#### PART II, LINE 10a

10a.	Investment	Book Value Beginning of Year		Book Value End of Year		Fair Market Value End of Year		
	Morgan Stanley Smith Barney Account No. 808-114506-019	\$	162,097.11	\$	209,786.11	\$	197,931.98	
	PART II, LINE 10b							
10b.	Investment		Book Value ginning of Year		Book Value End of Year		Market Value Ind of Year	
	Morgan Stanley Smith Barney Account No. 808-114506-019	\$	98,025.38	\$	98,025.38	\$	134,796.25	
	PART II, LINE 10c							
10c.	Investment	_	Book Value ginning of Year		Book Value End of Year		Market Value ind of Year	
	Morgan Stanley Smith Barney Account No. 808-114506-019	\$	52,563.08	\$	0.00	\$	0.00	

## HUNTINGTON CLINICAL FOUNDATION, INC. EMPLOYER IDENTIFICATION NO. 31-0979390 2013 IRS FORM 990-PF

#### PART I, LINE 16a

Legal Fees (2012 IRS Form 990-PF Preparation and Filing)	\$	307.03
PART I, LINE 18		
Tax paid with 2012 IRS Form 8868	\$	188.74
Tax paid with 2012 IRS Form 990-PF	<u>\$_</u>	<u>56.91</u>
TOTAL	<u>\$</u>	<u> 245,65</u>
PART I, LINE 23		
OTHER EXPENSES		
Supplies	\$	36.40
Service Charges and Overdraft Fees	\$	40.00
Insurance	\$	665.64
State Registration Fees	\$_	50.00
TOTAL	<u>\$</u>	<u>792.04</u>