

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



DLN: 93491218007126

2015

OMB No 1545-0052

50rm990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation 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.
 Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Open to Public Inspection

For	caler	ndar year 2015, or tax	year beginning 01-0	01-2015	, and ending 1	2-31-2015	
	e of four ARLES &	ndation MARY FAYNE			A Employer ide	entification numb	er
GL	OTFELTY	FOUNDATION INC			27-4002334		
		street (or P O box number if mail is	not delivered to street address)	Room/suite	B Telephone nur	nber (see instructior	ıs)
12	OS HONT	ERS RIDGE ROAD			(304) 552-2460		
		state or province, country, and ZIP of , WV 25314	or foreign postal code		C If exemption	application is pendir	ng, check here 🕨 🦵
G Ch	neck all	that apply Initial return	·	ormer public charity	D 1. Foreign on	ganizations, check h	ere 🕨 🗀
		Final return Address chan	<u> </u>		2. Foreign or test, check	ganizations meeting k here and attach co	the 85%
		pe of organization 「「Section 1947(a)(1) nonexempt charita				ındatıon status was n 507(b)(1)(A), che	
		et value of all assets at end	J Accounting method		F If the founda	ition is in a 60-mont	h termination
ofy	ear <i>(fr</i>	om Part II, col. (c), \$ 5,741,067	Other (specify) (Part I, column (d) must	be on cash basıs.)	under section	n 507(b)(1)(B), che	ck here 🕨 🔽
Pa	rt I	Analysis of Revenue a (The total of amounts in columns necessarily equal the amounts in constructions)	(b), (c), and (d) may not	Revenue and expenses per (a) books	Net investment (b) income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, e	etc , received (attach				
		schedule)		268,707			
	2	Check ► ┌ If the foundation	is not required to attach				
	3	Interest on savings and tem	•	6	6		
	4	Dividends and interest from	securities	92,034	92,034		
	5a .	Gross rents					
Revenue	b 6a	Net rental income or (loss) _ Net gain or (loss) from sale of		50,038			
				30,030			
	b	Gross sales price for all asse 1,683,808	ets on line 6a				
	7	Capital gain net income (from	n Part IV, line 2)		50,038		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	Ь	Less Cost of goods sold.					
	C	Gross profit or (loss) (attach	•	40.044	107		
	11	Other income (attach schedu	•	10,011	107		
	12	Total.Add lines 1 through 11		420,796 25,000	142,185 1,250		23,750
	13 14	Compensation of officers, dir Other employee salaries and		23,000	1,230		23,730
.n	15	Pension plans, employee ber					
Expenses	16a	Legal fees (attach schedule)		% 303			
臺	ь	Accounting fees (attach sch			1,543		
	c	O ther professional fees (atta		<u> </u>	38,281		
ĕ	17	Interest			•		
:rat	18	Taxes (attach schedule) (see		1,961	1,921		
and Administrative	19	Depreciation (attach schedu	·	_			
₫	20	Occupancy					
₹	21	Travel, conferences, and me		3,419			2,564
and	22	Printing and publications .					
	23	Other expenses (attach sche	edule)	3,282	2,698		
탏	24	Total operating and administ	rative expenses.				
Operating		Add lines 13 through 23.		75,331	45,693		26,314
0	25	Contributions, gifts, grants p	aid	229,550			229,550
	26	Total expenses and disburser 25	ments.Add lines 24 and	304,881	45,693		255,864
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expe		115,915			
	b	Net investment income (if ne	• .		96,492		
F *	С	Adjusted net income(If negation A at Nation and			C-1 N- 11200V	<u> </u>	000 PF (2015)

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	beginning of year	End o	·
	1	Cash—non-interest-bearing	(a) Book Value 496,870	(b) Book Value 376,204	(c) Fair Market Value 376,204
	2	Savings and temporary cash investments	,		
	3	Accounts receivable			
	3	Less allowance for doubtful accounts			
	4	Pledges receivable			
	4	Less allowance for doubtful accounts			
	_				
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts			
2	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ΑS	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	4,600,651	4,596,250	4,596,250
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	797,994	768,613	768,613
	14	Land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule)			
	15	O ther assets (describe 🟲)			
	16	Total assets(to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	5,895,515	5,741,067	5,741,067
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ě	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
コ	22	Other liabilities (describe 🟲)			
	23	Total liabilities(add lines 17 through 22)		0	
_		Foundations that follow SFAS 117, check here 🕨 🔽			
ě		and complete lines 24 through 26 and lines 30 and 31.			
ğ	24	Unrestricted	5,895,515	5,741,067	
8	25	Temporarily restricted			
<u> </u>	26	Permanently restricted			
Fund Balances		Foundations that do not follow SFAS 117, check here			
or		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
Ą	29	Retained earnings, accumulated income, endowment, or other funds			
Net	30	Total net assets or fund balances(see instructions)	5,895,515	5,741,067	
_	31	Total liabilities and net assets/fund balances(see instructions)	5,895,515	5,741,067	
Pa	rt III	<u> </u>			
1		Total net assets or fund balances at beginning of year—Part II, column (a) line 30 (must ag	ree	
_		with end-of-year figure reported on prior year's return)	., .		5,895,515
2		Enter amount from Part I, line 27a			115,915
3		Other increases not included in line 2 (itemize)		3	113,913
4		Add lines 1, 2, and 3		_	6,011,430
5		Decreases not included in line 2 (itemize)		· · · · · · · · · · · · · · · · · · ·	270,363
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa			5,741,067
~		-, ota, hot abbets of rana balances at ena of year (fille + fillings fille b)—F (J, FI,00/

the Part VI instructions

		the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs	How acquired P—Purchase (b) D—Donation	ט ן	ate acquired mo , day, yr)	Date sold (d) (mo , day, yr)		
1a	See Additional Data	Table						
b								
С								
d								
е								
(e) Gross sales price	Depreciation allowe (f) (or allowable)		t or other basis expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)			
a	See Additional Data	Table						
b								
С С								
d								
е								
	mplete only for assets s	showing gain in column (h) and owne	ed by the foundation	on 12/31/69		Gains (Col	(h) gaın mınus	
	FMV as of 12/31/69	A djusted basis (j) as of 12/31/69	Exc	cess of col (ı) r col (j), ıf any	(I) c	ol (k), but no	ot less than -0-) or (from col (h))	
a	See Additional Data		(11) 010		+``			
b					+			
d					+			
e					+			
			If gaın, also enter	ın Dart I lına 7 il				
2 3	, -	me or (net capital loss) { al gain or (loss) as defined in sectio	If (loss), enter -0-	in Part I, line 7	2		50,038	
	If gain, also enter in l in Part I, line 8 .	Part I, line 8, column (c) (see instru	ctions) If (loss), e	nter-0-	3		57,911	
Part \	V Qualification I	Jnder Section 4940(e) for R	educed Tay on	Net Investme		COMA	37,511	
(For opt	-	private foundations subject to the se						
		e section 4942 tax on the distributa ot qualify under section 4940(e) Do			eriod?		┌ Yes ┌ No	
1 Ent	er the appropriate amo	unt ın each column for each year, s	ee instructions befo	ore making any ent	ries			
Base	(a) period years Calendar or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchar			(d) Distributio (col (b) divided	n ratio	
,	2014	249,656		5,932,753		, (-)	0 042081	
	2013	119,291		3,727,654			0 032002	
	2012	22,000		2,343,343			0 009388	
	2011	55,840		1,485,690			0 037585	
	2010			614,983				
2	Total of line 1, column	n (d)			2		0 121056	
3	the number of years t	ratio for the 5-year base period—div the foundation has been in existence	e ıf less than 5 yea	rs	3		0 030264	
4	Enter the net value o	f noncharitable-use assets for 2015	5 from Part X, line 5	5	4		5,920,269	
5	Multiply line 4 by line	23		[5		179,171	
6	Enter 1% of net inves	stment income (1% of Part I, line 2 $^\circ$	7b)	[6		965	
7	Add lines 5 and 6.			[7		180,136	
8	Enter qualifying distr	ibutions from Part XII, line 4			8		255,864	
	If line 8 is equal to or	greater than line 7, check the box	ın Part VI, lıne 1b,	and complete that	part u	sıng a 1% ta:		

	990-PF (2015) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b),	4940(e), or 49	948—see nage	18 of the ins	tructio		age 4			
1a	Exempt operating foundations described in section 4940(d)(2), check here		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1001 (110 1110	erweere	110)				
14	and enter "N/A" on line 1	- 1								
	Date of ruling or determination letter		\ \							
	(attach copy of letter if necessary-see instructions)									
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V	√, check	J.	1			965			
	here Fand enter 1% of Part I, line 27b									
С	All other domestic foundations enter 2% of line 27b Exempt foreign organize Part I, line 12, col (b)	zatıons enter	4% of							
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable for enter -0-)	undations onl	y Others	2						
3										
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable fo enter -0-)	undations onl	ly Others	4						
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less,	enter-0		5			965			
6	Credits/Payments			-						
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a								
ь	Exempt foreign organizations—tax withheld at source	6b								
С	Tax paid with application for extension of time to file (Form 8868)	6c	1,000							
d	Backup withholding erroneously withheld	6d	,							
7	Total credits and payments Add lines 6a through 6d			7		:	1,000			
8	Enter any penalty for underpayment of estimated tax. Check here 🔽 if Form	. 2220 is atta	ched 🕏	8			22			
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed			9						
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount	unt overpaid.	▶	10			13			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	13 Refu	unded 🕨	11						
Par	t VII-A Statements Regarding Activities		•							
1a	During the tax year, did the foundation attempt to influence any national, state	te, or local le	gıslatıon or dı	d		Yes	No			
	ıt participate or intervene in any political campaign?				1a		No			
b	Did it spend more than \$100 during the year (either directly or indirectly) for	r political purp	ooses (see Ins	structions						
	for definition)?				1b		No			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	es and copies o	of any material	s						
	published or distributed by the foundation in connection with the activities.									
С	Did the foundation file Form 1120-POL for this year?				1c		No			
d	Enter the amount (If any) of tax on political expenditures (section 4955) imp	-	•							
	(1) On the foundation \$ (2) On foundation managers									
е	Enter the reimbursement (if any) paid by the foundation during the year for po	olitical expend	diture tax imp	osed						
_	on foundation managers 🕨 \$									
2	Has the foundation engaged in any activities that have not previously been re	eported to the	e IRS?		2		No			
_	If "Yes," attach a detailed description of the activities.									
3	Has the foundation made any changes, not previously reported to the IRS, in		•		2		Na			
4a	of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a cor</i> Did the foundation have unrelated business gross income of \$1,000 or more				3 4a	\vdash	No No			
4a b	If "Yes," has it filed a tax return on Form 990-T for this year?				4a 4b	+-+	140			
5	Was there a liquidation, termination, dissolution, or substantial contraction d				5		No			
,	If "Yes," attach the statement required by General Instruction T.	anny me yea					.40			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4	.945) satisfie	d either							
•	By language in the governing instrument, or	3 13 / 3 d c c 3 i c	d Citirei							
	By state legislation that effectively amends the governing instrument so t	that no manda	atory direction	ıs						
	that conflict with the state law remain in the governing instrument?				6	Yes				
7	Did the foundation have at least \$5,000 in assets at any time during the yea									
	and Part XV.				7	Yes				
8a	Enter the states to which the foundation reports or with which it is registered	(see instruct	ions)							
	►wv									
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form ${}^{\rm S}$									
	General (or designate) of each state as required by General Instruction G? $I_{\rm G}$	f "No," attach e	explanation .		8b	Yes				
9	Is the foundation claiming status as a private operating foundation within the	_								
	or $4942(j)(5)$ for calendar year 2015 or the taxable year beginning in 2015 ((see instructi	ons for Part X	I∨)?						
	If "Yes," complete Part XIV				9	\vdash	No			
10	Did any persons become substantial contributors during the tax year? If "Yes		nedule listing	their names						
	and addresses.				10		No			

Par	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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►WWW GLOTFELTYFOUNDATION COM			
14	The books are in care of ►KELLY SHAFER Telephone no ►(304) 522-	-2460	
	Located at ▶1411 VIRGINIA ST E STE 100 CHARLESTON WV ZIP+4 ▶25301			
1 5			<u> </u>	-
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		- 1	
				l
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	1	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Par	t 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 V 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? Yes V No			
	(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) A gree 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 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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
	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 2015?	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))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes Vo			
	If "Yes," list the years > 20			
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 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)	2b	Yes	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
За	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 2015 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 2015.)	3b	igspace	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		ككم	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

Pal	LE ATT-R	Statements Rega	iraii	ig Activities for	WI	IICH FORM 4/2U	мау	, se kednirea (<i>cont</i>	inue	ea)
5a	During the	year did the foundatio	n pay	or incurany amoun	t to					
	(1) Carry	on propaganda, or othe	rwise	attempt to influence	e leg	ıslatıon (section 494	15(e	:)) [?]	No	
	(2) Influer	nce the outcome of any	spec	ific public election (see	section 4955), or to	car	ry		
	on, dire	ectly or indirectly, any	vote	registration drive?.				│ Yes ▽	No	
	(3) Provid	e a grant to an individu	al for	travel, study, or oth	ners	ımılar purposes?		☐ Yes ☐	No	
	(4) Provid	e a grant to an organız	atıon	other than a charıta	ble,	etc , organization des	scrib	ped		
	ın sect	:ion 4945(d)(4)(A)? (s	ee in:	structions)				│ Yes ▽	No	
	(5) Provid	e for any purpose othe	r thar	religious, charitable	e, sc	ientific, literary, or				
	educat	ional purposes, or for t	he pr	evention of cruelty t	o ch	ıldren or anımals?.			No	
b	If any ans	werıs "Yes" to 5a(1)-	(5), d	ıd any of the transac	tions	fail to qualify under	the	exceptions described in		
	Regulation	s section 53 4945 or	ın a c	urrent notice regard	ıng c	lısaster assıstance (see	instructions)?		5b
	O rganızatı	ons relying on a currer	nt not	ice regarding disast	eras	sistance check here	· .		_	
c	If the ansv	ver ıs "Yes" to questıoı	n 5a(4), does the foundat	ion c	laım exemption from	the			
	tax becaus	se it maintained expend	diture	responsibility for th	ne gr	ant?		Yes	- No	
		tach the statement requ								
6a										
	a personal benefit contract?								No	
b	·							benefit contract?		6b No
		6b, file Form 8870.	, ,			,, .				
7a		e during the tax year, \	was ti	ne foundation a party	/ to a	nrohibited tax sheli	ert	ransaction? Yes	No	
	•					·		the transaction?		7b
								n Managers, Highly		
Pa		and Contractors	. 0.	neers, birectors	,	ustees, i ounda	LIO.	ii Managers, mgmy	ran	a Linpioyees,
1		cers, directors, trustee	s, foi	ındation managers a	nd t	heir compensation (s	see i	instructions).		
				Title, and average	(6)) Compensation(If		(d)		
	(a) Nam	ne and address	hours per week		(0)	not naid enter		Contributions to	Expense accoun	
	` ,		(b)	devoted to position		-0-)		mployee benefit plans d deferred compensation	(e)	other allowances
SUE S	SERGI		PRE	SIDENT		25,000	une	0		0
120	3 HUNTERS	RIDGE ROAD	15 (23,000		· ·		J
	RLESTON,									
SAND	RA MURPHY		SEC	CRETARY		0		0		0
500	QUARRIER	STREET	0 00	0 0 0						
	RLESTON,	WV 25301								
PRISC	CILLA HADEN		-	E PRESIDE		0		0		0
	UARRY RII		0 00)						
	RLESTON,	WV 25301	-							
	/ SHAFER		TRE 0 00	ASURER		0		0		0
	1 VIRGINI <i>A</i> TE 100	A ST E	١٠٠	,						
	RLESTON,	WV 25301								
2	Compensati	ion of five highest-paid	l emp	oloyees (other than	thos	e included on line 1—	see	instructions). If none, er	ter "	'NONE."
		(a)		Title, and aver	3.00			Contributions to		
Nar	me and addr	ess of each employee	paıd	hours per wee		(c) Compensatio	n	employee benefit	(-)	Expense account,
		e than \$50,000		(b) devoted to pos	ition			plans and deferred (d) compensation	(e)	other allowances
10 N	JE							(a) components		
	-									
				1						
				-						
Fot a	I number of	other employees hald	OVAL	±50.000				<u> </u>		

Part VIII Information About Officers, Directors, Trus and Contractors (continued)	tees, Foundation Managers, Hi	ghly Paid Employees,
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "NON	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include re organizations and other beneficiaries served, conferences convened, research papers pro		er of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	(see instructions)	
Describe the two largest program-related investments made by the foundation during	the tax year on lines 1 and 2	A mount
1 N/A		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		<u></u>

Part X Minimum Investment Return

PG	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	4,689,682
b	A verage of monthly cash balances	1b	517,711
c	Fair market value of all other assets (see instructions)	1 c	803,032
d	Total (add lines 1a, b, and c)	1d	6,010,425
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	6,010,425
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	90,156
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	5,920,269
6	Minimum investment return.Enter 5% of line 5	6	296,013
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cercheck here ► and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	296,013
2a	Tax on investment income for 2015 from Part VI, line 5 2a 965		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	965
3	Distributable amount before adjustments Subtract line 2c from line 1	3	295,048
4	Recoveries of amounts treated as qualifying distributions	4	9,904
5	Add lines 3 and 4	5	304,952
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	304,952
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	255,864
	Program-related investments—total from Part IX-B	1b	
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	255,864
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b (see instructions)	5	965
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	254,899
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

P	art XIII Undistributed Income (see insti	ructions)			
		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7				304,952
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only			228,422	
b	Total for prior years 20				
3	Excess distributions carryover, if any, to 2015				
а	From 2010				
	From 2011				
	From 2012				
	From 2013				
	From 2014				
	Total of lines 3a through e				
4	Qualifying distributions for 2015 from Part				
	XII, line 4 \$ 255,864			228,422	
	Applied to 2014, but not more than line 2a			220,422	
	Applied to undistributed income of prior years (Election required—see instructions)				
	Treated as distributions out of corpus (Election required—see instructions)				
	Applied to 2015 distributable amount				27,442
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2015				_
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income Subtract line 4b from line 2b				
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				
d	Subtract line 6c from line 6b Taxable amount —see instructions				
е	Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions				
f	Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				277,510
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
8	Excess distributions carryover from 2010 not				
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				
е	Excess from 2015				

RECIPIENT

	rt XIV Private Operating Foundation	tions (see mstru	ictions and Part	VII-A, question	9)	
	f the foundation has received a ruling or deteri oundation, and the ruling is effective for 2015,					
b (Check box to indicate whether the organization	ıs a private operat	ing foundation de	scribed in section	─ 4942(j)(3) or	厂 4942(j)(5)
	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
1	ncome from Part I or the minimum nvestment return from Part X for each /ear listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	5% of line 2a					
	Qualifying distributions from Part XII,					
I	ine 4 for each year listed					
c	lirectly for active conduct of exempt					
f	Qualifying distributions made directly or active conduct of exempt activities Subtract line 2d from line 2c					
	omplete 3a, b, or c for the					
ā	alternative test relied upon					
,	Assets" alternative test—enter					
((1) Value of all assets					
((2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					
(Endowment" alternative test— enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed					
	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					
ır	Supplementary Information (assets at any time during the			e organization	had \$5,000 oi	more in
1	Information Regarding Foundation Managers:	year see ms	i decionsi j			
	ist any managers of the foundation who have o	ontributed more th	an 2% of the tota	l contributions rec	eived by the founda	ation
Ł	pefore the close of any tax year (but only if the	y have contributed	more than \$5,000	O) (See section 50)7(d)(2))	
_						
	ist any managers of the foundation who own 10 ownership of a partnership or other entity) of wl				large portion of the	2
C	ownership of a partnership of other entity) of wi	non the loundation	nas a 10% or gre	eater interest		
	Information Regarding Contribution, Grant, Gif	t, Loan, Scholarshi	p, etc., Programs:			
					d does not accept	
(Information Regarding Contribution, Grant, Gif Check here ► If the foundation only makes controlled in the foundation only makes controlled in the foundation of the foundation in the foundati	ontributions to pres	selected charitabl	e organizations an		s under
C	Check here 🔭 if the foundation only makes c	ontributions to pres n makes gifts, gran	selected charitabl	e organizations an		s under
(Check here	ontributions to pres n makes gifts, gran	selected charitabl	e organizations an		s under
((Check here	ontributions to pres n makes gifts, gran d	selected charitabl ts, etc (see instru	e organizations an uctions) to individu	als or organization	s under
-	Check here if the foundation only makes consolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and other conditions, and telephone number or e	ontributions to pres n makes gifts, gran d	selected charitabl ts, etc (see instru	e organizations an uctions) to individu	als or organization	s under
-	Check here if the foundation only makes consolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and other conditions, and telephone number or essential states.	ontributions to pres n makes gifts, gran d	selected charitabl ts, etc (see instru	e organizations an uctions) to individu	als or organization	s under
	Check here if the foundation only makes consolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and other conditions, and telephone number or essue SUE SERGI.	ontributions to pres n makes gifts, gran d	selected charitabl ts, etc (see instru	e organizations an uctions) to individu	als or organization	s under
- :	Check here if the foundation only makes consolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and other conditions, and telephone number or essue SERGI. 1203 HUNTERS RIDGE ROAD CHARLESTON, WV 25314	ontributions to pres n makes gifts, gran d	selected charitabl ts, etc (see instru	e organizations an uctions) to individu	als or organization	s under
- :	Check here if the foundation only makes consolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and other conditions, and telephone number or estimate the second state of the second state	ontributions to pres n makes gifts, gran d	selected charitabl ts, etc (see instru	e organizations an uctions) to individu	als or organization	s under
	Check here if the foundation only makes consolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and other conditions, and telephone number or established. The name, address, and telephone number or established. It is a substitution of the condition of the	ontributions to preson makes gifts, grand	selected charitabl ts, etc (see instru ne person to whom	e organizations and ictions) to individu	als or organization	s under
- :	Check here if the foundation only makes consolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and other conditions, and telephone number or established. The name, address, and telephone number or established. It is supported by the condition of the cond	ontributions to preson makes gifts, grand	selected charitables, etc (see instruments) are person to whome	e organizations and ictions) to individu	als or organization	
- : : : : : : : : : : : : : : : : : : :	Check here if the foundation only makes consolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and other conditions, and telephone number or established. If the form in which applications should be submarked.	ontributions to preson makes gifts, grand mail address of the litted and information of the little of the littl	selected charitables, etc (see instruments, etc (see instruments) are person to whome on and materials to the policy of the poli	e organizations and ictions) to individure a polications shout they should include S AND THE INFOI	als or organization Id be addressed RMATION THAT S	HOULD BE
- : : : : : : : : : : : : : : : : : : :	Check here if the foundation only makes consolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and other conditions are conditions. The name, address, and telephone number or established the submother conditions are foundations. The form in which applications should be submother conditions. The form in which applications are foundations are for conditions.	ontributions to preson makes gifts, grand mail address of the litted and information of the little	selected charitables, etc (see instruments, etc (see instruments) are person to whome on and materials to the policy of the poli	e organizations and ictions) to individure a polications shout they should include S AND THE INFOI	als or organization Id be addressed RMATION THAT S	HOULD BE
- : : : : : : : : : : : : : : : : : : :	Check here if the foundation only makes consolicited requests for funds. If the foundation of the conditions, complete items 2a, b, c, and of the conditions, complete items 2a, b, c, and of the name, address, and telephone number or estable SUE SERGI. 1203 HUNTERS RIDGE ROAD. CHARLESTON, WV 25314. (304) 522-2460. SUESERGI@YAHOO COM. The form in which applications should be submarked and the submarked submarked submarked. A GUIDELINE FOR PREPARING THE TWO DELING THE APPLICATIONS ARE FOUNDER EDUCATIONAL GRANTS AND CHARMANTS.	ontributions to preson makes gifts, grand mail address of the litted and information of the little	selected charitables, etc (see instruments, etc (see instruments) are person to whome on and materials to the policy of the poli	e organizations and ictions) to individure a polications shout they should include S AND THE INFOI	als or organization Id be addressed RMATION THAT S	HOULD BE
- : : : : : : : : : : : : : : : : : : :	Check here if the foundation only makes consolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and other conditions, conditions, conditions, conditions, conditions, conditions, conditions, complete items 2a, b, c, and other conditions,	ontributions to preson makes gifts, grand mail address of the street and information of the s	selected charitables, etc (see instructions) is person to whome person to whome on and materials to the person to the person to whome on and materials to the person to whome on any person to whom the person to whome on any person to whom the perso	e organizations and include in applications should include S AND THE INFOINTERSITE (WWW GI	als or organization Id be addressed RMATION THAT S	HOULD BE ATION COM)
	Check here if the foundation only makes consolicited requests for funds If the foundation of the conditions, complete items 2a, b, c, and of the name, address, and telephone number or estable to the conditions of the name, address, and telephone number or estable to the conditions of the conditions	ontributions to preson makes gifts, grand -mail address of the street and information of the street and information of the street and the st	selected charitables, etc (see instructions) see person to whome person to whome person to whome person and materials to the transfer of the t	e organizations and ictions) to individure in applications should include S AND THE INFOINTERSITE (WWW GI	als or organization Id be addressed RMATION THAT S OTFELTYFOUND O NO LATER THAN	HOULD BE ATION COM)
	Check here if the foundation only makes consolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and other conditions, conditions, conditions, conditions, conditions, conditions, conditions, complete items 2a, b, c, and other conditions,	ontributions to preson makes gifts, grand -mail address of the street and information of the street and information of the street and the st	selected charitables, etc (see instructions) see person to whome person to whome person to whome person and materials to the transfer of the t	e organizations and ictions) to individure in applications should include S AND THE INFOINTERSITE (WWW GI	als or organization Id be addressed RMATION THAT S OTFELTYFOUND O NO LATER THAN	HOULD BE ATION COM)
	Check here if the foundation only makes consolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and other conditions, and telephone number or established. The name, address, and telephone number or established items and conditions. The form in which applications should be submarked and conditions. The form in which applications should be submarked in the form in which applications should be submarked. The form in which applications should be submarked in the form in which applications should be submarked. The form in which applications and the form in which applications and the form in which applications and the form in which applications are conditions. Any submission deadlines. The form in the form in which applications on awards, such any restrictions or limitations on awards, such any conditions.	ontributions to preson makes gifts, grand described and information of the control of the contro	selected charitable is, etc (see instruction of see instruction on and materials to the second of second o	e organizations and ictions) to individud in applications should include S AND THE INFOINEBSITE (WWW GIVERSITE (WWW GIVERSITE) at fields, kinds of in	als or organization Id be addressed RMATION THAT S OTFELTYFOUND ONO LATER THAN stitutions, or other	HOULD BE ATION COM)
	Check here if the foundation only makes consolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and other conditions, and telephone number or established. The name, address, and telephone number or established items and conditions. The following serious should be submarked. The form in which applications and the form in which applications applies the form in which applications applies the form in which applications applies to the form in which applications applies the form in which applie	ontributions to preson makes gifts, grand described and information of the control of the contro	selected charitable is, etc (see instructs, etc (see instructs) and materials to the person to whome and materials to the person to who materials to the person to whome and the person to who who will be person to whome and the person to whom and the person to whome and the person to whome and the person to whome and the person to whom and the person th	e organizations and ictions) to individure they should include S AND THE INFOLVEBSITE (WWW GIVERSITE (WWW GIVERSITE) a fields, kinds of in the state of the state	als or organization Id be addressed RMATION THAT S OTFELTYFOUND ONO LATER THAN stitutions, or other NAWHA COUNTY	HOULD BE ATION COM) N MAY 1 AND , WEST D, OR TO
	Check here if the foundation only makes consolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and other conditions, conditions are resulted in the conditions and conditions are founded in the conditions are founded in the conditions of the conditions on a conditions are founded in the conditions of the conditions on a conditions of the conditions on a conditions of the conditions on a conditions of the conditions of the conditions on a conditions of the conditions of the conditions on a conditions of the conditions on a conditions of the conditions of the conditions on a conditions of the conditions on a condition of the conditions of the conditi	ontributions to preson makes gifts, grand described and information of the control of the contro	selected charitables, etc (see instructs, etc (see instructs) and materials to the person to whome and materials to the person	e organizations and ictions) to individual i	als or organization Id be addressed RMATION THAT S OTFELTYFOUND ONO LATER THAN stitutions, or other NAWHA COUNTY ESS OR BATTERE WILL ALSO BE AW	HOULD BE ATION COM) N MAY 1 AND , WEST D, OR TO ARDED TO
	Check here if the foundation only makes consolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and other conditions, and telephone number or established. The name, address, and telephone number or established items and conditions. The following serious should be submarked. The form in which applications and the form in which applications applies the form in which applications applies the form in which applications applies to the form in which applications applies the form in which applie	ontributions to preson makes gifts, grand described and information of the control of the contro	selected charitables, etc (see instructs, etc (see instructs) and materials to the person to whome and materials to the person to the person to whome and materials to the person to the pe	e organizations and ictions) to individual i	als or organization Id be addressed RMATION THAT S OTFELTYFOUND ONO LATER THAN stitutions, or other NAWHA COUNTY ESS OR BATTERE WILL ALSO BE AW TOR EDUCATIONA	HOULD BE ATION COM) N MAY 1 AND WEST D, OR TO ARDED TO AL GRANTS

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 229,550 **b** Approved for future payment

Part XVI-A Analysis of Income-Produc	ing Activities	i			
Enter gross amounts unless otherwise indicated	Unrelated bus	(b)	Excluded by section (c)	(d)	(e) Related or exemp function income
1 Program service revenue	Business code	Amount	Exclusion code	Amount	(See Instructions)
a b					
c					
e f					
 g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					92,03
5 Net rental income or (loss) from real estate a Debt-financed property					
b Not debt-financed property					
7 Other investment income					10
8 Gain or (loss) from sales of assets other than inventory					50,03
O Net income or (loss) from special events O Gross profit or (loss) from sales of inventory					
Cother revenue a GRANTS PAID BACK					9,90
b					
d					
e 2 Subtotal Add columns (b), (d), and (e)					152,08
Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify			1	3	152,089
Part XVI-B Relationship of Activities to	the Accomp				
Line No. Explain below how each activity for wh the accomplishment of the foundation's instructions)					

Part X	VIII	Information Re					insac	ctions and F	Relationships	s With			
		anization directly or in 1 (c) of the Code (othe	ndirectly e	engage	ın any of	the following						Yes	No
organ	ıızatıo	ns?											
a Trans	fers f	rom the reporting foun	dation to	a nonc	harıtable	exempt orga	nızatıo	n of					
(1)	Cash.										1a(1)		No
(2)	ther	assets									1a(2)		No
b Other	r trans	sactions											
(1) 9	Sales	of assets to a nonchai	rıtable ex	empt or	ganızatıo	n					1b(1)		No
		ases of assets from a									1b(2)		No
		of facilities, equipme											No
		ursement arrangemen									1b(4)		No
		or loan guarantees.									1b(5)		No
		ance of services or m									1b(5)		No
	_	facılıtıes, equıpment, r er to any of the above	_								1c		No
of the	good tran:	s, other assets, or seisaction or sharing arra (b) Amount involved	rvices giv angement	en by t , show i	he reporti In column	ng foundatio	n Ifth e ofth	ne foundation r e goods, other	eceived less tha	in fair mark ices receive	et value ed	!	nts
(a) Line N	+	(b) Amount involved	(c) Name	OI HOHEI	iditidale ext	empt organization		(d) Description	or transfers, transac	ctions, and site	annig ana	ngemer	11.3
	_												
	_												
							_						
	_												
	-												
	-						-						
descr	ıbed ı	dation directly or indir n section 501(c) of th omplete the following s (a) Name of organization	e Code (d schedule		an sectio		orıns	section 527?.		nption of relati		es ∀	No
	the brinform	r penalties of perjury, est of my knowledge a nation of which prepar *****	nd belief, er has an	ıt ıs tru	ie, correc		ete De			May t return with t below	r) is ba: he IRS di i he prepa	sed on scuss th	all nis vn
							ΠD	ate	Check if self-	PTIN			
		Print/Type preparer's KELLI J VANCE	name	Prepa	rer's Sıgn	nature		2016-08-03	employed •		00366!	597	
Paid Prepai Use	rer (Firm's name ► GIBBONS & KAWASH	AC						Firm's EIN ► !	55-073898	5		
Only	-	Firm's address ► 707 VIRGINIA ST E S 253012724	STE 300 (CHARL	ESTON,\	WV			Phone no (30	4)345-840	00		

rm 990PF Part IV - Capit	al Gains and Losses for Ta	x on Inves	tment Income -	Columns a - d	I
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)			(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
MORGAN STANLEY 11	565		Р	2014-06-19	2015-01-27
MORGAN STANLEY 11	565		Р	2013-04-11	2015-01-07
MORGAN STANLEY 37758			Р	2014-05-29	2015-04-15
MORGAN STANLEY 37758			Р	2013-05-14	2015-04-15
MORGAN STANLEY 37	MORGAN STANLEY 37759			2014-04-17	2015-04-15
MORGAN STANLEY 37759			Р	2013-03-23	2015-04-15
rm 990PF Part IV - Capit	al Gains and Losses for Ta	x on Inves	tment Income -	Columns e - h	1
(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale			n or (loss) (f) mınus (g)
127,891		107,491		20,400	
131,692		138,323		138,323 -6,6	
715,825			673,116		42,709

rm 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I					
547,418	558,781	-11,363			
123,880	129,078	-5,198			
31,790	26,981	4,809			
715,825	673,116	42,709			
131,692	138,323	-6,631			
127,891	107,491	20,400			

123,880		129,078	-5,198
547,418		558,781	-11,363
Form 990PF Part IV - Capit	al Gains and Losses for Ta	x on Investment Income -	Columns i - I
Complete only for assets show	ving gain in column (h) and owned b	by the foundation on 12/31/69	Gains (Col (h) gain minus
(i) F M V as of 12/31/69	A djusted basis (j) as of 12/31/69	Excess of col (1) (k) over col (j), ıf any	col (k), but not less than -0-) or (l) Losses (from col (h))
			20,400
			-6,631
			42,709
			4,809
			-5,198

-11,363

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
CAMC FOUNDATION 3412 STAUNTON AVE CHARLESTON,WV 25304			HEALTH	10,000
CHARLESTON BALLET 100 CAPITOL STREET CHARLESTON,WV 25301		501(C)(3)	CREATIVE ARTS	5,000
CHARLESTON LIGHT OPERA GUILD 411 TENNESSEE AVENUE CHARLESTON,WV 25302		501(C)(3)	CREATIVE ARTS	21,000
CHILDHOOD LANGUAGE CENTER 406 CAPITOL STREET CHARLESTON,WV 25301		501(C)(3)	CHILDREN - COMMUNICATION	10,000
CHILDRENS HOME SOCIETY 1422 KANAWHA BLVD E CHARLESTON,WV 25301		501(C)(3)	CHILDHOOD PROGRAMS	10,000
CHRISTS KITCHEN 405 B STREET SAINT ALBANS, WV 25177			COMMUNITY MEALS	1,000
COVENANT HOUSE 600 SHREWSBURY STREET CHARLESTON,WV 25301		501(C)(3)	FOOD, CLOTHING, SHELTER	1,000
DAYMARK 1592 WASHINGTON ST E CHARLESTON, WV 25311			EDUC AND SUPPORT FOR YOUTH	7,000
FESTIVALL CHARLESTON 229 CAPITOL STREET CHARLESTON,WV 25301			COMMUNITY	10,000
GREATER KANAWHA VALLEY FOUNDATION 900 LEE ST E CHARLESTON,WV 25301		501(C)(3)	CREATIVE ARTS	5,000
MANNA MEAL 1105 QUARRIER STREET CHARLESTON,WV 25301		501(C)(3)	COMMUNITY MEALS	1,000
REA OF HOPE 1429 LEE ST E CHARLESTON, WV 25301			HOUSING	10,000
RECOVERY POINT 501 STOCKTON ST CHARLESTON,WV 25301			DRUG REHABILITATION	40,000
RELIGIOUS COALITION 1516 WASHINGTON ST E CHARLESTON, WV 25311			COMMUNITY RENEWAL	10,000
ROARK SULLIVAN LIFE WAY CENTER 505 LEON SULLIVAN WAY CHARLESTON,WV 25301			SUPPORT FOR HOMELESS	1,000
Total			▶ 3a	229,550

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

OTHER SOFT FAIL AVEING 5 GIV	ante ana contributions	raid During	ale real of Approved for	i atare rayinen
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
WEST VIRGINIA STATE UNIVERSITY 5000 FAIRLAWN AVE INSTITUTE,WV 25112			EDUCATION	18,000
WV HEALTHY KIDS ' 1114 QUARRIER STREET CHARLESTON,WV 25301		501(C)(3)	CHILDHOOD HEALTH	33,550
WV SYMPHONY ORCHESTRA CLAY SQUARE CHARLESTON,WV 25301		501(C)(3)	CREATIVE ARTS	20,000
WVU PO BOX 6201 MORGANTOWN,WV 26506			EDUCATION	15,000
YWCA SOJOURNERS SHELTER 1426 KANAWHA BLVD E CHARLESTON,WV 25301			FAMILY SHELTER	1,000
Total				229,550

TY 2015 Accounting Fees Schedule

Name: CHARLES & MARY FAYNE

GLOTFELTY FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	3,085	1,543		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491218007126

TY 2015 Investments Corporate Stock Schedule

Name: CHARLES & MARY FAYNE

GLOTFELTY FOUNDATION INC

Name of Stock	End of Year Book Value	End of Year Fair Market Value
COMMON STOCK & OPTIONS	896,567	896,567
MUTUAL FUNDS	792,864	792,864
CLOSED END FUNDS	2,906,819	2,906,819

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491218007126

TY 2015 Investments - Other Schedule

Name: CHARLES & MARY FAYNE

GLOTFELTY FOUNDATION INC

Categ	ory/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
SKYBRIDGE		FMV	768,613	768,613

TY 2015 Legal Fees Schedule

Name: CHARLES & MARY FAYNE

GLOTFELTY FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	303			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491218007126

TY 2015 Other Decreases Schedule

Name: CHARLES & MARY FAYNE

GLOTFELTY FOUNDATION INC

Description	Amount
FEDERAL TAX PAYMENTS	699
UNREALIZED LOSS	269,664

TY 2015 Other Expenses Schedule

Name: CHARLES & MARY FAYNE

GLOTFELTY FOUNDATION INC

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
INSURANCE	1,198	1,198		
MEMBERSHIP DUES	1,500	1,500		
OTHER EXPENSES	584			

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491218007126

TY 2015 Other Income Schedule

Name: CHARLES & MARY FAYNE

GLOTFELTY FOUNDATION INC

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
MS 37759	107	107	
GRANTS PAID BACK	9,904		

TY 2015 Other Professional Fees Schedule

Name: CHARLES & MARY FAYNE

GLOTFELTY FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEES	38,281	38,281		

TY 2015 Taxes Schedule

Name: CHARLES & MARY FAYNE

GLOTFELTY FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES PAID	1,921	1,921		
STATE FEES	40			

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491218007126

EN. 93491210007120

OMB No 1545-0047

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

CHARLES & MARY FAYNE

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.
► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

2015

Employer identification number

GLOTFELTY FOUNDATION	TINC 27-4002334
Organization type (check o	one)
Filers of:	Section:
Form 990 or 990-EZ	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	√ 501(c)(3) exempt private foundation
	501(c)(3) taxable private foundation
, ,	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions
,	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or many one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
under sections 509(a received fromany on	lescribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3% support test of the regulations a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that ne contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990) Form 990-EZ, line 1 Complete Parts I and II
during the year, total	lescribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or cruelty to children or animals. Complete Parts I, II, and III
during the year, conti this box is checked, e purpose Do not com	lescribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, ributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., plete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> etc., contributions totaling \$5,000 or more during the year

990-EZ, or 990-PF)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of 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

Name of organization CHARLES & MARY FAYNE GLOTFELTY FOUNDATION INC

Employer identification number 27-4002334

(a)	Contributors (see instructions) Use duplicate copies of Part I (b)	(c)	(d)	
No.	Name, address, and ZIP + 4	Total contributions	Type of con	tribution
1			Person	r
	ESTATE OF MARY GLOTFELTY 135 SOUTH SHORE DRIVE	\$ 268,707	Payroll	Γ
	NEWMAN, GA 30263		Noncash	Г
			(Complete Part II to contributions)	for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
			Person	Γ
		\$	Payroll	Г
			Noncash	Г
			(Complete Part II f	for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
			Person	Г
			Payroll	Г
	-	<u>\$</u>	Noncash	Г
			(Complete Part II to contributions)	for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
			Person	Г
			Payroll	Г
		<u>\$</u>	Noncash	г
			(Complete Part II t	for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
			Person	Г
			Payroll	Г
		<u> </u>	Noncash	Г
			(Complete Part II t	for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
			Person	Г
		s	Payroll	Г
		*	Noncash	Г
			(Complete Part II t	for noncook

Name of organization **Employer identification number** CHARLES & MARY FAYNE GLOTFELTY FOUNDATION INC 27-4002334 Noncash Property Part II (see instructions) Use duplicate copies of Part II if additional space is needed (c) (a) (b) (d) FMV (or estimate) No.from Part I Description of noncash property given Date received (see instructions) (c) (b) (d) (a) FMV (or estimate) Description of noncash property given No.from Part I Date received (see instructions) (c) (b) (d) (a) FMV (or estimate) No.from Part I Description of noncash property given Date received (see instructions) (c) (b) (d) (a) FMV (or estimate) Description of noncash property given No.from Part I Date received (see instructions) (c) (a) (b) (d) FMV (or estimate) No.from Part I Description of noncash property given Date received (see instructions) (c) (a) (b) (d) FMV (or estimate) No.from Part I Description of noncash property given Date received (see instructions)

Schedule B (Form 9	90, 990-EZ, or 990-PF) (2015)		Page 4
Name of organizati CHARLES & MARY	FAYNE		Employer identification number
GLOTFELTY FOUN	IDATION INC		27-4002334
total me line ent of \$1,00	ore than \$1,000 for the year from any c	one contributor. Complete co III, enter the total of <i>exclusiv</i> mation once. See instruction	ribed in section 501(c)(7), (8), or (10) that plumns (a) through (e) and the following ely religious, charitable, etc., contributions as.) *
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	Transferee's name, address, an	(e) Transfer of gi	ft Relationship of transferor to transferee
	<u>-</u>		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an	 (e) Transfer of gı d ZIP4	ft 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, ar	<u>I</u> (e) Transfer of gift nd ZIP4 Relati	onship of transferor to transferee	
	-			
(a)		<u> </u>		
No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	

Transferee's name, address, and ZIP4

(e) Transfer of gift

Relationship of transferor to transferee