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EXTENDED TO AUGUST 15, 20: 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.

mation about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

		Mar year 2015 or tax year beginning		, and e	nding		
		foundation				A Employer identificatio	n number
В	OAI	RD OF TRUSTEES OF PRICH	ARD SCHOOL				
C	<u>/</u> 0	CITY NATIONAL BANK TRU	ST WEALTH MGI	MT		55-0435910)
Nun	nber a	nd street (or P O box number if mail is not delivered to street	address)		Room/suite	B Telephone number	
_1	90	O THIRD AVE			l	(304)526-0	5200
City	or to	own, state or province, country, and ZIP or foreign p	ostal code			C if exemption application is	pending, check here
_ <u>H</u>	UN	FINGTON, WV 25703					
G (heck	all that apply; Initial return	Initial return of a fo	rmer public (charity	D 1. Foreign organization	s, check here
		Final return	Amended return			Foreign organizations m check here and attach of	eeting the 85% test.
		Address change	Name change			check here and attach o	omputation
H_(_	type of organization: X Section 501(c)(3) e.		41		E If private foundation st	
<u> </u>			Other taxable private foundaing method: X Cash	Acci		under section 507(b)(1	* * *
		· \ 	ing method: X Cash ther (specify)	AGG	uai	F If the foundation is in a	
	om r -\$	Part II, col. (c), line 16)0 20,963,922. (Part I, colu	iner (specify)	pasis.)		under section 507(b)(1)(b), check here
		Analysis of Revenue and Expenses	(a) Revenue and		vestment	(c) Adjusted net	(d) Disbursements
		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books		ome	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received			<u> </u>	N/A	
•	2	Check X if the foundation is not required to attach Sch B					·
ì	3	Interest on savings and temporary cash investments			0 506		
•	4	Dividends and interest from securities	288,796.		8,796.		CENTED 1
	1	Gross rents	17,359.		7,359.		STATEMENT 1
}	b	· · · · · · · · · · · · · · · · · · ·	49,198.	·			
e e	oa L	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1,662,317.	49,190.				
Revenue	7	assets on line 6a		4	9,198.		
ì %	8	Net short-term capital gain			<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
÷	9	Income modifications					
ζ	10a	Gross sales less returns					
2	Ь	Less Cost of goods sold					
	C	Gross profit or (loss)					
	11	Other income	1,981,851.		1,851.		STATEMENT 2
	12	Total. Add lines 1 through 11	2,337,204.	2,33	7,204.		ļ <u>.</u>
	13	Compensation of officers, directors, trustees, etc	0.		0.		0.
	14	Other employee salaries and wages					
ģ	15	Pension plans, employee benefits Legal fees STMT 3	216,825.	21	6,825.		0.
Sus	16a	Legal fees STMT 3 Accounting fees STMT 4	5,800.		5,220.		580.
Expenses	. 0	Other professional fees STMT 5	186,949.	18	6,949.		0.
		Interest	200,545.		,515.		<u> </u>
ativ	18	Taxes STMT 6	75,298.	7	5,298.	-	0.
istr	19	Depreciation and depletion					
į	20	Occupancy					
Ad	21	Travel, conferences, and meetings					
and Administrative	22	Printing and publications					
pd	23	Other expenses REC. STMT 7	52,914.	4	<u>7,623.</u>		5,291.
Operating	24	Total operating and administrative			1 01 5		- 054
Spe	1	expenses Add lines 13 through 23.	537,786.	5.5	1,915.		5,871.
J	25	Contributions, gifts, grants paid	1,714,600.				1,714,600.
	26	Total expenses and disbursements.	2 252 206	E2	1,915.		1,720,471.
	 	Add lines 24 and 25 - Line 12:	2,252,386.		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	 	1,140,411.
			84,818.				
	i	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	<u> </u>	1,80	5,289.		
	1	Adjusted net income (if negative, enter -0-)				N/A	

Form **990-PF** (2015)

For	n 99	0-PF (2015) C/O CITY NATIONAL BANK	TRUST WEALTH	MGMT 55-	0435910 Page 2
	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year		of year
	21 L	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing .	33,661.		3,686.
	2	Savings and temporary cash investments	33,682.	358,902.	358,902.
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable -			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable		- 	
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons	· · · · · · · · · · · · · · · · · · ·	 	
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
Assets	_	Inventories for sale or use			
Ass	9	Prepaid expenses and deferred charges			
•		Investments - Ú.S. and state government obligations	6,479,026	6,261,296.	6 261 206
		Investments - corporate stock STMT 8 Investments - corporate bonds STMT 9	4,829,632		
			4,023,032	4,444,030.	4,444,090.
	11	Investments - land, buildings, and equipment basis	-		
	40	Less accumulated depreciation		"	
		Investments - mortgage loans Investments - other			
	13	Land, buildings, and equipment: basis	-		
	14	Less accumulated depreciation	-		
	15	Other assets (describe ► STATEMENT 10)	55,231	. 38,711.	9,897,340.
		Total assets (to be completed by all filers - see the	35/3-		
		instructions. Also, see page 1, item I)	11,431,232	. 11,105,293.	20,963,922.
	17				ļ
	18	Grants payable			
ģ	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iabi	21	Mortgages and other notes payable			
_	22	Other liabilities (describe >)			
_	23		0	0.	1
	l	Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31.	11,431,232	. 11,105,293.	
2	24	Unrestricted .	11,431,434	11,105,295.	1
ala	25	Temporarily restricted			1
d E	26	Permanently restricted Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
þ	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			ĺ
Ass	29	Retained earnings, accumulated income, endowment, or other funds]
Net Assets or Fund Balances	30	Total net assets or fund balances	11,431,232	. 11,105,293.	
_					
	31	Total liabilities and net assets/fund balances	11,431,232	<u>. 11,105,293.</u>	
P	art	III Analysis of Changes in Net Assets or Fund E	Balances		
		I net assets or fund balances at beginning of year - Part II, column (a), line	30		
1		i net assets or fund balances at beginning of year - Part II, column (a), line st agree with end-of-year figure reported on prior year's return)	. 00	1	11,431,232.
2	•	r amount from Part I, line 27a	•	2	84,818.
3		r increases not included in line 2 (itemize)		3	0.
A		lines 1, 2, and 3		4	11,516,050.
5		eases not included in line 2 (itemize) CHANGE IN FMV	OF INVESTMENT	TS 5	410,757.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, o		6	11,105,293.
_					Form 990-PF (2015)

Form 990-PF (2015) C/O CITY NATIONAL BANK TRUST WEALTH MGMT 55-0435910 Page 3 Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired P - Purchase D - Donation (c) Date acquired (a) List and describe the kind(s) of property sold (e.g., real estate, (d) Date sold (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) INVESTMENT SECURITIES P b CAPITAL GAINS DIVIDENDS C d (g) Cost or other basis (h) Gain or (loss) (f) Depreciation allowed (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale 9,068. 1,613,119 1,622,187 40,130. 40,130. h d (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (j) Adjusted basis (k) Excess of col. (i) Losses (from col. (h)) (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any 9,068. 40,130. b е If gain, also enter in Part I, line 7 49.198. 2 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). N/A If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making any entries. (d)
Distribution ratio
(col. (b) divided by col. (c)) (a) Base period years (b) Net value of noncharitable-use assets Adjusted qualifying distributions Calendar year (or tax year beginning in) 19,683,617 1,624,118 .082511 2014 1,964,215 15,910,546. .123454 2013 672,765. 14,069,151. .047818 2012 14,923,908. .129022 ,925,517 2011 414.547 13.686.661 .103352 2010 2 .486157 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years .097231 3 the foundation has been in existence if less than 5 years 4 21,059,842. Enter the net value of noncharitable-use assets for 2015 from Part X, line 5 2,047,669. 5 Multiply line 4 by line 3 18,053. Enter 1% of net investment income (1% of Part I, line 27b) 6 2,065,722. 7 Add lines 5 and 6 1,720,471. Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

See the Part VI instructions.

	BOARD OF TRUSTEES OF PRICH						
Form 990-	PF (2015) C/O CITY NATIONAL BANK TRU	ST WEAL	TH MGMT	<u> 55-043</u>			Page 4
Part V	Excise Tax Based on Investment Income (Section	n 4940(a), 4	l940(b), 4940(e), or	4948 - se	e instru	ıctio	ns)
	npt operating foundations described in section 4940(d)(2), check here 🕨 📖						
	of ruling or determination letter: (attach copy of letter						
b Dom	estic foundations that meet the section 4940(e) requirements in Part V, check h	nere 🕨 📖	and enter 1%	1 1	<u>3</u>	<u>6,1</u>	06.
	art i, line 27b						
	ther domestic foundations enter 2% of line 27b. Exempt foreign organizations e						
	under section 511 (domestic section 4947(a)(1) trusts and taxable foundations	only. Others en	ter -0-)	2			<u>0.</u>
	lines 1 and 2			3	3	<u>6,1</u>	.06.
	itle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations		nter -0-)	4		- 1	0.
	based on investment income. Subtract line 4 from line 3. If zero or less, enter	-0-		5		6 , I	.06.
	lits/Payments:	٠١٠	35 000				
	5 estimated tax payments and 2014 overpayment credited to 2015	6a	35,800	-			
	npt foreign organizations - tax withheld at source	6b	500	-			
	paid with application for extension of time to file (Form 8868)	6c	500	-			
	kup withholding erroneously withheld	6d		-	2	6 2	
	I credits and payments. Add lines 6a through 6d	O is attached	• •	7		0,3	42.
	r any penalty for underpayment of estimated tax. Check here X if Form 222 due. If the total of lines 5 and 8 is more than line 7, enter amount owed	O IS attached		. 8			44.
	rpayment. If line 7 is more than the total of lines 5 and 8, enter the amount over	roald		10		1	52.
	r the amount of line 10 to be: Credited to 2016 estimated tax	ipaiu	152. Refunded	11			0.
	/IJ-A Statements Regarding Activities		LJZ - Nelullueu				
	ng the tax year, did the foundation attempt to influence any national, state, or lo	cal legislation o	r did it narticinate or interve	 Ne in		Yes	No
	political campaign?	-	ala ii partioipato or intorvo	-	1a-		X
	t spend more than \$100 during the year (either directly or indirectly) for political	al purposes (see	instructions for the definiti	on)?	1b		X
	e answer is "Yes" to 1a or 1b, attach a detailed description of the activ						
	nbuted by the foundation in connection with the activities.)]
	the foundation file Form 1120-POL for this year?				1c		х
	r the amount (If any) of tax on political expenditures (section 4955) imposed du	uring the year:					
	On the foundation. > \$ O . (2) On foundation m		0				
	r the reimbursement (if any) paid by the foundation during the year for political						
	agers. ▶ \$ 0 .				}		ļ
2 Has	the foundation engaged in any activities that have not previously been reported	to the IRS?			_ 2		X
If "Y	es," attach a detailed description of the activities.						
3 Has	the foundation made any changes, not previously reported to the IRS, in its gov	verning instrum	ent, articles of incorporation	, or			
	ws, or other similar instruments? If "Yes," attach a conformed copy of the				_ 3		X
	the foundation have unrelated business gross income of \$1,000 or more during	the year?			4a		X
	es," has it filed a tax return on Form 990-T for this year?			N/A	_4b		ļ
	there a liquidation, termination, dissolution, or substantial contraction during t	he year?			5	<u> </u>	X_
	es," attach the statement required by General Instruction T.						
	the requirements of section 508(e) (relating to sections 4941 through 4945) sa	tisfied either:					ľ
	/ language in the governing instrument, or					ł	
-	y state legislation that effectively amends the governing instrument so that no m	iandatory direct	ions that conflict with the st	ate law			1,7
	ain in the governing instrument?	!/-4-	Double and Inch and Doubl	w.,	6	7	X
7 Did t	the foundation have at least \$5,000 in assets at any time during the year? If "Ye	es," complete	Paπ II, coi. (c), and Paπ λ	(V	7	X	├──
0 - 6 - 1 -	with a state to which the foundation was also as with which it is registered (one in	actructions)					
	er the states to which the foundation reports or with which it is registered (see in	isu ucions)			-	ĺ	1
<u>W</u>	v e answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF	to the Attorney	General (or designate)	_	-		
	e answer is 'tes' to line 7, has the foundation formshed a copy of Form 990-Fr ach state as required by General Instruction G? If "No," attach explanation		autorat (or assignate)		8b	Х	
	the foundation claiming status as a private operating foundation within the meaning		942(i)(3) or 4942(i)(5) for e	alendar	- 00		
	· 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If				9		х
_	any persons become substantial contributors during the tax year? If "Yes," attach				10		X
	any personal aggregation out the second country of the second sec				لتنب		

55-0435910 C/O CITY NATIONAL BANK TRUST WEALTH MGMT Page 5 Part VII-A Statements Regarding Activities (continued) Yes No 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 X 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? 13 Website address ► N/A 14 The books are in care of ▶ EDWARD MORRISON Telephone no. \triangleright (304)523-3484 Located at ▶ 4034 ALTIZER AVE, P O BOX 2163, HUNTINGTON, ZIP+4 **▶**25722 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year 15 N/A No 16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, Yes securities, or other financial account in a foreign country? 16 X See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (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 Yes X No 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 Yes X No 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 N/A 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 c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? X 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(1)(3) or 4942(1)(5)); a 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 Yes X No before 2015? If "Yes," list the years b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach N/A statement - see instructions.) 2b c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No 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, N/A Form 4720, to determine if the foundation had excess business holdings in 2015) 3b 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Х **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 2015?

BOARD OF TRUSTEES OF PRI Form 990-PF (2015) C/O CITY NATIONAL BANK T		rcmm	55-04359	110 Dage
Part VII-B Statements Regarding Activities for Which F				10 Page 6
	Om 4720 May Do 1	toqui ou (continu		
5a During the year did the foundation pay or incur any amount to:	4045(0))2		s 🗓 No	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section		•	IS LAL NO	1 1
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire		. .	
any voter registration drive?	_		s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y€	s X No	1 1
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
4945(d)(4)(A)? (see instructions)		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t			1 1
the prevention of cruelty to children or animals?		Ye	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ter the exceptions described	ın Regulatıons		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	ere		▶□	1 1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	om the tax because it mainta	ined		
expenditure responsibility for the grant?	I.	I/A 🛄 Ye	s 🔲 No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?		☐ Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.	or other some contract.		ļ-	71
7a At any time during the tax year, was the foundation a party to a prohibited tax s	halter transaction?	□ v _e	s X No	1 1
b If "Yes," did the foundation receive any proceeds or have any net income attribu		16	. —	7b
Part VIII Information About Officers, Directors, Trust	oos Foundation Ma	nagere Highly		70
Paid Employees, and Contractors	ees, Foundation Ma	mayers, mymy		
List all officers, directors, trustees, foundation managers and their	compensation	`	·	
List all officers, directors, a distees, foundation managers and their	oomponeation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Expense
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
(a) Name and address	(b) Title, and average hours per week devoted to position		(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	Compensation	allowances
(a) Name and address SEE STATEMENT 11	(b) Title, and average hours per week devoted to position		(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	Compensation	allowances
	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	Compensation	allowances
	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	Compensation	allowances
	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	Compensation	allowances
	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	Compensation	allowances
	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	Compensation	allowances
	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	Compensation	allowances
	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	Compensation	allowances
	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	Compensation	allowances
	to position	(If not paid, enter -0-)	Compensation	allowances
SEE STATEMENT 11 2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	O .	allowances O.
SEE STATEMENT 11	to position Luded on line 1). If none, (b) Title, and average hours per week	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
SEE STATEMENT 11 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	luded on line 1). If none,	enter "NONE."	(d) Contributions to employee benefit plans	allowances O.
SEE STATEMENT 11 2 Compensation of five highest-paid employees (other than those inc	to position Luded on line 1). If none, (b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
SEE STATEMENT 11 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	to position Luded on line 1). If none, (b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
SEE STATEMENT 11 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	to position Luded on line 1). If none, (b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
SEE STATEMENT 11 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	to position Luded on line 1). If none, (b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
SEE STATEMENT 11 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	to position Luded on line 1). If none, (b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
SEE STATEMENT 11 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	to position Luded on line 1). If none, (b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
SEE STATEMENT 11 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	to position Luded on line 1). If none, (b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
SEE STATEMENT 11 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	to position Luded on line 1). If none, (b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other

Form **990-PF** (2015)

Total number of other employees paid over \$50,000

orm 990-PF (2015) C/O CITY NATIONAL BANK TRUST WEA		435910 Page /
Part VIII Information About Officers, Directors, Trustees, Foundate Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
GADDY ENGINEERING COMPANY		
303 WEST WASHINGTON ST, CHARLESTON, WV 25302	ENGINEERING	138,558.
MCGUIRE WOODS, LLP		
800 EAST CANAL ST, RICHMOND, VA 23219	LEGAL	72,656.
DINSMORE & SHOHL, LLP		
611 THIRD AVE, HUNTINGTON, WV 25701	LEGAL	64,823.
WHITEFORD, TAYLOR & PRESTON, LLP - 120		
PROSPEROUS PL, STE 101, LEXINGTON, KY 40509	LEGAL	62,187.
THOUSE THE STEE TOLY BELLEVOLULY THE EVOLUTION		3=1=3:5
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers prod	ical information such as the	Expenses
	0000, 010.	
1 <u>N/A</u>		
		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		
	j	

0.

Form **990-PF** (2015)

Total. Add lines 1 through 3

C/O CITY NATIONAL BANK TRUST WEALTH MGMT

	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dation	ns, see instructions.)
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	10,903,798.
	Average of monthly cash balances	1b	579,412.
	Fair market value of all other assets	1c	9,897,340.
d	Total (add lines 1a, b, and c)	1d	21,380,550.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	21,380,550.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	320,708.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	21,059,842.
6	Minimum investment return. Enter 5% of line 5	6	1,052,992.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certa	
1	Minimum investment return from Part X, line 6	1	1,052,992.
2a	Tax on investment income for 2015 from Part VI, line 5 2a 36, 106.		
b	Income tax for 2015. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c_	36,106.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,016,886.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,016,886.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,016,886.
Р	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	1,720,471.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	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	1,720,471.
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	5	<u> </u>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,720,471.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	jualifies	for the section

Form **990-PF** (2015)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see	e instructions)			
	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				1,016,886
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010 . 764,592.				
b From 2011 1,219,498.				
c From 2012				
d From 2013 1,201,692.				
e From 2014 <u>675,718.</u>				
f Total of lines 3a through e	3,861,500.			<u> </u>
4 Qualifying distributions for 2015 from				
Part XII, line 4: ▶ \$ 1,720,471.				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		·
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount	702 505			1,016,886.
e Remaining amount distributed out of corpus	703,585.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,565,085.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
e Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				<u> </u>
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.		<u></u>	0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				<u> </u>
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)	0.	<u> </u>		
8 Excess distributions carryover from 2010	564 500			
not applied on line 5 or line 7	764,592.			
9 Excess distributions carryover to 2016.	2 222 422			
Subtract lines 7 and 8 from line 6a	3,800,493.			
10 Analysis of line 9:				
a Excess from 2011 1,219,498.				
b Excess from 2012		-		
c Excess from 2013 1,201,692.	Ì			

BOARD OF TRUSTEES OF PRICHARD SCHOOL 55-0435910 Form 990-PF (2015) C/O CITY NATIONAL BANK TRUST WEALTH Page 10 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5) Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (a) 2015 (b) 2014 (c) 2013 (d) 2012 (e) Total income from Part I or the minimum investment return from Part X for each year listed b 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (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 c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here 🕨 🛄 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: EDWARD W. MORRISON, (304)523-3484 415 W WHITAKER BLVD, HUNTINGTON, WV 25701

b The form in which applications should be submitted and information and materials they should include:

NO PRESCRIBED FORM

c Any submission deadlines:

NO SUBMISSION DEADLINES

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

ONLY FOR EDUCATIONAL OR CHARITABLE PURPOSES TO ORGANIZATIONS CLASSIFIED UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE

BOARD OF TRUSTEES OF PRICHARD SCHOOL C/O CITY NATIONAL BANK TRUST WEALTH MGMT 55-0435910 Page 11 Form 990-PF (2015) 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 status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year SEE ATTACHED SCHEDULE SEE ATTACHED SCHEDULE 1,714,600. ▶ 3a 1 714 600 b Approved for future payment NONE

▶ 3b

Total

BOARD OF TRUSTEES OF PRICHARD SCHOOL C/O CITY NATIONAL BANK TRUST WEALTH MGMT

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Form 990-PF (2015)

523621 11-24-15

Part XVI-A Analysis of Income-Producing Activities

	Unrelated h	usiness income	Evolude	ed by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	Amount	Tunction moonie
a			 		
b			 -		
c			 		
d	<u> </u>		├ ├		
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 .			14	288,796.	
5 Net rental income or (loss) from real estate:			$\perp \perp \perp$		
Debt-financed property .					
b Not debt-financed property			16	17,359.	
6 Net rental income or (loss) from personal			1		
property			$\perp \perp$		
7 Other investment income			15	1,979,468.	
8 Gain or (loss) from sales of assets other	-				
than inventory			18	49,198.	
9 Net income or (loss) from special events			1		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			1 1		
a MISCELLANEOUS			14	2,383.	
b					
С					
d					
е					
12 Subtotal. Add columns (b), (d), and (e)		0.		2,337,204.	0.
13 Total. Add line 12, columns (b), (d), and (e)				. 13	2,337,204.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accon	nolishment of Ex	xempt	Purposes	
				_ 	
Line No. Explain below how each activity for which inco			A contribu	ited importantly to the accom	olishment of
the foundation's exempt purposes (other than	by providing fund	s for such purposes).			
					
				· · · · · · · · · · · · · · · · · · ·	
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				<u>,</u>	
523621 11-24-15					Form 990-PF (2015)

C/O CITY NATIONAL BANK TRUST WEALTH MGMT 55-0435910 Form 990-PF (2015) Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) X (2) Other assets 1a(2) Х **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization X 16(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) Х X (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements X 15(4) Х (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations Х 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees X d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements (a) Line no N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (b) Type of organization (c) Description of relationship (a) Name of organization N/A that I have examined this retain, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer shown below (see instr)? ther than taxpayer) is based on all information of which preparer has any knowledge Sign Here 8-5-16 PRESIDENT X Yes Nο Title Signature of officer or trustee Date eparer's sumature Date Check Print/Type preparer's name self- employed Paid P00115975 JOHN G. HESS Preparer Firm's EIN ► 55-0657218 CAMPBELL, PLLC Firm's name **HESS**, STEWART Use Only

WV 25713-1060

Phone no. (304) 523-6464

Firm's address ▶ P.O. BOX 1060

HUNTINGTON,

FORM 990-PF	RENTAL	INC	OME		STATEMENT	1
KIND AND LOCATION OF PROPERTY				ACTIVITY NUMBER	GROSS RENTAL INC	OME
REAL ESTATE				1	17,3	59.
TOTAL TO FORM 990-PF, PART I,	LINE 5A			=	17,3	59.
FORM 990-PF	ОТНЕ	RIN	COME		STATEMENT	2
DESCRIPTION			(A) REVENUE ER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTE NET INCO	
COAL ROYALTIES GAS ROYALTIES MISCELLANEOUS	-		1,962,386. 17,082. 2,383.	1,962,386. 17,082. 2,383.	•	-
TOTAL TO FORM 990-PF, PART I,	LINE 11		1,981,851.	1,981,851.		
FORM 990-PF	LEC	GAL	FEES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOM		(B) NET INVEST- MENT INCOME			
LEGAL	216,8	25.	216,825	•		0.
TO FM 990-PF, PG 1, LN 16A =	216,8	25.	216,825	•		0.
FORM 990-PF	ACCOU	NTIN	G FEES		STATEMENT	4
DESCRIPTION	(A) EXPENSE: PER BOO		(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	
ACCOUNTING	5,8	00.	5,220	•	5	80.
TO FORM 990-PF, PG 1, LN 16B	5,8	00.	5,220	•	5	80.

FORM 990-PF	OTHER PROFES	SIONAL FEES		STATEMENT !
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
CITY NATIONAL BANK FOR ANNUAL AGENCY FEES	48,391.	48,391.		0
ENGINEERING	138,558.	138,558.		0
TO FORM 990-PF, PG 1, LN 160	186,949.	186,949.		0
FORM 990-PF	TAX	ES		STATEMENT (
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
EXCISE TAX PROPERTY TAX	72,223. 3,075.			0
TO FORM 990-PF, PG 1, LN 18	75,298.	75,298.		0
FORM 990-PF	OTHER E	XPENSES		STATEMENT '
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
INSURANCE	52,914.	47,623.		5,291
TO FORM 990-PF, PG 1, LN 23	52,914.	47,623.		5,291
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 8
FORM 990-PF DESCRIPTION	CORPORAT		OK VALUE	STATEMENT 8 FAIR MARKET VALUE
	CORPORAT		OK VALUE 6,261,296.	FAIR MARKET

FORM 990-PF C	ORPORATE BONDS		STATEMENT 9
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE BONDS		4,442,698.	4,442,698.
TOTAL TO FORM 990-PF, PART II, LI	NE 10C	4,442,698.	4,442,698.
FORM 990-PF	OTHER ASSETS		STATEMENT 10
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
REAL ESTATE MINERAL INTEREST EXCISE TAX DEPOSIT	38,711. 16,520.	38,711.	9,897,340.
TO FORM 990-PF, PART II, LINE 15	55,231.	38,711.	9,897,340.

FORM 990-PF PART VIII - I TRUSTEES A	IST OF OFFICERS, DI	STATI	EMENT 11	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
EDWARD W. MORRISON, JR 415 WHITAKER BLVD HUNTINGTON, WV 25701	PRESIDENT 0.00	0.	0.	0.
MARC WILD 1104 5TH AVENUE HUNTINGTON, WV 25701	VICE PRESIDENT 0.00	0.	0.	0.
DON O'DELL PO BOX 2488 HUNTINGTON, WV 25725	SECRETARY/TREAS	SURER 0.	0.	0.
SHARON FRAZIER 1501 ENSLOW BLVD HUNTINGTON, WV 25701	DIRECTOR 0.00	0.		0 .
JOHN SPEER PO BOX 1743 HUNTINGTON, WV 25718	DIRECTOR 0.00	0.	0.	0.
ELIZABETH B. JENKINS 306 HOLSWADE DRIVE HUNTINGTON, WV 25701	DIRECTOR 0.00	0.	0.	0.
STEVE HATTEN 501 E MCBEE AVE, STE 101 GREENVILLE, SC 29601	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	E 6, PART VIII	0.	0.	0.

Board of Trustees of Prichard School	
F.E.I.N.: 55-0435910	
Form 990PF (2015)	
Part XV (Supplementary Information)	
. Grants	
(a) Paid during 2015	
Boys' and Girls' Club of Huntington	\$ 10,000
Address: 520 Everett Street	
Huntington, WV 25701	
Purpose: Charitable activities of	
the recipient organization	
Children's Place	
Address: 625 Richmond Street	25,000
Huntington, WV	
Purpose: Charitable activities of	
the recipient organization	
Davis & Elkins College	15,000
Address Elkins, WV 26241	
Purpose: Educational scholarships	
at Davis & Elkins College	
Davis-Stuart School	25,000
Address: Lewisburg, WV 24901	
Purpose: Educational and charitable	
activities of the recipient institution	
Contact Rape Crisis Center	20,000
Address: P.O. Box 2963	
Huntington, WV 25728	
Purpose: Charitable activities of	
the recipient organization	
Dress for Success River Cities	60,000
Address: 1141 4th Avenue	
Huntington, WV 25701	
Purpose: Charitable activities of	
the recipient organization	
Campus Christian Center	22,500
Address: Marshall University	
Huntington, WV 25701	
Purpose: Ministry to students	
and public at large	

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Form 9 Part X	I.: 55-0435910 90PF (2015)	
Part X	90PF (2015)	
3. Grai	V (Supplementary Information)	
3. Grai		
1	nts (continued)	
	Fig. 60	5.00
.	First Stage Theater Company Address: PO Box 4	5,00
<u> </u>	Huntington, WV 25706-0004	
	Purpose: Opportunities for children	
	to develop social and communication	
<u> </u>	skills through fine arts productions	
-	skins through the arts productions	
	First Presbyterian Church of Huntington	10,000
	Address: 1015 Fifth Avenue	
	Huntington, WV 25701	
	Purpose: Charitable activities of	
	the recipient organization	
	Green Acres Regional Center, Inc.	15,000
	Address: Rt. 2, Box 115	
	Lesage, WV 25537	
	Purpose: Educational and charitable	
ļ	activities of the recipient organization	
<u> </u>	Christian Associates, Inc FBO	45,000
ļ	Cridlin Food & Clothing Pantry	
	Address: 520 11th Street	
 	Huntington, WV 25701 Purpose: Charitable activities of	
	the recipient organization	
-	the recipient organization	
 	HER Place Family Recovery Program	20,000
	Address: 1524 10th Ave	
	Huntington, WV 25701	
	Purpose: Provide education and recovery	
	from alcohol and drug addiction.	
	Huntington Museum of Art	15,000
	Address: Park Hills,	
	Huntington, WV 25701	
	Purpose: Educational and charitable	
ļ	activities of the recipient institution	
<u> </u>		25.000
	Huntington Symphony Orchestra	35,000
	Address: 800 Fifth Avenue	
ļ	Huntington, WV 25701 Purpose: Charitable activities of	
	the recipient organization	
}	the recipient organization	

Board of Trustees of Prichard School	
F.E.I.N.: 55-0435910	
Form 990PF (2015)	
Part XV (Supplementary Information)	
. Grants (continued)	
Big Brothers - Big Sisters	30,000
of the Tri-State	
Address: 910 Fourth Avenue	
Huntington, WV 25701	
Purpose: Charitable activities of	
the recipient organization	
The state of the s	
Developmental Therapy Center	25,000
Address: 845 4th Avenue, #302A	25,000
Huntington, WV	
Purpose: Charitable activities of	
the recipient organization	
the recipient organization	
Golden Girl Group Home	225,000
Address: PO Box 876	223,000
·—	
Ceredo, WV 25507	
Purpose: Home for girls	
Make-A-Wish Foundation	5,000
Address: 623 Lee Street	
Charleston, WV 25302	
Purpose: Charitable activities of	
the recipient organization	
Marshall University Foundation	25,000
Address: Huntington, WV 25701	
Purpose: Educational scholarships	
at Marshall University	
Hospice of Huntington	10,000
Address: 1101 6th Ave	
Huntington, WV 25701	
Purpose: Charitable activities of	
the recipient organization	
Hospice of Huntington	37,500
Address: 1101 6th Ave	
Huntington, WV 25701	
Purpose: Charitable activities of	
the recipient organization	
wie resignation	
Operation B.E.S.T.	8,200
Address: 729 7th Ave., Suite 126	6,200
Huntington, WV 25701 Purpose: Charitable activities of	
the recipient organization	

Board of Trustees of Prichard School	
F.E.I.N.: 55-0435910	
Form 990PF (2015)	
Part XV (Supplementary Information)	
rart XV (Supplementary Information)	
2 Cronto (continued)	
3. Grants (continued)	
I iluta Diago	60,000
Lily's Place Address: P.O. Box 2	60,000
Huntington, WV 25706	
Purpose: Pediatric Addiction	
Columbian America	40,000
Salvation Army	40,000
Address: 1223 3rd Avenue	
Huntington, WV 25701	
Purpose: Charitable activities of	
the recipient organization	
V Life II	75,000
Young Life Huntington	75,000
Address: PO Box 505	
Huntington, WV 25710	
Purpose: Charitable activities of	
the recipient organization	
	5,000
Greater Huntington Park & Recreation	5,000
Address: 210 11th Street	
Huntington, WV 25701	
Purpose: Charitable activities of	
the recipient organization	
WVU Extension Agent 4th Youth Development	5,000
Address: 314 Monroe St.	
Fairmont, WV 26554	
Purpose: Charitable activities of	
the recipient organization	
Ronald McDonald House	20,000
Address: Huntington, WV 25701	
Purpose: Charitable activities of	
the recipient organization	
Young Life Camp Summerville	25,000
Address: PO Box 505	
Huntington, WV 25710	
Purpose: Charitable activities of	
the recipient organization	
Marshall University Foundation	10,000
School of Medicine	
Address: Huntington, WV 25701	
Purpose: Educational scholarships	
at Marshall University	

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oard of Trustees	of Pricha	ard Sch	ool				
E.I.N.: 55-0435	910						
orm 990PF (2015	5)						
art XV (Supplem		iformat	ion)				
. Grants (continue	ed)	-					
Boys' and	Girls' Clu	b of Hu	ntington				10,000
	520 Ever						
	ton, WV		i i				
Purpose:			ies of				
	ient organ		T				
1.0.1001	Tent organ		-				
Children's	Place		 				25,000
	625 Rich	mond St	reet				25,000
	ton, WV	inond bi	1				
Purpose:		e activit	ies of			. —	
	ient organ		103 01				
the recip	Tent organ	iizatiUil	 	<u> </u>			
Marshall	Universit	Found	l	 			25,000
							23,000
	Huntingto						-
Purpose:			larships				
at Marsi	all Unive	rsity					
D:- 0. I	711-i C-1	1	ļ				15,000
Davis & I			4.1				15,000
Address:							
Purpose:							
at Davis	& Elkins	College					
							27.000
	art Schoo		<u></u>				25,000
	Lewisbur						
Purpose:							
activitie	s of the re	cipient i	nstitution	<u> </u>			
Contact R	ape Crisis	<u>Center</u>					20,000
	P.O. Box		L				
	gton, WV		<u></u>				
Purpose:							
the recip	ient organ	nization					
	Christian C						22,500
Address:	Marshall	Universi	ity				
Huntin	gton, WV	25701					
Purpose:	Ministry to	o studen	its				
	ic at large						
	Ť						
Huntingto	n High So	chool G	een BLD	G Turf			23,000
	1 Highlan						
	gton, WV						
Purpose							·
	activities						·
			 				

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l of Trustees of Prichard School	
N.: 55-0435910	
990PF (2015)	
(V (Supplementary Information)	
ants (continued)	
Explorer Academy	25,000
68 Holley Ave	
Huntington, WV 25705	
Purpose: Charitable activities of	
the recipient organization	
First Presbyterian Church of Huntington	28,400
Address: 1015 Fifth Avenue	
Huntington, WV 25701	
Purpose: Charitable activities of	
the recipient organization	
Boone County Community Foundation	500
Address: 330 State Street	
Madison, WV 25130	
Purpose: Charitable activities of	
the recipient organization	
Green Acres Regional Center, Inc.	15,000
Address: Rt. 2, Box 115	
Lesage, WV 25537	
Purpose: Educational and charitable	
activities of the recipient organization	
Christian Associates, Inc FBO	
Cridlin Food & Clothing Pantry	45,000
Address: 520 11th Street	
Huntington, WV 25701	
Purpose: Charitable activities of	
the recipient organization	
Cabell County Health Dept.	10,000
Address: 703 7th Ave	
Huntington, WV 25701	
Purpose: Charitable activities of	
the recipient organization	
Cabell Huntington Coalition for Homeless	5,000
Address: 627 4th Ave	
Hutington, WV 25701	
Purpose: Charitable activities of	
the recipient organization	
are recipions or Bannacion	
	

Board of Trustees of Prici	nard Sch	ool					
F.E.I.N.: 55-0435910	lar d och						
Form 990PF (2015)							
Part XV (Supplementary	Informat	ion)					
Tart AV (Supplementary	luivi mat	1011)				·	
3. Grants (continued)							
3. Grants (continued)		ļ <u>.</u>					-
IIED DI E : II-	D	D				20.000	
HER Place Family		<u>y Progran</u> I	<u>n</u>			20,000	
Address: 1524 10t							
Huntington, W		<u> </u>	<u>. </u>				
Purpose: Provide			very		-		
from alcohol an	d drug ad	diction.	ļ				
	L					1.7.000	
Huntington Museu						15,000	
Address: Park Hi					-		
Huntington, WV		l					
Purpose: Education							
activities of the r	ecipient i	nstitution		<u> </u>			
	İ						
Huntington Muser			-	<u> </u>		25,000	
Address: Park Hi							
Huntington, WV							
Purpose: Education							
activities of the r	ecipient i	nstitution					
		l					
Huntington Sympl	nony Orch	<u>nestra</u>				35,000	
Address: 800 Fift	h Avenue	;					
Huntington, W							
Purpose: Charital	ole activit	ies of					
the recipient or	ganization	1					
Big Brothers - Big	Sisters						
of the Tri-State						30,000	
Address: 910 Fou	rth Aven	ue					
Huntington, W	V 25701						
Purpose: Charital	ole activit	ies of					
the recipient or	ganization	1					
	Ĭ						
Golden Girl Group	o Home					175,000	
Address: PO Box	876						
Ceredo, WV 25	5507						-
Purpose: Home fo							
Hospice of Huntin	igton					10,000	
Address: 1101 6th							
Huntington, W							
Purpose: Charitab		es of					
the recipient orga							
		†					
 				<u> </u>			
<u> </u>							

F.E.I.N.: 55-0435910	
Form 990PF (2015)	
Part XV (Supplementary Information)	
3. Grants (continued)	
Hospice of Huntington	37,500
Address: 1101 6th Ave	
Huntington, WV 25701	
Purpose: Charitable activities of	
the recipient organization	
Operation B.E.S.T.	9,500
Address: 729 7th Ave., Suite 126	
Huntington, WV 25701	
Purpose: Charitable activities of	
the recipient organization	
Recovery Point	20,000
Address: 2425 9th Ave	
Huntington WV, 25703	
Purpose: Charitable activities of	
the recipient organization	
Lily's Place	40,000
Address: P.O. Box 2	
Huntington, WV 25706	
Purpose: Pediatric Addiction	
	 75.000
Young Life Huntington	 75,000
Address: PO Box 505	
Huntington, WV 25710	
Purpose: Charitable activities of	
the recipient organization	
Gross contributions	\$ 1 714 600
Gross contributions	 1,714,600

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