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Form **990-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 separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf)

OMB No. 1545-0052

**2015**

Open to Public Inspection

For calendar year 2015 or tax year beginning

, 2015, and ending

, 20

Name of foundation <b>BB&amp;T WEST VIRGINIA FOUNDATION INC</b>		A Employer identification number <b>55-6017269</b>
Number and street (or P.O. box number if mail is not delivered to street address)	Room/suite	B Telephone number (see instructions) <b>919-716-9045</b>
PO BOX 2907 - TRUST TAX DEPT		
City or town, state or province, country, and ZIP or foreign postal code <b>WILSON, NC 27894-2907</b>		
G Check all that apply:		
<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity	
<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return	
<input type="checkbox"/> Address change	<input type="checkbox"/> Name change	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation		
<input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <b>10,449,520.</b>		
J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual		
Other (specify) _____		
(Part I, column (d) must be on cash basis.)		
		C If exemption application is pending, check here . . . . . <input type="checkbox"/>
		D 1. Foreign organizations, check here . . . . . <input type="checkbox"/>
		2. Foreign organizations meeting the 85% test, check here and attach computation . . . . . <input type="checkbox"/>
		E If private foundation status was terminated under section 507(b)(1)(A), check here . . . . . <input type="checkbox"/>
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here . . . . . <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)		100,000.			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B. . . . .					
3 Interest on savings and temporary cash investments.					
4 Dividends and interest from securities . . . . .		235,783.	235,783.		
5a Gross rents . . . . .					
b Net rental income or (loss) . . . . .					
6a Net gain or (loss) from sale of assets not on line 10		120,950.			
b Gross sales price for all assets on line 6a <b>5,244,036.</b>					
7 Capital gain net income (from Part IV, line 2) . . . . .			120,950.		
8 Net short-term capital gain. . . . .					
9 Income modifications . . . . .					
10a Gross sales less returns and allowances . . . . .					
b Less Cost of goods sold . . . . .					
c Gross profit or (loss) (attach schedule) . . . . .					
11 Other income (attach schedule) . . . . .					
12 Total. Add lines 1 through 11 . . . . .		456,733.	356,733.		
13 Compensation of officers, directors, trustees, etc. . . . .					
14 Other employee salaries and wages . . . . .			NONE	NONE	
15 Pension plans, employee benefits . . . . .			NONE	NONE	
16a Legal fees (attach schedule) . . . . .					
b Accounting fees (attach schedule) . . . . .		1,000.			1,000.
c Other professional fees (attach schedule) . . . . .		1,300.			1,300.
17 Interest . . . . .					
18 Taxes (attach schedule) (see instructions) . . . . .		28,477.	4,411.		
19 Depreciation (attach schedule) and depletion . . . . .					
20 Occupancy . . . . .					
21 Travel, conferences, and meetings . . . . .			NONE	NONE	
22 Printing and publications . . . . .			NONE	NONE	
23 Other expenses (attach schedule) . . . . .		830.	830.		
24 Total operating and administrative expenses. Add lines 13 through 23. . . . .		31,607.	5,241.	NONE	2,300.
25 Contributions, gifts, grants paid . . . . .		656,170.			656,170.
26 Total expenses and disbursements. Add lines 24 and 25 . . . . .		687,777.	5,241.	NONE	658,470.
27 Subtract line 26 from line 12: . . . . .					
a Excess of revenue over expenses and disbursements . . . . .		-231,044.			
b Net investment income (if negative, enter -0-) . . . . .			351,492.		
c Adjusted net income (if negative, enter -0-) . . . . .					

JSA For Paperwork Reduction Act Notice, see instructions.

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<b>Part II Balance Sheets</b>		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
<b>Assets</b>	1	Cash - non-interest-bearing . . . . .	-244,377.	11,733.	11,733.
	2	Savings and temporary cash investments . . . . .	465,938.	298,835.	298,835.
	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 (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ . . . . .			
		Less: allowance for doubtful accounts ▶ . . . . .	NONE		
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments - U S and state government obligations (attach schedule) . . . . .			
	b	Investments - corporate stock (attach schedule) . . . . .	6,537,264.	7,005,763.	6,881,939.
	c	Investments - corporate bonds (attach schedule) . . . . .	3,019,391.	2,975,007.	2,841,983.
	<b>Liabilities</b>	11	Investments - land, buildings, and equipment basis . . . . .		
		Less: accumulated depreciation (attach schedule) ▶ . . . . .			
12		Investments - mortgage loans . . . . .			
13		Investments - other (attach schedule) . . . . .	1,159,672.	416,540.	415,030.
14		Land, buildings, and equipment basis . . . . .			
		Less: accumulated depreciation (attach schedule) ▶ . . . . .			
15		Other assets (describe ▶ . . . . .)			
16		<b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I) . . . . .	10,937,888.	10,707,878.	10,449,520.
17		Accounts payable and accrued expenses . . . . .			
18		Grants payable . . . . .			
<b>Net Assets or Fund Balances</b>	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons . . . . .			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ . . . . .)			
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .		NONE	
		<b>Foundations that follow SFAS 117, check here . ▶</b> <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
		<b>Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.</b> <input checked="" type="checkbox"/> <b>X</b>			
27	Capital stock, trust principal, or current funds . . . . .	10,937,888.	10,707,878.		
28	Paid-in or capital surplus, or land, bldg, and equipment fund . . . . .				
29	Retained earnings, accumulated income, endowment, or other funds . . . . .				
30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	10,937,888.	10,707,878.		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	10,937,888.	10,707,878.		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	1	10,937,888.
2	Enter amount from Part I, line 27a . . . . .	2	-231,044.
3	Other increases not included in line 2 (itemize) ▶ <b>ADJUSTMENT FOR MUTUAL FUND POSTINGS</b> . . . . .	3	1,040.
4	Add lines 1, 2, and 3 . . . . .	4	10,707,884.
5	Decreases not included in line 2 (itemize) ▶ <b>ROUNDING</b> . . . . .	5	6.
6	<b>Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 . . . . .</b>	6	<b>10,707,878.</b>

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a PUBLICLY TRADED SECURITIES</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
<b>a</b> 5,244,036.		5,123,086.	120,950.		
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
<b>a</b>			120,950.		
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>2 Capital gain net income or (net capital loss)</b> { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }			<b>2</b>	120,950.	
<b>3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):</b> If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 . . . . .			<b>3</b>		

**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.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.**

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2014	625,288.	11,151,069.	0.056074
2013	594,188.	10,798,590.	0.055025
2012	628,225.	10,266,457.	0.061192
2011	554,421.	10,315,333.	0.053747
2010	550,938.	9,814,749.	0.056134
<b>2 Total of line 1, column (d) . . . . .</b>			<b>2</b> 0.282172
<b>3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . . .</b>			<b>3</b> 0.056434
<b>4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5 . . . . .</b>			<b>4</b> 10,822,656.
<b>5 Multiply line 4 by line 3 . . . . .</b>			<b>5</b> 610,766.
<b>6 Enter 1% of net investment income (1% of Part I, line 27b) . . . . .</b>			<b>6</b> 3,515.
<b>7 Add lines 5 and 6 . . . . .</b>			<b>7</b> 614,281.
<b>8 Enter qualifying distributions from Part XII, line 4 . . . . .</b> 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.			<b>8</b> 658,470.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. . . . .			
Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b. . . . .		1	3,515.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . . . . .		2	
3 Add lines 1 and 2. . . . .		3	3,515.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . . . . .		4	NONE
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- . . . . .		5	3,515.
6 Credits/Payments:			
a 2015 estimated tax payments and 2014 overpayment credited to 2015. . . . .	6a	20,232.	
b Exempt foreign organizations - tax withheld at source. . . . .	6b	NONE	
c Tax paid with application for extension of time to file (Form 8868). . . . .	6c	NONE	
d Backup withholding erroneously withheld. . . . .	6d		
7 Total credits and payments. Add lines 6a through 6d. . . . .	7	20,232.	
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached. . . . .	8		
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 overpaid. . . . .	10	16,717.	
11 Enter the amount of line 10 to be credited to 2016 estimated tax. <input checked="" type="checkbox"/> 3,516. Refunded <input type="checkbox"/> 13,201.	11		

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? . . . . . If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year? . . . . .		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes. . . . .		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		X
b If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> WV		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation. . . . .	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV. . . . .		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. . . . . STMT 1		X

**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	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	13	X
14 The books are in care of ► <u>BRANCH BANKING &amp; TRUST COMPANY</u> Telephone no. ► <u>(304) 348-7271</u> Located at ► <u>BB&amp;T SQUARE, CHARLESTON, WV</u> ZIP+4 ► <u>25301</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here . . . . . ► <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . ► <u>15</u>		
16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, 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**

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? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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)? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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 . . . . . ► <input type="checkbox"/>		
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? . . . . .	1c	X
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)).		
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 before 2015? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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 statement - see instructions.) . . . . .	2b	X
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 during the year? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
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?	4b	X

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

**5a** During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ Yes ☒ No  
Organizations relying on a current notice regarding disaster assistance check here ☐

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☒ No  
If "Yes," attach the statement required by Regulations section 53.4945-5(d).

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No  
If "Yes" to 6b, file Form 8870

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(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
SEE STATEMENT 2				

**2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE		NONE	NONE	NONE

Total number of other employees paid over \$50,000 ☐ NONE

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**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**3 Five highest-paid independent contractors for professional services** (see instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		NONE
<b>Total number of others receiving over \$50,000 for professional services</b> . . . . . ▶		NONE

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<b>1</b> NONE	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**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.	Amount
<b>1</b> NONE	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b> NONE	
<b>Total.</b> Add lines 1 through 3 . . . . . ▶	

Form 990-PF (2015)



**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities . . . . .	<b>1a</b>	10,797,391.
<b>b</b>	Average of monthly cash balances . . . . .	<b>1b</b>	190,077.
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	NONE
<b>d</b>	<b>Total</b> (add lines 1a, b, and c) . . . . .	<b>1d</b>	10,987,468.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . .	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets . . . . .	<b>2</b>	NONE
<b>3</b>	Subtract line 2 from line 1d . . . . .	<b>3</b>	10,987,468.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	164,812.
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 . . . . .	<b>5</b>	10,822,656.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5 . . . . .	<b>6</b>	541,133.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6 . . . . .	<b>1</b>	541,133.
<b>2a</b>	Tax on investment income for 2015 from Part VI, line 5 . . . . .	<b>2a</b>	3,515.
<b>b</b>	Income tax for 2015. (This does not include the tax from Part VI.) . . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b . . . . .	<b>2c</b>	3,515.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .	<b>3</b>	537,618.
<b>4</b>	Recoveries of amounts treated as qualifying distributions . . . . .	<b>4</b>	NONE
<b>5</b>	Add lines 3 and 4 . . . . .	<b>5</b>	537,618.
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	NONE
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 . . . . .	<b>7</b>	537,618.

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 . . . . .	<b>1a</b>	658,470.
<b>b</b>	Program-related investments - total from Part IX-B . . . . .	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .	<b>2</b>	NONE
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required) . . . . .	<b>3a</b>	NONE
<b>b</b>	Cash distribution test (attach the required schedule) . . . . .	<b>3b</b>	NONE
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 . . . . .	<b>4</b>	658,470.
<b>5</b>	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) . . . . .	<b>5</b>	3,515.
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .	<b>6</b>	654,955.

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
<b>1</b> Distributable amount for 2015 from Part XI, line 7 . . . . .				537,618.
<b>2</b> Undistributed income, if any, as of the end of 2015				
<b>a</b> Enter amount for 2014 only. . . . .			NONE	
<b>b</b> Total for prior years: 20 <u>13</u> , 20 <u>  </u> , 20 <u>  </u> . . . . .		NONE		
<b>3</b> Excess distributions carryover, if any, to 2015.				
<b>a</b> From 2010 . . . . .	68,417.			
<b>b</b> From 2011 . . . . .	70,211.			
<b>c</b> From 2012 . . . . .	125,760.			
<b>d</b> From 2013 . . . . .	66,209.			
<b>e</b> From 2014 . . . . .	87,966.			
<b>f</b> Total of lines 3a through e . . . . .	418,563.			
<b>4</b> Qualifying distributions for 2015 from Part XII, line 4: ► \$ <u>658,470.</u>				
<b>a</b> Applied to 2014, but not more than line 2a . . . . .			NONE	
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions) . . . . .		NONE		
<b>c</b> Treated as distributions out of corpus (Election required - see instructions) . . . . .	NONE			
<b>d</b> Applied to 2015 distributable amount . . . . .				537,618.
<b>e</b> Remaining amount distributed out of corpus. . . . .	120,852.			
<b>5</b> Excess distributions carryover applied to 2015. (If an amount appears in column (d), the same amount must be shown in column (a).)	NONE			NONE
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 . . . . .	539,415.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .		NONE		
<b>c</b> 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 . . . . .		NONE		
<b>d</b> Subtract line 6c from line 6b. Taxable amount - see instructions . . . . .		NONE		
<b>e</b> Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see instructions . . . . .			NONE	
<b>f</b> Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016. . . . .				NONE
<b>7</b> 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) . . . . .	NONE			
<b>8</b> Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions) . . . . .	68,417.			
<b>9</b> Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a . . . . .	470,998.			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2011 . . . . .	70,211.			
<b>b</b> Excess from 2012 . . . . .	125,760.			
<b>c</b> Excess from 2013 . . . . .	66,209.			
<b>d</b> Excess from 2014 . . . . .	87,966.			
<b>e</b> Excess from 2015 . . . . .	120,852.			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

NOT APPLICABLE

**1a** 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)

	Tax year	Prior 3 years			(e) Total
	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test - enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .					
<b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . . . .					
<b>c</b> "Support" alternative test - enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .					
<b>(3)</b> Largest amount of support from an exempt organization . . . . .					
<b>(4)</b> 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.)**1 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.

NONE

**2 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:

SEE STATEMENT 6

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

SEE ATTACHED STATEMENT FOR LINE 2

**c** Any submission deadlines:

SEE ATTACHED STATEMENT FOR LINE 2

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

SEE ATTACHED STATEMENT FOR LINE 2

**Part XV** **Supplementary Information** *(continued)***3 Grants and Contributions Paid During the Year or Approved for Future Payment**

<b>Recipient</b> <b>Name and address (home or business)</b>	<b>If recipient is an individual, show any relationship to any foundation manager or substantial contributor</b>	<b>Foundation status of recipient</b>	<b>Purpose of grant or contribution</b>	<b>Amount</b>
<b>a Paid during the year</b>  SEE STATEMENT 34				656,170.
<b>Total</b> .....			<b>3a</b>	656,170.
<b>b Approved for future payment</b>				
<b>Total</b> .....			<b>3b</b>	

## 16 -

**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

- | 1 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? |                                                                                                                                                                                                                                                                                                                                                                                              | Yes   | No |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----|
| <b>a</b>                                                                                                                                                                                                                                              | Transfers from the reporting foundation to a noncharitable exempt organization of:                                                                                                                                                                                                                                                                                                           |       |    |
|                                                                                                                                                                                                                                                       | (1) Cash . . . . .                                                                                                                                                                                                                                                                                                                                                                           | 1a(1) | X  |
|                                                                                                                                                                                                                                                       | (2) Other assets . . . . .                                                                                                                                                                                                                                                                                                                                                                   | 1a(2) | X  |
| <b>b</b>                                                                                                                                                                                                                                              | Other transactions:                                                                                                                                                                                                                                                                                                                                                                          |       |    |
|                                                                                                                                                                                                                                                       | (1) Sales of assets to a noncharitable exempt organization . . . . .                                                                                                                                                                                                                                                                                                                         | 1b(1) | X  |
|                                                                                                                                                                                                                                                       | (2) Purchases of assets from a noncharitable exempt organization . . . . .                                                                                                                                                                                                                                                                                                                   | 1b(2) | X  |
|                                                                                                                                                                                                                                                       | (3) Rental of facilities, equipment, or other assets . . . . .                                                                                                                                                                                                                                                                                                                               | 1b(3) | X  |
|                                                                                                                                                                                                                                                       | (4) Reimbursement arrangements . . . . .                                                                                                                                                                                                                                                                                                                                                     | 1b(4) | X  |
|                                                                                                                                                                                                                                                       | (5) Loans or loan guarantees . . . . .                                                                                                                                                                                                                                                                                                                                                       | 1b(5) | X  |
|                                                                                                                                                                                                                                                       | (6) Performance of services or membership or fundraising solicitations . . . . .                                                                                                                                                                                                                                                                                                             | 1b(6) | X  |
| <b>c</b>                                                                                                                                                                                                                                              | Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . .                                                                                                                                                                                                                                                                                                   | 1c    | X  |
| <b>d</b>                                                                                                                                                                                                                                              | 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. |       |    |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

[illegible]

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of Officer or trustee **JOHN BARRY** Date **03/16/2016**

**DIRECTOR**  
Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

**Paid  
Preparer  
Use Only**

Print/Type preparer's name <b>CAROLYN L BRACEY</b>	Preparer's signature <i>Carolyn L Bracey</i>	Date <b>03/16/2016</b>	Check <input type="checkbox"/> if self-employed	PTIN <b>P01220124</b>
Firm's name ▶ <b>BRANCH BANKING AND TRUST CO</b>	Firm's EIN ▶ <b>56-0149200</b>			
Firm's address ▶ <b>PO BOX 2907 WILSON, NC 27894</b>	Phone no. <b>252-246-4394</b>			

**Schedule of Contributors**

OMB No 1545-0047

**2015**

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**

▶ **Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)**

**Name of the organization**

**Employer identification number**

BB&T WEST VIRGINIA FOUNDATION INC

55-6017269

**Organization type** (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

☐ 501(c)( ) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

**Name of organization**

BB&amp;T WEST VIRGINIA FOUNDATION INC

**Employer identification number**

55-6017269

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BB&T BB&T SQUARE CHARLESTON, WV 25301	\$ 100,000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



BB&T WEST VIRGINIA FOUNDATION INC

55-6017269

FORM 990PF, PART VII-A - NEW SUBSTANTIAL CONTRIBUTORS

=====

NAME AND ADDRESS

-----

BB&T

BB&T SQUARE

CHARLESTON, WV 25301

STATEMENT 1

## FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

## =====

## OFFICER NAME:

MRS PHYLLIS H. ARNOLD

## ADDRESS:

P. O. BOX 1793

CHARLESTON, WV 25326

## TITLE:

MEMBER &amp; TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

## OFFICER NAME:

MRS NELLE RATRIE CHILTON

## ADDRESS:

P. O. BOX 311

CHARLESTON, WV 25321

## TITLE:

MEMBER &amp; TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

## OFFICER NAME:

MR. C. EDWARD GAUNCH

## ADDRESS:

524 WOODBRIDGE DRIVE

CHARLESTON, WV 25301

## TITLE:

MEMBER &amp; TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

## OFFICER NAME:

MR J. HOLMES MORRISON

## ADDRESS:

P. O. BOX 1793

CHARLESTON, WV 25326

## TITLE:

MEMBER &amp; TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

## FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

## =====

## OFFICER NAME:

MR. CALVIN E. BARKER

## ADDRESS:

466 HIGH STREET

MORGANTOWN, WV 25605

## TITLE:

MEMBER &amp; TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

## OFFICER NAME:

MR. STEVEN M. RUBIN

## ADDRESS:

1700 PENNSYLVANIA AVENUE

CHARLESTON, WV 25302

## TITLE:

MEMBER &amp; TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

## OFFICER NAME:

MR. K. RICHARD C. SINCLAIR

## ADDRESS:

P. O. BOX 757

ST ALBANS, WV 25177

## TITLE:

MEMBER &amp; TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

## OFFICER NAME:

DR. EDWIN H. WELCH

## ADDRESS:

2300 MACCORKLE AVENUE, SE

CHARLESTON, WV 25304

## TITLE:

MEMBER &amp; TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

OFFICER NAME:

MR. JOHN M. BARRY

ADDRESS:

P. O. BOX 1793

CHARLESTON, WV 25326

TITLE:

EXECUTIVE DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

## AVERAGE MONTHLY FMV - 990PF, PART X, LINES 1a-1c

=====

MONTH -----	LINE 1a-FMV SECURITIES -----	LINE 1b-FMV CASH BALANCES -----	LINE 1c-FMV OTHER ASSETS -----
JANUARY	10,975,552.	201,654.	
FEBRUARY	11,345,809.	208,103.	
MARCH	11,304,542.	130,442.	
APRIL	11,420,518.	103,628.	
MAY	11,205,507.	215,414.	
JUNE	10,917,273.	196,172.	
JULY	10,944,646.	152,031.	
AUGUST	10,444,230.	57,234.	
SEPTEMBER	10,043,994.	183,112.	
OCTOBER	10,423,239.	258,651.	
NOVEMBER	10,404,424.	263,913.	
DECEMBER	10,138,952.	310,567.	
	-----	-----	-----
TOTAL	129,568,686.	2,280,921.	
	=====	=====	=====
AVERAGE FMV	10,797,391.	190,077.	
	=====	=====	=====

BB&T WEST VIRGINIA FOUNDATION INC  
FORM 990PF, PART XV - LINES 2a - 2d  
=====

55-6017269

RECIPIENT NAME:

JOHN M BARRY, BRANCH BANKING & TRUST CO  
ADDRESS:

P. O. BOX 1793  
CHARLESTON, WV 25326  
RECIPIENT'S PHONE NUMBER: 304-348-7271  
FORM, INFORMATION AND MATERIALS:  
SEE ATTACHED APPLICATION  
SUBMISSION DEADLINES:  
NOVEMBER 1  
RESTRICTIONS OR LIMITATIONS ON AWARDS:  
WEST VIRGINIA ORGANIZATIONS ONLY

STATEMENT 6

RECIPIENT NAME:  
ALLOHAK COUNCIL, BSA  
ADDRESS:  
1340 JULIANA STREET  
PARKERSBURG, WV 26101  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 1,500.

RECIPIENT NAME:  
CHARLES T MATHENA CENTER  
ADDRESS:  
TWO STAFFORD COMMONS  
PRINCETON, WV 24740  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 1,500.

RECIPIENT NAME:  
PROTEC  
ADDRESS:  
PO BOX 167  
SCOTT DEPOT, WV 25560  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 3,000.

RECIPIENT NAME:  
WEST VIRGINIA SENIOR SPORTS CLASSIC  
ADDRESS:  
602 TENNESSEE AVENUE  
CHARLESTON, WV 25302  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 1,000.

RECIPIENT NAME:  
BUCKSKIN COUNCIL, BSA  
ADDRESS:  
2829 KANAWHA BLVD E  
CHARLESTON, WV 25311  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
THOMAS MEMORIAL & SAINT FRANCIS HOS  
ADDRESS:  
4605 MACCORKLE AVENUE SW  
SOUTH CHARLESTON, WV 25309  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
MEDICAL  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 2,500.



RECIPIENT NAME:  
CENTER FOR RURAL HEALTH DEVELOPMENT  
ADDRESS:  
3465-B TEAYS VALLEY ROAD  
HURRICANE, WV 25526  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
GREENBRIER COUNTY SCHOOLS FOUND.  
ADDRESS:  
400 NORTH LEE STREET  
LEWISBURG, WV 24901  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
EDUCATION  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:  
GIRL SCOUTS OF THE BLACK DIAMOND CO  
ADDRESS:  
PO BOX 507  
CHARLESTON, WV 25322  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 7,500.

=====

RECIPIENT NAME:  
SHEPHERD'S CENTER OF CHARLESTON, WV  
ADDRESS:  
PO BOX 4171  
CHARLESTON, WV 25364  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 5,750.

RECIPIENT NAME:  
WV FINANCIAL EDUCATION FOUNDATION  
ADDRESS:  
600 QUARRIER STREET  
CHARLESTON, WV 25301  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
WOOD COUNTY SOCIETY  
ADDRESS:  
521 MARKET STREET  
PARKERSBURG, WV 26101  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 2,500.

RECIPIENT NAME:  
LEADERSHIP WEST VIRGINIA  
ADDRESS:  
1624 KANAWHA BLVD E  
CHARLESTON, WV 25311  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
TAMARACK FOUNDATION  
ADDRESS:  
3310 PIEDMONT ROAD  
CHARLESTON, WV 25306  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
HUNTINGTON AREA DEVELOPMENT COUNCIL  
ADDRESS:  
916 FIFTH AVE SUITE 400  
HUNTINGTON, WV 25701  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 8,000.

RECIPIENT NAME:  
CLAY CENTER FOR THE ARTS & SCIENCES  
ADDRESS:  
ONE CLAY SQUARE  
CHARLESTON, WV 25301  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
EDUCATION  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 15,000.

RECIPIENT NAME:  
WVUH-EAST  
ADDRESS:  
2000 FOUNDATION WAY SUITE 2310  
MARTINSBURG, WV 25401  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
YWCA OF CHARLESTON  
ADDRESS:  
1426 JANAWHA BLVD E  
CHARLESTON, WV 25301  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 20,000.

=====

## RECIPIENT NAME:

MARSHALL UNIVERSITY FOUNDATION

## ADDRESS:

519 JOHN MARSHALL DRIVE

HUNTINGTON, WV 25703

## RELATIONSHIP:

HUNT

## PURPOSE OF GRANT:

EDUCATION

## FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 20,000.

## RECIPIENT NAME:

FELLOWSHIP OF CHRISTIAN ATHLETES

## ADDRESS:

PO BOX 11556

CHARLESTON, WV 25339

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

COMMUNITY

## FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 3,000.

## RECIPIENT NAME:

CONCORD UNIVERSITY FOUNDATION

## ADDRESS:

PO BOX 1405

ATHENS, WV 24712

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

EDUCATION

## FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
WEST SIDE MAIN STREET  
ADDRESS:  
303 WASHINGTON STREET W  
CHARLESTON, WV 25302  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 2,500.

RECIPIENT NAME:  
FAIRMONT MORGANTOWN HOUSING AUTH  
ADDRESS:  
PO BOX 2738  
FAIRMONT, WV 26555  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 2,500.

RECIPIENT NAME:  
GREENBRIER VALLEY THEATRE  
ADDRESS:  
113 E WASHINGTON STREET  
LEWISBURG, WV 24901  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:  
LOGAN COUNTY CHILD ADVOCACY CENTER  
ADDRESS:  
PO BOX 308  
LOGAN, WV 25601  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 1,000.

RECIPIENT NAME:  
MILAN PUSKAR HEALTH RIGHT  
ADDRESS:  
PO BOX 1519  
MORGANTOWN, WV 26507  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
THE FOUN. OF MONONGALIA GEN HOSPITA  
ADDRESS:  
1200 JD ANDERSON DRIVE  
MORGANTOWN, WV 26505  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
MEDICAL  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 10,000.

=====

## RECIPIENT NAME:

MID-OHIO VALLEY SYMPHONY ORCHESTRA

## ADDRESS:

PO BOX 5511

VIENNA, WV 26105

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

COMMUNITY

## FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 2,000.

## RECIPIENT NAME:

REA OF HOPE FELLOWSHIP HOME

## ADDRESS:

1429 LEE STREET E

CHARLESTON, WV 25301

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

COMMUNITY

## FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 3,000.

## RECIPIENT NAME:

READ ALOUD WEST VIRGINIA

## ADDRESS:

PO BOX 1784

CHARLESTON, WV 25326

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

COMMUNITY

## FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 2,500.



RECIPIENT NAME:  
WV SECONDARY SCHOOL ACTIVITIES COMM  
ADDRESS:  
2875 STAUNTON TURNPIKE  
PARKERSBURG, WV 26104  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
EDUCATION  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
BLUE RIDGE COMMUNITY & TECH COLLEGE  
ADDRESS:  
400 WEST STEPHENS STREET  
MARTINSBURG, WV 25401  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
EDUCATION  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
CADCO FOUNDATION  
ADDRESS:  
1116 SMITH STREET  
CHARLESTON, WV 25301  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 23,900.

=====

## RECIPIENT NAME:

WV INDEPENDENT COLLEGES &amp; UNIVERSIT

## ADDRESS:

900 LEE STREET E SUITE 910

CHARLESTON, WV 25301

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

EDUCATION

## FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 53,000.

## RECIPIENT NAME:

WEST VIRGINIA HEALTH RIGHT

## ADDRESS:

1520 WASHINGTON STREET E

CHARLESTON, WV 25311

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

COMMUNITY

## FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 5,000.

## RECIPIENT NAME:

WEST VIRGINIA HUMANITIES COUNCIL

## ADDRESS:

1310 KANAWHA BLVD E

CHARLESTON, WV 25301

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

COMMUNITY

## FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 2,500.

=====

## RECIPIENT NAME:

YOUTH SERVICES SYSTEM, INC

## ADDRESS:

PO BOX 6041

WHEELING, WV 26003

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

COMMUNITY

## FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 5,000.

## RECIPIENT NAME:

LIBRARY FOUNDATION OF KANAWHA COUNT

## ADDRESS:

123 CAPITOL STREET

CHARLESTON, WV 25301

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

COMMUNITY

## FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 3,000.

## RECIPIENT NAME:

BELIEVE IN WEST VIRGINIA

## ADDRESS:

PO BOX 8622

SOUTH CHARLESTON, WV 25303

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

COMMUNITY

## FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 3,000.

RECIPIENT NAME:  
CONS CRED COUNS SERV OF SOUTHERN WV  
ADDRESS:  
1219 OHIO AVE  
DUNBAR, WV 25064  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 2,500.

RECIPIENT NAME:  
KANAWHA PASTORAL COUNSELING CENTER  
ADDRESS:  
16 LEON SULLIVAN WAY  
CHARLESTON, WV 25301  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 1,750.

RECIPIENT NAME:  
NATURAL CAPITAL INVESTMENT FUND  
ADDRESS:  
1098 TURNER ROAD  
SHEPHERDSTOWN, WV 25443  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 3,500.

RECIPIENT NAME:  
COMMUNITY FOUND OF THE VIRGINIAS  
ADDRESS:  
PO BOX 4127  
BLUEFIELD, WV 24701  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 1,500.

RECIPIENT NAME:  
KANAWHA VALLEY FELLOWSHIP HOME  
ADDRESS:  
1121 VIRGINIA STREET E  
CHARLESTON, WV 25301  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 2,500.

RECIPIENT NAME:  
WEST VIRGINIA SYMPHONY ORCHESTRA  
ADDRESS:  
PO BOX 2292  
CHARLESTON, WV 25328  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
HUNTINGTON MUSEUM OF ART  
ADDRESS:  
2033 MCCOY ROAD  
HUNTINGTON, WV 25701  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 2,400.

RECIPIENT NAME:  
HUNTINGTON YMCA  
ADDRESS:  
PO BOX 1855  
HUNTINGTON, WV 25719  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
NICHOLAS COUNTY COMMUNITY FOUNDATIO  
ADDRESS:  
PO BOX 561  
SUMMERSVILLE, WV 26651  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 3,000.

RECIPIENT NAME:  
WEST VIRGINIA ROUNDTABLE FOUNDATION  
ADDRESS:  
1018 KANAWHA BLVD E SUITE 200  
CHARLESTON, WV 25301  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
WVU FOUNDATION  
ADDRESS:  
PO BOX 1650  
MORGANTOWN, WV 26507-1650  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
EDUCATION  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 36,500.

RECIPIENT NAME:  
CAMC FOUNDATION  
ADDRESS:  
3412 STAUNTON AVENUE  
CHARLESTON, WV 25304  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 30,588.

RECIPIENT NAME:  
CHILDHOOD LANGUAGE CENTER  
ADDRESS:  
401 CAPITOL STREET  
CHARLESTON, WV 25301-1717  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 3,500.

RECIPIENT NAME:  
DISCOVER THE REAL WV FOUNDATION  
ADDRESS:  
405 CAPITOL STREET SUITE 512  
CHARLESTON, WV 25301  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
UNITED FUND OF MONONGALIA COUNTY  
ADDRESS:  
PO BOX 651  
MORGANTOWN, WV 26505  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 5,250.



RECIPIENT NAME:  
UPPER OHIO VALLEY UNITED FUND  
ADDRESS:  
51 11TH STREET  
WHEELING, WV 26003  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 2,550.

RECIPIENT NAME:  
UNITED WAY OF THE EASTERN PANHANDLE  
ADDRESS:  
222 W KING ST  
MARTINSBURG, WV 25401  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 6,050.

RECIPIENT NAME:  
UNITED WAY OF CENTRAL WEST VIRGINIA  
ADDRESS:  
ONE UNITED WAY SQUARE  
CHARLESTON, WV 25301  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 38,000.

RECIPIENT NAME:  
UNITED WAY OF THE RIVER CITIES  
ADDRESS:  
820 MADISON AVE  
HUNTINGTON, WV 25704  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 2,500.

RECIPIENT NAME:  
UNITED WAY OF GREENBRIER VALLEY  
ADDRESS:  
109 S JEFFERSON ST  
LEWISBURG, WV 24901  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 1,050.

RECIPIENT NAME:  
UNITED WAY OF HARRISON COUNTY  
ADDRESS:  
301 W MAIN ST #508  
CLARKSBURG, WV 26301  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 2,500.

## RECIPIENT NAME:

UNITED WAY OF MARION COUNTY

## ADDRESS:

112 ADAMS ST SUITE 205  
FAIRMONT, WV 26554

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

COMMUNITY

## FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 1,650.

## RECIPIENT NAME:

UNITED WAY ALLIANCE OF THE MID OHIO

## ADDRESS:

520 GRAND CENTRAL AVE UNIT 201  
VIENNA, WV 26105

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

COMMUNITY

## FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 3,200.

## RECIPIENT NAME:

UNITED WAY OF SOUTHERN WV

## ADDRESS:

PO BOX 5456  
BECKLEY, WV 25801

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

COMMUNITY

## FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 3,650.

RECIPIENT NAME:  
MARTINSBURG-BERKELEY COUNTY  
PUBLIC LIBRARY  
ADDRESS:  
101 W KING STREET  
MARTINSBURG, WV 25401  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 7,500.

RECIPIENT NAME:  
UNIVERSITY OF CHARLESTON  
ADDRESS:  
2300 MACCORKLE AVENUE  
CHARLESTON, WV 25304  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
EDUCATIONAL  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 50,000.

RECIPIENT NAME:  
WEST VIRGINIA ALUMNI ASSOCIATION  
ADDRESS:  
PO BOX 4269  
MORGANTOWN, WV 26504  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 20,000.

RECIPIENT NAME:  
BOY SCOUTS OF AMERICA  
SUMMIT BECHTEL RESERVE  
ADDRESS:  
68 CROSSROADS MALL  
MOUNT HOPE, WV 25880  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 50,000.

RECIPIENT NAME:  
ALDERSGATE UMC  
ADDRESS:  
7004 VALLEY BROOK DRIVE  
CHARLESTON, WV 25312  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 1,882.

RECIPIENT NAME:  
BURLINGTON UNITED METHODIST FAMILY  
SERVICES  
ADDRESS:  
RR3 BOX 3122  
KEYSER, WV 26726  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 5,000.

=====

## RECIPIENT NAME:

THE FAMILY CENTER INC

## ADDRESS:

PO BOX 66

RICHWOOD, WV 26261

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

COMMUNITY

## FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 2,000.

## RECIPIENT NAME:

HIGHLAND HOSPITAL FOUNDATION

## ADDRESS:

1418-A MACCORKLE AVE SW

CHARLESTON, WV 25303

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

COMMUNITY

## FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 10,000.

## RECIPIENT NAME:

YMCA OF KANAWHA VALLEY

## ADDRESS:

100 YMCA DRIVE

CHARLESTON, WV 25311

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

COMMUNITY

## FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:  
NATIONALYOUTH SCIENCE FOUNDATION  
ADDRESS:  
PO BOX 3387  
CHARLESTON, WV 25333  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
BOONE MEMORIAL HOSPITAL  
ADDRESS:  
701 MADISON AVENUE  
MADISON, WV 25130  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
BIG BROTHERS BIG SISTERS OF  
SC WEST VIRGINIA  
ADDRESS:  
1071 5TH AVE, SUITE 115  
CHARLESTON, WV 25387  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 2,500.

RECIPIENT NAME:  
FESTIVALL CHARLESTON  
ADDRESS:  
PO BOX 11287  
CHARLESTON, WV 25339  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 2,500.

RECIPIENT NAME:  
BOB BURDETTE CENTER INC  
ADDRESS:  
1401 WEST WASHINGTON STREET  
CHARLESTON, WV 25387  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
FAIRMONT STATE FOUNDATION  
ADDRESS:  
PO BOX 461  
FAIRMOUNT, WV 26555-0461  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 7,500.



RECIPIENT NAME:  
CENTRAL CATHOLIC HIGH SCHOOL  
ADDRESS:  
75 14TH STREET  
WHEELING, WV 26003  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
YOUNG LIFE  
ADDRESS:  
312 OLD GAULEY ROAD  
MT NEBO, WV 26679  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
CHARLESTON BALLET  
ADDRESS:  
100 CAPITOL STREET, STE 100  
CHARLESTON, WV 25301  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
COMMUNITY  
FOUNDATION STATUS OF RECIPIENT:  
EXEMPT  
AMOUNT OF GRANT PAID ..... 2,000.

BB&T WEST VIRGINIA FOUNDATION INC 55-6017269  
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

RECIPIENT NAME:

WEST VIRGINIA STATE UNIVERSITY

ADDRESS:

PO BOX 100

INSTITUTE, WV 25112

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

COMMUNITY

FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 5,000.

TOTAL GRANTS PAID:

656,170.

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