For Paperwork Reduction Act Notice, see instructions.

**Return of Private Foundation** 

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

OMB No. 1545-0052 2018

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury

	TIQI TICVO	■ Go to www.irs.gov/Form990PF to	or instructions ar	nd the late	st intormati	on. Upen	to Public Inspection
<u>Fo</u>	r calen	dar year 2018 or tax year beginning	, 20	018, and			, 20
Nan	ne of four	ndation	-		A Employe	r identification numbe	r
Har	ley B. I	Reger Rehabilitation Foundation, Inc.				31-0887052	
		street (or P O box number if mail is not delivered to street address)	Ro	om/suite	B Telephon	e number (see instructi	ons)
P.0	D. BOX	1716				(304) 624-5571	1
		state or province, country, and ZIP or foreign postal code			0 4		
		URG, WV 2630		Cirexempi	ion application is pend	ing, check here ►	
			lic charit				
G	CHECK	Final return Amended	of a former pub	one chanty	ו ט ו. Foreigi	n organizations, check	nere ► [_
		☐ Address change ☐ Name cha				n organizations meeting	
	Obsale			<del>- ( \                                  </del>		here and attach compu foundation status was	
H		type of organization: Section 501(c)(3) exempt p				07(b)(1)(A), check here	and the same of th
브		n 4947(a)(1) nonexempt charitable trust			4		
1		arket value of all assets at J Accounting method	: 🗹 Cash 📙	Accrual		ndation is in a 60-mont	
•		year (from Part II, col. (c), Other (specify)			under sec	ction 507(b)(1)(B), checi	chere ►
\ <b>_</b>	line 16		on cash basis.)	<del></del>	<u></u>		
	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Ne	t investment	(c) Adjusted net	(d) Disbursements for chantable
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books		ncome	income	purposes
		the amounts in column (a) (see instructions).)					(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)		26	Kr. Anin	Represent we the over the	Contraction of the second
	2	Check ► ☐ if the foundation is not required to attach Sch. B					1
	3	Interest on savings and temporary cash investments					<u> </u>
ക	4	Dividends and interest from securities					
2019	5a	Gross rents					
	b	Net rental income or (loss)					
_ =	6a	Net gain or (loss) from sale of assets not on line 10					
UEL I / Revenue	b	Gross sales price for all assets on line 6a					
ار الأ	7	Capital gain net income (from Part IV, line 2)					
ے בּ	8	Net short-term capital gain					
$\cap$	9	Income modifications				· · · · · · · · · · · · · · · · · · ·	
ΠĪ	10a	Gross sales less returns and allowances					
<b>Z</b>	b	Less: Cost of goods sold					
Ë	C	Gross profit or (loss) (attach schedule)					
SCANNED	11	Other income (attach schedule)					i
(I)	12	Total. Add lines 1 through 11		26	0	0	
	13	Compensation of officers, directors, trustees, etc.					
enses	14	Other employee salaries and wages					
ns.	15	Pension plans, employee benefits				SEN/ED	
ğ	16a	Legal fees (attach schedule)			RE	CEIVED	
Ω̈	Ь	Accounting fees (attach schedule)				J	l
Operating and Administrative Exp	C	Other professional fees (attach schedule)			/0 <i>N</i> 246	1 4 2019	
ati	17	Interest	<del></del>		<del>                                       </del>		<del>                                     </del>
Str	18	Taxes (attach schedule) (see instructions)	}	<del>                                     </del>			<del>                                     </del>
2.	19	Depreciation (attach schedule) and depletion			<u> </u>	DEN UT	<del>]</del>
3	20	Occupancy					
Ą	21	Travel, conferences, and meetings					
ğ	1			_	···		
ē	22	Printing and publications		26	26	26	26
ing.	23	Other expenses (attach schedule)			20	20	20
ati	24	<b>Total operating and administrative expenses.</b> Add lines 13 through 23		26	24		24
ĕ	05	-		26	26	26	26
Ö	25	Contributions, gifts, grants paid		00		<del></del>	700
_	26	Total expenses and disbursements. Add lines 24 and 25	<del> </del>	26	26	26	<b>7</b> 26
	27	Subtract line 26 from line 12:	_				
	a	Excess of revenue over expenses and disbursements	-7	00	• • • • •	dender of the British	
		Net investment income (if negative, enter -0-)		<del>                                     </del>	0		
		Adjusted net income (if negative, enter -0-)	<u> </u>	<del>                                     </del>		0	
Fai	Paper	work Reduction Act Notice, see instructions.	t. No 1128	9X	Fo	m <b>990-PF</b> (2018)	

Cat. No 11289X

<u>.Part</u>	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
_	should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash-non-interest-bearing	10866	10166	10166
2		51014	51014	51014
3				
	Less: allowance for doubtful accounts ▶			
14				
	Pledges receivable ►  Less: allowance for doubtful accounts ►		***	<del></del>
	5 Grants receivable			
}				
'	disqualified persons (attach schedule) (see instructions)		1	
7	· · · · · · · · · · · · · · · · · · ·	<del></del>		
'	Least allowance for doubtful accounts	<del></del>	<del></del>	
ہ ایں	Less: allowance for doubtful accounts ▶	-		
ets ets				<del></del>
Assets				
۱۱ ک	Da Investments — U.S. and state government obligations (attach schedule)			
	b investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
11	division to the control of the contr			
	Less: accumulated depreciation (attach schedule) ▶			
12				
13	· · · · · · · · · · · · · · · · · · ·			
14				
	Less: accumulated depreciation (attach schedule) ▶			
15	5 Other assets (describe ► )			
16	Total assets (to be completed by all filers-see the			
	instructions. Also, see page 1, item l)	61880	61180	6118
17	Accounts payable and accrued expenses			
رم   18				
<u>ë</u>   19	Deferred revenue			
<u> </u>	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities				
<u>ا</u> ا	- · · · · · · · · · · · · · · · · · · ·			
23	,	0	0	
	Foundations that follow SFAS 117, check here			
es	and complete lines 24 through 26, and lines 30 and 31.			
일   24	- · · · · · · · · · · · · · · · · · · ·			
alances				
	· · · · · · · · · · · · · · · · · · ·			
Fund B	Foundations that do not follow SFAS 117, check here ▶ □			
교	and complete lines 27 through 31.			
Ö 27	-			
S	· · · · · · · · · · · · · · · · · · ·			
35 Set	• • • • • • • • • • • • • • • • • • • •	61880	61180	
SS 29	, , ,			
Net Assets	· · · · · · · · · · · · · · · · · · ·	61880	61180	
S 3.	, i			
	instructions)	61880	61180	<del></del>
Part				
	otal net assets or fund balances at beginning of year-Part II, colui			
	nd-of-year figure reported on prior year's return)			6188
<b>2</b> E	inter amount from Part I, line 27a		2	-70
3 (	Other increases not included in line 2 (itemize) ▶	***************************************	3	
4 A	dd lines 1, 2, and 3		4	6118
<b>5</b> [	Pecreases not included in line 2 (itemize) ▶		5	
6 T	otal net assets or fund balances at end of year (line 4 minus line 5)-I	Part II, column (b), line	30 <b>6</b>	6118

		s) of property sold (for example, real e 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.)	
1a						
b						
С						
d						
е			<u> </u>			
				other basis nse of sale		In or (1033) (f) minus (g))
а						
b						
c						
d						
_е				····		
	Complete only for assets shown	ng gain in column (h) and owned	by the foundation	on 12/31/69.	(I) Gains (Co	l (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any	col. (k), but no	t less than -0-) <b>or</b> from col. (h))
а						
b						
C						
d						
е						
2	Capital gain net income or (r		also enter in Pa , enter -0- in Pa		2	
3	Net short-term capital gain of gain, also enter in Part I,	or (loss) as defined in sections line 8, column (c) See instru	s 1222(5) and (6) actions. If (loss)	: , enter -0- in }		
	Part I, line 8				3	<u> </u>
Part	V Qualification Under ptional use by domestic private	Section 4940(e) for Red				
Was t	tion 4940(d)(2) applies, leave the foundation liable for the se s," the foundation doesn't qua	ction 4942 tax on the distribu			pase period?	☐ Yes ☐ No
1		nt in each column for each ye			akıng any entries.	
Cal	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distribution	ns Net value o	(c) f nonchantable-use a		(d) stribution ratio divided by col (c))
	2017					<u></u>
	2016					
	2015					
	2014					
	2013					
		·				
2	Total of line 1, column (d)				. 2	
3	Average distribution ratio fo	r the 5-year base period—dindation has been in existence	vide the total on	line 2 by 5.0, o	r by	
4	·	aritable-use assets for 2018				<del>-</del>
5	Multiply line 4 by line 3 .				. 5	
	Enter 1% of net investment i	income (1% of Part I, line 27t	0)		6	
6						
6 7					. 7	

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—se	e instri	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		0	
	here ▶ ☐ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).		<del></del>	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 2		0	
3	Add lines 1 and 2		0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		0	
6	Credits/Payments:			
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868) . 6c 5			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d		5	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9		0	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10		5	
11	Enter the amount of line 10 to be: Credited to 2019 estimated tax ▶ 5 Refunded ▶ 11		0	
	/II-A Statements Regarding Activities		1	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	participate or intervene in any political campaign?	1a	<del> </del>	~
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	e 1b		/
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materia	s		
	published or distributed by the foundation in connection with the activities.			
	Did the foundation file Form 1120-POL for this year?	1c	<u> </u>	~
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$(2) On foundation managers. ▶ \$	_ i	1	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		ļ	
_	on foundation managers. ▶ \$	<del></del>	·	
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.	2	ļ	<i>\</i>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article	:s		
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	3	ļ	~
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a_	<b> </b>	~
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	<del> </del>	~
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<del> </del>	~
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		}	
	By language in the governing instrument, or	.		
	By state legislation that effectively amends the governing instrument so that no mandatory directions the given that the state of		·	
7	conflict with the state law remain in the governing instrument?	(V <b>7</b>	V	~
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 3 Enter the states to which the foundation reports or with which it is registered. See instructions.	·*  - <del>'</del>	<del>-</del>	ļ
8a			i	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gener			
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation		<del>                                     </del>	<del> </del>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes complete Part XIV			~
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the			~

Part	VII-A	Statements Regarding Activities (continued)			_	
					Yes	No
11		time during the year, did the foundation, directly or indirectly, own a controlled g of section 512(b)(13)? If "Yes," attach schedule. See instructions		11		,
12		foundation make a distribution to a donor advised fund over which the foundation had advisory privileges? If "Yes," attach statement. See instructions		12		,
13	Did the fo	oundation comply with the public inspection requirements for its annual returns and exer	nption application?	13	٧	
	Website	address ► GUIDESTAR.COM				
14	The book	address ► GUIDESTAR.COM  sks are in care of ► BENJAMIN DAVISSON  Telephone	ne no. ▶ (30	4) 624	-5571	
	Located	at ▶ P.O. BOX 1716, CLARKSBURG, WV	ZIP+4 ▶	2630	2	
15	Section 4	4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—ch	eck here			▶ □
	and ente	er the amount of tax-exempt interest received or accrued during the year	▶ 15			
16		ime during calendar year 2018, did the foundation have an interest in or a signature			Yes	No
		ank, securities, or other financial account in a foreign country?		16		~
		instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes,"	enter the name of			
		gn country ►		<u> </u>		<u> </u>
Part	VII-B	· · · · · · · · · · · · · · · · · · ·		1	V	T 84 -
4		m 4720 if any item is checked in the "Yes" column, unless an exception applies	<b>5.</b>		Yes	No
та	_	he year, did the foundation (either directly or indirectly):  age in the sale or exchange, or leasing of property with a disqualified person?	. Yes 🗹 No			
		ow money from, lend money to, or otherwise extend credit to (or accept it from)				
		ualified person?				1
		ish goods, services, or facilities to (or accept them from) a disqualified person? .	_			
		compensation to, or pay or reimburse the expenses of, a disqualified person? .			ļ	
		sfer any income or assets to a disqualified person (or make any of either available for			[	
	the b	penefit or use of a disqualified person)?	· 🗌 Yes 🗹 No			
	(6) Agree	ee to pay money or property to a government official? (Exception. Check "No" if the	ne			
	termi		. 🗌 Yes 🗹 No			
b	If any ar	inswer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the except ions section 53.4941(d)-3 or in a current notice regarding disaster assistance? See i	ions described in netructions .	1b		
	_	ations relying on a current notice regarding disaster assistance, check here				
С		foundation engage in a prior year in any of the acts described in 1a, other than ex				
		t corrected before the first day of the tax year beginning in 2018?		1c		~
2		on failure to distribute income (section 4942) (does not apply for years the foundating foundation defined in section 4942(j)(3) or 4942(j)(5)):	ion was a private			
а		nd of tax year 2018, did the foundation have any undistributed income (lines 6d ar				
		XIII) for tax year(s) beginning before 2018?	. Yes No			l
		' list the years ▶ 20, 20, 20, 20				i i
Ь		re any years listed in 2a for which the foundation is <b>not</b> applying the provisions of		İ		
		to incorrect valuation of assets) to the year's undistributed income? (If applying ses listed, answer "No" and attach statement—see instructions.)	ction 4942(a)(2) to	2b		<b></b>
_	•	ovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the	o vears here	20		ļ ,
С	▶ 20	, 20 , 20 , 20				
3a		foundation hold more than a 2% direct or indirect interest in any business enterprisme during the year?	se			'
b		' did it have excess business holdings in 2018 as a result of (1) any purchase by				
	disqualifi	fied persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period	approved by the			
		ssioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest;				,
		, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to				
		ion had excess business holdings in 2018.)		3b	ļ	-
4a		foundation invest during the year any amount in a manner that would jeopardize its charge that on the same any investment in a prior year (but after December 31, 1969) that one of the same any investment in a prior year (but after December 31, 1969) that one of the same are same as a same as a same are same as a same are same as a same as a same are same as a same		4a	-	
b		foundation make any investment in a prior year (but after December 31, 1969) that of the purpose that had not been removed from jeopardy before the first day of the tax year		4b		~

Pari	VIES Statements Regarding Activities	S TOP W	nich Form	4/20 N	viay be R	equire	<b>a</b> (contil	nuea)			
5a		-								Yes	No
	(1) Carry on propaganda, or otherwise attempt t						☐ Yes	✓ No			- 1
	(2) Influence the outcome of any specific public		=			-	<b></b> 1				
	directly or indirectly, any voter registration dr						☐ Yes	☑ No			
	<ul><li>(3) Provide a grant to an individual for travel, stu</li><li>(4) Provide a grant to an organization other than</li></ul>		•	•			☐ Yes	<b>∠</b> No			.
	section 4945(d)(4)(A)? See instructions						☐ Yes	☑ No			
	(5) Provide for any purpose other than religious										
	purposes, or for the prevention of cruelty to							✓ No			.
b	If any answer is "Yes" to 5a(1)-(5), did any of the							scribed	ļ		
	in Regulations section 53.4945 or in a current no	-						· ·_	5b		
	Organizations relying on a current notice regardi	-									ļ
С	If the answer is "Yes" to question 5a(4), does the answer is maintained available to reasonability and the same and the sa			_							
	because it maintained expenditure responsibility  If "Yes," attach the statement required by Regula		-			• •	☐ Yes	∐ No			ı
6a						miums					. 1
- Ou	on a personal benefit contract?		-	_			□Yes	₩ No		·	
ь	Did the foundation, during the year, pay premium					benefit	contract	? .	6b		
	If "Yes" to 6b, file Form 8870.	·	•	•	•						
7a	, ,		-				TYes	✓ No			اـــا
b	If "Yes," did the foundation receive any proceeds							1? .	7b	<b></b>	<del></del>
8	Is the foundation subject to the section 4960 ta							<b></b>			
Dor	remuneration or excess parachute payment(s) do  VIII Information About Officers, Direct									998	!
Par	Information About Officers, Direction and Contractors	turs, i	rusices, ri	Juliuai	HOII WIGHT	igers,	inginy r	alu L	ilipioy	ccs,	
1	List all officers, directors, trustees, and found	lation r	nanagers an	d their	compens	ation. S	See instru	uctions			
	(a) Name and address	(b) Title	e, and average rs per week	(c) Con	npensation ot paid,	(d) (	Contribution yee benefit	s to	(e) Expe		
	(a) Name and address		ed to position		ter -0-)		erred compe		other	allowan	ces
INDA	R WILSON	PRESIDENT 10 HOURS/YEAR		o				0			
3ENJ	AMIN G DAVISSON		RESIDENT JRS/YEAR	o				0			0
ARF	EN F DAVISSON	SECRE	TARY			-					
		1	JRS/YEAR		0	0		0			0
GNA	TIUS L SCOTT	TREAS			0			0			0
			JRS/YEAR								
2	Compensation of five highest-paid employed "NONE."	es (oth	er than thos	se inclu	ıded on li	ne 1—	see instr	uction	s). If n	one,	enter ——
	(a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	veek	(c) Compe	nsation	(d) Contrib employee plans and compen	benefit deferred	(e) Expe	ense ace allowan	
IONE											
									,		
									ļ		
<b>-</b> -											
			<u> </u>						<u> </u>		
	·····										
								-			
otal	number of other employees paid over \$50,000 .								L		
									Form 99	10-PF	(2018)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly P and Contractors (continued)	aid Employees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, ente	r "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	. •
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the nu organizations and other beneficianes served, conferences convened, research papers produced, etc.	umber of Expenses
1 PROVIDED EMERGENCY, INTEREST FREE LOANS TO STUDENTS AT WEST VIRGINIA WESLEYAN COLLEG	E AND
SOUTHERN WEST VIRGINIA COMMUNITY COLLEGE TO COVER MISCELLANEOUS ACADEMIC COSTS.	400
2 PROVIDED GRANTS TO THE WEST VIRGINIA LIBRARY COMMISSION FOR THE RECORDING OF BOOKS FO	·
THE PHYSICALLY AND VISUALLY IMPAIRED AND TO THE DEPARTMENT OF VOCATIONAL REHABILITATION	N. 300
3	
4	
Detail V.D. Common of Drogram Deleted Investments (see instructions)	
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
1 NONE	
2	
All other program-related investments See instructions	
3	
	·
•••••••••••••••••••••••••••••••••••••••	<i>,</i>
Total. Add lines 1 through 3	•
	Form <b>990-PF</b> (2018

Part	X Minimum Investment Return (All domestic foundations must complete this part. Forei	gn found	lations,
	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	0
b	Average of monthly cash balances	1b	61530
С	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	61530
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	61530
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	923
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	60607
6	Minimum investment return. Enter 5% of line 5	6	3030
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here ► and do not complete this part.)	oundatio	ns ·
1	Minimum investment return from Part X, line 6	1	3030
2a	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	3030
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	3030
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	3030
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	726
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.,	1	
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	726
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	
_	Enter 1% of Part I, line 27b. See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	726
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculatin qualifies for the section 4940(e) reduction of tax in those years.	g whethe	r the foundation

Part	XIII Undistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years pnor to 2017	<b>(c)</b> 2017	(d) 2018
1	Distributable amount for 2018 from Part XI,				
2	line 7				3030
² a	Enter amount for 2017 only			٥	
b	Total for prior years: 20 , 20 , 20		0		<u></u>
3	Excess distributions carryover, if any, to 2018:				
а	From 2013 0				
b	From 2014 0				
C	From 2015 0				
ď	From 2016 0				
e	From 2017 0				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2018 from Part XII, line 4: ► \$ 726				
а	Applied to 2017, but not more than line 2a.			o	ļ
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election required—see instructions)	0			
d	Applied to 2018 distributable amount				726
e	Remaining amount distributed out of corpus	0			I
5	Excess distributions carryover applied to 2018				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)	2304			2304
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2304			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0		
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0		
е	Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f	Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019				0
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			
8	Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).	0			
9	Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	o	,	-	
10	Analysis of line 9:				
а	Excess from 2014 0				
b	Excess from 2015 0				}
C	Excess from 2016 0				
d	Excess from 20170				
е	<u> </u>				
					Form <b>990-PF</b> (2018)

Part	AIV Private Operating Founda	tions (see instr	uctions and Part	VII-A, question s	")	
1a	If the foundation has received a ruling foundation, and the ruling is effective fo					
ь			=		notion [] 4042(i)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	T T T T T T T T T T T T T T T T T T T	Pnor 3 years	(CIIOII 4942(J)	(3) or 4942(j)(5)
~a	income from Part I or the minimum	(a) 2018	<b>(b)</b> 2017	(c) 2016	(d) 2015	(e) Total
	investment return from Part X for	(a) 2018	(B) 2017	(c) 2016	(0) 2015	/
_	each year listed		<b>_</b>	ļ.————————————————————————————————————		<b>!</b>
b	85% of line 2a					
С	Qualifying distributions from Part XII,					Ì
	line 4 for each year listed			·		
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.  Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon:					}
а	"Assets" alternative test-enter:				ĺ	
	(1) Value of all assets					
	(2) Value of assets qualifying under					1
	section 4942(j)(3)(B)(i)		<i></i>			
þ	"Endowment" alternative test—enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed					
C	"Support" alternative test—enter:					
	(1) Total support other than gross		}		}	}
	investment income (interest,					
	dividends, rents, payments on securities loans (section				1	1
	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			<u> </u>		
	an exempt organization					
	(4) Gross investment income					<del> </del>
Part		n (Complete 1	his part only if	the foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-	•	•		• •	
1	Information Regarding Foundation			···········		
'a	List any managers of the foundation		outed more than 2	% of the total cont	ributions received	by the foundation
-	before the close of any tax year (but of					by the roundation
	boloro illo olobo or ally tax your (but t	, my m andy mave a		40,000,. (000 0		
	List any managers of the foundation	who own 10%	or more of the sto	ock of a corporatio	n (or an equally is	arge portion of the
U	ownership of a partnership or other e					arge portion of the
	Ownership of a partnership of other el	ridly) Of William	e louridation has a	1070 of greater and	erest.	
		0:41	an Oak alamakin	-A- Duanuman	<del></del>	<del></del>
2	Information Regarding Contribution	•	•			
	Check here ▶ ☑ if the foundation	•	•		-	•
	unsolicited requests for funds. If the f		s gins, grants, etc.	, to individuals of c	rganizations unde	r other conditions,
	complete items 2a, b, c, and d. See ir					<del></del>
а	The name, address, and telephone nu	ımber or email ad	ddress of the perso	on to whom applica	itions should be a	ddressed:
b	The form in which applications should	d be submitted a	nd information and	l materials they sho	uld include:	
C	Any submission deadlines:					
d	Any restrictions or limitations on av	vards, such as	by geographical a	reas, charitable fi	elds, kinds of ins	titutions, or other
	factors:					

Total

Page 11 Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual Recipient Foundation show any relationship to any foundation manager Purpose of grant or status of **Amount** contribution recipient Name and address (home or business) or substantial contributor Paid during the year WEST VIRGINIA WESLEYAN COLLEGE N/A 501(c)3 **PROVIDE LOAN TO STUDENTS** 200 59 COLLEGE AVENUE, BUCKHANNON, WV 26201 SOUTHERN WV COMMUNITY COLLEGE N/A 501(c)3 PROVIDE LOANS TO STUDENTS 200 P.O. BOX 2900, MOUNT GAY, WV 25637 WV LIBRARY COMMISSION 501(c)3 **RECORDING BOOKS** 200 N/A 1900 KANAWHA BLVD. E., CHARLESTON, WV 25301 **DEPARTMENT OF VOCATIONAL REHABILITATION** A/A **RECORDING BOOKS** 100 501(c)3 107 CAPITOL STREET, CHARLESTON, WV 25301 700 За Total Approved for future payment b NONE

 $\triangleright$ 

3b

	ross amounts unless otherwise indicated.	Unrelated bu	Isiness income	Excluded by secti	on 512, 513, or 514	1 (8)
		(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	Related or exemp function income (See instructions.)
1 P	ogram service revenue:	<u> </u>	· · · · · · · · · · · · · · · · · · ·	<u> </u>		, , , , , , , , , , , , , , , , , , , ,
a				<del> </del>		
b				<del> </del>	. <del></del>	
C		·····	•			
d						
e						
1	Fees and contracts from government agencies					<del></del>
9 2 M	embership dues and assessments					
	terest on savings and temporary cash investments			<del>                                     </del>	· · · · · · · · · · · · · · · · · · ·	
	vidends and interest from securities			<u> </u>	"	
	et rental income or (loss) from real estate:		•			
a						
b						
	et rental income or (loss) from personal property				<u> </u>	
	ther investment income					
	ain or (loss) from sales of assets other than inventory					<del></del>
	et income or (loss) from special events			-		
	ross profit or (loss) from sales of inventory .					
	ther revenue: a			<u> </u>		
b				1	<del></del> -	
c		<u> </u>				
d						
-						
12 S	ubtotal. Add columns (b), (d), and (e)					
13 T	otal. Add line 12, columns (b), (d), and (e)				13	
	orksheet in line 13 instructions to verify calculation	s.)				
ee w	orksheet in line 13 instructions to verify calculation <b>KVI-B</b> Relationship of Activities to the A	ccomplishm				
ee we Part Line N	orksheet in line 13 instructions to verify calculation <b>KVI-B</b> Relationship of Activities to the A	ccomplishm			-A contributed	mportantly to the
ee w	orksheet in line 13 instructions to verify calculation  KVI-B Relationship of Activities to the A	ccomplishm			-A contributed oses). (See instru	mportantly to th
ee we Part Line N	orksheet in line 13 instructions to verify calculation <b>KVI-B</b> Relationship of Activities to the A	ccomplishm			-A contributed i oses). (See instru	mportantly to the
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Part	XVII	Informatio Organizati		sfers to and Transa	ections and F	Relationship	s With Nonchar	itable		mpt
	D: 4 N		<del></del>		Uttab			T-1-	Yes	No
	in se			engage in any of the fo 501(c)(3) organization				-	.03	
	-		norting foundation to	a noncharitable exem	nt organization	of:		1		- 1
		ash				Oi.		1a(1)		
		ther assets						1a(2)		<u> </u>
		transactions:						10(2)		<del></del>
-			a noncharitable eve	mpt organization .				1b(1)	<del> </del> -	
				ible exempt organization				1b(1)		<u> </u>
				rassets				1b(3)	-+	<u> </u>
								1b(4)		·
		pans or loan gua	_					1b(5)		~
		•		ip or fundraising solicit				1b(6)	<del>-  </del>	<u> </u>
				its, other assets, or pai				1c		·
				s," complete the follow				-	ir m	
				ces given by the report						
				ement, show in column						
(a) Line		b) Amount involved		antable exempt organization		<u>-</u>	, transactions, and sha			
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22	le the	foundation du	ectly or indirectly at	filiated with, or related	t to one or m	ore tay-evem	nt organizations			
				ction 501(c)(3)) or in se		ore tax exem	ipt organizations	□ Vos	<b>.</b> 🗆	No
			e following schedule.						• 📖	NO
	11 10	(a) Name of organ	<del></del>	(b) Type of organ	zation		) Description of relation	nshin		
		(a) Name of organ	iization	(b) Type of organ	1200011		y bescription of relation	101115		
		<del> </del>								
						·				
	Unde	r penalties of penury	declare that I have examine	d this return, including accomp	anving schedules and	statements, and t	o the best of my knowled	lge and he	elief. it i	is true
Sign				in taxpayer) is based on all infor			ledge -			
Here		Bollin	an )	10/29/10	MINE 1	PRISIDE	May the If with the pi			
101C		ature of officer or tru	stee	Date	Title		See instruc			
	J. J. J.	Print/Type preparer		Preparer's signature	7100	Date		PTIN		==
Paid		i ype proparer	- Harrio	, operor o dignaturo		50.0	Check if			
Prepa				<del></del>			self-employed			
Jse C	nly	Firm's name					Firm's EIN ▶		-	
		Firm's address 🕨					Phone no			