Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0047

Department of the Treasury

►Do not enter social security numbers on this form as it may be made public. ()

►Go to www.irs.gov/Form990PF for instructions and the latest information.

2019

THE DETERMAN FOUNDATION, INC. THE DETERMAN FOUNDATION, INC. B I designmen number (or P o be number in multi and delinered to steed adjusted) 364 PATTESON DRIVE #265 G Check at that apply Indust return Amended return A	For	calen		and ending	JIIS AIIU UII	e latest III	normation.		Open to Public Inspection	
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Name and steed (or PO Des number (or an interded on street addressed) 364 PSYTESON DRIVE #265	d).	ยะ	DETERMAN EXIMINATION THE			27	122241	2		
304-598-8000 Cry a thors, user presents, carely, and the others pressed core MORGANTOWN WV 26505 G Check all that apply Indust return Address change Industrial return Industrial				Ro	om/suite				one)	
MORGANTOWN WV 26505 G Check all that apply				1			•			1
G Check all that apply Indual return Initial return	City	or tow	n, state or province, country, and ZIP or foreign postal code			1				١.
# Check type of organization Section 507(o(3) everified private foundation Section 4947(a)(1) nonexempt charable trust Other taxable private foundation Section 4947(a)(1) nonexempt charable trust Other taxable private foundation F if the provise foundation F if	_M	ORG	ANTOWN WV 26505			Cliexe	mpton application	is perding	g check here	•
Address change Name change Name change Richards	GC	heck	all that apply Initial return Initial retu	m of a former public	chanty	D 1 Fo	oreign organization:	s, check t	here 🕨 📘	
H Check type of organization Section 501(c)(3) evering private foundation Section 4947(a)(1) nonexempt chariable trust Other taxable private foundation Fair market value of all assets at Accounting method Cash X Accounting method X Accounting method Cash			Final return Amended	retum		1		-		
Section 4947(a)(1) nonexempt chantable trust Other taxable provate foundation		·				85	i% test, check here	and atta	ich computation	
Far market value of all assets at end of year (from Part II, cold (c), line 1619 + \$ 5,000 5,361 (Part, column (d), must be on cash basis.) Part I Analysis of Revenue and Expenses (The load of year (from Part II, column (d), must be on cash basis.) Part I Analysis of Revenue and Expenses (The load of year (from Part II), column (d), must be on cash basis.) Part I Analysis of Revenue and Expenses (The load of year (from Part II), column (d), must be on cash basis.) Part I Analysis of Revenue and Expenses (The load of year (from Part II), column (d), must be on cash basis.) Part I Analysis of Revenue and Expenses (The load of year (from Part II), column (d), must be on cash basis.) Part I Analysis of Revenue and Expenses (The load of year (from Part III), must be on cash basis.) Part I Analysis of Revenue and Expenses (The load of year (from Part II)), must be on cash basis.) Part I Analysis of Revenue and Expenses (The load of year (from Part II)), must be on cash basis.) Part I Analysis of Revenue and the following the followin	H C	heck	type of organization X Section 501(c)(3) exempt priva	ite foundation	1 1	E If priva	ate foundation stat	us was ie	rminaled under	
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The 16	1 Fa	air ma	rket value of all assets at J Accounting method	Cash X Acc	rual	li .			1 3	
Part I Analysis of Revenue and Expenses (The local of approach in columns (b), cl. and (c) might control recessively exist in the amounts in column (a) (see instructions) I Contributions, grifts, grains, etc., received (attach schedule) 2 "roads P		-		•		under	section 507(b)(1)(B) check	here 🕨 🔝	
amounts in columns (b), (c), and (c) may not receivable receivable process by a sequences per broads. 1				st be on cash basis)	ı	<u>L</u>			·	
The amounts in column (s) (see transcores) 1 Contributions, gifs, grafts, 6.c., received (attach schedule) 2 Contributions, gifs, grafts, 6.c., received (attach schedule) 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6 Net gen or (loss) ton sake of assets not on the 10 STMT 1 6 Yes sake proc for all seets on the 6a 3,523,769 7 Capital gain net income (from Part IV, line 2) 8 Net schort-term capital gain 9 Income modifications 10a Gross sales two returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 10 Other monome (attach schedule) 11 Other monome (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 0 Other professional fees (attach schedule) 14 Other employee salenaes and wages 15 Compensation of officers, directors, trustees, etc 0 Other professional fees (attach schedule) 17 Interest 18 Traves (attach schedule) 19 Deprecation (attach schedule) 20 Occupancy 21 Travel, conferences, and meetings 22 Pinnting and publications 23 Pinting and publications 24 Total operating and administrative expenses Add lines 13 through 23 25 Total expenses and disbursements. Add less 24 and 25 27 Subtract ine 26 from line 12 a Excess of revenue over expenses and disbursements -19,423	Pa	irt !						net		
1					incoi	me				
2	h	1	Contributions, gifts, grants, etc. received (attach schedule)	\					1227.223.53111	
1	$^{\prime\prime}\lambda$	2		B					D. D	
## Dividends and interest from securities	<i>y</i> '	3	tana .			23,148			RECEIVED	
6a Net gain or (loss) from sale of assets not on line 10 STMT 1 142,665		4	Dividends and interest from securities	84,750	1	34,750				70
6a Net gain or (loss) from sale of assets not on line 10 STMT 1 142,665		5a	Gross rents					4	MAY 0 2 2021	Ü
8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and altowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 255,425 121,730 0 13 Compensation of officers, directors, trustees, etc 0 4 Other employee salanes and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) SEE STMT 2 2,470 b Accounting fees (attach schedule) 2 Other professional fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 0 Occupancy 21 Travel, conferences, and meetings 22 Pinnting and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses 25 Add lines 13 through 23 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements 2 -19,423	ø	b	Net rental income or (loss)					8	MAT O O ZUZI	0000
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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 11 255,425 121,730 0 13 Compensation of officers, directors, trustees, etc 14 Other employee salanes and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) SEE STMT 2 2,470 b Accounting fees (attach schedule) c Other professional fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Deprecation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Pinnting and publications 23 Other expenses (att sch) 25 Contributions, gifts, grants pad 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements -19,423		8	Net short-term capital gain .					0		
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13 Compensation of officers, directors, trustees, etc 14 Other employee salanes and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) SEE STMT 2 2,470 b Accounting fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (att sch) 24 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, grits, grants pad 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements 15 Pension plans, eithory 20 2 2, 470 2 2, 470 2 3, 470 3 4, 470 4 2, 470 5 2, 470 5 2, 470 6 3 3, 470 7 3, 480 8 31, 616 9 3, 380 9 3, 378 9 31, 616 9 3, 308 9 3, 308 9		11	Other income (attach schedule)							
Deprecation (attach schedule) and depletion Coccupancy Coccupanc	07	12	Total. Add lines 1 through 11		12	21,730		0		
Deprecation (attach schedule) and depletion Coccupancy Coccupanc	Se	1	· · · · · · · · · · · · · · · · · · ·	0						
Deprecation (attach schedule) and depletion Coccupancy Coccupanc	ē	ļ	· •							
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Deprecation (attach schedule) and depletion Coccupancy Coccupanc	ive	þ	- ,				·			
Deprecation (attach schedule) and depletion Coccupancy Coccupanc	rat		·							
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26 Total expenses and disbursements. Add lines 24 and 25 274,848 31,616 0 240,308 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements -19,423							· · · · · · · · · · · · · · · · · · ·			
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27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements -19,423	0		·			1,616	<u></u>	0		
a Excess of revenue over expenses and disbursements -19,423										
				-19,423				į		
1 - Net integrated in regarded, circle 4)		ь	Net investment income (if negative, enter -0-)			0,114				
c Adjusted net income (if negative, enter -0-)			,					0		

Forr	n 99	0-PF (2019) THE PETERMAN FOUNDATION, INC.	27-13324	L <u>Z</u>	Page 2
P	arŧ (Balance Sheets Atlached schedules and amounts in the description column aboute be for end-of-year amounts only (See instructions)	Beginning of year	End e	of year
		anound be for end-or-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
- {	1	Cash – non-interest-bearing	8,187	5,410	
	2	Savings and temporary cash investments	148,699	77,331	77,331
- 1	3	Accounts receivable >	1	~	
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
ı	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see			
- }		instructions)			l
	7	Other notes and loans receivable (att. schedule) ▶			-
		Less' allowance for doubtful accounts ▶		- 	
S	8	Inventories for sale or use	-		
Assets		Prepaid expenses and deferred charges			
š.	10a	Prepaid expenses and deferred charges Investments – US and state government obligations (attach schedule)STMT 4	518,747		
	b	Investments – corporate stock (attach schedule) SEE STMT 5	2,290,130	2 011 735	2,334,984
ł	c	Investments – corporate stock (attach schedule) SEE STMT 6			
. .	11		- 1,000,003		2,587,636
	• •	Investments - land, buildings, and equipment basis		- +	
	12	Less accumulated depreciation (attach sch.)			l
l i	13	Investments - mortgage loans			
- 1	14	Investments – other (attach schedule)	-,-		
- '	14	Land buildings, and equipment basis			
1.	15	Less, accumulated depreciation (attach sch.)			
- 1	15 16	Other assets (describe Total assets (to be completed by all filers – see the			
	10	instructions. Also, see page 1, item I)	4 653 766	4 634 343	5 005 361
+	17	Accounts revealed account expresses	4,033,700	4,054,545	5,005,361
J	18	Accounts payable and accrued expenses		······································	
		Grants payable			
	19	Deferred revenue			
اهَ	20	Loans from officers, directors, trustees, and other disqualified persons			
의 :	21	Mortgages and other notes payable (atlach schedule)			
- 1	22	Other liabilities (describe >	0		<u> </u>
+	23	Total liabilities (add lines 17 through 22)			
S		Foundations that follow FASB ASC 958, check here X and complete lines 24, 25, 29, and 30.			ď
낕.			A (E2 266	4 624 242	. 'i
<u>₩</u>]		Net assets without donor restrictions	4,653,766	4,634,343	
iii i	25	Net assets with donor restrictions Foundations that do not follow FASB ASC 958, check here			
2					1
Fund		and complete lines 26 through 30.			'1
b 4	26	Capital stock, trust principal, or current funds			<u> </u>
\$ 2	27	Paid-in or capital surplus, or land, bldg , and equipment fund			
221	28	Retained earnings, accumulated income, endowment, or other funds	4 650 566		
¥ 2		Total net assets or fund balances (see instructions)	4,653,766	4,634,343	
Net 3	30	Total liabilities and net assets/fund balances (see	4 650 566	4 604 646	
-		instructions)	4,653,766	4,634,343	
	art I				
-		net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with		
		of-year figure reported on pnor year's return)		1	4,653,766
		amount from Part I, line 27a		2	-19,423
		r increases not included in line 2 (itemize) ▶	,	3	
4 A	Add I	ines 1, 2, and 3		4	4,634,343
		eases not included in line 2 (itemize)	., , . ,	5	
6 7	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column	n (b), line 29	6	4,634,343
					Form 990-PF (2019)

			27-1332412		Page 3
Part IV Capital Gains :	and Losses for Tax on Investm	ent Income			
	the kind(s) of property sold (for example, real estate rehouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donalion	(c) Date accurred (mo., day, yr)	(d) Date sold (mo , day, yr)
1a FIRST NATIONAL	(SEE ATTACHED)				
b HUNTINGTON NAT	'L (SEE ATT'D)				
ε					
<u>d</u>					
е		n			<u> </u>
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)	(g) Cost or plus exper			in or (loss) (f) minus (g))
a 7,276	<u> </u>			((-) p.es	7,276
ь 6,556				<u>-</u>	6 556
c				·	
d		·····			
_e					
Complete only for assets show	ng gain in column (h) and owned by the	foundation on 12/	31/69	(I) Gains (Co	I, (h) gain mınus
(I) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col			it less than -0-) or from col. (h))
a					7,276
b					6,556
<u>C</u>					
d					
<u>e</u>		Part Line 7		1	
2 Capital gain net income or (net	capital loss) If (loss), enter -0- in P		1	2	13,832
3 Net short-term capital gain or (li	oss) as defined in sections 1222(5) and (_	<u> </u>	-	25,002
, , ,	8, column (c) See instructions. If (loss),	_	1		
Part I, line 8		<u></u>		3_	
Part V Qualification U	nder Section 4940(e) for Reduc	ed Tax on No	et Investment Inc	come	
(For optional use by domestic priva	te foundations subject to the section 494	0(a) tax on net in	vestment income)		
If section 4940(d)(2) applies, leave	this part blank				
Mac the foundation liable for the co	ction 4942 tax on the distributable amour	nt of any year in th	no hasa pagad?		Yes X No
	ify under section 4940(e). Do not complete		ic base period?		☐ 163 E3 110
	each column for each year, see the inst		aking any entries		
(a)	(b)	1	(c)		(d)
Base period years Calendar year (or tax year beginning in	Auftrestant more former abstractions	Net value	of nonchantable-use assets		tribution ratio divided by col (c))
2018	238,4	48	4,851,67	3	0.049148
2017	218,7	20	4,770,73		0.045846
2016	237,4		4,688,50		0.050651
2015	227,0		4,833,95		0.046974
2014		[07]	4,864,26	97	0.036862
O. Takel of her A. cohome (d)					0 220401
2 Total of line 1, column (d)	5-year base penod – divide the total on	line 2 by 50° or b	· · · · · · · · · · · · · · · · · · ·	. 2	0.229481
	ion has been in existence if less than 5 y		, ,	3	0.045896
4 Enter the net value of nonchant	able-use assets for 2019 from Part X, line	5	,	4	4,851,673
5 Multiply line 4 by line 3				5	222,672
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)			6	901
7 Add lines 5 and 6				7	223,573
• •	P + 2011				
8 Enter qualifying distributions from If line 8 is equal to or greater that	n Part XII, line 4 an line 7, check the box in Part VI, line 1b	, and complete th	at part using a 1% ta	x rate See the	240,308
Part VI instructions,					

Form	990-PF (2019) THE PETERMAN FOUNDATION, INC. 27-1332412		Page 4
P	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	e instru	ctions)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1		<u>^, </u>
	Date of ruling or determination letter (attach copy of letter if necessary—see Instructions)		•
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check	•	901
	here ► X and enter 1% of Part I, line 27b		•
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of		
•	Part I, line 12, col (b)		-
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		0
3			901
4	Add lines 1 and 2 Subtille A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 4		307
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	·····	901
	• • • • • • • • • • • • • • • • • • • •		901
6	Credits/Payments 2019 estimated tax payments and 2018 overpayment credited to 2019 4 , 082	r	t i
а			}
b	Exempt foreign organizations tax withheld at source 6b		,
c	Tax paid with application for extension of time to file (Form 8868)		1 * * [
d	Backup withholding erroneously withheld		- 5 6 6 Y
7	Total credits and payments. Add lines 6a through 6d	4	082
8	Enter any penalty for underpayment of estimated tax. Check he of Form 2220 is attached.		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		101
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10	<u> </u>	181
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 3,181 Refunded ▶ 11		
	ht'VII-A'I Statements Regarding Activities	, , , , , , , , , , , , , , , , , , , 	
1a	Dunng the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Yes	No
	participate or intervene in any political campaign?	1a	X
b	Did it spend more than \$100 duning the year (either directly or indirectly) for political purposes? See the		
	Instructions for the definition	1b	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	1:1:	1. 1
	published or distributed by the foundation in connection with the activities		
С	Did the foundation file Form 1120-POL for this year?	1c	X
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 ▶ \$		1 1
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		1 ;
	on foundation managers > \$.	السا.
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	X
	If "Yes," attach a detailed description of the activities	[
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	1 - 1 .	أأسا
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	x
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	X
	If "Yes," attach the statement required by General Instruction T	7	- 1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		1 .1
-	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?	6 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	7 X	
8а	Enter the states to which the foundation reports or with which it is registered. See instructions.	 	1
Ja	MONE	- .	
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		1
b	1 1 2 1 2 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2	8b X	' '
	(or designate) of each state as required by General Instruction G? If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	8b X	+
^	is the councidation craiming status as a private checaling counciding Milling Meaning of Section 4447(1)(1) of	1 ' I	1 - 4
		1 1	1
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See instructions for Part XIV. If "Yes,"		
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See instructions for Part XIV If "Yes," complete Part XIV	9	x
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See instructions for Part XIV If "Yes,"	9	x

Form 990-PF (2019)

	1 990-PF (2019) THE PETERMAN FOUNDATION, INC.		L332412	· /aaatuu			Р	age (
	art VII-B. Statements Regarding Activities for Which For	11 4/20 May E	se Required	(CONUIN	uea)		T	T
Эa	During the year did the foundation pay or incur any amount to	nn 4045(a)\2	Г	Yes [X No		Yes	No
	 Carry on propaganda, or otherwise attempt to influence legislation (section). Influence the outcome of any specific public election (see section 4955). 		· · L	jies į	X] No	1 .	ľ	Ι.
	directly or indirectly, any voter registration drive?	or to carry on,		lvas F	جاء ا ل	1	ł	١,;
	* * * * * * * * * * * * * * * * * * * *			Yes	X No	`		
	(3) Provide a grant to an individual for travel, study, or other similar purpose	••• ,	, L	Yes [X No	1] .	Į
	(4) Provide a grant to an organization other than a chantable, etc., organiza	don described in) v	⊡			1
	section 4945(d)(4)(A)? See instructions		L	Yes [X No]	<u>}</u> ,	},
	(5) Provide for any purpose other than religious, chantable, scientific, literary	y, or educational	_) r				
	purposes, or for the prevention of cruelty to children or animals?		<u>-</u>	Yes [X No	1	i +	l
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify	· ·			/-	<u> </u>	-	[<u>:</u>
	in Regulations section 53 4945 or in a current notice regarding disaster assi		actions (, ,		N/A	5b	,	ļ
	Organizations relying on a current notice regarding disaster assistance, chec	•			▶ []	١.	ľ .	ĺ
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption	n from the tax	(ľ,	١ ١	,
	because it maintained expenditure responsibility for the grant?		N/A _	Yes	_ No	•	ł	l
	If "Yes," attach the statement required by Regulations section 53 4945-5(d).							١.
6a	Did the foundation, during the year, receive any funds, directly or indirectly, t	o pay premiums	_		_	·	٠,	٠,
	on a personal benefit contract?	,	., L	Yes 2	K No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit	contract?		_	6b		X
	If "Yes" to 6b, file Form 8870				• • • • •			_
7a	At any time during the tax year, was the foundation a party to a prohibited ta	x shelter transacti	on?	Yes	₹ No	.		
b	If "Yes," did the foundation receive any proceeds or have any net income att	nbutable to the tra	insaction?		N/A	7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of more than	\$1,000,000 in			·			-
	remuneration or excess parachute payment(s) during the year?		., [_	Yes 2	√ √ √ √ √ √ √ √ √ √ √ √ √ √ √ √ √ √ √			, ,
"Pa	rt VIII Information About Officers, Directors, Trustees,	Foundation N	lanagers, H	ighly Pa	id Em	ploye	ees,	
	and Contractors						•	
1 L	ist all officers, directors, trustees, and foundation managers and their of							
	ist air onicers, directors, trustees, and foundation managers and their c	ompensation. Se	e instructions	•				
	ist all onicers, directors, trustees, and foundation managers and their c	J	1	(d) Cont	ributions to	T		
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid,	(d) Cont employ	ree benefit		perse a	
		(b) Title, and average	(c) Compensation	(d) Cont employ plans a			pense a r allowa	
тн	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid,	(d) Cont employ plans a	ree benefit nd deferred			
	(a) Name and address OMAS A VORBACH MORGANTOWN	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid,	(d) Cont employ plans a	ree benefit nd deferred	othe		
50	(a) Name and address OMAS A VORBACH MORGANTOWN O9 LARE LYNN DRIVE WV 26508	(b) Title, and average hours per week devoted to position PRESIDENT	(c) Compensation (if not paid,	(d) Cont employ plans a comp	ree benefit nd deferred ensation	othe		
50	(a) Name and address OMAS A VORBACH MORGANTOWN O9 LAKE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN	(b) Title, and average hours per week devoted to position PRESIDENT 1 00	(c) Compensation (if not paid,	(d) Cont employ plans a comp	ree benefit nd deferred ensation	othe		
50 LA 65	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LAKE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00	(c) Compensation (if not paid,	(d) Cont employ plans a comp	ree benefit nd deferred ensation	othe		
50 LA 65 SH	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LAKE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505 ERI O SMITH CLEMMONS	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00 SEC./TREAS.	(c) Compensation (if not paid,	(d) Cont employ plans a comp	ree benefit nd deferred ensation	othe		onces 0
50 LA 65 SH	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LAKE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00	(c) Compensation (if not paid,	(d) Cont employ plans a comp	ree benefit nd deferred ensation	othe		onces 0
50 LA 65 SH	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LAKE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505 ERI O SMITH CLEMMONS	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00 SEC./TREAS.	(c) Compensation (if not paid,	(d) Cont employ plans a comp	ree benefit nd deferred ensation	othe		onces 0
50 1.A 65 SH 84	(a) Name and address OMAS A VORBACH MORGANTOWN O9 LAKE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505 ERI O SMITH CLEMMONS 5 MALLARD LANDING BLVD NC 27012	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00 SEC./TREAS. 1.00	(c) Compensator (If not paid, enter -0-)	(d) Cont employ plans a comp	ree benefit nd deferred ensation	othe		onces 0
50 LA 65 SH	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LAKE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505 ERI O SMITH CLEMMONS	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00 SEC./TREAS. 1.00	(c) Compensator (If not paid, enter -0-)	(d) Cont employ plans a comp	ree benefit nd deferred ensation	othe		onces 0
50 1.A 65 SH 84	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LAKE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505 ERI O SMITH CLEMMONS 5 MALLARD LANDING BLVD NC 27012 Compensation of five highest-paid employees (other than those include	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00 SEC./TREAS. 1.00 d on line 1 ~ see	(c) Compensator (If not paid, enter -0-)	(d) Cont employ plans a comp	ree benefit nd deferred ensation	othe		onces 0
50 1.A 65 SH 84	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LAKE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505 ERI O SMITH CLEMMONS 5 MALLARD LANDING BLVD NC 27012 Compensation of five highest-paid employees (other than those include "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00 SEC./TREAS. 1.00	(c) Compensation (if not paid, enter -0-)	(d) Contemploy plans a comp	ee benefit nd deferred ensation C C C C D D D D D D D D D	(e) Exp	r allowa	O O O O O O O O O O O O O O O O O O O
50 1.A 65 SH 84	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LAKE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505 ERI O SMITH CLEMMONS 5 MALLARD LANDING BLVD NC 27012 Compensation of five highest-paid employees (other than those include	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00 SEC./TREAS. 1.00 d on line 1 ~ sec	(c) Compensator (If not paid, enter -0-)	(d) Contemploy plans a compound of the compoun	ee benefit nd deferred ensation C C O enter chubtons to ee benefit nd deferred	(e) Exp	allowa	O O O O O O O O O O O O O O O O O O O
50 LA 65 SH 84	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LARE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505 ERI O SMITH CLEMMONS 5 MALLARD LANDING BLVD NC 27012 Compensation of five highest-paid employees (other than those include "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00 SEC./TREAS. 1.00 d on line 1 ~ sec	(c) Compensation (if not paid, enter -0-)	(d) Contemploy plans a compound of the compoun	ee benefit nd deferred ensation C C C C D D D D D D D D D	(e) Exp	r allowa	O O O O O O O O O O O O O O O O O O O
50 1.A 65 SH 84	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LARE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505 ERI O SMITH CLEMMONS 5 MALLARD LANDING BLVD NC 27012 Compensation of five highest-paid employees (other than those include "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00 SEC./TREAS. 1.00 d on line 1 ~ sec	(c) Compensation (if not paid, enter -0-)	(d) Contemploy plans a compound of the compoun	ee benefit nd deferred ensation C C O enter chubtons to ee benefit nd deferred	(e) Exp	r allowa	O O O O O O O O O O O O O O O O O O O
50 LA 65 SH 84	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LARE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505 ERI O SMITH CLEMMONS 5 MALLARD LANDING BLVD NC 27012 Compensation of five highest-paid employees (other than those include "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00 SEC./TREAS. 1.00 d on line 1 ~ sec	(c) Compensation (if not paid, enter -0-)	(d) Contemploy plans a compound of the compoun	ee benefit nd deferred ensation C C O enter chubtons to ee benefit nd deferred	(e) Exp	r allowa	O O O O O O O O O O O O O O O O O O O
50 LA 65 SH 84	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LARE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505 ERI O SMITH CLEMMONS 5 MALLARD LANDING BLVD NC 27012 Compensation of five highest-paid employees (other than those include "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00 SEC./TREAS. 1.00 d on line 1 ~ see	(c) Compensation (if not paid, enter -0-)	(d) Contemploy plans a compound of the compoun	ee benefit nd deferred ensation C C O enter chubtons to ee benefit nd deferred	(e) Exp	r allowa	O O O O O O O O O O O O O O O O O O O
50 LA 65 SH 84	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LARE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505 ERI O SMITH CLEMMONS 5 MALLARD LANDING BLVD NC 27012 Compensation of five highest-paid employees (other than those include "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00 SEC./TREAS. 1.00 d on line 1 ~ see	(c) Compensation (if not paid, enter -0-)	(d) Contemploy plans a compound of the compoun	ee benefit nd deferred ensation C C O enter chubtons to ee benefit nd deferred	(e) Exp	r allowa	O O O O O O O O O O O O O O O O O O O
50 LA 65 SH 84	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LARE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505 ERI O SMITH CLEMMONS 5 MALLARD LANDING BLVD NC 27012 Compensation of five highest-paid employees (other than those include "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00 SEC./TREAS. 1.00 d on line 1 ~ see	(c) Compensation (if not paid, enter -0-)	(d) Contemploy plans a compound of the compoun	ee benefit nd deferred ensation C C O enter chubtons to ee benefit nd deferred	(e) Exp	r allowa	O O O O O O O O O O O O O O O O O O O
50 LA 65 SH 84	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LARE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505 ERI O SMITH CLEMMONS 5 MALLARD LANDING BLVD NC 27012 Compensation of five highest-paid employees (other than those include "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00 SEC./TREAS. 1.00 d on line 1 ~ see	(c) Compensation (if not paid, enter -0-)	(d) Contemploy plans a compound of the compoun	ee benefit nd deferred ensation C C O enter chubtons to ee benefit nd deferred	(e) Exp	r allowa	O O O O O O O O O O O O O O O O O O O
50 LA 65 SH 84	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LARE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505 ERI O SMITH CLEMMONS 5 MALLARD LANDING BLVD NC 27012 Compensation of five highest-paid employees (other than those include "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00 SEC./TREAS. 1.00 d on line 1 ~ see	(c) Compensation (if not paid, enter -0-)	(d) Contemploy plans a compound of the compoun	ee benefit nd deferred ensation C C O enter chubtons to ee benefit nd deferred	(e) Exp	r allowa	O O O O O O O O O O O O O O O O O O O
50 LA 65 SH 84	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LARE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505 ERI O SMITH CLEMMONS 5 MALLARD LANDING BLVD NC 27012 Compensation of five highest-paid employees (other than those include "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00 SEC./TREAS. 1.00 d on line 1 ~ see	(c) Compensation (if not paid, enter -0-)	(d) Contemploy plans a compound of the compoun	ee benefit nd deferred ensation C C O enter chubtons to ee benefit nd deferred	(e) Exp	r allowa	O O O O O O O O O O O O O O O O O O O
50 LA 65 SH 84	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LARE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505 ERI O SMITH CLEMMONS 5 MALLARD LANDING BLVD NC 27012 Compensation of five highest-paid employees (other than those include "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00 SEC./TREAS. 1.00 d on line 1 ~ see	(c) Compensation (if not paid, enter -0-)	(d) Contemploy plans a compound of the compoun	ee benefit nd deferred ensation C C O enter chubtons to ee benefit nd deferred	(e) Exp	r allowa	O O O O O O O O O O O O O O O O O O O
50 1.20 65 5 SH 84	(a) Name and address OMAS A VORBACH MORGANTOWN 09 LARE LYNN DRIVE WV 26508 URIE C. BARBE MORGANTOWN 1 KILARNEY DRIVE WV 26505 ERI O SMITH CLEMMONS 5 MALLARD LANDING BLVD NC 27012 Compensation of five highest-paid employees (other than those include "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT 1 00 VICE PRES. 1.00 SEC./TREAS. 1.00 d on line 1 ~ see	(c) Compensation (if not paid, enter -0-)	(d) Contemploy plans a compound of the compoun	ee benefit nd deferred ensation C C O enter chubtons to ee benefit nd deferred	(e) Exp	r allowa	O O O O O O O O O O O O O O O O O O O

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, F and Contractors (continued)		inproyees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter	"NONE."	
	of service	(c) Compensation
NONE		
11/2/20 - 11 - 11/4 - 11		
35 1644		
otal 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 chanteble activities during the tax year include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc		Expenses
1 SEE STATEMENT 7		
2,		
3	.,	
4	•••••	
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tox year on lines 1 and 2.		Amount
1 N/A		
2		
· · · · · · · · · · · · · · · · · · ·		
All other program-related investments, See instructions		
3		
	., ., .	
	•	

Form 990-PF (2019)

qualifies for the section 4940(e) reduction of tax in those years.

	B	(a) Corpus	(b) Years pnor to 2018	(c)	(d)
1	Distributable amount for 2019 from Part XI,	Curpus	rears prior to 2018	2018	2019
_	line 7				241,683
2 _	Undistributed income, if any, as of the end of 2019			222 120	
a	Enter amount for 2018 only	<u></u>		232,129	
_	Total for prior years 20, 20				
3	Excess distributions carryover, if any, to 2019			İ	
a	From 2014	-		}	
D	From 2015	4		ļ	
C	From 2016	1			
	From 2017	_	1].	
	From 2018		 		
	Total of lines 3a through e		, r		
4	Qualifying distributions for 2019 from Part XII,	· ·		}	
	line 4 ▶ \$240,308			000 100	
	Applied to 2018, but not more than line 2a			232,129	
b	Applied to undistributed income of pnor years	1	ľ		
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required - see instructions)		 		0.170
d	Applied to 2019 distributable amount				8,179
_	Remaining amount distributed out of corpus		ļ		
5	Excess distributions carryover applied to 2019	ľ	1		
	(If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as	1		1	
	indicated below:		ŀ		
	Corpus Add lines 3f, 4c, and 4e Subtract line 5		<u> </u>		
b	Prior years' undistributed income Subtract	- 11 :	ĺ	{	(
	line 4b from line 2b	·	 		
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		<u> </u>		
d	Subtract line 6c from line 6b Taxable	_	[
	amount - see instructions		 		
е	Undistributed income for 2018 Subtract line]		,
	4a from line 2a Taxable amount – see	,			!
	instructions				<u> </u>
f	Undistributed income for 2019 Subtract lines	}	'		
	4d and 5 from line 1. This amount must be				000 504
	distributed in 2020				233,504
7	Amounts treated as distributions out of corpus]			,
	to satisfy requirements imposed by section		ĺ		,
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)	ļ			
8	Excess distributions carryover from 2014 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2020.		}	j	
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
а	Excess from 2015				
þ	Excess from 2016			j	
С	Excess from 2017			İ	
đ	Excess from 2018	•			
9	Excess from 2019		: I	į į	

	990-PF (2019) THE PETERMAN			27-13324		Page 10
	art XIV. Private Operating Fo				on 9)	
1a	If the foundation has received a ruling of			perating		
	foundation, and the ruling is effective fo			^	L	
ь	Check box to indicate whether the foun		perating foundation di		942(j)(3) or 4	94Ž(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	4) 0040	Pnor 3 years		(e) Total
	income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(-,
	investment return from Part X for					
	each year listed					
b	85% of line 2a					
C	Qualifying distributions from Part XII,		ļ			
	line 4, for each year listed					
d	Amounts included in line 2c not used directly		1			
	for active conduct of exempt activities					
8	Qualifying distributions made directly					
	for active conduct of exempt activities		i	Y	i	1
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the		/	1		
	alternative test relied upon:					
а	"Assets" alternative test – enter			1	1	1
	(1) Value of all assets					
	(2) Value of assets qualifying under		/]	
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test - enter 2	3	-			
	of minimum investment return shown in			ĺ		ĺ
	Part X, line 6, for each year listed		ļ <u>. </u>	l		
C	"Support" alternative test - enter		[
	(1) Total support other than gross					
	investment income (interest,				ļ	
	dividends, rents, payments on					
	secunties loans (section		ļ	ļ		
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4842(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	ap exempt organization					
	(4) Gross investment income					
· Ps	ort XV Supplementary Inform	nation (Complet	e this part only	if the foundation	had \$5,000 or	more in assets a
. • .•	any time during the y	•	•		40,000 0.	
1	Information Regarding Foundation M		10ti0113.)			
a	List any managers of the foundation who	-	nore than 2% of the t	ntal contributions rece	wed by the foundation	nn.
a	before the close of any tax year (but only					חות
	/	y ii tiley have contin	nated more man 45,0	oo, (dee section do)	(U)(2))	
	N/A List any managers of the foundation who	109/ or more	of the stock of a com-	amtion (or an aqually	large portion of the	
b					large portion of the	
	ownership of a partnership or other entit	y) of which the found	ation has a 10% or g	greater interest		
	N/A Information Regarding Contribution, (0	Nahalasahir sta 🌣			
2						
	Check here ► X if the foundation only		-	-	· · · · · · · · · · · · · · · · · · ·	
	unsolicited requests for funds If the four	=	grants, etc., to individ	luals or organizations	under other condition	ons,
	complete items 2a, b, c, and d. See inst					
а	The name, address, and telephone num	ber or email address	s of the person to who	om applications should	d be addressed	
	SEE ATTACHED.					
				··	<u> </u>	
b	The form in which applications should be	e submitted and info	rmation and materials	they should include		
	SEE ATTACHED.					
С	Any submission deadlines					
	SEE ATTACHED.			· 		
d	Any restrictions or limitations on awards,	such as by geograp	ohical areas, chantabl	e fields, kinds of instit	utions, or other	
	factors					
	SEE ATTACHED.					
DAA						Form 990-PF (2019)

Part XV: Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment if recipient is an individual, Recipient show any relationship to Purpose of grant or status of recipient Name and address (home or business) or substantial contributor a Paid during the year MOUNTAINEER SPAY NEUTER ASSIST. PRO 1216 PHILLIP ST. NONE 501C3 MORGANTOWN WV 26501 SPAYING AND NEUTERING ANIMALS 50,000 PRESTON COUNTY HUMANE SOCIETY 116 BROWN AVENUE NONE 501C3 KINGWOOD WV 26537 SPAYING AND NEUTERING ANIMALS 10,000 HOMEWARD BOUND WV, INC. 501C3 PO BOX 80 NONE ARTHURDALE WV 26520 SPAYING AND NEUTERING ANIMALS 20,000 PET HELPERS, INC. 726 EAST PARK AVE, PMB 3 NONE 501C3 FAIRMONT WV 26554 SPAYING AND NEUTERING ANIMALS 50,000 ANIMAL FRIENDS OF NORTH CENTRAL WV 501C3 252 BREWER ROAD NONE MORGANTOWN WV 26508 SPAYING AND NEUTERING ANIMALS 50,000 MARION COUNTY HUMANE SOCIETY NONE 501C3 PO BOX 905 SPAYING AND NEUTERING ANIMALS 25,000 FAIRMONT WV 26554 MOUNTAINEERS FOR MUTTS 2002 WHITEHALL COURT NONE 501C3 MORGANTOWN WV 26508 SPAYNG AND NEUTERING ANIMALS 15,000 STEPPING STONES 400 MYLAN PARK NONE 501C3 HELPING DISABLED INDIVIDUALS MORGANTOWN WV 26501 13,000 233,000 **▶** 3a **b** Approved for future payment N/A **▶** 3b Total

	mounts unless otherwise indicated		business Income	Excluded by	section 512, 513, or 514	
-	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
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a b		 		 		
<u>-</u>				+		
d		 		+		
		 				
,		 		 - -		
	and contracts from government agencies	<u> </u>		 		
=	in duce and accomments		—	+		
	savings and temporary cash investments			14	28,010	
	and interest from securities	1		14	84,750	
	income or (loss) from real estate	 	-	+	017,00	<u>.</u>
	nancod property	 		 	-	
	aht fannand aranash.			+	· · · · · · · · · · · · · · · · · · ·	
	income or (loss) from personal property			 		
				 -		
	estment income	 		14	13,832	128,833
9 Net meem	a as /lace) from enacial avante			+	13,032	120,033
40 Gross proj	fit or (loss) from sales of inventory	 		++		
11 Other reve		<u> </u>				
				+		
		<u> </u>		 		
		<u> </u>		 		
		 		 		
e	Add columns (b), (d), and (e)				126,592	128,833
12 Sublutal A	Add columns (b), (d), and (e)	<u></u>			42	255,425
(Soo worksho	I line 12, columns (b), (d), and (e)	.,,,,,,				233,423
Part XVI-		ccomplish	nent of Evemn	of Purnos	AC	· · · · · · · · · · · · · · · · · · ·
Line No.	Explain below how each activity for which income					the
∠ iiie itto.	accomplishment of the foundation's exempt purp					
N/A		\			,	
						
						
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···					· · · · · · · · · · · · · · · · · · ·	
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		······			····	
			····			

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitate Organizations 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a nonchantable exempt organization of (1) Cash (2) Other assets b Other transactions (1) Sales of assets to a nonchantable exempt organization (2) Purchases of assets from a nonchantable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations c Shanng of facilities, equipment, mailing lists, other assets, or paid employees	Yes)))))))))	·
in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a nonchantable exempt organization of (1) Cash (2) Other assets b Other transactions (1) Sales of assets to a nonchantable exempt organization (2) Purchases of assets from a nonchantable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations)	X X X X X X
organizations? a Transfers from the reporting foundation to a nonchantable exempt organization of (1) Cash (2) Other assets b Other transactions (1) Sales of assets to a nonchantable exempt organization (2) Purchases of assets from a nonchantable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations)	X X X X X
a Transfers from the reporting foundation to a nonchantable exempt organization of (1) Cash (2) Other assets b Other transactions (1) Sales of assets to a nonchantable exempt organization (2) Purchases of assets from a nonchantable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations)	X X X X X
(1) Cash (2) Other assets (3) Other transactions (1) Sales of assets to a nonchantable exempt organization (2) Purchases of assets from a nonchantable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (1) Loans or loan guarantees)	X X X X X
(2) Other assets b Other transactions (1) Sales of assets to a nonchantable exempt organization (2) Purchases of assets from a nonchantable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations 1a(2) 1b(3) 1c(3) 1c()	X X X X X
b Other transactions (1) Sales of assets to a nonchantable exempt organization (2) Purchases of assets from a nonchantable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations 1b(6))	X X X X X
(1) Sales of assets to a nonchantable exempt organization 1b(1) (2) Purchases of assets from a nonchantable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6))))	X X X X
(2) Purchases of assets from a nonchantable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations 1b(6))))	X X X X
(3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations 1b(6))))	X X X
(4) Reimbursement arrangements)	X X
(5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations 1b(6))	X
(6) Performance of services or membership or fundraising solicitations	4	X
	1	
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees		X
d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market		
value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market		
value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received,		
(a) Line no (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrange	ments	
N/A		
		—
		—
		—
		
2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations		١
	es X	No
b If "Yes," complete the following schedule		
(a) Name of organization (b) Type of organization (c) Description of relationship		
N/A		
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 correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	, it is true	<u>, </u>
May the IRS discuss the	return	
Sign with the preparer shown	_	1l
Here de maudans X	Yos	No
1/4/2020 PRESIDENT		
Signature of officer or trustee Date Title		
Print/Type preparer's name Preparer's signalure 1/ Dato	- i	<u> </u>
The species in the second seco	Check self-erne	il
Paid MELISSA S. WATKINS, ESQ. MELISSA S. WATKINS, ESQ.	المراج	in ken
Preparer COMPROD 6 TOUNGON DAYS	2000	
Use Only Firm's name ► STEPTOE & JOHNSON PLLC PTIN PU06/0		

MORGANTOWN, WV 26507-1616

27-1332412		Federal Sta	Statements	S			:	
1 8	Statement 1 - Fo	- Form 990-PF, Part I.		Line 6a - Sale of Assets	<u>sets</u>			
Description		Received						
Whom Date Sold Acquired	Date Sold	Sale Price	Cost	Expense	se Depreciation	siation	Net Gain / Loss	SS
A A	ATTACH) VARIOUS \$ ATTACH)	PURCHASE 1,423,030 \$ PURCHASE	1,388,756	\$ 95,	v	0 7	\$ 34,	274
VARIOUS (SEE ATTACHI VARIOUS	VARIOUS IED) VARIOUS	501,193 PURCHASE 447,162	462,542	542 312	447		38,651-6,597	651 597
BANK LT (SEE ATTACH) VARIOUS	RIOUS	PURCHASE 138,552	076,				62,	505
TOTAL	w.	3,509,937 \$	3,380,6	657 \$	447 \$	0	\$ 128,8	833
	Statement 2 - Form 990-PF.		Net	Part I, Line 16a - Legal Fees	β	O	Charitable	
STEPTOE & JOHNSON PLLC	, v	2,470	s s	. s	ב	۰ ا س	asodin L	
TOTAL	w.	2,470	w.	\$	0	့ တ	0	
Description	Form 990-PF	Part I,	Line 23 - An	- Amortization				
Date Acquired	Cost Basis	Prior Year Amortization	Life	Current Year Amortization	Net Investment Income	!	Adjusted Net Income CC	COGS
AMORTIZATION ON 50,000 UNITS OF MA \$ AMORTIZATION ON 75,000 UNITS OF WV AMORTIZATION ON 75,000 UNITS PARKE AMORTIZATION ON 50,000 UNITS BERKE	MARSHALL CN WV STR DEV KERSBURG WV KELRY COUNT	CNTY WVA \$ 423 .V AUTH 121 WV WRTWK 217 NTY WV BD 2,167	ഗ		ഗ	v _r		
							1-2	01

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27-1332412 Federal Statements	
Form 990-PF, Part I, Line 23 - Amortization (continued)	
Description	
Date Cost Prior Year Current Year Net Investment Adjust Adjust Acquired Basis Amortization Life Amortization Income Income	Adjusted Net Income COGS
S WV ST \$ \$ \$ S WEST VIRGINIAST REF 4	
2, 75,000 UNITS WV ST WIR DEV AUTH	
AMORTIZATION ON 50,000 UNITS WV ST REF 4%	
AMORITIZATION ON 75,000 UNITS WHEELING WV WTRWKS	
AMORITIZATION ON 50,000 UNITS BERKELEY CTY WV BD 818	
AMORITIZATION ON 75,000 UNITS WV ST WTR DEV AUTH	
AMORITIZATION ON 50,000 UNITS BERKELEY CTY WV BD	
AMORITIZATION ON 50,000 UNITS PUTNAM CNTY WV BD ED	
AMORITIZATION ON 65,000 UNITS WV UNIV REVS RED-WVA	
AMORITIZATIN ON 60,000 UNITS WV UNIV REVS WV	
AMORITIZATION ON 50,000 UNITS PARKERSBURG WV WTRWK	
AMORITIZATION ON 50,000 UNITS WV ST SCH BLDG AUTH	
AMORITIZATION ON 50,000 UNITS BERKELEY CTY WV BRD	
AMORITIZATION ON 50,000 UNITS PUTNAM CNTY WV BRD	
AMORITIZATION ON 50,000 UNITS WV HIGHER ED POL	
AMORITIZATION ON 65,000 UNITS WV UNIV REVS REF	
AMORITIZATION ON 50,000 UNITS WV UNIV REVS WV 96	
ON 50,000 UNITS WV UNIV REVS WV	

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27-1332412		Federal Sta	Statements	nts			
	Form 990-PF, P.	art I, Line 23 -	Amort	990-PF, Part I, Line 23 - Amortization (continued)	(pa		
Description							
Date	Cost Basis	Prior Year Amortization	Life	Current Year Amortization	Net Investment Income	Adjusted Net Income	SOCO
AMORITIZATION ON 60,000 UNITS WV UNIV REVS WV AMORITIZATION ON 50,000 UNITS PARKERSBURG WV WIRWK	WV UNIV REVS WV \$ PARKERSBURG WV	2,879 WIRWK		\$	w.	\$	
AMORITIZATION ON 50,000 UNITS WV	WV ST SCH BLDG		•				
COSTCO WHOLE CORP 2.75%		8.5		•			
IBM CORP 3.3%	•	144 1 7 7					
INTEL CORP		/71		,			
INTERCON EXCHANGE 2.5%		9/			,	l	
JP MORGAN 2.4%		טענט טענט נע					
ORACLE CORP 3.625%		500 500 500					
IBM CORP 3.375%		700					
BANCORP SERIES MIN 3.9%		4/2					
BANK OF NEW MELLON SERIES G		4 L					
TOTAL	s	28,961		0 s	8	0 \$	
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		Charitable Purpose	\$ 7,225 18 65 \$ 7,308		Fair Market Value	\$\frac{\pi}{4}
	sesuedx	Adjusted Net	\$	State Government Investments	Basis of Valuation	COST COST COST COST COST COST COST COST
Statements	Part I, Line 23 - Other Expenses	Net Investment	\$ 31,616	- US and	End of Year	w.
Federal St	Statement 3 - Form 990-PF, Pa	Total	\$ 31,616 454 7,225 18 65 \$ \$ \$ \$ 39,378	990-PF, Part II, Line 10a	Beginning of Year	\$ 50,000 51,670 49,928 51,732 99,561 50,000 50,000 50,000 \$ 518,747
27-1332412	Statement	Description	EXPENSES INVESTMENT/MANAGEMENT FEES FOREIGN TAXES PAID ADVERTISING BANK SERVICE CHARGE/WIRE FEES OTHER TOTAL	Statement 4 - Form 99	Description	95662MN22 WV ST HSG DEV FD SER 95653VL2 WV ST REF 4% 305459FC8 FAIRMONT WV WTRWKS REV REF 746690CM6 PUTNAM CNTY WVA BRD ED PUB 95648MPFO WV ST ECON DEV AUTH 95662MN48 WV ST HSG DEV FD SER 956704YW4 WV UNIV REVS WV UNIV 956704YYO WV ST HSG DEV FD SER 95662MN22 WV ST HSG DEV FD SER TOTAL

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	ments	Basis of Fair Market Valuation Value	ر. ا	\$ 2,334,984	ments	Basis of Fair Market Valuation Value	(γ-	5T 61,353	51 50,154 51 52,819		•	5T 50,757 5T 50,312		51,	51, 957 51, 562 51, 562	52,918 57 57 56,085 57	
Statements	Line 10b - Corporate Stock Investments	End of Ba Year Val	\$ 999, 696 COST 296, 558 COST 419, 499 COST 295, 982 COST	\$ 2,011,735	c - Corporate Bond Investments	End of Ba Year Val	\$ 78,107 COST COST	60,956 COST	50, 047 COST 50, 817 COST	49,331 COST COST 132,881 COST	49,340	49,536 COST 50,266 COST		50,450 COST 51,629 COST	50, 641 COST 50, 450 COST	COST 50,745 COST 50,365 COST COST COST	
Federal Stater	Form 990-PF, Part II, Line 10k	Beginning of Year	\$ 932,927 385,879 633,724 337,600	\$ 2,290,130	Form 990-PF, Part II, Line 10c -	Beginning of Year	જ	52,250	50,094	49, 226	49,340	49,536 50,443	167,995	50,551 52,036	50,758 50,551	50,844 50,408 142,189 79,052	
27-1332412	Statement 5 - Form	Description	60-0041-01-6-EQUITIES (SEE ATTACHED) 609100094-MUT FUND (SEE ATTACHED) 6091000469-EQUITIES (SEE ATTACHED) 6091000469-MUTUAL FD (SEE ATTACHED) 6091000094 MUTUAL FD (SEE ATTACHED) 60910000469 MUTUAL FD (SEE ATTACHED)		Statement 6 - Form	Description	FEDERATED INTRMD CORP BD FD VANGUARD INTER TERM INV GRADE ADMIRA FIDELITY NEW MARKETS INCOME FIND		%1 110	SISCO CORF 2.0% VANGUARD SHORT TERM CORP BOND FIDELITY SPARTAN INTMD TREASURY BOND	SPARTAN SHORT TERM D INC 2.35%	STATE ST. CORP 2.65% JP MORGAN CHASE & CO 2.4%	2	COSICO WHOLESALE 2.75% IBM CORP 3.375%	COSTCO WHOLESALE 2.75% TNTERNCONTINENTAL EYCHANGE 2.5	MTN 3.9% HORT BD - UND CLASS	

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eral Statements

	(Pi	Fair Market Value	\$ 53,686	412, 635	793, 736 49, 996	49,820	50,010 49,866	50,05	50,013	49,880	50,125	50,406	9,742	37,131	10,484	65,399	19,974	30,861	28,314	28,581	56,362	\$ 2,587,636
	ments (continue	Basis of Valuation	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COSI	COST	COST	COST	1
ents	rate Bond Invest	End of Year	51,286	406,836	ת מ	48,937	50,000	20,000	49,425	49,033	49,910	30, 039 49, 832	9,234	35,520	4,517	64,650	19,957	0,000	28,526	27,728	56, 195 56, 281	ı ∞
Federal Statements	Statement 6 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments (continued	Beginning of Year	\$ 199,783 \$ 142,513 224,756																			\$ 1,688,003
27-1332412	Statement 6 - Form 990-PI	Description	JPMORGAN CORE PLUS BOND FUND PIMCO LOW DURATION INC INST VANGUARD SHORT-TERM FED-ADM #549	VANGUARD SHORT TERM CORP BOND #1945	1.84	FHLB 1.54% FHIR 3 24%			FREDDIE MAC NEKIEN OU04 ZW FHIMC NEKIEN OCOO 2%	FINMA SERIES 0002 1.6%	US TRESURY NB 2.375%	BANK OF AMERICA CORP GMIN 2,65%	FEDERATED INSTITUTIONAL HIGH YIELD B	GOLDMAN SACHS INFLATION PROTECT	GUGGENHEIM LIMITED DURATION CL	LORD ABBETT /SHORT DURATION INOCME	METROPOLITAN WEST UNG BU PIMCO INCOME FIND	DIMCO LONG DIPATTON TOTAL DEPTION FO	FEDERATED INST HIGH YIELD BOND R6	GOLDMAN SACHS INFLATION SEC FUND	LOKU ABBEIT SHOKI DUK INC FUND CL 1 METROPOLITAN WEST UNC BD-1	TOTAL

27	7-1	33	324	1	2

Federal Statements

Statement 7 - Form 990-PF, Part IX-A, Line 1 - Summary of Direct Charitable Activities

Description

THE ORGANIZATION SUPPORTS FREE SPAYING AND NEUTERING OF CATS AND DOGS, THE PREVENTION OF CRUELTY TO ANIMALS, AND THE NEEDS OF THOSE INDIVIDUALS WHO ARE MENTALLY OR PHYSICALLY INCAPACITATED OR INCOMPETENT.

Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

		Description	
SEE	ATTACHED.		

Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

SEE ATTACHED.

Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

SEE ATTACHED.

Attachment to Form 990-PF

The Peterman Foundation, Inc.

EIN: 27-1332412

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

Summary of Capital Gains and Losses for Tax on Investment Income

	Net Gain/Loss
600041016 (Short Term)	\$34,274.16
600041016 (Long Term)	\$38,651.44
6091000469 (Short Term)	(\$6,596.89)
6091000469 (Long Term)	\$62,505.32
Total:	\$128,834.00

Attachment to Form 990-PF

The Peterman Foundation, Inc.

EIN: 27-1332412

Part II: Investments – Corporate Stock

Summary of Investments – Corporate Stock

	Basis of Valuation	Fair Märket Value
60-0041-01-6 (Equities) .	Cost	\$1,146,904.48
6091000094 (Mutual Funds – Equities)	Cost	\$313,789.76
6091000469 (Equities)	Cost	\$571,406.04
6091000469 (Mutual Funds – Equities)	. Cost	\$302,883.78
Total:		\$2,334,984.06

Attachment to Form 990-PF

The Peterman Foundation, Inc.

EIN: 27-1332412

Part XV Supplementary Information

Applications are to be addressed to:

The Peterman Foundation, Inc. 364 Patteson Drive, #265 Morgantown, WV 26505