Form **990-PF** Department of the Treasury

Internal Revenue Service

20202949111400708 EXTENDED TO NOVEMBER 16, 2
Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2019 or tax year beginning 2019 DEC 19, 2019 and ending DEC 31, A Employer identification number Name of foundation SHOTT-BAKER FAMILY FOUNDATION, 84-4000525 Number and street (or P O box number if mail is not delivered to street address) B Telephone number 304-324-3283 422 OAKHURST AVENUE City or town; state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here BLUEFIELD, WV 24701 G Check all that apply: X | Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization: If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here J Accounting method: X Cash I Fair market value of all assets at end of year Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 50,733. (Part I, column (d), must be on cash basis.) _\$ Analysis of Revenue and Expenses Part I (d) Disbursements (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income income 8,125. N/A Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 8a 0. Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 8,125 0 Total. Add lines 1 through 11 0 0. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees **b** Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 21 Travel, conferences, and meetings GDEN,
22 Printing and publication 23 Other expenses Operating 24 Total operating and administrative 0 0 expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 0 26 Total expenses and disbursements 0 Add lines 24 and 25 ο. 27 Subtract line 26 from line 12: 8,125 2 Excess of revenue over expenses and disbursements 0. b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

D	art	Balance Sheets Attached schedules and amounts in the description column should be for end of-year amounts only	Beginning of year	End of	f year
	arı	Column should be for end of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments			
	3	Accounts receivable			
	*	Less: allowance for doubtful accounts			
	4	Pledges receivable			
	'	Less: allowance for doubtful accounts			······································
	5	Grants receivable		-	
		Receivables due from officers, directors, trustees, and other			
	ľ	disqualified persons			
	7	Other notes and loans receivable			
	' '	Less; allowance for doubtful accounts			
		-	·		=
ets		Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
		Investments - U.S. and state government obligations		0 105	FO 722
	_	Investments - corporate stock STMT 1	0.	8,125.	50,733.
		Investments - corporate bonds			·
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans		<u></u>	
	13	Investments - other			
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe >)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	0.	8,125.	50,733.
	17	Accounts payable and accrued expenses			
	18	Grants payable			l
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
ت	22	Other liabilities (describe)			
					1
	23	Total liabilities (add lines 17 through 22)	0.	0.	Ì
		Foundations that follow FASB ASC 958, check here			
ç		and complete lines 24, 25, 29, and 30.			
nces	24	Net assets without donor restrictions			,
alai		Net assets with donor restrictions		-	1
8		Foundations that do not follow FASB ASC 958, check here ▶ 🗶			
Š		and complete lines 26 through 30			
Net Assets or Fund Balar	26	Capital stock, trust principal, or current funds	0.	0.	
ış		Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Se		Retained earnings, accumulated income, endowment, or other funds	0.	8,125.	
Ž		Total net assets or fund balances	0.	8,125.	
Š	23	Total liet assets of fully balances		0,123.	•
	20	Total liabilities and not assets found beloness	0.	8,125.	-
		Total liabilities and net assets/fund balances		0,123.	<u> </u>
P	art l	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line			
		t agree with end-of-year figure reported on prior year's return)	20		Λ
		amount from Part I, line 27a		1	0. 8,125.
				2	
		increases not included in line 2 (itemize)	<u></u> .	3	0.
		nes 1, 2, and 3		4	8,125.
		ases not included in line 2 (itemize)		5	0.
<u> </u>	otal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 29		8,125.
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Part IV Capital Gains a	and Losses for Tax of	on Investmer	t Income						
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)					How ac - Purc - Dona	quired hase ation	(c) Date a	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a									
b NON	VE							_	
c				ļ					
				<u> </u>					
_e	·			Ь.,					
- (e) Gross sales price -	(f) Depreciation allowed (or allowable)		expense of sale		•		(h) Ga ((e) plus	in or (loss) (f) minus (g))
a									
b	·								
C									
d									<u> </u>
e			10/01/00			_			
Complete only for assets showing		ī					(I) Gains (Co ol. (k), but n		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		xcess of col. (i) r col. (j), if any				Losses ((from col. (I))
<u>a</u> .									
b									
C			· · · · · · · · · · · · · · · · · · ·						
d									<u> </u>
e									
2 Capital gain net income or (net cap	ortal loss) { If gain, also If (loss), en	enter in Part I, line iter -0- in Part I, line	7 2 7	}	2				
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, c		(5) and (6):		}					
If (loss), enter -0- in Part I, line 8 Part V Qualification Ur	nder Section 4940(e	for Peduce	1 Tay on Not	Jpv/	3 octm	ont In	come		
(For optional use by domestic private in If section 4940(d)(2) applies, leave thing Was the foundation liable for the section If "Yes," the foundation doesn't qualify	s part blank. on 4942 tax on the distributal	ole amount of any y	ear in the base per		ı.)				N/A Yes No
1 Enter the appropriate amount in ea	 			ntries					
(a) Base period years Calendar year (or tax year beginning	(b) g in) Adjusted qualifyii		Net value of no	(c) nchar	c) (d) Distribution ratio (col. (b) divided by col. (c))				(d) ution ratio ded by col. (c))
2018									
2017									
2016									
2015									
2014									<u> </u>
2 Total of line 1, column (d)							2		
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years									
the foundation has been in existence if less than 5 years							3		
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5							4		
5 Multiply line 4 by line 3							5		
6 Enter 1% of net investment income (1% of Part I, line 27b)							6		
7 Add lines 5 and 6							7		
B Enter qualifying distributions from Part XII, line 4						-4-	8		-
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.									

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	art VI Excise Tax Based on Investment Income (Section 494			e), or 4	948 -	see ii	<u>ıstrı</u>	ictio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and e	nter "N/A	t" on line 1.)					1
	Date of ruling or determination letter: (attach copy of letter if ne	ces <u>sary</u> -	see instructions)	-					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	▶	and enter 1%	}	1_				0.
	of Part I, line 27b			İ					- 1
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 45	% of Part	t I, line 12, col. (b)	J					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; o	thers, en	ter -0-)		2				0.
3	Add lines 1 and 2				3				0.
4	_Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; o	thers, er	nter -0-)		-4-				<u>_0.</u>
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-				5				0.
6	Credits/Payments:								
а	2019 estimated tax payments and 2018 overpayment credited to 2019	6a		0.					1
	Exempt foreign organizations - tax withheld at source	6b		0.					
	Tax paid with application for extension of time to file (Form 8868)	6c		0.					
	Backup withholding erroneously withheld	6d		0.					
	Total credits and payments. Add lines 6a through 6d				7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ched			8			•	0.
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				
	Enter the amount of line 10 to be; Credited to 2020 estimated tax		Refu	nded 🕨	11			•	
	rt VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state, or local legis	slation or	did it participate oi	ıntervene	ın			Yes	No
	any political campaign?						1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses? See	the instructions fo	r the defin	ition	Ì	1b	-	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of					Ì		-1	- 1
	distributed by the foundation in connection with the activities.	•	•					•	
c	Did the foundation file Form 1120-POL for this year?						1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	e vear:				Ì			-
	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers			0.					
e	Enter the reimbursement (if any) paid by the foundation during the year for political expend								1
•	managers. ▶ \$ 0.		,			[ĺ		
2	Has the foundation engaged in any activities that have not previously been reported to the II	RS?				İ	2		X
_	If "Yes," attach a detailed description of the activities.					Ī			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing	ınstrume	nt, articles of incori	oration, o	r		`	•	
-	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	ιτ?				Ī	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?				N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•					5		X
•	If "Yes," attach the statement required by General Instruction T					ľ			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied ei	ther:					,		
-	By language in the governing instrument, or								_ (
	By state legislation that effectively amends the governing instrument so that no mandator	v directio	ons that conflict wit	h the state	law				- 1
	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," comp	lete Part	II. col. (c), and Par	t XV		Ī	7	X	
•			, \-/1 \ w.	-		ľ		_ -	
8a	Enter the states to which the foundation reports or with which it is registered. See instruction	ns. >							
	WV	-							- 1
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttornev (General (or designa	te)					
•	of each state as required by General Instruction G? If "No," attach explanation		, ,	•		ľ	8b	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of se	ction 49	42(1)(3) or 4942(1)(5) for cale	ndar				<u> </u>
•	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," com			,	•	ľ	9		$\overline{\mathbf{x}}$
10	Did any persons become substantial contributors during the tax year? M "Yes," attach a schedu			ses S'	TMT	2	10	х	
	a the state of the							-PF	2019)

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b if "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Schedule C, to determine if the foundation had excess business holdings in 2019.)

had not been removed from jeopardy before the first day of the tax year beginning in 2019?

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3b

4a

Yes X No

N/A

during the year?

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Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be I	Required (contin	ued)			
5a During the year, did the foundation pay or incur any amount to:				Yes	No	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es 🗶 No		- 1	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir					
any voter registration drive?			es 🔀 No			
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es 🗓 No	1		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section						
4945(d)(4)(A)? See instructions		Y	es 🗶 No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or	for]		
the prevention of cruelty to children or animals? —		Y	s X No		- ^-	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	ın Regulations				
section 53.4945 or in a current notice regarding disaster assistance? See instri	uctions		N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check l	nere					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	om the tax because it mainta	ined				
expenditure responsibility for the grant?		. —	es 🔲 No			
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		•				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on					
a personal benefit contract?	•	Ye	es X No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		7	Sb	X	
If "Yes" to 6b, file Form 8870.					1	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es X No			
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$		r				
excess parachute payment(s) during the year?		Ye	es X No			
Part VIII Information About Officers, Directors, Trusto	ees, Foundation Ma	nagers, Highly	y			
Paid Employees, and Contractors						
1 List all officers, directors, trustees, and foundation managers and t		1	I dana a iii a a l			
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Exp account	ense . other	
	to position	enter -0-)	compensation	allowa	nces	
JOHN H. SHOTT						
422 OAKHURST AVENUE						
BLUEFIELD, WV 24701	0.00	0.	0.		0.	
		<u>.</u>				
		<u></u>				
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exp account,	ense , other	
	devoted to position	(6)	compensation	allowai		
NONE						
		İ				
	<u> </u>					
		1				
						
		l	L			
Total number of other employees paid over \$50,000				200 ==	0	
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Paid Employees, and Contractors (continued)	action Managers, Fighty	
3 Five highest-paid independent contractors for professional services. If none, ent	ter "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		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant stat number of organizations and other beneficiaries served, conferences convened, research papers pr	tistical information such as the	Expenses
1 N/A	000000, 000	
1		1
		1
2		
]
3		-
		_
		1
		1
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year of	in lines 1 and 2.	Amount
1 N/A		
2		1
		1
All other program-related investments. See instructions.		
}		
Total. Add lines 1 through 3		0.
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Part X Minimum Investment Return (All domestic foundations must complete	this part Foreign foundations, see	e instructions)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes	s: <u></u>	
a Average monthly fair market value of securities	1a	19,639.
b Average of monthly cash balances	1b	
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	19,639.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	19,639.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions	s) 4	295.
5 Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	19,344.
6 Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX	PERIOD 6	34.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private foreign organizations, check here and do not complete this part.)	operating foundations and certain	
1 Minimum investment return from Part X, line 6	1	34.
2a Tax on investment income for 2019 from Part VI, line 5		· · · · · · · · · · · · · · · · · · ·
b Income tax for 2019. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	0.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	34.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	34.
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	34.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
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., purpose	2 <u>2</u>	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)		
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line	4	0.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
income. Enter 1% of Part I, line 27b	5	0.
6 Adjusted qualifying distributions Subtract line 5 from line 4	6	0.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	whether the foundation qualifies for the	esection

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

(a) (b) (c) Corpus Years prior to 2018 2018	(d) 2019
	2019
1 Distributable amount for 2019 from Part XI,	2.4
line 7	34.
2 Undistributed income, if any, as of the end of 2019	
a Enter amount for 2018 only	<u> </u>
b Total for prior years:	
0.	
3 Excess distributions carryover, if any, to 2019:	
a From 2014	
b From 2015	
e From 2016	
d From 2017	•
e From 2018	
f Total of lines 3a through e	
4 Qualifying distributions for 2019 from	
Part XII, line 4: ► \$	
a Applied to 2018, but not more than line 2a	,
b Applied to undistributed income of prior	
years (Election required - see instructions)	
c Treated as distributions out of corpus	
(Election required - see instructions) 0.	
d Applied to 2019 distributable amount	0.
e Remaining amount distributed out of corpus 0 .	
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount	0.
6 Enter the net total of each column as	
indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5	
b Prior years' undistributed income. Subtract line 4b from line 2b	
c Enter the amount of prior years'	
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously	
assessed O.	
d Subtract line 6c from line 6b. Taxable	
amount - see instructions 0 .	
e Undistributed income for 2018. Subtract line	
4a from line 2a. Taxable amount - see instr.	
f Undistributed income for 2019. Subtract	
lines 4d and 5 from line 1. This amount must	
be distributed in 2020	34.
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 2014	
not applied on line 5 or line 7	,
9 Excess distributions carryover to 2020.	
Subtract lines 7 and 8 from line 6a O •	
O Analysis of line 9:	
a Excess from 2015	
b Excess from 2016	1
c Excess from 2017	
d Excess from 2018	
e Excess from 2019	

Part XIV Private Operating Fo	oundations (see ins			N/A	700323 Page I		
1 a If the foundation has received a ruling or			, , ,				
foundation, and the ruling is effective for							
b Check box to indicate whether the foundation			in section	4942(j)(3) or 4	942(1)(5)		
2 a Enter the lesser of the adjusted net	Tax year	g touridation docoribod	Prior 3 years	1 10 ic()/(0)/_ u	9 .L())(0)		
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total		
investment return from Part X for	` `,		· · · · · · · · · · · · · · · · · · ·				
each year listed							
b 85% of line 2a							
c Qualifying distributions from Part XII,	-	-					
line 4, for each year listed							
d Amounts included in line 2c not							
used directly for active conduct of							
exempt activities							
e Qualifying distributions made directly							
for active conduct of exempt activities.							
Subtract line 2d from line 2c							
3 Complete 3a, b, or c for the							
alternative test relied upon:							
a "Assets" alternative test - enter. (1) Value of all assets							
``					-		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)							
b "Endowment" alternative test - enter							
2/3 of minimum investment return							
shown in Part X, line 6, for each year listed							
c "Support" alternative test - enter:							
(1) Total support other than gross							
investment income (interest,							
dividends, rents, payments on				1			
securities loans (section 512(a)(5)), or royalties)				İ			
(2) Support from general public							
and 5 or more exempt							
organizátions as provided in sectión 4942(j)(3)(B)(iii)							
(3) Largest amount of support from							
an exempt organization							
(4) Gross investment income	-						
Part XV Supplementary Infor	mation (Complet	e this part only	if the foundation	had \$5,000 or me	ore in assets		
at any time during th				• •			
1 Information Regarding Foundation	Managers:						
a List any managers of the foundation who	-	han 2% of the total con	tributions received by the	foundation before the clo	se of any tax		
year (but only if they have contributed mo			_		·		
JOHN H. SHOTT							
b List any managers of the foundation who	own 10% or more of the	stock of a corporation	(or an equally large porti	on of the ownership of a p	artnership or		
other entity) of which the foundation has							
NONE							
2 Information Regarding Contribution	n, Grant, Gift, Loan,	Scholarship, etc., P	rograms:				
Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If							
the foundation makes gifts, grants, etc., to	o individuals or organizat	ions under other condi	tions, complete items 2a,	b, c, and d.			
a The name, address, and telephone number	er or email address of the	person to whom apple	cations should be addres	sed:			
JOHN H. SHOTT							
422 OAKHURST AVENUE,	BLUEFIELD,	WV 24701					
b The form in which applications should be			hould include:	•			
NONE							
c Any submission deadlines:							
NONE							
d Any restrictions or limitations on awards,	such as by geographical	areas, charitable fields	kinds of institutions, or o	other factors:	·		
NONE							

Total		► 3a	0.
b Approved for future payment	 		
NONE			
Total		▶ 3b	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		ded by section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		Code		i i i i i i i i i i i i i i i i i i i
å					
b			 		
<u> </u>		<u>-</u>	 		
d					
e					
g Fees and contracts from government agencies			-		
Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:				1	
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal			-		
property		:			
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory Net income or (loss) from special events			-		
10 Gross profit or (loss) from sales of inventory	-		-		
10 Other revenue:			<u> </u>		
a b					
			<u> </u>		
d e					
12 Subtotal. Add columns (b), (d), and (e)		0.		0	0.
3 Total Add line 12, columns (b), (d), and (e)		<u> </u>			0.
See worksheet in line 13 instructions to verify calculations.)				· · · · · ·	.
				. D	
Part XVI-B Relationship of Activities to	tne Acc	omplishment of Ex	emp	t Purposes	
Line No Explain below how each activity for which incom	ne is reported	in column (e) of Part XVI-A	contrit	outed importantly to the accord	nplishment of
the foundation's exempt purposes (other than b				, , , , , , , , , , , , , , , , , , ,	
	_				
			•		
·					(

Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: X (1) Cash 1a(1) (2) Other assets X 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization X 16(1) (2) Purchases of assets from a noncharitable exempt organization X 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) X (4) Reimbursement arrangements X 1b(4) X (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) Х X c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 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 noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) (other than section 501(c)(3)) or in section 527? Yes If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A are that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer shown below? See instr Sign Here X Yes No Signature of officer or trustee Date 9/23/20 Check Print/Type preparer's name ıf PTIN self- employed Paid SIMMONS J. K. SIMMONS P00545190 Preparer EDWARDS & COMPANY, Firm's EIN $\triangleright 54 - 0504608$ Firm's name ► BROWN, **Use Only**

Form **990-PF** (2019)

Phone no. 304-325-8157

Firm's address ▶ 1815 JEFFERSON STREET

BLUEFIELD, WV 24701

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Name of the organization

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

	SHOTT-BAKER FAMILY FOUNDATION, INC.	84-4000525						
Organization type (che	eck one)							
Filers of:	Section:							
Form 990 or 990-EZ	501(c)() (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
,								
Check if your organizati	on is covered by the General Rule or a Special Rule.							
Note: Only a section 50	01(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Speci	ial Rule. See instructions						
General Rule								
General Rule								
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to any one contributor. Complete Parts I and II. See instructions for determining a contrib							
Special Rules								
sections 509(a any one contrib	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II.							
year, total cont	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III							
year, contributi is checked, ent purpose Don't	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.							
but it must answer "No"	on that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on seet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).							

Name of organization

Employer identification number

SHOTT	-BAKER FAMILY FOUNDATION, INC.		84-4000525
Part I	Contributors (see instructions). Use duplicate copies of Part I if an	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOHN H. SHOTT 422 OAKHURST AVE	\$8,12	
	BLUEFIELD, WV 24701		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
 			Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

SHOTT-BAKER FAMILY FOUNDATION, INC.

84-4000525

Part II	Noncash Property (see instructions) Use duplicate copies of Pa	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	270 SHS VISA INC COM CL A		
1		ss	12/23/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

Employer identification number

SHOTT-	-BAKER FAMILY FOUNDATION	N, INC.			84-4000525		
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, completing Part III of additional statements.	through (e) and the following that the following the state of the stat	a line entry. Fo	r organizations			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
		(e) Transfe	er of aift				
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
(a) No.				· · · · · · · · · · · · · ·			
from Part I	(b) Purpose of gift	✓ (c) Use of gift		(d) Description of how gift is held			
							
}	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Desc	ription of how gift is held		
		(e) Transfe	er of gift				
-	Transferee's name, address, and ZIP + 4			Relationship of trai	nsferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	ft ^	(d) Desc	ription of how gift is held		
-	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
1							

FORM 990-PF	CORPORATE STOCK		
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
VISA INC COM CL A	8,125.	50,733.	
TOTAL TO FORM 990-PF, PART II	, PART II, LINE 10B 8,125.		
FORM 990-PF LIST OF	STATEMENT	2	
NAME OF CONTRIBUTOR	ADDRESS		
JOHN H. SHOTT	422 OAKHURST AVE BLUEFIELD, WV 24701		