Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0047 **2019**

Open to Public Inspection

Department of the Treasury Internal Revenue Service uDo not enter social security numbers on this form as it may be made public. uGo to www.irs.gov/Form990PF for instructions and the latest information.

For	calend	lar year 2019 or tax year beginning ,	and ending				
Na	me of fou	ındation			A Emplo	yer identification number	
_							
		ZLER FOUNDATION, INC				-0783635	
		I street (or P.O. box number if mail is not delivered to street address) BELLA VISTA DR.	l Ko	om/suite		none number (see instructions) $4-345-5667$	
		, state or province, country, and ZIP or foreign postal code					
V	IEN	NA WV 26105			C If exer	mption application is pending, of	check here ,,
G	Check a	all that apply: Initial return Initial retu	irn of a former public cha	arity	D 1. Fo	reign organizations, check her	е "
		Final return Amended	return	·		reign organizations meeting th	
		Address change Name ch	ange		85	% test, check here and attach	computation ,,
H (Check t	ype of organization: X Section 501(c)(3) exempt private	e foundation		E If priva	ate foundation status was term	inated under
			ole private foundation			n 507(b)(1)(A), check here	
		ket value of all assets at J Accounting method:		ual		foundation is in a 60-month ter	
						section 507(b)(1)(B), check he	
	ne 16) i		t be on cash basis.)				
	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	# N. N		() A II	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books	(b) Net inv incon		(c) Adjusted net income	for charitable purposes
	Т.	the amounts in column (a) (see instructions).)					(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	1,100				
	2	Check u X if the foundation is not required to attach Sch. B	1 550		1 550		
	3	Interest on savings and temporary cash investments	1,579		1,579		
	4	Dividends and interest from securities	54,500		54,500		
	5a	Gross rents					
ne	b	Net rental income or (loss)	09 615				
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	98,615				
é	b	Gross sales price for all assets on line 6a 355,711	-		98,615		
œ	7	Capital gain net income (from Part IV, line 2)			90,013	0	
	8	Net short-term capital gain				0	
	9	Income modifications					
	10a b	Gross sales less returns and allowances					
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	155,794	1	54,694	0	
_	13	Compensation of officers, directors, trustees, etc.	0		31,031		
es	14	Other employee salaries and wages					
seuses	15	Pension plans, employee benefits					
	16a	Logal face (attack askedula)					
Ä	b	Accounting fees (attach schedule) STMT 1	3,850				
<u>×</u>	С	Other professional fees (attach schedule)	_				
rati	17	Interest					
ist	18	Taxes (attach schedule) (see instructions) STMT 2	12,914		12,914		
Administrative	19	Depreciation (attach schedule) and depletion					
þ	20	Occupancy					
~	21	Travel, conferences, and meetings					
and	22	Printing and publications					
 ත	23	Printing and publications Other expenses (att. sch.) STMT 3	1,047		154		
Ë	24	Total operating and administrative expenses.					
era		Add lines 13 through 23	17,811	:	13,068	0	
Operating	25	Contributions, gifts, grants paid	124,553				124,553
_	26	Total expenses and disbursements. Add lines 24 and 25	142,364	:	13,068	0	124,553
	27	Subtract line 26 from line 12:					
	а	Excess of revenue over expenses and disbursements \dots	13,430				
	b	Net investment income (if negative, enter -0-)		1.	41,626		

c Adjusted net income (if negative, enter -0-)

	Part I	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	End of	year
'	aiti	should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	256	2	2
	2	Savings and temporary cash investments	125,666	226,954	226,954
	3	Accounts receivable u			
		Less: allowance for doubtful accounts ${f u}$			
	4	Pledges receivable u			
		Less: allowance for doubtful accounts ${f u}$			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see			
		instructions)			
	7	Other notes and loans receivable (att. schedule) u			
Ø		Less: allowance for doubtful accounts ${f u}$			
	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments – U.S. and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule) SEE STMT 4	383,649	320,121	852,685
	С	Investments – corporate bonds (attach schedule) SEE STMT 5	75,000	75,000	33,990
	11	Investments – land, buildings, and equipment: basis ${f u}$			
		Less: accumulated depreciation (attach sch.) ${f u}$			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule) SEE STATEMENT 6	1,324,949	1,300,873	1,559,132
	14	Land, buildings, and equipment: basis u			-
		Less: accumulated depreciation (attach sch.) ${f u}$			
	15	Other assets (describe u			
	16	Total assets (to be completed by all filers – see the			
		instructions. Also, see page 1, item I)	1,909,520	1,922,950	2,672,763
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
≝	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
⊐	22	Other liabilities (describe u			
	23	Total liabilities (add lines 17 through 22)	0	0	
_		Foundations that follow FASB ASC 958, check here u			
Ś		and complete lines 24, 25, 29, and 30.			
ည	24	Net assets without donor restrictions			
ä	25	Net assets with donor restrictions			
ä		Foundations that do not follow FASB ASC 958, check here $u[X]$			
pr		and complete lines 26 through 30.			
or Fund Balances	26	Capital stock, trust principal, or current funds			
ō	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
ets	28	Retained earnings, accumulated income, endowment, or other funds	1,909,520	1,922,950	
Net Assets	29	Total net assets or fund balances (see instructions)	1,909,520	1,922,950	
¥	30	Total liabilities and net assets/fund balances (see			
ž		instructions)	1,909,520	1,922,950	
	Part I				
_		net assets or fund balances at beginning of year – Part II, column (a), line 29 (must a	gree with		
-		f-year figure reported on prior year's return)	=	1	1,909,520
2		amount from Part I, line 27a			13,430
		increases not included in line 2 (itemize) ${f u}$			
		nes 1, 2, and 3			1,922,950
5	Decre	eases not included in line 2 (itemize) ${f u}$		-	
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), li			1,922,950

Part IV Capital Gains a	nd Losses for Tax on Investment	Income		
	e the kind(s) of property sold (for example, real estate, rarehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date ac (mo., day	
1a PUBLICLY TRADED	SECURITES	D		
b PUBLICLY TRADED		P		
	ISTRIBUTIONS	-		
d				
e				
	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (loss)
(e) Gross sales price	(or allowable)	plus expense of sale		((e) plus (f) minus (g))
a 111,104		63,197		47,907
b 206,983		193,899		13,084
c 37,624				37,624
d				37,7022
e				
	gain in column (h) and owned by the founda	ation on 12/31/69.		
	(j) Adjusted basis	(k) Excess of col. (i)		Gains (Col. (h) gain minus (k), but not less than -0-) or
(i) FMV as of 12/31/69	as of 12/31/69	over col. (j), if any		Losses (from col. (h))
a				47,907
b				13,084
				37,624
d				37,021
e				
	∫ If gain, also enter in Pai	t Lline 7		
2 Capital gain net income or (net ca	apital loss) If (loss), enter -0- in Par	IL .	2	98,615
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) and (6):			70,020
, ,	column (c). See instructions. If (loss), enter -	O- in		
•		}	3	60,991
	nder Section 4940(e) for Reduced			00/331
	foundations subject to the section 4940(a) ta			
	•	ix on het investment income.)		
If section 4940(d)(2) applies, leave this	is part blank.			
Was the foundation liable for the secti	ion 4942 tax on the distributable amount of a	ny year in the base period?		Yes X No
If "Yes," the foundation doesn't qualify	under section 4940(e). Do not complete this	s part.		
1 Enter the appropriate amount in e	each column for each year; see the instruction	ns hefore making any entries		
(a)				(d)
Base period years Calendar year (or tax year beginning in	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse	is	Distribution ratio (col. (b) divided by col. (c))
2018	110,8	393 2,382,	480	0.046545
2017	73,0			0.047434
	50,4			0.037738
2016	73,2			0.053496
2015	62,8			0.044437
2014	02,0	1,414,	330	0.011137
2 Total of line 1, column (d)			2	0.229650
* * * * * * * * * * * * * * * * * * * *				0.227030
•	•	•		0.045930
the number of years the foundation	on has been in existence if less than 5 years		3	0.043930
A Foton the net value of nearly witch	ala una acceta for 2040 forma Don't V. line 5			2,506,205
4 Enter the net value of noncharitat	ble-use assets for 2019 from Part X, line 5 $_{\dots}$		4	2,500,205
F. M. Rick, Proc. Adv. Proc. O.			_	115 110
5 Multiply line 4 by line 3			5	115,110
	//			1 41 6
b Enter 1% of net investment incom	ne (1% of Part I, line 27b)		6	1,416
				116 506
7 Add lines 5 and 6			7	116,526
			····	•
8 Enter qualifying distributions from	Part XII, line 4		8	124,553

Part VI instructions.

Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	ee inst	ructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here u and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			1,	416
	here u 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	Add lines 1 and 2			1,	416
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5			1,	416
6	Credits/Payments:				
а	2019 estimated tax payments and 2018 overpayment credited to 2019				
b	Exempt foreign organizations – tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld 6d			_	
7	Total credits and payments. Add lines 6a through 6d			6,	888
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed u 9	1			4=0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid u 10	1		5,	472
11_	Enter the amount of line 10 to be: Credited to 2020 estimated tax u 5,472 Refunded u 11				
	rt VII-A Statements Regarding Activities			.,	·
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		4-	Yes	No X
L	participate or intervene in any political campaign?		1a		Λ
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the		46		х
	instructions for the definition If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		1b		Λ
	published or distributed by the foundation in connection with the activities.				
С	Did the foundation file Form 1120-POL for this year?		1c		х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		10		
-	(1) On the foundation. u \$ (2) On foundation managers. u \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers. u \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		х
	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				
	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		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		Х
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	● By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions 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	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. u WV				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See instructions for Part XIV. If "Yes,"				_
	complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		10		X

<u>Pa</u>	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address u WWW.DEITZLER.COM			
14	The books are in care of u HARRY G. DEITZLER Telephone no. u 304-	345-	566'	7
	149 BELLA VISTA DR			
	Located at u VIENNA wv ZIP+4 u 2610	5		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			u
	and enter the amount of tax-exempt interest received or accrued during the year			_
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country u			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	- 10		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
_	were not corrected before the first day of the tax year beginning in 2019?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
-				
	If "Yes," list the years u 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	NT / 7	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	u 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
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, Schedule C, to determine if the			
	foundation had exceed hydrogen hydrogen hadron in 2010.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	, a		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		Х
	<u> </u>			

Pa	art VII-B Statements Ro	egarding Activities for Which For	n 4720 May Be R	equired (con	tinued)				
5a	During the year did the foundation	n pay or incur any amount to:				_		Yes	No
	(1) Carry on propaganda, or other	erwise attempt to influence legislation (section	4945(e))?		Yes X	No			
	(2) Influence the outcome of any	specific public election (see section 4955); o	to carry on,			_			
	directly or indirectly, any vote	r registration drive?			Yes X	No			
	(3) Provide a grant to an individu	ual for travel, study, or other similar purposes			Yes X	No			
	(4) Provide a grant to an organize	ation other than a charitable, etc., organization	n described in		_	_			
		nstructions		🔲	Yes X	No			
		er than religious, charitable, scientific, literary,			_	_			
		on of cruelty to children or animals?			Yes X	No			
b		i), did any of the transactions fail to qualify ur							
		r in a current notice regarding disaster assista				N/A	5b		
		t notice regarding disaster assistance, check				u 📙			
С		5a(4), does the foundation claim exemption f		/- □	_	,			
	because it maintained expenditure	e responsibility for the grant?		N/A L	Yes	No			
		uired by Regulations section 53.4945-5(d).							
6a	- · · · · · · · · · · · · · · · · · · ·	ar, receive any funds, directly or indirectly, to				a			
	on a personal benefit contract?			L	Yes X	. No			37
b		ar, pay premiums, directly or indirectly, on a p	ersonal benefit contract	r?			6b		X
7 -	If "Yes" to 6b, file Form 8870.	and the formulation of the Control of the Control	ah alkan kuan a sasiis s		V [V	No			
7a		was the foundation a party to a prohibited tax			_	_			
ь		e any proceeds or have any net income attrib		n?		IN./ A	7b		
8	•	ection 4960 tax on payment(s) of more than \$			Yes X	No			
D	Information About	e payment(s) during the year?out Officers, Directors, Trustees,	Foundation Mana	· · · · · · · · · · · · · · · · · · ·			06		
Г	art VIII Information Abo and Contractor		i outidation mana	igers, riigiliy	i aiu Li	пріоус	cs,		
1 1		es, and foundation managers and their co	empensation. See inst	tructions.					
	· · · · · · · · · · · · · · · · · · ·		(b) Title, and average	(c) Compensation	(d) Contri	butions to			
	(a) N	Name and address	hours per week	hours per week (If not paid, employee benefit				r allower	
		devoted to nocition						nces	
			devoted to position	enter -0-)	compe		Ourc	er allowa	nces
HA	ARRY G. DEITZLER	VIENNA	DDECTDENT	enter -0-)			Ourc	ei alluwai	nces
	ARRY G. DEITZLER 49 BELLA VISTA DR	VIENNA WV 26105	DDECTDENT	,				er allowal	nces 0
14	49 BELLA VISTA DR		PRESIDENT 0.00	,	compe	nsation		ei allowal	nces 0
14	49 BELLA VISTA DR	WV 26105	PRESIDENT 0.00	,	compe	nsation)	er allowal	o 0
14	49 BELLA VISTA DR ATHE E. DEITZLER 49 BELLA VISTA DR	WV 26105 VIENNA	PRESIDENT 0.00 SECRETARY-TR	,	compe 0	nsation)	er allowal	o O
14 KA 14	49 BELLA VISTA DR ATHE E. DEITZLER 49 BELLA VISTA DR	WV 26105 VIENNA WV 26105	PRESIDENT 0.00 SECRETARY-TR 0.00		compe 0	nsation)	er allowal	O O
14 KA 14 EF	49 BELLA VISTA DR ATHE E. DEITZLER 49 BELLA VISTA DR RIN DEITZLER 48 EASTMOOR BLVD	WV 26105 VIENNA WV 26105 COLUMBUS	PRESIDENT 0.00 SECRETARY-TR 0.00 DIRECTOR 0.00		compe 0	nsation ()	el allowal	0
14	49 BELLA VISTA DR ATHE E. DEITZLER 49 BELLA VISTA DR RIN DEITZLER 48 EASTMOOR BLVD RADFORD DEITZLER 07 WILLOWDALE RD.	WV 26105 VIENNA WV 26105 COLUMBUS OH 43209 MORGANTOWN WV 26505	PRESIDENT 0.00 SECRETARY-TR 0.00 DIRECTOR 0.00 DIRECTOR 0.00		compe	nsation (el allowal	0
14	49 BELLA VISTA DR ATHE E. DEITZLER 49 BELLA VISTA DR RIN DEITZLER 48 EASTMOOR BLVD RADFORD DEITZLER 07 WILLOWDALE RD. Compensation of five highest-	WV 26105 VIENNA WV 26105 COLUMBUS OH 43209 MORGANTOWN	PRESIDENT 0.00 SECRETARY-TR 0.00 DIRECTOR 0.00 DIRECTOR 0.00		compe	nsation		et allowal	0
14	49 BELLA VISTA DR ATHE E. DEITZLER 49 BELLA VISTA DR RIN DEITZLER 48 EASTMOOR BLVD RADFORD DEITZLER 07 WILLOWDALE RD.	WV 26105 VIENNA WV 26105 COLUMBUS OH 43209 MORGANTOWN WV 26505	PRESIDENT 0.00 SECRETARY-TR 0.00 DIRECTOR 0.00 DIRECTOR 0.00		compe	c c		allowal	0
14	49 BELLA VISTA DR ATHE E. DEITZLER 49 BELLA VISTA DR RIN DEITZLER 48 EASTMOOR BLVD RADFORD DEITZLER D7 WILLOWDALE RD. Compensation of five highest-p	WV 26105 VIENNA WV 26105 COLUMBUS OH 43209 MORGANTOWN WV 26505 Daid employees (other than those included	PRESIDENT 0.00 SECRETARY-TR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 I on line 1 – see instr	uctions). If none	compe	c C			0 0
14	49 BELLA VISTA DR ATHE E. DEITZLER 49 BELLA VISTA DR RIN DEITZLER 48 EASTMOOR BLVD RADFORD DEITZLER D7 WILLOWDALE RD. Compensation of five highest-p	WV 26105 VIENNA WV 26105 COLUMBUS OH 43209 MORGANTOWN WV 26505	PRESIDENT 0.00 SECRETARY-TR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 I on line 1 – see instr		compe co	c c c c c c c c c c c c c c c c c c c	(e) Ex	kpense acer allowa	O O O
14 KZ 14 EF 54 BF 20 2	49 BELLA VISTA DR ATHE E. DEITZLER 49 BELLA VISTA DR RIN DEITZLER 48 EASTMOOR BLVD RADFORD DEITZLER 07 WILLOWDALE RD. Compensation of five highest-p "NONE."	WV 26105 VIENNA WV 26105 COLUMBUS OH 43209 MORGANTOWN WV 26505 Daid employees (other than those included	PRESIDENT 0.00 SECRETARY-TR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 I on line 1 – see instr	uctions). If none	compe co	c c c c c c c c c c c c c c c c c c c	(e) Ex	kpense ac	O O O
14 KZ 14 EF 54 BF 20 2	49 BELLA VISTA DR ATHE E. DEITZLER 49 BELLA VISTA DR RIN DEITZLER 48 EASTMOOR BLVD RADFORD DEITZLER D7 WILLOWDALE RD. Compensation of five highest-p	WV 26105 VIENNA WV 26105 COLUMBUS OH 43209 MORGANTOWN WV 26505 Daid employees (other than those included	PRESIDENT 0.00 SECRETARY-TR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 I on line 1 – see instr	uctions). If none	compe co	c c c c c c c c c c c c c c c c c c c	(e) Ex	kpense ac	O O O
14 KZ 14 EF 54 BF 20 2	49 BELLA VISTA DR ATHE E. DEITZLER 49 BELLA VISTA DR RIN DEITZLER 48 EASTMOOR BLVD RADFORD DEITZLER 07 WILLOWDALE RD. Compensation of five highest-p "NONE."	WV 26105 VIENNA WV 26105 COLUMBUS OH 43209 MORGANTOWN WV 26505 Daid employees (other than those included	PRESIDENT 0.00 SECRETARY-TR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 I on line 1 – see instr	uctions). If none	compe co	c c c c c c c c c c c c c c c c c c c	(e) Ex	kpense ac	O O O
14 KZ 14 EF 54 BF 20 2	49 BELLA VISTA DR ATHE E. DEITZLER 49 BELLA VISTA DR RIN DEITZLER 48 EASTMOOR BLVD RADFORD DEITZLER 07 WILLOWDALE RD. Compensation of five highest-p "NONE."	WV 26105 VIENNA WV 26105 COLUMBUS OH 43209 MORGANTOWN WV 26505 Daid employees (other than those included	PRESIDENT 0.00 SECRETARY-TR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 I on line 1 – see instr	uctions). If none	compe co	c c c c c c c c c c c c c c c c c c c	(e) Ex	kpense ac	O O O
14 KZ 14 EF 54 BF 20 2	49 BELLA VISTA DR ATHE E. DEITZLER 49 BELLA VISTA DR RIN DEITZLER 48 EASTMOOR BLVD RADFORD DEITZLER 07 WILLOWDALE RD. Compensation of five highest-p "NONE."	WV 26105 VIENNA WV 26105 COLUMBUS OH 43209 MORGANTOWN WV 26505 Daid employees (other than those included	PRESIDENT 0.00 SECRETARY-TR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 I on line 1 – see instr	uctions). If none	compe co	c c c c c c c c c c c c c c c c c c c	(e) Ex	kpense ac	O O O
14 KZ 14 EF 54 BF 20 2	49 BELLA VISTA DR ATHE E. DEITZLER 49 BELLA VISTA DR RIN DEITZLER 48 EASTMOOR BLVD RADFORD DEITZLER 07 WILLOWDALE RD. Compensation of five highest-p "NONE."	WV 26105 VIENNA WV 26105 COLUMBUS OH 43209 MORGANTOWN WV 26505 Daid employees (other than those included	PRESIDENT 0.00 SECRETARY-TR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 I on line 1 – see instr	uctions). If none	compe co	c c c c c c c c c c c c c c c c c c c	(e) Ex	kpense ac	O O O
14 KZ 14 EF 54 BF 20 2	49 BELLA VISTA DR ATHE E. DEITZLER 49 BELLA VISTA DR RIN DEITZLER 48 EASTMOOR BLVD RADFORD DEITZLER 07 WILLOWDALE RD. Compensation of five highest-p "NONE."	WV 26105 VIENNA WV 26105 COLUMBUS OH 43209 MORGANTOWN WV 26505 Daid employees (other than those included	PRESIDENT 0.00 SECRETARY-TR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 I on line 1 – see instr	uctions). If none	compe co	c c c c c c c c c c c c c c c c c c c	(e) Ex	kpense ac	O O O
14 KZ 14 EF 54 BF 20 2	49 BELLA VISTA DR ATHE E. DEITZLER 49 BELLA VISTA DR RIN DEITZLER 48 EASTMOOR BLVD RADFORD DEITZLER 07 WILLOWDALE RD. Compensation of five highest-p "NONE."	WV 26105 VIENNA WV 26105 COLUMBUS OH 43209 MORGANTOWN WV 26505 Daid employees (other than those included	PRESIDENT 0.00 SECRETARY-TR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 I on line 1 – see instr	uctions). If none	compe co	c c c c c c c c c c c c c c c c c c c	(e) Ex	kpense ac	O O O
14 KZ 14 EF 54 BF 20 2	49 BELLA VISTA DR ATHE E. DEITZLER 49 BELLA VISTA DR RIN DEITZLER 48 EASTMOOR BLVD RADFORD DEITZLER 07 WILLOWDALE RD. Compensation of five highest-p "NONE."	WV 26105 VIENNA WV 26105 COLUMBUS OH 43209 MORGANTOWN WV 26505 Daid employees (other than those included	PRESIDENT 0.00 SECRETARY-TR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 I on line 1 – see instr	uctions). If none	compe co	c c c c c c c c c c c c c c c c c c c	(e) Ex	kpense ac	O O O
14 KZ 14 EF 54 BF 20 2	49 BELLA VISTA DR ATHE E. DEITZLER 49 BELLA VISTA DR RIN DEITZLER 48 EASTMOOR BLVD RADFORD DEITZLER 07 WILLOWDALE RD. Compensation of five highest-p "NONE."	WV 26105 VIENNA WV 26105 COLUMBUS OH 43209 MORGANTOWN WV 26505 Daid employees (other than those included	PRESIDENT 0.00 SECRETARY-TR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 I on line 1 – see instr	uctions). If none	compe co	c c c c c c c c c c c c c c c c c c c	(e) Ex	kpense ac	O O O

Part VIII	Information About Officers, Directors, Trustees, Foundation Manand Contractors (continued)	agers, Highly Paid Em	ploye	es,
3 Five high	est-paid independent contractors for professional services. See instructions. If non	e, enter "NONE."		
	(a) Name and address of each person paid more than \$50,000	(b) Type of service		(c) Compensation
NONE				
	others receiving over \$50,000 for professional services		u	
Part IX-A	Summary of Direct Charitable Activities			
	s four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of other beneficiaries served, conferences convened, research papers produced, etc.			Expenses
1 N/A				
2				
3				
4				
Part IX-B	Summary of Program-Related Investments (see instructions)			
	rgest program-related investments made by the foundation during the tax year on lines 1 and 2.			Amount
1 N/A				
2				
-	elated investments. See instructions.			
3				

Form **990-PF** (2019)

▶

Total. Add lines 1 through 3

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

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	found	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
•	purposes:		
а	Average monthly fair market value of securities	1a	2,384,866
b	Average of monthly cash balances	1b	159,505
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	2,544,371
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	2,544,371
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see		_,,,,,,,,
•	in a financial and	4	38,166
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,506,205
6	Minimum investment return. Enter 5% of line 5	6	125,310
_	rrt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for		
•	and certain foreign organizations, check here u and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	125,310
2a	Tax on investment income for 2019 from Part VI, line 5 2a 1,416		•
b	Income tax for 2019. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	1,416
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	123,894
4	Recoveries of amounts treated as qualifying distributions	4	•
5	Add lines 3 and 4	5	123,894
6	Deduction from distributable amount (see instructions)	6	•
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	123,894
Pa	art XII Qualifying Distributions (see instructions)		•
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	124,553
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	124,553
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	1,416
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	123,137
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation)	

Pa	art XIII Undistributed Income (see instructions)				
		(a)	(b)	(c)	(d)
1	Distributable amount for 2019 from Part XI,	Corpus	Years prior to 2018	2018	2019
	line 7				123,894
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only				
	Total for prior years: 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2019:				
а	From 2014				
b	From 2015 5,881				
С	From 2016				
d					
е		5 001			
f		5,881			
4	Qualifying distributions for 2019 from Part XII,				
	line 4: u \$124,553				
	Applied to 2018, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)				102.004
	Applied to 2019 distributable amount				123,894
	Remaining amount distributed out of corpus	659			
5	Excess distributions carryover applied to 2019				
	(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				
	indicated below:	6 540			
	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	6,540			
D	Prior years' undistributed income. Subtract				
	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				
a	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				
ı	Undistributed income for 2019. Subtract lines				
	4d and 5 from line 1. This amount must be				0
7	Amounts treated as distributions out of corpus				0
7	·				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be				
	() () ()				
8	required—see instructions) Excess distributions carryover from 2014 not	+			
0	applied on line 5 or line 7 (see instructions)				
9		+			
9	Excess distributions carryover to 2020.	6,540			
10	Subtract lines 7 and 8 from line 6a Analysis of line 9:	0,540			
10					
a h	F (0040				
b	Excess from 2016				
۲ C	Excess from 2017				
d e	Excess from 2018 Excess from 2019 659				
-	LAGGG HOILI 2018				

Pa	ert XIV Private Operating Fou	undations (see ins	structions and Part	t VII-A, question 9)		
1a	If the foundation has received a ruling or o	letermination letter that	it is a private operating	g		
	foundation, and the ruling is effective for 2	019, enter the date of t	the ruling	u		
b	Check box to indicate whether the foundat	tion is a private operati	ng foundation described	d in section 49	42(j)(3) or 49	42(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Total
	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					
С	Qualifying distributions from Part XII,					
-	line 4, for each year listed					
d	Amounts included in line 2c not used directly					
u	for active conduct of exempt activities					
е	Qualifying distributions made directly					
е	, ,					
	for active conduct of exempt activities.					
•	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
а	"Assets" alternative test – enter:					
	(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					
С	"Support" alternative test – enter:					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplementary Inform			he foundation had	l \$5,000 or more	e in assets at
	any time during the ye		tions.)			
1	Information Regarding Foundation Ma	-				
а	List any managers of the foundation who h			•	he foundation	
	before the close of any tax year (but only	if they have contributed	more than \$5,000). (S	see section 507(d)(2).)		
_	HARRY DEITZLER	400/		/	et a set disc	
b	List any managers of the foundation who o				rtion of the	
	ownership of a partnership or other entity) NONE	or which the foundation	n has a 10% or greater	mieresi.		
2	Information Regarding Contribution, G	rant Cift Laan Sah	alarahin ata Bragrar	ma.		
2	Check here u X if the foundation only		-		not accept	
				=		
	unsolicited requests for funds. If the found		its, etc., to individuals t	or organizations under o	trier conditions,	
	complete items 2a, b, c, and d. See instru		the person to whom on	plications should be add	dragged:	
а	The name, address, and telephone number N/A	a or email address of t	ше регоон то многи ар	plications should be add	aresseu.	
	41/44					
	The form in which applications should be	submitted and informat	ion and materials they	should include:		
	N/A	casimila and informat	and materials triey	S. Said Holddo.		
	Any submission deadlines:					
-	N/A					
d	Any restrictions or limitations on awards, s	uch as by geographica	al areas, charitable field	ls, kinds of institutions, o	or other	
	factors:	, 5 5 1		-,		

N/A

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 Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year ACTOR'S GUILD OF PARKERSBURG 724 MARKET STREET NONE PC PARKERSBURG WV 26101 SUPPORT PROGRAM OPERATIONS 4,000 BOYS & GIRLS CLUB OF PARKERSBURG 1200 MARY ST. NONE PC PARKERSBURG WV 26101 COMMUNITY CHILDREN SUPPORT 500 CAPITAL HIGH SCHOOL PC 1500 GREENBRIER ST NONE CHARLESTON WV 25311 SUPPORT EDUCATIONAL OPERATIONS 4,053 CENTER FOR JUSTICE AND DEMOCRACY 185 WEST BROADWAY NONE ADVOCATE FOR CIVIL JUSTICE ISSUES NEW YORK NY 10013 1,000 wv CHILDREN'S HOME SOCIETY OF 1640 SAINT MARYS AVENUE NONE PC PARKERSBURG WV 26102 SUPPORT LOCAL CHILDREN 500 COMMUNITY RESOURCES, INC. 1037 MARKET ST NONE PC PARKERSBURG WV 26101 SUPPORT DAYCARE PROGRAM 2,500 EDUCATIONAL SERVICE CENTER 2080 CITYGATE DR NONE PC COLUMBUS OH 43219 ROCKBRIDGE **ACADEMY** 2,500 ERICKSON ALL-SPORTS FACILITY 4601 CAMDEN AVENUE NONE PC PARKERSBURG WV 26101 SUPPORT SPORTS OPERATIONS 1,200 CENTER FAMILY CRISIS INTERVENTION PO BOX 695 NONE PC PARKERSBURG WV 26102 SUPPORT COMMUNITY **FAMILIES** 5,000 FIRST PRESBYSTERIAN CHURCH 1341 JULIANA STREET NONE PC PARKERSBURG WV 26101 SUPPORT CHURCH OPERATIONS 7,500 Total 124,553 u 3a **b** Approved for future payment N/A

u 3b

Total

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Part XVI-A	Analysis of Income-Producing Act	ivities				
Enter gross am	ounts unless otherwise indicated.	Unrelated I	business income	Excluded by	section 512, 513, or 514	(a)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
1 Program se						(OCC Instructions.)
f	-					
	nd contracts from government agencies					
	dues and assessments					
3 Interest on	savings and temporary cash investments			14	1,579	
	and interest from securities			14	54,500	
	ncome or (loss) from real estate:				. ,	
	anced property					
b Not del	ot-financed property					
6 Net rental in	ncome or (loss) from personal property					
	tment income					
8 Gain or (los	s) from sales of assets other than inventory			14	98,615	
	or (loss) from special events					
10 Gross profit	or (loss) from sales of inventory					
11 Other rever						
b						
е						
12 Subtotal. Ad	dd columns (b), (d), and (e)			0	154,694	C
13 Total. Add	line 12, columns (b), (d), and (e)				13	154,694
See worksheet	in line 13 instructions to verify calculations.)					
Part XVI-B	T			-		
Line No.	Explain below how each activity for which income is	•			•	
<u>q</u>	accomplishment of the foundation's exempt purpos	es (other than by	providing funds for	r such purpose	s). (See instructions.)	
N/A						

Part	XVII	Informati Organiza	ion Reg	arding Tr		o and	Transa	actio	ns and Relati	ionships Wit	h Noncharitable	Exe		gc I
	d the orga	nization dire	ectly or indi						her organization d	escribed			Yes	No
			than section	on 501(c)(3)	organizations) or in	section 52	7, rela	ating to political					
•	ganizations ansfers fro		rtina found	ation to a no	oncharitable e	exempt	organizatio	on of:						
		•	•				•					1a(1)		Х
(2)												1a(2)		Х
b Ot	her transa	ictions:												
(1)	Sales of	assets to a	a noncharit	able exempt	organization							1b(1)		X
(2)	Purchase	es of assets	s from a no	oncharitable	exempt orga	nızatıon						1b(2)		X
(3) (4)	Reimbur	sement arr	angements	or other ass	ets							1b(3) 1b(4)		X
٠,	Loans of	r Ioan guara	antees									1b(5)		X
(6)	Performa	ance of ser	vices or m	embership o	r fundraising	solicita	tions					1b(6)		Х
c Sh	aring of fa	cilities, equ	ipment, ma	ailing lists, ot	her assets, o	or paid	employees	3				1c		X
val		transaction		arrangemer	•	olumn (d) the valu	ue of t	ne foundation rece he goods, other a (d) Des	ssets, or services		rangeme	nts	
N/A														
									1					
									1					
de	scribed in	•	(c) (other	than section	with, or relate 501(c)(3)) or			e tax-e	exempt organizatio	ons		Y	es X	No
		a) Name of org	anization		(b)	Type of c	organization			(c) Descri	ption of relationship			
N/.	A				1									
									dules and statements, a hich preparer has any		knowledge and belief, it is	s true,		
Sign Here	001100t, a.i.	a complete. D		oropaioi (outor t		2000 0	. a. moma		o. proparor nac any	ougo.	May the IRS disc with the preparer See instructions.			No
	_									PRES	SIDENT			
	Signa	ture of officer of	or trustee				1	Date	•	Title				
Paid	Print/Typ	e preparer's na	ame				Preparer's	signatu	ire		Date		Check self-em	if iployed
Preparer	KATHY	G. ED					•		EDDY, CPA		05/08			
Use Onl	Firm's na			NOUGH, OX 184	EDDY,	PAR	SONS	&	BAYLOUS,	A.C.		0729		
	Firm's a	ddress "	FO B	OA 184							Firm's EIN " 55-	-060	<u> </u>	<u> </u>

PARKERSBURG, WV 26102-0184

304-428-8091

Phone no.

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 Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year GRACE EPISOPAL CHURCH 33 CHURCH STREET NONE PC WHITE PLAINS NY 10601 SUPPORT CHURCH OPERATIONS 1,000 HABITAT FOR HUMANITY 600 16TH STREET B NONE PC VIENNA WV 26105 SUPPORT COMMUNITY HOUSING 10,000 HUMANE SOCIETY OF PARKERSBURG PC 530 29TH STREET NONE PARKERSBURG WV 26101 PROVIDE ANIMAL SUPPORT IN COMMUNITY 1,000 LEGAL AID OF WV 922 QUARRIER STREET #400 NONE PC PROVIDE LEGAL CHARLESTON WV 25301 **SERVICES** 10,500 MARSHALL UNIVERSITY FOUNDATION, INC 519 JOHN MARSHALL DRIVE PC NONE **HUNTINGTON WV 25703** SUPPORT ACADEMICS 1,500 NATIONAL MULTIPLE SCLEROSIS SOCIETY P O BOX 4527 NONE PC NEW YORK NY 10163 MEDICAL RESEARCH 2,500 NORTH PARKERSBURG BAPTIST CHURCH 3109 EMERSON AVE NONE PC PARKERSBURG WV 26104 THE CLOTHING CLOSET 500 PACIFIC ISLANDS RESEARCH INSTITUTE PC PO BOX 2627 NONE FRIDAY HARBOR WA 98250 RAPANVI PANETARIUM 5,000 PARKERSBURG AREA COALITION 413 8TH AVENUE NONE PC PARKERSBURG WV 26101 SUPPORT TO THE HOMELESS 5,500 PARKERSBURG AREA COMMUNITY FOUNDATI 1620 PARK AVENUE NONE PC PARKERSBURG WV 26101 SUPPORT COMMUNITY EFFORTS 1,000 Total u 3a **b** Approved for future payment N/A Total u 3b

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 Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year PARKERSBURG CATHOLIC SCHOOL 3201 FAIRVIEW AVE NONE PC PARKERSBURG WV 26104 SUPPORT EDUCATION 1,000 PARKERSBURG PRIDE INCORPORATED PO BOX 2426 NONE PC PARKERSBURG WV 26102 SUPPORT PROGRAM OPERATIONS 1,000 PHS STADIUM COMMITTEE, INC 2101 DUDLEY AVENUE NONE PC PARKERSBURG WV 26101 ATHLETIC PROGRAM SUPPORT 1,000 PUBLIC CITIZEN FOUNDATION, INC PC 1600 20TH ST NW NONE WASHINGTON DC 20009 CONSUMER **ADVOCACY** 1,000 PUBLIC JUSTICE FOUNDATION 1620 L ST. NW STE 630 NONE PC WASHINGTON DC 20036 SUPPORT THE WORK OF PUBLIC JUSTICE 10,000 SAVE A KITTY FERAL CAT PROGRAM, INC PO BOX 1442 NONE PC PARKERSBURG WV 26102 SUPPORT PROGRAM OPERATIONS 500 SW RESOURCES 1007 MARY STREET NONE PC PARKERSBURG WV 26101 SUPPORT PROGRAM OPERATIONS 10,000 TRINITY EPISCOPAL CHURCH 430 JULIANA STREET NONE PC SUPPORT CHUCH OPERATIONS PARKERSBURG WV 26101 7,500 UNITED WAY ALLIANCE OF MID-OHIO 935 MARKET STREET NONE PC PARKERSBURG WV 26101 SUPPORT CHARITIABLE ORGANIZATIONS 15,000 VIENNA VOLUNTEER FIRE DEPT 609 28TH STREET NONE PC SUPPORT COMMUNITY FIRE PREVENTION VIENNA WV 26105 1,000 Total u 3a **b** Approved for future payment N/A Total u 3b

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 Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year VOICES FOR CHILDREN FOUNDATION, 305 1/2 FOURTH ST. STE. 1 NONE PC 2,500 PARKERSBURG WV 26101 CHILD **ADVOCACY** WESTMINISTER PRESBYTERIAN CHURCH 708 54TH STREET NONE PC VIENNA WV 26105 SUPPORT CHURCH OPERATIONS 1,000 WOOD COUNTY SOCIETY PC 1411 GRAND CENTRAL AVENUE NONE VIENNA WV 26105 SUPPORT FOR THOSE WITH DI\$ABILITES 500 YMCA OF PARKERSBURG 1800 30TH ST NONE PC PARKERSBURG WV 26101 SUPPOT PROGRAM OPERATIONS 1,000 YWCA OF CHARLESTON 1426 KANAWHA BLVD E NONE PC CHARLESTON WV 25301 ANNUAL WOMEN OF ACHIEVEMENT/PROG. 1,300 WOMENS HEALTH CENTER 510 W WASHINGTON ST NONE PC SUPPORT PROGRAM OPERATIONS CHARLESTON WV 25302 2,000 SECOND HELPINGS ATLANTA PO BOX 720582 NONE PC ATLANTA GA 30358 PROGRAM SUPPORT 500 THE CHILDREN'S LISTENING PLACE 4221 EMERSON AVE NONE PC PARKERSBURG WV 26104 PROGRAM SUPPORT 500 Total u 3a **b** Approved for future payment N/A u 3b Total

Federal Statements

Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description	 Total	Net stment	٠,	usted Net	_	aritable ırpose
ACCOUNTING FEES	\$ 3,850	\$ 	\$		\$	
TOTAL	\$ 3,850	\$ 0	\$	0	\$	0

Statement 2 - Form 990-PF, Part I, Line 18 - Taxes

Description	 Total	_ In	Net vestment	A	djusted Net	haritable Purpose
FOREIGN TAX WITHHELD ON DIVIDEND FEDERAL ESTIMATED TAX FEREDAL TAX 2018 BAL DUE	\$ 460 6,888 5,566	\$	460 6,888 5,566	\$		\$
TOTAL	\$ 12,914	\$	12,914	\$	0	\$ 0

Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	Total	Inv	Net estment	Adjusted Net	Charitable Purpose
	\$	\$		\$	\$
EXPENSES					
ADMINISTRATIVE EXPENSE		600			
WEBSITE MAINTENANCE		268			
ANNUAL INVESTMENT FEE		150	150		
DESPOITORY BANK (ADR) FEES		4	4		
WV REGISTRATION FEE		25			
TOTAL	\$ 1,	047 \$	154	\$ 0	\$0

Federal Statements

Statement 4 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	E	Beginning of Year		End of Year	Basis of Valuation	Fair Market Value
100 SHS INTL BUSINESS MACHINES CORP	\$	15,979	\$		COST	\$
100 SHS PHILLIPS 66	·	2,582	•		COST	•
100 SHS UNITED PARCEL SVC CL B		7,352			COST	
109 SHS TEXAS INSTRUMENTS		4,968		4,968	COST	13,984
116 SHS EBAY INC COM		1,456		•	COST	•
116 SHS PAYPAL HOLDINGS INC		2,146		2,146	COST	12,548
118 SHS UNITEDHEALTH GROUP INC		6,046		6,046	COST	34,690
14 SHS AMAZON COM INC		5,583		5,583	COST	25,870
15 SHS DXC TECHNOLOGY CO		549			COST	
150 SHS UNITED TECHS CORP		12,472		12,472	COST	22,464
1734 SHS FIRST FINANCIAL BANCORP		20,734		20,734	COST	44,113
1734 SHS PFIZER INC		32,107		32,107	COST	67,938
175 SHS HEWLETT PACKARD		1,465			COST	
175 SHS HP INC		2,291			COST	
186 SHS ELI LILLY & CO		10,253		10,253	COST	24,446
195 SHS CARNIVAL CORP PAIRED SHS		9,513			COST	
200 SHS AMER EXPRESS COMPANY		7,710		7,710	COST	24,898
200 SHS APPLE		12,110		12,110	COST	58,730
200 SHS DIAGEO PLC SPSD ADR NEW		22,527		22,527	COST	33,684
203 SHS LOWE'S COMPANIES INC		5,651		5,651	COST	24,311
211 SHS GENL DYNAMICS CORP COM		14,492		14,492	COST	37,210
250 SHS EXXON MOBIL CORP		17,666		17,666	COST	17,445
295 SHS NORFOLK SOUTHERN CORP		23,061		23,061	COST	57,268
319 SHS PAYCHEX INC		10,454			COST	
325 SHS JPMORGAN CHASE & CO		13,421		13,421	COST	45,305
354 SHS CINN FINCL CRP OHIO		14,585		14,585	COST	37,223
368 SHARES PEPSICO INC		21,822		21,822	COST	50,295
369 SHS MICROSOFT CORP		10,603		10,603	COST	58,191
48 SHS NEWMARKET CORP		10,915		10,915	COST	23,353
60 SHS BIOGEN IDEC INC		6,139			COST	
637 SHS CISCO SYSTEMS INC COM		11,937		11,937	COST	30,551
69 SHS DISNEY (WALT) CO COM STK		2,179		2,179	COST	9,979
72 SHS BLACKROCK INC		16,031		16,031	COST	36,194
747 SHS INTEL CORP		17,249		17,249	COST	44,708
78 SHS HASBRO INC COM		3,020			COST	
80 SHS VERIZON COMMUNICATNS INC		2,397			COST	
9 SHS WSTN DIGITAL CORP		331			COST	
92 SHARES VISA CL A		3,853		3,853	COST	17,287

Federal Statements

Statement 4 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments (continued)

Description	 Beginning of Year	End of Year	Basis of Valuation	F 	air Market Value
TOTAL	\$ 383,649	\$ 320,121		\$	852,685

Statement 5 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments

Description	В	eginning of Year	 End of Year	Basis of Valuation	F 	air Market Value
3000 SHS FNMA PRFD SERIES	\$	75,000	\$ 75,000	COST	\$	33,990
TOTAL	\$	75,000	\$ 75,000		\$	33,990

Statement 6 - Form 990-PF, Part II, Line 13 - Other Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
VARIOUS MUTUAL FUNDS	\$ 1,324,949	\$ 1,300,873	COST	\$ 1,559,132
TOTAL	\$ 1,324,949	\$ 1,300,873		\$ 1,559,132

55-0783635	Federal S	Statements	
Form 99	<u>0-PF, Part XV, Line 1a - Mana</u> ç	gers Who Contributed Ov	er 2% or \$5,000
	Name of Manager		nount
HARRY DEITZLER TOTAL		\$\$	0
Form	990-PF, Part XV, Line 1b - Ma	nagers Who Own 10% or	More Stock
	Name of Manager	Ar	mount
NONE TOTAL		\$\$	0

(Worksheet)

Estimated Tax on Unrelated Business Taxable Income for Tax-Exempt Organizations (and on Investment Income for Private Foundations)

OMB No. 1545-0047

	rtment of the Treasury nal Revenue Service			r instructions and the lates send to the Internal Reven			2020
1	Unrelated business taxable income e	expected in	the tax year			1	
2	Tax on the amount on line 1. See instr	uctions for ta	x computation			2	
3	Alternative minimum tax for trusts. S	Gee instructi	ions			3	
4	Total. Add lines 2 and 3					4	
5	Estimated tax credits. See instruction	ns				5	
6	Subtract line 5 from line 4					6	
7	Other taxes. See instructions					7	
8	Total. Add lines 6 and 7					8	
9	Credit for federal tax paid on fuels. S	See instruct	ions			9	
10a b	Subtract line 9 from line 8. Note: If I not required to make estimated tax instructions Enter the tax shown on the 2019 ret zero or the tax year was for less that enter the amount from line 10a on line 1020 Estimated Tax. Enter the small skip line 10b, enter the amount from	urn. See in: n 12 month: ne 10c aller of line	Private foundations, see structions. Caution: If s, skip this line and 10a or line 10b. If the organiz	10b zation is required to	1,416	10c	1,416
			(a)	(b)	(c)		(d)
11	Installment due dates. See instructions	. 11	07/15/20	07/15/20	09/15/20		12/15/20
12	Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization." 2019 Overpayment. See		354	354		354	354
	instructions	. 13	354	354		354	354
14	Payment due (Subtract line 13 from line 12)	. 14					

For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2020)

Form **990PF**

Two Year Comparison Report

, ending

For calendar year 2019, or tax year beginning

2018 & 2019

Name

DEITZLER FOUNDATION, INC

Taxpayer Identification Number 55-0783635

			DETIZIER FOUNDATION, INC			55-0763635			
	_		2	2018	201	9	Differences		
			Revenue and expenses per books	Net investment income	Revenue and expenses per books	Net investment income	Revenue and expenses per books	Net investment income	
	1. Contributions, gifts, grants, and similar amounts received	1.	135,079		1,100		-133,979		
e	2. Interest on savings and temporary cash investments	2.	854	854	1,579	1,579	725	725	
n L	3. Dividends and interest from securities	3.	52,294	52,294	54,500	54,500	2,206	2,206	
>	4. Gross rents	4.							
e e	5. Net gain or (loss) from sale of assets	5.	293,174		98,615		-194,559		
_	6. Capital gain net income	6.		293,174		98,615		-194,559	
	7. Gross profit or (loss)	7.							
	8. Other income	8.							
	9. Total. Add lines 1 through 8	9.	481,401	346,322	155,794	154,694	-325,607	-191,628	
S		10.							
2		11.							
ξ	12. Pension plans, employee benefits	12.							
o n	13. Professional fees	13.	5,125		3,850		-1,275		
þ	14. Interest	14.							
۵	15. Taxes	15.	1,878	1,878	12,914	12,914	11,036	11,036	
•ఠ	16. Depreciation and depletion	16.							
es	17. Occupancy	17.							
JS	18. Other expenses	18.	1,372	154	1,047	154	-325		
9	19. Contributions, gifts, grants paid	19.	110,893		124,553		13,660		
×	20. Total expenses and disbursements. Add lines 10 through 19	20.	119,268	2,032	142,364	13,068	23,096	11,036	
Ш	21. Net income (if negative investment activity, enter -0-)	21.	362,133	344,290	13,430	141,626	-348,703	-202,664	
	22. Excise Tax	22.		6,886		1,416		-5,470	
es	23. Section 511 Tax	23.							
ã	24. Subtitle A income tax	24.							
	25. Total Taxes	25.		6,886		1,416		-5,470	
		26.		1,320		6,888		5,568	
		27.							
밀	28. Other Payments	28.							
Refund	29. Total payments and credits	29.		1,320		6,888		5,568	
-	30. Balance due / (Overpayment)	30.		5,566		-5,472		-11,038	
Dŭ	31. Overpayment credited to next year	31.				5,472		5,472	
		32.							
	33. Net due / (Refund)	33.		5,566		0		-5,566	
_		34.	1,909,520		1,922,950		0		
the	35. Total liabilities	35.	0		0		0		
0	36. Net assets	36.	1,909,520		1,922,950		0		

55-0783635	Federal Statements
	Direct Public Support
Contributor	Cash Noncash Contribution Contribution
CHARLES LOFTY TOTAL	100 100 0
	Taxable Interest on Investments
Description ML ACCOUNT #668-04A79 TOTAL	Amount Unrelated Exclusion Code Code US Obs (\$ or %) \$ 1,579 \$ 1,579
	Taxable Dividends from Securities
Description ML ACCOUNT #668-04A79 TOTAL	Amount \$ 54,500

Filing Instructions

DEITZLER FOUNDATION, INC

Exempt Organization / Private Foundation Tax Return(s)

Taxable Year Ended December 31, 2019

Federal Filing Instructions

Your Form 990-PF for the tax year ended 12/31/19 shows a total overpayment of \$5,472, all of which is to be credited to your estimated tax liability for the coming year. Do not mail a copy of this return.

Your return is being filed electronically with the IRS and is not required to be mailed. If you mail a paper copy of your return to the IRS it will delay the processing of your return. Your electronically filed return is not complete without your signature. You are using a Personal Identification Number (PIN) for signing your return electronically. Form 8879-EO, IRS *e-file* Signature Authorization for an Exempt Organization should be signed and dated by an authorized officer of the organization and returned as soon as possible to:

McDonough, Eddy, Parsons & Baylous, A.C. PO Box 184
Parkersburg, WV 26102-0184

Important: Your return will not be filed with the IRS until the signed Form 8879-EO has been received by this office.

You have no required 2020 Form 990-PF estimated tax payments.