# Form **990-PF**

### **Return of Private Foundation**

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

2022

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to <a href="https://www.irs.gov/Form990PF">www.irs.gov/Form990PF</a> for instructions and the latest information.

Open to Public Inspection

| For              | calend  | lar year 2022 or tax year beginning ,   | and ending             |                 |                |                                     |                                  |
|------------------|---------|---|------------------------|-----------------|----------------|-------------------------------------|----------------------------------|
| Na               | me of f | foundation  |                        |                 | A Empl         | oyer identification num             | ber                              |
|                  |         |   |                        |                 |                | 0702625                             |                                  |
|                  |         | ZLER FOUNDATION, INC  |                        | Da a sa fa vita |                | -0783635<br>hone number (see instru | otions)                          |
|                  |         | nd street (or P.O. box number if mail is not delivered to street add <b>BELLA VISTA DR</b> .                  | iress)                 | Room/suite      |                | 1-345-5667                          | Clions)                          |
|                  |         | vn, state or province, country, and ZIP or foreign postal code  |                        |                 |                |                                     |                                  |
|                  | IENI    |   |                        |                 | C If exe       | mption application is pen           | ding, check here                 |
| G                | heck a  | all that apply: Initial return Initial return   | n of a former public c | harity          | D 1. Fo        | reign organizations, chec           | k here                           |
|                  |         | Final return Amended  | •                      | ,               | 2. Fo          | reign organizations meet            | ing the                          |
|                  |         | Address change Name cha   | inge                   |                 | 1              | % test, check here and a            |                                  |
| Н С              | hack t  | type of organization: X Section 501(c)(3) exempt private  | foundation             |                 | F If priv      | ate foundation status was           | s terminated under               |
| _                |         |   | e private foundation   |                 |                | n 507(b)(1)(A), check he            |                                  |
| _                |         | ket value of all assets at J Accounting method:   |                        | crual           | F If the       | foundation is in a 60-mor           | nth termination                  |
|                  |         | ear (from Part II, col. (c), Other (specify)  |                        |                 | 1              | section 507(b)(1)(B), ch            |                                  |
|                  | e 16)   | \$ 2,774,406 (Part I, column (d), must  | be on cash basis.)     |                 |                |                                     |                                  |
|                  | rt I    | Analysis of Revenue and Expenses (The total of  | (a) Revenue and        | (E) Net is      |                | (c) Adjusted net                    | (d) Disbursements for charitable |
|                  |         | amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).) | expenses per<br>books  | (b) Net in      | vestment<br>me | income                              | purposes                         |
|                  |         |   | 127,000                |                 |                |                                     | (cash basis only)                |
|                  | 1       | Contributions, gifts, grants, etc., received (attach schedule)  | 127,000                |                 |                |                                     |                                  |
|                  | 2       | Check if the foundation is not required to attach Sch. B  | 2:                     | 3               | 23             |                                     |                                  |
|                  | 3       | Interest on savings and temporary cash investments Dividends and interest from securities                     | 54,380                 | -               | 54,380         |                                     |                                  |
|                  | 4       |   | 34,300                 |                 | 54,500         |                                     |                                  |
|                  | 5a<br>b | Net rental income or (loss)   |                        |                 |                |                                     |                                  |
| ne               | 6a      | Net gain or (loss) from sale of assets not on line 10   | 17,349                 | 9               |                |                                     |                                  |
| /en              | b       | Gross sales price for all assets on line 6a 59,643  |                        |                 |                |                                     |                                  |
| Revenue          | 7       | Capital gain net income (from Part IV, line 2)  |                        |                 | 17,349         |                                     |                                  |
| _                | 8       | Net short-term capital gain   |                        |                 |                | 0                                   |                                  |
|                  | 9       | Income modifications  |                        |                 |                |                                     |                                  |
|                  | 10a     | Gross sales less returns and allowances   |                        |                 |                |                                     |                                  |
|                  | b       | Less: Cost of goods sold  |                        |                 |                |                                     |                                  |
|                  | С       | Gross profit or (loss) (attach schedule)  |                        |                 |                |                                     |                                  |
|                  | 11      | Other income (attach schedule)  |                        |                 |                |                                     |                                  |
|                  | 12      | Total. Add lines 1 through 11   | 198,752                | 2               | 71,752         | 0                                   |                                  |
| (0               | 13      | Compensation of officers, directors, trustees, etc.   |                        | 0               |                |                                     |                                  |
| Expenses         | 14      | Other employee salaries and wages   |                        |                 |                |                                     |                                  |
| eu               | 15      | Pension plans, employee benefits  |                        |                 |                |                                     |                                  |
| 꼾                | 16a     | Legal fees (attach schedule)  |                        |                 |                |                                     |                                  |
| 9                | b       | Accounting fees (attach schedule) STMT 1  | 4,35                   | /               |                |                                     |                                  |
| >                | С       | Other professional fees (attach schedule)   |                        |                 |                |                                     |                                  |
| tra              | 17      | Interest  | 677                    |                 | 670            |                                     |                                  |
| nis.             | 18      | Taxes (attach schedule) (see instructions) STMT 2   | 670                    | U               | 670            |                                     |                                  |
| Ξ                | 19      | Depreciation (attach schedule) and depletion  |                        |                 |                |                                     |                                  |
| and Administrati | 20      | Occupancy   |                        | -               |                |                                     |                                  |
| þ                | 21      | Travel, conferences, and meetings   |                        |                 |                |                                     |                                  |
| ā                | 23      | Printing and publications Other expenses (att. sch.) STMT 3   | 2,840                  | 0               | 150            |                                     |                                  |
| Operating        | 24      | Other expenses (att. sch.) STMT 3  Total operating and administrative expenses.                               | 2,04                   |                 | 150            |                                     |                                  |
| rati             | 4       | A 1115 40 th 100  | 7,86                   | 7               | 820            | 0                                   | 0                                |
| be               | 25      | Add lines 13 through 23 Contributions, gifts, grants paid   | 133,500                |                 |                |                                     | 133,500                          |
| 0                | 26      | Total expenses and disbursements. Add lines 24 and 25   | 141,36                 |                 | 820            | 0                                   |                                  |
|                  | 27      | Subtract line 26 from line 12:  |                        |                 |                |                                     |                                  |
|                  | a       | Excess of revenue over expenses and disbursements   | 57,38!                 | 5               |                |                                     |                                  |
|                  | b       | Net investment income (if negative, enter -0-)  |                        |                 | 70,932         |                                     |                                  |
|                  | _       | Adjusted not income (if pegative enter -0-)   |                        |                 |                | 0                                   |                                  |

|                | )-PF (2022) DEITZLER FOUNDATION, INC  | 55 070303                         |                | raye Z                 |
|----------------|---|-----------------------------------|----------------|------------------------|
| Part           | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions,) | Beginning of year  (a) Book Value | End o          | (c) Fair Market Value  |
| 1              | Cash – non-interest-bearing   | 1                                 | (b) Book Value | (e) I all Markot Value |
| 2              | Savings and temporary cash investments  | 109,109                           | 151,438        | 151,438                |
| 3              |   |                                   |                | - î                    |
| •              | Accounts receivable Less: allowance for doubtful accounts   |                                   |                |                        |
| 4              |   |                                   |                |                        |
| 7              | Pledges receivable  Less: allowance for doubtful accounts   |                                   |                |                        |
| 5              | Cronto recoivable   |                                   |                |                        |
| 6              | Receivables due from officers, directors, trustees, and other   |                                   |                |                        |
|                | disqualified persons (attach schedule) (see   |                                   |                |                        |
|                | in the sale of  |                                   |                |                        |
| 7              | Other notes and loans receivable (att. schedule)  |                                   |                |                        |
| ļ .            | Less: allowance for doubtful accounts   |                                   |                |                        |
| 8              | Inventories for sale or use   |                                   |                |                        |
| 9              | Prepaid expenses and deferred charges   |                                   |                |                        |
| 10a            | Investments – U.S. and state government obligations (attach schedule)   |                                   |                |                        |
| b              | Investments – corporate stock (attach schedule) SEE STMT 4  | 360,465                           | 360,465        | 1,085,319              |
| C              | Investments – corporate bonds (attach schedule) SEE STMT 5  | 75,000                            | 75,000         |                        |
| 11             | Investments – land, buildings, and equipment: basis   |                                   |                |                        |
| ''             | Less: accumulated depreciation (attach sch.)  |                                   |                |                        |
| 12             |   |                                   |                |                        |
| 13             | Investments – mortgage loans Investments – other (attach schedule) SEE STATEMENT 6  | 1,312,714                         | 1,328,172      | 1,532,129              |
| 14             | 1 1 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1   |                                   |                |                        |
| '*             |   |                                   |                |                        |
| 15             | Less: accumulated depreciation (attach sch.) Other assets (describe SEE STATEMENT 7 )   | 600                               |                |                        |
| 16             | Total assets (to be completed by all filers – see the   |                                   |                |                        |
| '              | instructions. Also, see page 1, item I)   | 1,857,889                         | 1,915,075      | 2,774,406              |
| 17             | Accounts payable and accrued expenses   |                                   |                |                        |
| 18             | Grants payable  |                                   |                |                        |
| 19             | Deferred revenue  |                                   |                |                        |
| 20             | Loans from officers, directors, trustees, and other disqualified persons  |                                   |                |                        |
| 19<br>20<br>21 | Mortgages and other notes payable (attach schedule)   |                                   |                |                        |
| 22             | Other liabilities (describe )   |                                   |                |                        |
| 23             | Total liabilities (add lines 17 through 22)   | 0                                 | 0              |                        |
|                | Foundations that follow FASB ASC 958, check here  |                                   |                |                        |
|                | and complete lines 24, 25, 29, and 30.  |                                   |                |                        |
| 24             | Net assets without donor restrictions   |                                   |                |                        |
| 25             | Net assets with donor restrictions  |                                   |                |                        |
|                | Foundations that do not follow FASB ASC 958, check here   |                                   |                |                        |
|                | and complete lines 26 through 30.   |                                   |                |                        |
| 26             | Capital stock, trust principal, or current funds  |                                   |                |                        |
|                | Paid-in or capital surplus, or land, bldg., and equipment fund  |                                   |                |                        |
| 28<br>29       | Retained earnings, accumulated income, endowment, or other funds  | 1,857,889                         | 1,915,075      |                        |
| 29             | Total net assets or fund balances (see instructions)  | 1,857,889                         | 1,915,075      |                        |
| 30             | Total liabilities and net assets/fund balances (see   |                                   |                |                        |
| 30             | instructions)   | 1,857,889                         | 1,915,075      |                        |
| Part           |   |                                   |                |                        |
| Tota           | net assets or fund balances at beginning of year - Part II, column (a), line 29 (must a   | agree with                        |                |                        |
|                | of-year figure reported on prior year's return)   |                                   | 1              | 1,857,889              |
|                | r amount from Part I, line 27a  |                                   | 2              | 57,385                 |
|                | r increases not included in line 2 (itemize)  |                                   | 3              |                        |
|                | lines 1, 2, and 3   |                                   | 4              | 1,915,274              |
|                | eases not included in line 2 (itemize) SEE STATEMENT 8  |                                   | 5              | 199                    |
|                | net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b),   | line 29                           | 6              | 1,915,075              |
| U 1018         | The doces of furth parameter at one or year (this 4 things have by 1 this it, column (b),   |                                   |                | Form 990-PF            |

| Pa  | art IV Capital Gains an                 | nd Losses for Tax on Investm  | ent Income                        | W   |                               |  |
|-----|---|---|-----------------------------------|---|-------------------------------|--|
|     |   | e kind(s) of property sold (for example, real<br>nouse; or common stock, 200 shs, MLC Co                      |                                   | (b) How acquired P - Purchase D - Donation  | (c) Date acqu<br>(mo., day, y |  |
| 1a  | PUBLICLY TRADED                         | SECURITIES  |                                   | P   |                               |  |
| b   | CAPTIAL GAIN DI                         | STRIBUTIONS   |                                   |   |                               |  |
| С   |   |   |                                   |   |                               |  |
| d   |   |   |                                   |   |                               |  |
| е   |   |   |                                   |   |                               |  |
|     | (e) Gross sales price                   | (f) Depreciation allowed (or allowable)   |                                   | or other basis<br>ense of sale              |                               | ) Gain or (loss)<br>plus (f) minus (g))          |
| a   | 35,049                                  |   |                                   | 42,294                                      |                               | -7,245   |
| b   | 24,594                                  |   |                                   |   |                               | 24,594   |
| С   |   |   |                                   |   |                               |  |
| d   |   |   |                                   |   |                               |  |
| е   |   |   |                                   |   |                               |  |
| (   | Complete only for assets showing        | gain in column (h) and owned by the fo  | undation on 12/31/69.             | 6   | (I) Gains                     | s (Col. (h) gain minus                           |
|     | (i) FMV as of 12/31/69                  | (j) Adjusted basis<br>as of 12/31/69  |                                   | ss of col. (i)<br>I. (j), if any            | col (k) b                     | out not less than -0-) or<br>ses (from col. (h)) |
| a   |   |   |                                   |   |                               | -7,245   |
| b   |   |   |                                   |   |                               | 24,594   |
| c   |   |   |                                   |   |                               | ***  |
| d   |   |   |                                   |   |                               |  |
| e   |   |   |                                   |   |                               |  |
| 3 1 | f gain, also enter in Part I, line 8, o | if (loss), enter -0- ir (s) as defined in sections 1222(5) and (6 column (c). See instructions. If (loss), er | n Part I, line 7):<br>nter -0- in | Đ.  | 3                             | 17,349   |
| Pa  | art V Excise Tax Base                   | ed on Investment Income (Se   | ction 4940(a), 49                 | 940(b), or 4948—                            | -see instruc                  | tions)   |
| 1a  | Exempt operating foundations do         | escribed in section 4940(d)(2), check h   |                                   | ter "N/A" on line 1.<br>sary—see instructio | ns) 1                         | 986  |
| b   | •                                       | nter 1.39% (0.0139) of line 27b. Exemp  |                                   | •   |                               |  |
| J   |   | , col. (b)  |                                   |   |                               |  |
| 2   |   | section 4947(a)(1) trusts and taxable   |                                   |   | 2                             | C  |
| 3   | Add lines 1 and 2                       | s section -re may(r) trades and taxable   | oung only                         | we, onto: o / Invitation                    | 3                             | 986  |
| 4   |   | c section 4947(a)(1) trusts and taxable   | foundations only: other           | ers enter -0-)                              |                               | C  |
| 5   |   | ome. Subtract line 4 from line 3. If zero   |                                   |   | E                             | 986  |
| 6   | Credits/Payments:                       |   | Fa.4.40                           |   |                               |  |
| а   | •                                       | nd 2021 overpayment credited to 2022  | 1 6                               | ia   2                                      | ,806                          |  |
| b   | Exempt foreign organizations – t        | · ·   |                                   | ib  |                               |  |
| c   |   | ension of time to file (Form 8868)  |                                   | ic  |                               |  |
| d   |   | withheld  |                                   | id  |                               |  |
| 7   | Total credits and payments. Add         |   |                                   | 1   | 7                             | 2,806  |
| 8   | · ·                                     | ment of estimated tax. Check here   | if Form 2220 is atta              | ched  | 8                             | 1  |
| 9   |   | nd 8 is more than line 7, enter amount  |                                   | 255552-5-6-6-00 (0000-6-00 000-6-00)        | 9                             |  |
| 10  |   | than the total of lines 5 and 8, enter the  |                                   |   | 10                            | 1,820  |
| 11  |   | e: Credited to 2023 estimated tax   | 1,82                              | 20 Refunded                                 | 1 11                          |  |

| Pa | rt VI-A Statements Regarding Activities  |        | _    | _         |
|----|--|--------|------|-----------|
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it   |        | Yes  | No        |
|    | participate or intervene in any political campaign?  | 1a     |      | X         |
| b  | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the   |        |      |           |
|    | instructions for the definition  | 1b     |      | X         |
|    | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials  |        |      |           |
|    | published or distributed by the foundation in connection with the activities.  |        |      |           |
| С  | Did the foundation file Form 1120-POL for this year?   | 1c     |      | X         |
| d  | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:   |        |      |           |
|    | (1) On the foundation. \$ (2) On foundation managers. \$   |        |      |           |
| е  | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed  |        | - 5  | -         |
|    | on foundation managers. \$   |        |      |           |
| 2  | Has the foundation engaged in any activities that have not previously been reported to the IRS?  | 2      |      | X         |
|    | If "Yes," attach a detailed description of the activities.   |        | -    | 100       |
| 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     |      | X         |
| b  | If "Yes," has it filed a tax return on Form 990-T for this year?   | 4b     |      |           |
| 5  | Was there a liquidation, termination, dissolution, or substantial contraction during the year?   | 5      |      | X         |
|    | If "Yes," attach the statement required by General Instruction T.  |        |      |           |
| 6  | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  |        |      |           |
|    | By language in the governing instrument, or  |        |      |           |
|    | <ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>   |        |      |           |
|    | 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 XIV   | 7      | X    |           |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions.  WV   |        |      |           |
| b  | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General   |        | - 7. |           |
|    | (or designate) of each state as required by General Instruction G? If "No," attach explanation   | 8b     | X    |           |
| 9  | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or  |        |      |           |
|    | 4942(j)(5) for calendar year 2022 or the tax year beginning in 2022? See instructions for Part XIII. If "Yes,"   |        |      |           |
|    | complete Part XIII   | 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         |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the  |        |      |           |
|    | meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions   | 11     |      | X         |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified   |        |      |           |
|    | person had advisory privileges? If "Yes," attach statement. See instructions   | 12     |      | X         |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address  WWW.DEITZLER.COM   | 13     | X    | <u> </u>  |
| 14 | The books are in care of HARRY G. DEITZLER Telephone no. 304-3   | 345-   | 566  | 7         |
|    | 149 BELLA VISTA DR   |        |      |           |
|    | Located at VIENNA WV ZIP+4 2610  | 5      |      |           |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here  |        |      |           |
|    | and enter the amount of tax-exempt interest received or accrued during the year  |        |      | n a stall |
| 16 | At any time during calendar year 2022, 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  |        |      |           |
|    | Name of the second seco | Form 9 | 90-P | F (2022)  |

| Pa | art VI-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?   |       |      | X   |
|    | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified   | 1a(1) |      |     |
|    | person?  | 1a(2) |      | X   |
|    | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?   | 1a(3) |      | Х   |
|    | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   | 1a(4) |      | X   |
|    | (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)?   | 1a(5) |      | X   |
|    | (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.)   | 1a(6) |      | X   |
| b  | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in   |       |      |     |
|    | Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions  | 1b    | _    |     |
| C  | Organizations relying on a current notice regarding disaster assistance, check here  |       |      |     |
| d  | 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 2022? N/A   | 1d    | _    | -   |
| 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 2022, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for   |       |      | 37  |
|    | tax year(s) beginning before 2022?   | 2a    |      | X   |
|    | If "Yes," list the years 20 , 20 , 20 , 20   |       |      |     |
| b  | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)  |       |      |     |
|    | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed answer "No" and attach statement – see instructions.)  |       | -    |     |
|    | un your loted, another the data attached to an attached the second and attache | 2b    |      |     |
| С  | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  |       |      |     |
| _  | 20 , 20 , 20 , 20  |       | - 11 |     |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time  | 20    |      | x   |
|    | during the year?   | 3a    |      |     |
| b  | If "Yes," did it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or  |       | - 1  |     |
|    | disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the  |       | -1   |     |
|    | 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 excess business holdings in 2022.)  | 3b    |      |     |
| 12 | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable  | 0.5   |      |     |
| 4a |  | 4a    |      | x   |
| h  | purposes?  Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize  | 70    | -    |     |
| b  | its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning  |       |      |     |
|    | in 2022?   | 4b    |      | x   |
| _  |  | m 99  | 0-PF | _   |

| Pa     | art VI-B Statements Regarding Activ   | ities for Which Form 4   | 720 May Be Re   | equired (contin  | ued)   |          |                      |          |
|--------|---|--|---|--|--|----------|----------------------|----------|
| 5a     | During the year did the foundation pay or incur any a   | mount to:  |   |  |  |          | Yes                  | No       |
|        | (1) Carry on propaganda, or otherwise attempt to in   | ifluence legislation (section 494  | 15(e))?   |  | - Anny i An  | 5a(1)    |                      | _X_      |
|        | (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or |  |   |  |  |          |                      |          |
|        | indirectly, any voter registration drive?   |  |   |  | -014+044+0   | 5a(2)    |                      | X        |
|        | (3) Provide a grant to an individual for travel, study,   |  |   |  | no laterovativo  | 5a(3)    |                      | _X       |
|        | (4) Provide a grant to an organization other than a   | charitable, etc., organization de  | scribed in section 4  | 945(d)   |  |          |                      |          |
|        | (4)(A)? See instructions  |  |   | 10 YOU DO THE REAL PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY O | 420 A PRINTED TO THE P.  | 5a(4)    |                      | <u> </u> |
|        | (5) Provide for any purpose other than religious, cha   | aritable, scientific, literary, or ed  | ducational purposes,  | , or for   |  |          |                      |          |
|        | the prevention of cruelty to children or animals?   |  | -1.01-000-00-000-00-1-00-00                                     |  | 0.0000000000000000000000000000000000000  | 5a(5)    |                      | <u> </u> |
| b      | If any answer is "Yes" to 5a(1)-(5), did any of the tra   | ansactions fail to qualify under   | the exceptions desc   | ribed  |  |          |                      |          |
|        | in Regulations section 53.4945 or in a current notice   | regarding disaster assistance  | ? See instructions  |  | N/A  | 5b       |                      |          |
| С      | Organizations relying on a current notice regarding of  |  |   | 0.0000000000000000000000000000000000000  |  |          |                      |          |
| d      | If the answer is "Yes" to question 5a(4), does the for  | undation claim exemption from  | the tax because it  |  | /-   |          |                      |          |
|        | maintained expenditure responsibility for the grant?  |  |   | 000000000000000000000000000000000000000  | N/A  | 5d       |                      | _        |
|        | If "Yes," attach the statement required by Regulation   |  |   |  |  |          |                      |          |
| 6a     |   | s, directly or indirectly, to pay p  | oremiums on a pers  | onal   |  |          |                      | 77       |
|        | benefit contract?   | ACCORDANCE DESCRIPTION OF THE PROPERTY OF THE  | 000000000000000000000000000000000000000                         | 0.0000000000000000000000000000000000000  |  | 6a       | -                    | X        |
| Ь      |   | firectly or indirectly, on a perso   | nal benefit contract:   |  | +0-+10000-00000  | 6b       |                      |          |
|        | If "Yes" to 6b, file Form 8870.   | and the second of the second o |   |  |  | 7-       |                      | x        |
| 7a     |   |  |   | ***********  | N/A  | 7a<br>7b |                      |          |
| b      | If "Yes," did the foundation receive any proceeds or  |  |   |  | A VALUE OF THE PARTY OF THE PAR | 70       |                      |          |
| 8      | Is the foundation subject to the section 4960 tax on excess parachule payment(s) during the year?         |  |   |  |  | 8        |                      | x        |
| D      | art VII Information About Officers, D   | iractore Trustees Fol  | Indation Manag  | nors Highly F  | aid Employe  | _        |                      |          |
| Г      | and Contractors   | mediois, irusides, rot   | maanon mana   | goro, riiginiy r   | ala Employe  | 00,      |                      |          |
| 1      | List all officers, directors, trustees, and foundation  | n managers and their compo   | ensation. See instr   | ructions.  |  |          |                      |          |
|        | (a) Name and address  |  | (b) Title, and average<br>hours per week<br>devoted to position | (c) Compensation<br>(If not paid,<br>enter -0-)  | (d) Contributions to<br>employee benefit<br>plans and deferred<br>compensation   |          | pense ao<br>r allowa |          |
| HZ     | ARRY G. DEITZLER V  | IENNA  | PRESIDENT   |  |  |          |                      |          |
|        |   | 7 26105  | 0.00  | o  |  |          |                      | 0        |
|        |   | IENNA  | SECRETARY-TR  |  |  |          |                      |          |
| 33.13  |   | 7 26105  | 0.00  | 0  |  |          |                      | 0        |
| EF     | RIN DEITZLER V  | IENNA  | DIRECTOR  |  |  |          |                      |          |
| 51     | 109 GLENBROOK DRIVE W   | 7 26105  | 0.00  | 0  | (  |          |                      | 0        |
| BF     | RADFORD DEITZLER M  | ORGANTOWN  | DIRECTOR  |  |  |          |                      |          |
| 20     | 07 WILLOWDALE RD. W   | 7 26505  | 0.00  | o  |  |          |                      | 0        |
| 2      | Compensation of five highest-paid employees (o "NONE."  | ther than those included on  | line 1 – see instru   | uctions). If none,   | ente <b>r</b>  | _        |                      |          |
|        | (a) Name and address of each employee paid more than  | \$50,000   | (b) Title, and average<br>hours per week<br>devoted to position | (c) Compensation   | (d) Contributions to<br>employee benefit<br>plans and deferred<br>compensation   |          | pense a<br>r allowa  |          |
| NO     | ONE   | ):::::::::::::::::::::::::::::::::::::   |   |  |  |          |                      |          |
| ja o   |   |  |   |  |  |          |                      |          |
| en:    |   |  |   |  |  |          |                      |          |
| 15271  |   |  |   |  |  |          |                      |          |
| AUV 33 |   |  |   |  |  |          |                      |          |
|        |   |  |   |  |  |          |                      |          |
| Tota   | number of other employees paid over \$50,000  | X43 (643)604 3 W D C C C C C C C C C C C C C C C C C C   |   |  |  |          | 00 DI                | 0        |

(c) Compensation

Expenses

| Part VIII-B Summary of Program-Related Investments (see instructions)   |        |
|---|--------|
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
| 1 N/A   |        |
| \$40,454,000,000,000,000,000,000,000,000,0  |        |
| 2   |        |
|   |        |
| All other program-related investments. See instructions.  |        |
| 3   |        |
|   |        |
| otal. Add lines 1 through 3   |        |

| Pa | see instructions.)  | lete this part. Foreign  | tounda  | 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   | 0.0000000000000000000000000000000000000  | 1a      | 2,726,979 |
| b  | Average of monthly cash balances  |  | 1b      | 59,099    |
| С  | Fair market value of all other assets (see instructions)  | ONE WILLIAM OF THE STATE OF THE | 1c      | 0         |
| d  | Total (add lines 1a, b, and c)  |  | 1d      | 2,786,078 |
| е  | 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       | 2,786,078 |
| 4  | Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see   | one of the second section of the second section of the second section  |         |           |
|    | instructions)   |  | 4       | 41,791    |
| 5  | Net value of noncharitable-use assets. Subtract line 4 from line 3  | ***************************************  | 5       | 2,744,287 |
| 6  | Minimum investment return. Enter 5% (0.05) of line 5  |  | 6       | 137,214   |
| Pa | art X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(3) and certain foreign organizations, check here and do not com |  | oundati |           |
| 1  | Minimum investment return from Part IX, line 6  |  | 1       | 137,214   |
| 2a | Tax on investment income for 2022 from Part V, line 5   | 986  |         |           |
| b  | Income tax for 2022. (This does not include the tax from Part V.)   |  |         |           |
| C  | Add lines 2a and 2b   |  | 2c      | 986       |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1   |  | 3       | 136,228   |
| 4  | Recoveries of amounts treated as qualifying distributions   |  | 4       |           |
| 5  | Add lines 3 and 4   |  | 5       | 136,228   |
| 6  | Deduction from distributable amount (see instructions)  |  | 6       |           |
| 7  | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII,  |  |         |           |
|    | line 1  |  | 7       | 136,228   |
| Pa | art XI 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      | 133,500   |
| b  | Program-related investments – total from Part VIII-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 to through 3h Enter here and an Part XII line 4  |  | 4       | 133,500   |

| Pa | art XII Undistributed Income (see instructions)      |               |                            |             |             |
|----|--|---------------|----------------------------|-------------|-------------|
|    |  | (a)<br>Corpus | (b)<br>Years prior to 2021 | (c)<br>2021 | (d)<br>2022 |
| 1  | Distributable amount for 2022 from Part X, line 7    |               |                            |             | 136,228     |
| 2  | Undistributed income, if any, as of the end of 2022: |               |                            |             |             |
| а  | Enter amount for 2021 only                           |               |                            |             |             |
| b  | Total for prior years: 20 , 20 , 20                  |               |                            |             |             |
| 3  | Excess distributions carryover, if any, to 2022:     |               |                            |             |             |
| а  | From 2017  |               |                            |             |             |
| b  | From 2018  |               |                            |             |             |
| С  | From 2019  |               |                            |             |             |
| d  | From 2020 15,440                                     |               |                            |             |             |
| е  | From 2021  |               |                            |             |             |
| f  | Total of lines 3a through e                          | 15,440        |                            |             |             |
| 4  | Qualifying distributions for 2022 from Part XI,      |               |                            |             |             |
|    | line 4: \$133,500                                    |               |                            |             |             |
|    | Applied to 2021, but not more than line 2a           |               |                            |             |             |
| b  | Applied to undistributed income of prior years       |               |                            |             |             |
|    | (Election required – see instructions)               |               |                            |             |             |
| ¢  | Treated as distributions out of corpus (Election     |               |                            |             |             |
|    | required – see instructions)                         |               |                            |             | 122 500     |
| d  | 7000161300000000000000000000000000000000             |               |                            |             | 133,500     |
| е  | V-30-1503-1111111                                    |               |                            |             |             |
| 5  | Excess distributions carryover applied to 2022       |               |                            |             |             |
|    | (If an amount appears in column (d), the same        | 0.700         |                            |             | 2,728       |
|    | amount must be shown in column (a).)                 | 2,728         |                            |             | 2,120       |
| 6  | Enter the net total of each column as                |               |                            |             |             |
|    | indicated below:                                     | 10 710        |                            |             |             |
| a  | Corpus. Add lines 3f, 4c, and 4e. Subtract line 5    | 12,712        |                            |             |             |
| b  | 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  |  | 77.7          |                            |             |             |
|    | 4a from line 2a. Taxable amount – see instructions   |               |                            |             |             |
| f  | Undistributed income for 2022. Subtract lines        |               |                            |             |             |
| '  | 4d and 5 from line 1. This amount must be            |               |                            |             |             |
|    | distributed in 2022                                  |               |                            |             | l 0         |
| 7  | Amounts treated as distributions out of corpus       |               |                            |             |             |
| •  | to satisfy requirements imposed by section           |               |                            |             |             |
|    | 170(b)(1)(F) or 4942(g)(3) (Election may be          |               |                            |             |             |
|    | in-depth and in-depth and                            |               |                            |             |             |
| 8  | Excess distributions carryover from 2017 not         |               |                            |             |             |
| -  | applied on line 5 or line 7 (see instructions)       |               |                            |             |             |
| 9  | Excess distributions carryover to 2023.              |               |                            |             |             |
| -  | Subtract lines 7 and 8 from line 6a                  | 12,712        |                            |             |             |
| 10 | Analysis of line 9:                                  |               |                            |             |             |
| а  | Excess from 2018                                     |               |                            |             |             |
| b  | Excess from 2019                                     |               |                            |             |             |
| c  | Excess from 2020 12,712                              |               |                            |             |             |
| d  | Excess from 2021                                     |               |                            |             |             |
| е  | Excess from 2022                                     |               |                            |             |             |

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| _Pa | art XIII Private Operating Fou                                   | ındations (see in       | structions and Par         | t VI-A, question 9)        |                          |              |
|-----|--|-------------------------|----------------------------|----------------------------|--------------------------|--------------|
| 1a  | If the foundation has received a ruling or d                     |                         |                            | g                          |                          |              |
|     | foundation, and the ruling is effective for 20                   |                         |                            |                            | 0.400000 17 4040         | m (e)        |
| b   | Check box to indicate whether the foundat                        |                         | ing foundation describe    |                            | 942(j)(3) or 4942        | ()(5)        |
| 2a  | Enter the lesser of the adjusted net                             | Tax year                | (b) 2021                   | Prior 3 years<br>(c) 2020  | (d) 2019                 | (e) Total    |
|     | income from Part I or the minimum                                | (a) 2022                | (b) 2021                   | (6) 2020                   | (u) 2019                 |              |
|     | investment return from Part IX for                               |                         |                            |                            |                          |              |
|     | each year listed   |                         |                            |                            |                          |              |
| b   | 85% (0.85) of line 2a  |                         |                            |                            |                          |              |
| С   | Qualifying distributions from Part XI,                           |                         |                            |                            |                          |              |
|     | line 4, for each year listed                                     |                         |                            |                            |                          |              |
| d   | Amounts included in line 2c not used directly                    |                         |                            |                            |                          |              |
|     | for active conduct of exempt activities                          |                         |                            |                            | 1                        |              |
| е   | Qualifying distributions made directly                           |                         |                            |                            |                          |              |
|     | for active conduct of exempt activities.                         |                         |                            |                            |                          |              |
| •   | Subtract line 2d from line 2c                                    |                         |                            |                            | <u> </u>                 |              |
| 3   | Complete 3a, b, or c for the                                     |                         |                            |                            |                          |              |
| _   | alternative test relied upon: "Assets" alternative test – enter: |                         |                            |                            |                          |              |
| а   |  |                         |                            |                            |                          |              |
|     | (1) Value of all assets (2) Value of assets qualifying under     |                         |                            |                            |                          |              |
|     | section 4942(j)(3)(B)(i)   |                         |                            |                            |                          |              |
| b   | "Endowment" alternative test – enter 2/3                         |                         |                            |                            |                          |              |
| Ŋ   | of minimum investment return shown in                            |                         |                            |                            |                          |              |
|     | Part IX 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)  |                         | V                          |                            |                          |              |
|     | (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 XIV Supplementary Inform                                      | ation (Complete         | this part only if          | the foundation ha          | d \$5,000 or more        | in assets at |
|     | any time during the ye   |                         | tions.)                    |                            |                          |              |
| 1   | Information Regarding Foundation Ma                              | _                       |                            |                            |                          |              |
| а   | List any managers of the foundation who h                        |                         |                            |                            | the foundation           |              |
|     | before the close of any tax year (but only i                     | if they have contribute | d more than \$5,000). (    | See section 507(d)(2).)    |                          |              |
| _   | HARRY DEITZLER   | 400/                    |                            | comparation (or on o       | avally lorge portion of  | the          |
| b   | List any managers of the foundation                              |                         |                            |                            | equally large portion of | uie          |
|     | ownership of a partnership or other entity)                      | of which the foundation | on has a 10% or greate     | er interest.               |                          |              |
| _   | NONE Information Regarding Contribution, G                       | rant Gift Loan Sak      | olambin etc Progra         | me.                        |                          |              |
| 2   |  |                         |                            | e organizations and do     | es not accept            |              |
|     | unsolicited requests for funds. If the found                     |                         |                            |                            |                          |              |
|     | complete items 2a, b, c, and d. See instru                       |                         | into, etc., to individuals | or organizations ander     | outer conditions,        |              |
|     | The name, address, and telephone number                          |                         | the person to whom a       | onlications should be ac   | ldressed:                |              |
| d   | N/A  | a or crimali address Of | and person to whom a       | ophodiona anould be at     | 20.50000.                |              |
|     | 14/11  |                         |                            |                            |                          |              |
|     | The form in which applications should be                         | submitted and informa   | tion and materials they    | should include:            |                          |              |
| ~   | N/A  |                         |                            |                            |                          |              |
| С   | Any submission deadlines:  |                         |                            |                            |                          |              |
|     | N/A  |                         |                            |                            |                          |              |
| d   | Any restrictions or limitations on awards, s                     | uch as by geographic    | al areas, charitable fiel  | ds, kinds of institutions, | or other                 |              |
|     | factors:   |                         |                            |                            |                          |              |
|     | NT / 73  |                         |                            |                            |                          |              |

| Part XIV Supplementary Information (co. 3 Grants and Contributions Paid During to 1997)     |   | Future Payment                 |         |
|---|---|--------------------------------|---------|
| Recipient   | If recipient is an individual, show any relationship to | Foundation Purpose of grant or | Amount  |
| Name and address (home or business)   | any foundation manager<br>or substantial contributor    | recipient contribution         |         |
| a Paid during the year ERICKSON ALL-SPORTS FACILITY 4601 CAMDEN AVENUE PARKERSBURG WV 26101 | NONE  | PC<br>KERSBUG SOUTH STADIUM    | 2,500   |
| LEGAL AID OF WV<br>922 QUARRIER STREET #400<br>CHARLESTON WV 25301                          | NONE<br>LEGAL SERVICES                                  | PC<br>FOR UNDERPRIVILEDGED     | 15,000  |
| PARKERSBURG AREA COMMUNITY<br>1620 PARK AVENUE<br>PARKERSBURG WV 26101                      | FOUNDATI<br>NONE  | PC SUPPORT FAITHLINK           | 1,000   |
| TRINITY EPISCOPAL CHURCH 430 JULIANA STREET PARKERSBURG WV 26101                            | NONE<br>CHURCH  | PC<br>COMMUNITY ACTIVITIES     | 10,000  |
| UNITED WAY ALLIANCE OF MID-<br>935 MARKET STREET<br>PARKERSBURG WV 26101                    | NONE  | PC<br>RITIABLE ORGANIZATIONS   | 16,000  |
| VIENNA VOLUNTEER FIRE DEPT<br>609 28TH STREET<br>VIENNA WV 26105                            | NONE<br>SUPPORT COMM                                    | PC<br>UNITY FIRE PREVENTION    | 3,500   |
| WESTMINISTER PRESBYTERIAN (<br>708 54TH STREET<br>VIENNA WV 26105                           | HURCH<br>NONE<br>SUPE                                   | PC<br>ORT CHURCH OPERATIONS    | 1,000   |
| WOOD COUNTY SOCIETY 1411 GRAND CENTRAL AVENUE VIENNA WV 26105                               | NONE<br>SUPPORT 1                                       | PC<br>HOSE WITH DISABILITES    | 1,000   |
| WOMENS HEALTH CENTER<br>510 W WASHINGTON ST<br>CHARLESTON WV 25302                          | NONE<br>REPRODUCTIVE                                    | PC<br>HEALTHCARE FOR WOMEN     | 6,000   |
| RUFFNER ELEMENTARY SCHOOL<br>809 LITZ DR<br>CHARLESTON WV 25311                             | NONE  | PC FOOD PROGRAM                | 1,000   |
| Total b Approved for future payment   |   | 3a                             | 133,500 |
| N/A   |   |                                |         |
| Total   |   | 3b                             |         |

Supplementary Information (continued) Part XIV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FIRST PRESBYTERIAN CHURCH PARKERSBU 1341 JULIANA STREET NONE PC PARKERSBURG WV 26101 SUPPORT CHURCH RELIGOUS ACTIVITIES 5,000 SW RESOURCES INC 1007 MARY ST NONE PC JOBS FOR DISABLED INDIVIDUALS 5,500 PARKERSBURG WV 26101 NATIONAL MULTIPLE SCLEROSIS SOCIETY 6155 ROCKSIDE RD NONE PC ADVANCEMENT OF RESEARCH FOR MS CLEVELAND OH 44131 2,500 BOYS CLUB OF PARKERSBURG 1200 MARY ST NONE PEOPLE TO REACH GOALS 3,000 PARKERSBURG WV 26101 ENABLE YOUNG HUMANE SOCIETY OF PARKERSBURG NONE PC 530 29TH ST SAFETY OF ANIMALS 4,000 PARKERSBURG WV 26101 WVU FOUNDATION NONE PC 1 WATERFRONT PL CASEY PUBLIC INTEREST FELLOWSHIP 2,500 MORGANTOWN WV 26501 **YMCA** 1800 30TH ST NONE PC STRENGTHENING COMMUNITY 1,000 PARKERSBURG WV 26101 JACKSON MIDDLE SCHOOL NONE PC 1601 34TH ST PARTIAL FUNDING FOR DIGITAL SIGN 5,000 VIENNA WV 26105 CENTER FAMILY CRISIS INTERVENTION PC NONE NORTH HILLS FAMILY COUNSELING 5,000 NORTH HILLS WV 26102 DAYMARK, INC. 1592 WASHINGTON ST NONE PC CHARLESTON WV 25311 PROVIDE ASSISTANCE TO YOUTH 12-21 1,000 3a Total b Approved for future payment N/A Total 3b

Part XIV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Recipient Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year CHILDRENS MUSEUM OF THE MOV PC 900 MARKET ST NONE CHILDENS MUSEUM 5,000 PARKERSBURG WV 26101 FRIENDS OF VIENNA PO BOX 5579 PC NONE FREEDOM FESTIVAL COMMUNITY EVENT VIENNA WV 26105 1,500 DOWNTOWN PKB PARKERSBURG NONE PC PARKERSBURG WV 26101 SPONSOR TASTE OF PARKERSBURG 3,500 MARSHALL UNIVERSITY MOV ALUMNI 1 JOHN MARSHALL DR NONE PC **HUNTINGTON WV 25755** SCHOLARSHIPS FOR AREA STUDENTS 1,000 PARKERSBURG PRIDE PC NONE PARKERSBURG TO ENRICH THE COMMUNITY 500 PARKERSBURG WV 26101 SAINT URSULA ACADEMY 1339 E MCMILLIAN ST NONE PC ELISE ELLEN BARLY SCHOLARSHIP FUND 500 CINCINNATI OH 45206 UNICEF PC NEW YORK NONE AID FOR UKRAINE 15,000 NEW YORK NY 10038 ACTORS GUILD OF PARKERSBURG PC 724 MARKET ST NONE PROMOTING THE ARTS 4,000 PARKERSBURG WV 26101 CAMDEN CLARK FOUNDATION 800 GARFIELD AVE NONE PC PARKERSBURG WV 26101 FREE MAMMOGRAMS 5,000 PLANNED PARENTHOOD 522 GRAND CENTRAL AVE NONE PC VIENNA WV 26105 WOMEN'S SERVICES 5,000 3a Total b Approved for future payment N/A 3b Total

| Part XIV Supplementary Information (d  | continued)   |                      |                                  |        |
|--|--|----------------------|----------------------------------|--------|
| 3 Grants and Contributions Paid During   | the Year or Approved for   | Future Payment       | T T                              |        |
| Recipient  | If recipient is an individual,<br>show any relationship to<br>any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business)  | or substantial contributor   | recipient            |                                  |        |
| a Paid during the year  MOUNTAIN STATE SPOTLIGHT,  CHARLESTON  CHARLESTON WV 25301 | INC.<br>NONE<br>SUPPORT 1  | PC<br>NON-PROFIT WV  | NEWSROOM                         | 1,000  |
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| Total  | V + 1 + 1 + 1 + 1 + 2 + 2 + 2 + 2 + 2 + 2  |                      | 3a                               |        |
| b Approved for future payment N/A  |  |                      |                                  |        |
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| Total  |  | <u></u>              | 3b                               |        |
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| Part XV-                                 |  |               |                        | Levis            | 1                               |                                      |
|--|--|---------------|------------------------|------------------|---------------------------------|--------------------------------------|
| Enter gross a                            | mounts unless otherwise indicated.   | Unrelated     | business income        | Excluded         | d by section 512, 513, or 514   | (e)                                  |
|  |  | (a)           | (b)                    | (c)<br>Exclusion | (d)                             | Related or exempt<br>function income |
| 1 Drogram                                | service revenue:   | Business code | - Amount               | code             | Amount                          | (See instructions.)                  |
| •  |  |               |                        |                  |                                 |                                      |
|  |  |               |                        |                  |                                 |                                      |
|  |  |               |                        |                  |                                 |                                      |
|  |  |               |                        |                  |                                 |                                      |
|  |  |               |                        |                  |                                 |                                      |
| _  |  |               |                        |                  |                                 |                                      |
|  | and contracts from government agencies   |               |                        |                  |                                 |                                      |
|  | hip dues and assessments   |               |                        |                  |                                 |                                      |
|  | n savings and temporary cash investments   |               |                        | 14               | 23                              |                                      |
|  | and interest from securities   |               |                        | 14               | 54,380                          |                                      |
| 5 Net renta                              | I income or (loss) from real estate:   |               |                        |                  |                                 |                                      |
| a Debt-                                  | financed property  |               |                        |                  |                                 |                                      |
| <b>b</b> Not o                           | debt-financed property   |               |                        |                  |                                 |                                      |
| 6 Net renta                              | I income or (loss) from personal property  |               |                        |                  |                                 |                                      |
| 7 Other inv                              | estment income   |               |                        |                  |                                 |                                      |
| 8 Gain or (                              | oss) from sales of assets other than inventory   |               |                        | 18               | 17,349                          |                                      |
| 9 Net incon                              | ne or (loss) from special events   |               |                        |                  |                                 |                                      |
| 10 Gross pro                             | ofit or (loss) from sales of inventory   |               |                        |                  |                                 |                                      |
| 11 Other rev                             | /enue: a   |               |                        |                  |                                 |                                      |
| b  |  |               |                        | -                |                                 |                                      |
|  |  |               |                        | -                |                                 |                                      |
| d  |  |               |                        |                  |                                 |                                      |
|  | <del></del>  |               |                        |                  | 71 750                          | (                                    |
| 12 Subtotal.                             | Add columns (b), (d), and (e)  |               |                        | 0                | 71,752                          |                                      |
|  | ld line 12, columns (b), (d), and (e)  |               | medicina del constanti |                  |                                 | 71,752                               |
|  |  |               |                        |                  |                                 |                                      |
| Alternative property of the least of the | et in line 13 instructions to verify calculations.)  |               |                        |                  |                                 |                                      |
| Part XV-                                 | net in line 13 instructions to verify calculations.)  B Relationship of Activities to the Ac | complishmer   | nt of Exempt P         | urpose           | S                               | a rankish mant                       |
| Alternative property of the least of the | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
| Part XV-<br>Line No.                     | net in line 13 instructions to verify calculations.)  B Relationship of Activities to the Ac | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
| Part XV-                                 | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
| Part XV-<br>Line No.                     | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
| Part XV-<br>Line No.                     | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
| Part XV-<br>Line No.                     | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
| Part XV-<br>Line No.                     | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
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| Part XV-<br>Line No.                     | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
| Part XV-<br>Line No.                     | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
| Part XV-<br>Line No.                     | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
| Part XV-<br>Line No.                     | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
| Part XV-<br>Line No.                     | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
| Part XV-<br>Line No.                     | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
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| Part XV-<br>Line No.                     | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
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| Part XV-<br>Line No.                     | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
| Part XV-<br>Line No.                     | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
| Part XV-<br>Line No.                     | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
| Part XV-<br>Line No.                     | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
| Part XV-<br>Line No.                     | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |
| Part XV-<br>Line No.                     | B Relationship of Activities to the Ac  Explain below how each activity for which income is  | complishmer   | nt of Exempt P         | urpose:          | s<br>ed importantly to the acco | omplishment                          |

| Рап         | XVI           | Organizations                     | roing ira   | insters to an                           | d Transactio  | ns and Relationships with   | n Noncharitable                          | Exe              | mpt    |                   |
|-------------|---------------|-----------------------------------|---|---|---|---|--|------------------|--------|-------------------|
| 1 Di        | d the oras    |                                   | ectiv engage  | in any of the follo                     | wing with any oth   | ner organization described  |  |                  | Yes    | No                |
|             |               | 01(c) (other than section         | , ,   | •                                       |   | *   |  | İ                |        |                   |
|             | ganization    |                                   | (-)(-)  | g,                                      |   |   |  |                  |        |                   |
|             | •             | om the reporting founda           | tion to a nor   | ncharitable exempt                      | t organization of:  |   |  |                  |        |                   |
|             |               | , ,                               |   |   |   | (···)a((a(-a))a))((a)   |  | 1a(1)            |        | х                 |
|             |               |                                   |   |   |   |   |  | 1a(2)            |        | X                 |
| h Ot        | her trans     | actions.                          | **** 1000***  |   | - Contract of the Contract of | accommunication of the second | CHICAGO SHEETSCOOL                       |                  |        |                   |
|             |               |                                   | ble exempt c  | organization                            |   | 2-13-1313-1211-12-1-1211-1211-1211-1211   |  | 1Ь(1)            |        | х                 |
| (2)         | Purchas       | ses of assets from a no           | ncharitable e   | exempt organization                     | n   |   |  | 1b(2)            |        | X                 |
| (3)         | Rental        | of facilities equipment of        | or other asse   | ets                                     | 000000000000000000000000000000000000000   |   |  | 1b(3)            |        | X                 |
| 14          | Reimbu        | rsement arrangements              |   | *************************************** | EUR   | **************************************  | CHINESISMUSINE                           | 1b(4)            |        | X                 |
| (5)         | loanso        | or loan quarantees                | (a. b   |   |   |   |  | 1b(5)            |        | X                 |
| (6)         | Perform       | ance of services or me            | mbership or   | fundraising solicita                    | alions  |   | -151-16100-1610-1610-1610-1610-1610-1610 | 1b(6)            |        | X                 |
| e Sh        | aring of f    | acilities equipment mai           | ling lists oth  | er assets, or paid                      | employees   |   | TO THE PROPERTY.                         | 1c               |        | Х                 |
|             |               |                                   |   |   |   | n (b) should always show the fair i   |  |                  |        |                   |
|             |               |                                   |   |   |   | e foundation received less than fa  |  |                  |        |                   |
|             |               |                                   |   |   |   | ne goods, other assets, or services   |  |                  |        |                   |
|             | ine no.       | (b) Amount involved               |   | ne of noncharitable exer                |   | (d) Description of transfers, t   |  | ngemen           | ts     |                   |
| N/A         |               |                                   |   |   |   |   |  |                  |        |                   |
|             |               |                                   |   |   |   |   |  |                  |        |                   |
|             |               |                                   |   |   |   |   |  |                  |        |                   |
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|             |               |                                   |   |   |   |   |  |                  |        |                   |
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| 9172 2      | 27.111        |                                   |   |   |   | 112-11  |  |                  |        |                   |
| - Dinner    | III-SUILES VO |                                   |   |   |   |   |  |                  |        |                   |
|             |               |                                   |   |   |   |   |  |                  |        |                   |
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|             |               |                                   |   |   | Omisi (Strategical)   |   |  |                  |        |                   |
|             |               |                                   |   | -1                                      | -237  | 7   | HERE YES                                 |                  |        |                   |
|             | =-11          |                                   |   |   |   |   |  |                  |        |                   |
| - 7         |               |                                   |   |   |   |   |  |                  |        |                   |
|             |               |                                   |   |   |   |   |  |                  | 800c=  |                   |
| 20 lo       | the found     | lation directly or indirect       | v affiliated w  | ith or related to (                     | one or more tax-  | exempt organizations  | - 1 -1/1/2-2014                          |                  |        |                   |
|             |               | -                                 | -   |   |   |   | Γ  | ٦ <sub>٧</sub> , | s X    | ] No              |
|             |               | mplete the following sch          |   | 501(0)(0)) OF III 30                    |   |   | ******                                   | ٠. لــ           | . [    | ٠٠                |
| <b>U</b> II |               | (a) Name of organization          | subje.  | (b) Type of                             | organization  | (c) Descr   | ption of relationship                    |                  | -      |                   |
| N/          |               | (a) Harrie or organization        |   | (4) 1/2- 5.                             | 34  | 13  |  |                  |        |                   |
| 11/         | 71            |                                   |   |   |   |   |  |                  |        |                   |
|             |               |                                   |   |   |   |   |  |                  |        |                   |
| ~           |               |                                   |   |   |   |   |  |                  |        |                   |
|             |               |                                   |   |   |   |   |  |                  |        |                   |
|             | Under ne      | natties of periury. I declare tha | t I have examin   | ed this return, including               | accompanying sched  | fules and statements, and to the best of my   | knowledge and belief, it is              | true,            |        |                   |
|             | correct, a    | nd complete. Declaration of pr    | eparer (other the   | nan taxpayer) is based                  | on all information of w   | which preparer has any knowledge.   | May the IRS discus                       | -                | Muro   |                   |
|             |               | 5 II w                            |   |   |   |   | with the preparer s                      |                  |        | _                 |
| Sign        |               | 12 1 1.                           | 1   |   |   |   | See instructions.                        | X                | Yes    | No                |
| lere        | 1             | Vicing A. West                    | Zi_   |   | 15-11   | -23 PRESIDENT   |  |                  |        |                   |
|             | Cinnolura     | of afficer or trustee             |   |   | Date  | Title   |  |                  | -      |                   |
|             | 7             |                                   |   | 101 1                                   |   |   |  |                  | _      | $\overline{\Box}$ |
|             | Print/Ty      | pe preparer's name                |   |   | Preparer's signatu  | ire   | Date                                     |                  | Check  | ∐ if              |
| aid         | 12 3 mm       | ער בייטטע פייט                    | ē   |   | KATHY C   | EDDY, CPA   | 05/11                                    | 123              | ser-em | hiokea            |
| repare      | r             | Y G. EDDY, CPA<br>MCDON           | CONTRACTOR OF THE PARTY OF THE | EDDY, PO                                |   | AYLOUS, A.C.  | 200                                      |                  | 771    |                   |
| Jse Onl     | y Firm's I    | DO DO                             | X 184   | EDDI, PO.                               | LING & D  | LLLUVU, A.C.  | Firm's EIN 55-0                          |                  |        |                   |
|             | Firm's        | 200,020                           | RSRIIRG   | WV 26                                   | 102-0184  |   | Phone PR 304                             |                  |        |                   |

| 116 SHS PAYPAL HOLDINGS INC       2,146       2,146       COST       8,262         118 SHS UNITEDHEALTH GROUP INC       6,046       6,046       COST       62,561         280 SHS AMAZON COM INC       5,583       5,583       COST       23,520         1734 SHS PFIZER INC       30,429       30,429       COST       88,850  | 55-0783635   | Federal S               | Statements               |                 |         |  |  |
|---|--|-------------------------|--------------------------|-----------------|---------|--|--|
| Description   Total   Investment   Net   Purpose  | Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees          |                         |                          |                 |         |  |  |
| Statement 2 - Form 990-PF, Part I, Line 18 - Taxes   Statement 2 - Form 990-PF, Part I, Line 18 - Taxes   Statement 2 - Form 990-PF, Part I, Line 18 - Taxes  | Description  | Total                   |                          |                 |         |  |  |
| Statement 2 - Form 990-PF, Part I, Line 18 - Taxes  |  |                         |                          | \$              |         |  |  |
| Net   Net |  |                         | \$ 0                     | \$ 0            | \$ 0    |  |  |
| Description   Total   Investment   Net   Purpose  | <u>s</u>   | tatement 2 - Form 990   | PF, Part I, Line 18 - Ta | xes             |         |  |  |
| Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses   | Description  | Tatal                   |                          |                 |         |  |  |
| Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses   |  |                         | -                        | s Net           | \$      |  |  |
| Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses   |  |                         |                          | \$ 0            | \$ 0    |  |  |
| Description   Total   Net   Investment   Adjusted   Charitable   Purpose  |  |                         |                          |                 |         |  |  |
| ADMINISTRATIVE EXPENSE  | Description  | s                       | Investment               | Net             | Purpose |  |  |
| Statement 4 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments   Beginning of Year   Fair Market Value  | ADMINISTRATIVE EXPENSE<br>WEBSITE MAINTENANCE<br>ANNUAL INVESTMENT FEE | 265<br>150<br>25        |                          |                 |         |  |  |
| Description         Beginning of Year         End of Year         Basis of Year         Fair Market Value           109 SHS TEXAS INSTRUMENTS         \$ 4,968         \$ 4,968         COST         \$ 18,009           116 SHS PAYPAL HOLDINGS INC         2,146         2,146         COST         8,262           118 SHS UNITEDHEALTH GROUP INC         6,046         6,046         COST         62,561           280 SHS AMAZON COM INC         5,583         5,583         COST         23,520           1734 SHS PFIZER INC         30,429         30,429         COST         88,850   | TOTAL  | \$ 2,840                | \$ 150                   | \$0             | \$0     |  |  |
| Description         of Year         Year         Valuation         Value           109 SHS TEXAS INSTRUMENTS         \$ 4,968         \$ 4,968         COST         \$ 18,009           116 SHS PAYPAL HOLDINGS INC         2,146         2,146         COST         8,262           118 SHS UNITEDHEALTH GROUP INC         6,046         6,046         COST         62,561           280 SHS AMAZON COM INC         5,583         5,583         COST         23,520           1734 SHS PFIZER INC         30,429         30,429         COST         88,850  | Statement 4 -  | Form 990-PF, Part II, L | ine 10b - Corporate St   | ock Investments |         |  |  |
| 109 SHS TEXAS INSTRUMENTS   \$ 4,968   \$ 4,968   COST   \$ 18,009  | Description  | Beginning               |                          |                 |         |  |  |
| 116 SHS PAYPAL HOLDINGS INC 2,146 2,146 COST 8,262 118 SHS UNITEDHEALTH GROUP INC 6,046 6,046 COST 62,561 280 SHS AMAZON COM INC 5,583 5,583 COST 23,520 1734 SHS PFIZER INC 30,429 30,429 COST 88,850  |  | _                       | -                        |                 |         |  |  |
| 280 SHS AMAZON COM INC 5,583 5,583 COST 23,520<br>1734 SHS PFIZER INC 30,429 30,429 COST 88,850   | 116 SHS PAYPAL HOLDINGS INC  | 2,14                    | 6 2,146                  | COST            | 8,262   |  |  |
| 1734 SHS PFIZER INC 30,429 30,429 COST 88,850   |  |                         |                          |                 |         |  |  |
| 186 SHS ELI LILLY & CO 10,253 10,253 COST 68,046  | 1734 SHS PFIZER INC  | 30,42                   | 9 30,429                 | COST            | 88,850  |  |  |
|   | 186 SHS ELI LILLY & CO   | 10,25                   | 3 10,253                 | COST            | 00,046  |  |  |
| 1-4   |  |                         |                          |                 |         |  |  |

55-0783635

### **Federal Statements**

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

| Description                      | Beginning of Year | End of<br>Year | Basis of<br>Valuation | Fair Market<br>Value |
|----------------------------------|-------------------|----------------|-----------------------|----------------------|
| 200 SHS AMER EXPRESS COMPANY     | \$ 7,710          | \$ 7,710       | COST                  | \$ 29,550            |
| 800 SHS APPLE                    | 12,110            | 12,110         | COST                  | 103,944              |
| 200 SHS DIAGEO PLC SPSD ADR NEW  | 22,527            | 22,527         | COST                  | 35,638               |
| 203 SHS LOWE'S COMPANIES INC     | 5,651             | 5,651          | COST                  | 40,446               |
| 211 SHS GENL DYNAMICS CORP COM   | 14,492            | 14,492         | COST                  | 52,351               |
| 250 SHS EXXON MOBIL CORP         | 17,666            | 17,666         | COST                  | 27,575               |
| 295 SHS NORFOLK SOUTHERN CORP    | 23,061            | 23,061         | COST                  | 72,694               |
| 325 SHS JPMORGAN CHASE & CO      | 13,421            | 13,421         | COST                  | 43,583               |
| 354 SHS CINN FINCL CRP OHIO      | 14,585            | 14,585         | COST                  | 36,246               |
| 368 SHS PEPSICO INC              | 21,822            | 21,822         | COST                  | 66,483               |
| 369 SHS MICROSOFT CORP           | 10,603            | 10,603         | COST                  | 88,494               |
| 637 SHS CISCO SYSTEMS INC COM    | 11,937            | 11,937         | COST                  | 30,346               |
| 69 SHS DISNEY (WALT) CO COM STK  | 2,179             | 2,179          | COST                  | 5,995                |
| 72 SHS BLACKROCK INC             | 16,031            | 16,031         | COST                  | 51,021               |
| 747 SHS INTEL CORP               | 17,249            | 17,249         | COST                  | 19,743               |
| 92 SHARES VISA CL A              | 3,853             | 3,853          | COST                  | 19,114               |
| 75 SHS OTTS WORLDWIDE CORP       | 3,205             | 3,205          | COST                  | 5,873                |
| 150 SHS RAYTHEON TECHNOLOGIES    | 7,130             | 7,130          | COST                  | 15,138               |
| 400 SHS ALPHABET INC             | 57,872            | 57,872         | MARKET                | 35,492               |
| 1500 SHS FIRST FINANCIAL BANCORP | 17,936            | 17,936         | COST                  | 36,345               |
| TOTAL                            | \$ 360,465        | \$ 360,465     |                       | \$ 1,085,319         |

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

| Description               | E  | Beginning<br>of Year | <br>End of<br>Year | Basis of<br>Valuation | Fa<br>—— | ir Market<br>Value |
|---------------------------|----|----------------------|--------------------|-----------------------|----------|--------------------|
| 3000 SHS FNMA PRFD SERIES | \$ | 75,000               | \$<br>75,000       | COST                  | \$       | 5,520              |
| TOTAL                     | \$ | 75,000               | \$<br>75,000       |                       | \$       | 5,520              |

| 5-0783635   | Federal State                |                              |      |                              |  |  |  |  |
|---|------------------------------|------------------------------|------|------------------------------|--|--|--|--|
| Statement 6 - Form 990-PF, Part II, Line 13 - Other Investments                 |                              |                              |      |                              |  |  |  |  |
| Beginning End of Basis of Fair Market  Description of Year Year Valuation Value |                              |                              |      |                              |  |  |  |  |
| ARIOUS MUTUAL FUNDS TOTAL   | \$ 1,312,714<br>\$ 1,312,714 | \$ 1,328,172<br>\$ 1,328,172 | COST | \$ 1,532,129<br>\$ 1,532,129 |  |  |  |  |
|   |                              |                              |      |                              |  |  |  |  |
|   |                              |                              |      |                              |  |  |  |  |
|   |                              |                              |      |                              |  |  |  |  |
|   |                              | Ц                            |      |                              |  |  |  |  |
|   |                              |                              |      |                              |  |  |  |  |
|   |                              |                              |      |                              |  |  |  |  |
|   |                              |                              |      |                              |  |  |  |  |
|   |                              |                              |      | 6                            |  |  |  |  |

55-0783635

## Statement 7 - Form 990-PF, Part II, Line 15 - Other Assets

| Description                          | Beginning of Year | <br>End of<br>Year |     | Fair Market<br>Value |
|--------------------------------------|-------------------|--------------------|-----|----------------------|
| INCOME ON IRS 1099 PAID IN NEXT YEAR | \$<br>600         | \$                 | \$  |                      |
| TOTAL                                | \$<br>600         | \$<br>0            | \$_ | 0                    |

### Statement 8 - Form 990-PF, Part III, Line 5 - Other Decreases

| Description                | Am | ount |
|----------------------------|----|------|
| PRIOR PERIOD ADJNON INCOME | \$ | 199  |
| TOTAL                      | \$ | 199  |

## Form 990-PF, Part XIV, Line 1b - Managers Who Own 10% or More Stock

| Name of Manager | Amount |
|-----------------|--------|
| NONE            | \$     |
| TOTAL           | \$ 0   |

#### Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

#### Schedule of Contributors

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Employer identification number Name of the organization 55-0783635 DEITZLER FOUNDATION, INC Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. 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 S Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

DEITZLER FOUNDATION, INC

Employer identification number 55-0783635

| Part I     | Contributors (see instructions). Use duplicate copies of Pa | rt I if additional space is nee        | eded.  |
|------------|---|--|--|
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                           | (c)<br>Total contributions             | (d)<br>Type of contribution  |
| 1          | HARRY DEITZLER 149 BELLA VISTA DRIVE VIENNA WV 26102        | s 125,000                              | Person X Payroll Complete Part II for noncash contributions.)        |
| (a)        | (b)   | (c)<br>Total contributions             | (d) Type of contribution   |
| No.        | Name, address, and ZIP + 4                                  | \$                                     | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                           | (c)<br>Total contributions             | (d)<br>Type of contribution  |
| SS/ESSEE   |   | \$                                     | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                           | (c)<br>Total contributions             | (d) Type of contribution   |
|            | Name, address, and Err 14                                   | \$                                     | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                           | (c)<br>Total contributions             | (d) Type of contribution   |
| <          |   | \$                                     | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                           | (c)<br>Total contributions             | (d)<br>Type of contribution  |
| 2-04840    |   | g ************************************ | Person Payroll Noncash (Complete Part II for noncash contributions.) |

| Form <b>990-PF</b> | Underdistribution and Excess D                | 2022     |                       |
|--------------------|---|----------|-----------------------|
|                    | For calendar year 2022, or tax year beginning | , ending |                       |
| Name               |   |          | Identification Number |
| DEITZLER F         | OUNDATION, INC                                | 55-07    | 783635                |

# Undistributed Income Carryovers Form 990-PF, Part XII

|              | Prior Undistributed Income        |                    |                |                           | Next Year Carryover               |                    |
|--------------|-----------------------------------|--------------------|----------------|---------------------------|-----------------------------------|--------------------|
| Tax Year     | Nontaxable or<br>Previously Taxed | Taxable<br>in 2022 | Total per Year | Current Year<br>Decreases | Nontaxable or<br>Previously Taxed | Taxable<br>in 2023 |
| Years prior  |                                   |                    |                |                           |                                   |                    |
| 20 18        |                                   |                    |                |                           |                                   |                    |
| 20 19        |                                   |                    |                |                           |                                   |                    |
| 20 20        |                                   |                    |                |                           |                                   |                    |
| 2021         |                                   |                    |                |                           |                                   |                    |
| 2022         |                                   |                    | 136,228        | 136,228                   |                                   |                    |
| tal Carryove | r to Next Year                    |                    | 1,000          |                           |                                   |                    |

<sup>\*</sup> Carryover amount includes 4942(a) amounts

# Excess Distribution Carryovers Form 990-PF, Part XII

|  | Tomi 550-11, Fait 7th |           |
|--|-----------------------|-----------|
|  | Current Year          | Next Year |
| Preceding Tax Year Excess Distributions        | Decreases             | Carryover |
| 2017   |                       |           |
| 2018   |                       |           |
| 2019   |                       |           |
| 2020 15,440                                    | 2,728                 | 12,712    |
| 2021   |                       |           |
| Current Year Excess Distribution Generated (2) | 0                     |           |
| Total Carryover to Next Year                   | 12,712                |           |

Two Year Comparison Report 2021 & 2022 Form 990PF For calendar year 2022, or tax year beginning Taxpayer Identification Number Name 55-0783635 DEITZLER FOUNDATION, INC 2021 2022 Differences Net investment income Net investment income per books per books 57,872 127,000 69,128 1. Contributions, gifts, grants, and similar amounts received 1. 16 23 23 16 2. Interest on savings and temporary cash investments 2 47,712 54,380 47,712 54,380 6,668 6,668 3. Dividends and interest from securities 3. 4, 4. Gross rents 5. 94,941 17,349 -77,592 5. Net gain or (loss) from sale of assets **-77**,592 17,349 94,941

6. 6. Capital gain net income 7. 7. Gross profit or (loss) 8. Other income 8 71,752 -1,789 -70,917 198,752 200,541 142,669 9. Total. Add lines 1 through 8 9. 10. Compensation of officers, directors, trustees, etc. 10. Deductions 11. Other employee salaries and wages 11. 12. Pension plans, employee benefits 12. 13. Professional fees 13. 3,900 4,357 457 14. 14. Interest 550 670 670 550 120 120 15. Taxes 15. 16. 16. Depreciation and depletion 17. 17. Occupancy 2,840 150 18. Other expenses 18. 2,844 154 -4 19. 99,700 133,500 33,800 19. Contributions, gifts, grants paid 106,564 274 141,367 820 34,803 546 20. Total expenses and disbursements. Add lines 10 through 19 20. -36,592 70,932 -71.463 57,385 21. Net income (if negative investment activity, enter -0-) 21. 93,977 142,395 22. 1,979 986 -993 22. Excise Tax 23. 23. Section 511 Tax 24. Subtitle A income tax 24. 25. 1,979 986 -993 25. Total Taxes 4,785 2,806 -1,979 26. Estimates and overpayments credited 26. 27. Foreign tax withheld 27. 28. 28. Other Payments -1,979 4,785 2,806 29. 29. Total payments and credits 986 30. Balance due / (Overpayment) 30. -2,806 -1,82031. 2,806 1,820 -986 31. Overpayment credited to next year 32. 32. Penalty 33. Net due / (Refund) 33. Ω 0 1,857,889 1,915,075 57,186 34. 34. Total assets 35. 35, Total liabilities

1,915,075

57,186

1,857,889

36. Net assets

| 55-0783635   |             | Federal Sta          | atements              |                   |                        |                     |
|--|-------------|----------------------|-----------------------|-------------------|------------------------|---------------------|
| Direct Public Support  |             |                      |                       |                   |                        |                     |
|  | Contributor |                      | Cash<br>Contribution  | _Co               | loncash<br>Intribution | 1                   |
| TOTAL  |             | =                    | 2,000                 |                   |                        | 0                   |
| Form 990-PF, Part XIV, Line 1a - Managers Who Contributed Over 2% or \$5,000 |             |                      |                       |                   |                        |                     |
| Name of Manager  |             |                      |                       |                   | ount                   |                     |
| HARRY DEITZ<br>TOTAL   | ZLER        |                      |                       |                   | 25,000                 |                     |
| Taxable Interest on Investments  |             |                      |                       |                   |                        |                     |
| ML ACCOUNT   | Description | Amount               | Unrelated Business    | Exclusion Code    | Postal<br>Code         | US<br>Obs (\$ or %) |
| TOTAL  | #000-04A79  |                      | 23                    | 7.1               |                        |                     |
| Taxable Dividends from Securities  |             |                      |                       |                   |                        |                     |
|  | Description | Amount               | Unrelated<br>Business | Exclusion<br>Code | Postal<br>Code         | US<br>Obs (\$ or %) |
| ML ACCOUNT TOTAL   | #XXX-XXA79  | \$ 54,38<br>\$ 54,38 |                       | 14                |                        |                     |
|  |             |                      |                       |                   |                        |                     |
|  |             |                      |                       |                   |                        |                     |
|  |             |                      |                       |                   |                        |                     |

# Form 8879-TE

### IRS e-file Signature Authorization for a Tax Exempt Entity

| No. 1545-0047 |
|---------------|
| No. 1545-004  |

2022

Department of the Treasury Internal Revenue Service

Name of filer

Go to www.irs.gov/Form8879TE for the latest information.

EIN or SSN

DEITZLER FOUNDATION, INC 55-0783635

Name and little of officer or person subject to tax HARRY G, DEITZLER

| PRESIDENT   |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| Part I Type of Return and F   | Return Information   |  |  |  |  |  |
| Check the box for the return for which you ar   | re using this Form 8879-TE and enter the applicable a                              | amount, if any, from the return. Form              |  |  |  |  |
| 8038-CP and Form 5330 filers may enter doll   | lars and cents. For all other forms, enter whole dollars                           | s only. If you check the box on line 1a, 2a,       |  |  |  |  |
| 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and   | the amount on that line for the return being filed with                            | this form was blank, then leave line 1b, 2b,       |  |  |  |  |
| 3b. 4b. 5b. 6b. 7b. 8b. 9b. or 10b, whichever   | r is applicable, blank (do not enter -0-). But, if you en                          | tered -0- on the return, then enter -0- on the     |  |  |  |  |
| applicable line below. Do not complete more   |  |  |  |  |  |  |
| 1a Form 990 check here  | b Total revenue, if any (Form 990, Part VIII, co                                   | lumn (A), line 12)                                 |  |  |  |  |
| 2a Form 990-EZ check here   | 2h   |  |  |  |  |  |
| 3a Form 1120-POL check here   | b Total tax (Form 1120-POL, line 22)   | 3b   |  |  |  |  |
| 4a Form 990-PF check here   | b Tax based on investment income (Form 99  | 986 986 Part V, line 5)                            |  |  |  |  |
| 5a Form 8868 check here   | b Balance due (Form 8868, line 3c)   |  |  |  |  |  |
| 6a Form 990-T check here  | b Total tax (Form 990-T, Part III, line 4)   | 6b   |  |  |  |  |
|   | b Total tax (Form 4720, Part III, line 1)  | 7b   |  |  |  |  |
| 7a Form 4720 check here   | b FMV of assets at end of tax year (Form 52  | 27, Item D)  |  |  |  |  |
| 8a Form 5227 check here   | b Tax due (Form 5330, Part II, line 19)  |  |  |  |  |  |
| 9a Form 5330 check here   |  | n 8038-CP, Part III, line 22) 10b                  |  |  |  |  |
| 10a Form 8038-CP check here   | b Amount of credit payment requested (Fornature Authorization of Officer or Person | n Subject to Tax                                   |  |  |  |  |
|   |  | I am a person subject to tax with respect to (name |  |  |  |  |
| Citadi bandinas ai banta tit i accine   |  | and that I have examined a copy of the             |  |  |  |  |
| of entity)  (EIN)  and that I have examined a copy of the copy of |  |  |  |  |  |  |
| 2022 electronic return and accompanying scr   | Part I above is the amount shown on the copy of the                                | e electronic return. I consent to allow my         |  |  |  |  |
| complete. I further declare that the amount in  | electronic return originator (ERO) to send the return t                            | o the IRS and to receive from the IRS (a) an       |  |  |  |  |
| intermediate service provider, transmitter, or  | ejection of the transmission, (b) the reason for any del                           | ay in processing the return or refund, and (c)     |  |  |  |  |
| acknowledgement of receipt of reason for re-  | ize the U.S. Treasury and its designated Financial Ag                              | pent to initiate an electronic funds withdrawal    |  |  |  |  |
| direct debits onto to the financial institution   | account indicated in the tax preparation software for p                            | payment of the federal taxes owed on this          |  |  |  |  |
| carect debit) entry to the illiancial institution to debit the  | e entry to this account. To revoke a payment, I must                               | contact the U.S. Treasury Financial Agent at       |  |  |  |  |
| 4 999 353 4537 no later than 2 husiness day   | ys prior to the payment (settlement) date. I also author                           | orize the financial institutions involved in the   |  |  |  |  |
| processing of the electronic navment of taxe  | s to receive confidential information necessary to ans                             | swer inquiries and resolve issues related to       |  |  |  |  |
| the payment I have selected a personal ider   | ntification number (PIN) as my signature for the electr                            | onic return and, if applicable, the consent to     |  |  |  |  |
| electronic funds withdrawal.  |  |  |  |  |  |  |
| PIN: check one box only   |  |  |  |  |  |  |
|   | EDDY, POLING & BAYLOUS,  | to enter my PIN 83635 as my signature              |  |  |  |  |
| X I authorize MCDONOUGH,  | Enter five numbers, but  |  |  |  |  |  |
|   | ERO firm name  | do not enter all zeros                             |  |  |  |  |
| on the tay year 2022 electronically fi  | iled return. If I have indicated within this return that a                         | copy of the return is being filed with a state     |  |  |  |  |
| on the tax year 2022 electronically in  | art of the IRS Fed/State program, I also authorize the                             | aforementioned ERO to enter my PIN on the          |  |  |  |  |
| return's disclosure consent screen.   | are of the first parties programme   |  |  |  |  |  |
|   | x with respect to the entity, I will enter my PIN as my                            | signature on the tax year 2022 electronically      |  |  |  |  |
| As an officer or person subject to tax  | this return that a copy of the return is being filed with                          | n a state agency(ies) regulating charities as part |  |  |  |  |
| of the IRS Fed/State program, I will  | enter my PIN on the return's disclosure consent scre                               |  |  |  |  |  |
| Signature of officer or person subject to lax   | 3500   | Data 05/11/23                                      |  |  |  |  |
| Part III Certification and Au   | thentication /   | 11   |  |  |  |  |
| ERO's EFIN/PIN. Enter your six-digit electron   | onic filing identification   |  |  |  |  |  |
| number (EFIN) followed by your five-digit se  | 55051903535  |  |  |  |  |  |
|   |  | Do not enter all zeros                             |  |  |  |  |
| I certify that the above numeric entry is my f  | PIN, which is my signature on the 2022 electronically                              | filed return indicated above. I confirm that I     |  |  |  |  |
| am submitting this return in accordance with  | the requirements of Pub. 4163, Modernized e-File (                                 | MeF) Information for Authorized IRS e-file         |  |  |  |  |
| Providers for Business Returns.   |  |  |  |  |  |  |

ERO Must Retain This Form — See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

KATHY G. EDDY, CPA

ERO's signature

05/11/23