

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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

OMB No. 1545-0047
2020
Open to Public Inspection

A For the 2020 calendar year, or tax year beginning 01-01-2020, and ending 12-31-2020

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
THE GREATER KANAWHA VALLEY FOUNDATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
PO BOX 3041

City or town, state or province, country, and ZIP or foreign postal code
CHARLESTON, WV 25331

D Employer identification number
55-6024430

E Telephone number
(304) 346-3620

F Name and address of principal officer:
MICHELLE FOSTER
PO BOX 3041
CHARLESTON, WV 25331

G Gross receipts \$ 15,850,017

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.TGKVF.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1962 **M** State of legal domicile: WV

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE GREATER KANAWHA VALLEY FOUNDATION MAKES THOUGHTFUL AND PROACTIVE INVESTMENTS THAT GROW THE MULTIPLE FORMS OF WEALTH NECESSARY FOR OUR COMMUNITY TO THRIVE. THESE FORMS OF WEALTH INCLUDE THE INDIVIDUAL, INTELLECTUAL, SOCIAL, POLITICAL, NATURAL,CULTURAL, BUILT AND FINANCIAL ASSETS WITHIN OUR COMMUNITY.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	15
	6 Total number of volunteers (estimate if necessary)	6	13
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 39	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	6,375,023	3,599,905
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0	0
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	9,133,734	12,139,563
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	32,511	110,549
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	15,541,268	15,850,017
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	11,679,410	14,487,362
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,299,628	1,312,135
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶178,752		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,200,582	1,227,788
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	14,179,620	17,027,285
19 Revenue less expenses. Subtract line 18 from line 12	1,361,648	-1,177,268	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	265,698,298	304,704,868
	21 Total liabilities (Part X, line 26)	7,784,611	9,631,575
	22 Net assets or fund balances. Subtract line 21 from line 20	257,913,687	295,073,293

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: *****
Date: 2021-05-13

KRISTIN MOUNTS CHIEF FINANCIAL OFFICER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: SUTTLE & STALNAKER PLLC
Preparer's signature: _____
Date: 2021-05-13
Check if self-employed
PTIN: P00050159

Firm's name: SUTTLE & STALNAKER PLLC
Firm's EIN: 55-0538163

Firm's address: 1411 VIRGINIA ST E STE 100
CHARLESTON, WV 25301
Phone no. (304) 343-4126

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III Yes No

1 Briefly describe the organization's mission:

THE GREATER KANAWHA VALLEY FOUNDATION MAKES THOUGHTFUL AND PROACTIVE INVESTMENTS THAT GROW THE MULTIPLE FORMS OF WEALTH NECESSARY FOR OUR COMMUNITY TO THRIVE. THESE FORMS OF WEALTH INCLUDE THE INDIVIDUAL, INTELLECTUAL, SOCIAL, POLITICAL, NATURAL, CULTURAL, BUILT AND FINANCIAL ASSETS WITHIN OUR COMMUNITY.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 15,590,421 including grants of \$ 14,487,362) (Revenue \$)
See Additional Data

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 15,590,421

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
11a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	Yes	
11b	Did the organization report an amount for investments—other securities—in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		No
11c	Did the organization report an amount for investments—program related—in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		No
11d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		No
11e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Yes	
11f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	Yes	
12b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
20b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	Yes	

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23 Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26	No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	No
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29 Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38 Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 27	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with 16 main rows (2a-16) and sub-rows (a-e). Columns include question text, a grid for 'Yes/No' answers, and a grid for numerical values. Row 2a includes a '15' in the rightmost column. Rows 10a-11b include sub-columns for numerical values.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI



Section A. Governing Body and Management

Table with 5 columns: Question, 1a, 1b, Yes, No. Rows include questions about voting members, family relationships, management control, and governance decisions.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 5 columns: Question, Yes, No. Rows include questions about local chapters, written policies, conflict of interest, whistleblower, and document retention policies.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records:

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) TODD MOUNT CHAIRMAN	1.00	X		X			0	0	0	
(2) SUSAN SHUMATE VICE CHAIRMAN	1.00	X		X			0	0	0	
(3) ROBERT O ORDERS SECRETARY	1.00	X		X			0	0	0	
(4) DR JASON CASTLE TRUSTEE	1.00	X					0	0	0	
(5) DEBRA SULLIVAN TRUSTEE	1.00	X					0	0	0	
(6) SANDRA THOMAS TRUSTEE	1.00	X					0	0	0	
(7) MONIKA JAENSSON TRUSTEE	1.00	X					0	0	0	
(8) CHARLES W LOEB JR TRUSTEE	1.00	X					0	0	0	
(9) SEAN MAYBERRY TRUSTEE	1.00	X					0	0	0	
(10) TED ARMBRECHT III TRUSTEE	1.00	X					0	0	0	
(11) WILL CARTER TRUSTEE	1.00	X					0	0	0	
(12) DICKINSON GOULD TRUSTEE	1.00	X					0	0	0	
(13) GEORGETTE GEORGE TRUSTEE	1.00	X					0	0	0	
(14) MICHELLE FOSTER PRESIDENT AND CEO	40.00			X			199,427	0	28,275	
(15) KRISTIN MOUNTS CHIEF FINANCIAL OFFICER	40.00			X			149,458	0	23,483	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			

1b Sub-Total	▶			
c Total from continuation sheets to Part VII, Section A	▶			
d Total (add lines 1b and 1c)	▶		348,885	0
				51,758

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ **2**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ **0**

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	3,599,905				
	g Noncash contributions included in lines 1a - 1f:\$	1g	1,876,238				
	h Total. Add lines 1a-1f			3,599,905			
Program Service Revenue	2a	Business Code					
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f.						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		3,357,048	3,357,048			
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	6a				
			(ii) Personal	6a			
		b Less: rental expenses	6b				
		c Rental income or (loss)	6c				
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	7a	8,782,515			
			(ii) Other	7a			
		b Less: cost or other basis and sales expenses	7b	0			
		c Gain or (loss)	7c	8,782,515			
	d Net gain or (loss)			8,782,515	8,782,515		
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a					
		b Less: direct expenses	8b				
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19	9a						
	b Less: direct expenses	9b					
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	10a						
	b Less: cost of goods sold	10b					
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	Business Code						
11a OTHER INCOME	523000	110,549	110,549				
b							
c							
d All other revenue							
e Total. Add lines 11a-11d		110,549					
12 Total revenue. See instructions		15,850,017	12,250,112	0	0		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	13,646,845	13,646,845		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	840,517	840,517		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	400,644	14,383	357,207	29,054
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	646,333	313,326	232,013	100,994
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	51,414	24,924	18,456	8,034
9 Other employee benefits	142,216	68,943	51,051	22,222
10 Payroll taxes	71,528	17,167	45,778	8,583
11 Fees for services (non-employees):				
a Management				
b Legal	74,277		74,277	
c Accounting	35,000		35,000	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	180,610	180,610		
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	57,437		57,437	
12 Advertising and promotion				
13 Office expenses	36,555	14,622	14,622	7,311
14 Information technology	79,925		79,925	
15 Royalties				
16 Occupancy	141,883	49,659	89,670	2,554
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	29,945		29,945	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	9,608		9,608	
23 Insurance	29,972		29,972	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a BANK FEES	286,075	286,075		
b SPECIAL PROJECTS/GRANT	129,466	129,466		
c PRINTING & PUBLICATION	45,348		45,348	
d NET (INC)/DEC ADMIN FEE	3,884	3,884		
e All other expenses	87,803		87,803	
25 Total functional expenses. Add lines 1 through 24e	17,027,285	15,590,421	1,258,112	178,752
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	19,801	1	58,184
	2 Savings and temporary cash investments	284,971	2	351,281
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	9,951	4	
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net	300,000	7	300,000
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	65,606	9	55,324
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	415,329		
	b Less: accumulated depreciation	40,625	10c	374,704
	11 Investments—publicly traded securities	262,505,359	11	300,744,215
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	2,512,610	15	2,821,160
16 Total assets. Add lines 1 through 15 (must equal line 33)	265,698,298	16	304,704,868	
Liabilities	17 Accounts payable and accrued expenses	767	17	8,225
	18 Grants payable	1,211,284	18	1,818,929
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	231,641
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	6,572,560	25	7,572,780
	26 Total liabilities. Add lines 17 through 25	7,784,611	26	9,631,575
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	255,691,458	27	292,254,327
	28 Net assets with donor restrictions	2,222,229	28	2,818,966
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	257,913,687	32	295,073,293	
33 Total liabilities and net assets/fund balances	265,698,298	33	304,704,868	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	15,850,017
2	Total expenses (must equal Part IX, column (A), line 25)	2	17,027,285
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,177,268
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	257,913,687
5	Net unrealized gains (losses) on investments	5	38,035,886
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	300,988
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	295,073,293

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b	Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Additional Data

Software ID:

Software Version:

EIN: 55-6024430

Name: THE GREATER KANAWHA VALLEY FOUNDATION

Form 990 (2020)

Form 990, Part III, Line 4a:

THIS IS A COMMUNITY TRUST ORGANIZED TO ACCEPT CONTRIBUTIONS, ESTABLISH AND ADMINISTER TRUSTS AND DISTRIBUTE INCOME FOR THE BENEFIT OF PEOPLE IN THE KANAWHA VALLEY AREA.

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2020
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
THE GREATER KANAWHA VALLEY FOUNDATION

Employer identification number
55-6024430

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	80,407	338,590	4,896,056	6,375,023	3,599,905	15,289,981
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . . .						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 Total. Add lines 1 through 3	80,407	338,590	4,896,056	6,375,023	3,599,905	15,289,981
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . .						
6 Public support. Subtract line 5 from line 4.						15,289,981

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4. . .	80,407	338,590	4,896,056	6,375,023	3,599,905	15,289,981
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . .	2,823,296	3,390,384	5,510,022	6,487,375	3,357,048	21,568,125
9 Net income from unrelated business activities, whether or not the business is regularly carried on. . .						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .	6,856	22,785	15,413	32,511	110,549	188,114
11 Total support. Add lines 7 through 10						37,046,220
12 Gross receipts from related activities, etc. (see instructions)					12	

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f))	14	41.270 %
15 Public support percentage for 2019 Schedule A, Part II, line 14	15	35.290 %

16a 33 1/3% support test—2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6.						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . .						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c	Add lines 10a and 10b.						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here.**

Section C. Computation of Public Support Percentage

15	Public support percentage for 2020 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2019 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2020 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2019 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, of Part I, complete Sections A and B. If you checked box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
b	A family member of a person described in 11a above?		
c	A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to 11a, 11b, or 11c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer lines 2a and 2b below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b	Did the activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (<i>prior IRS approval required - provide details in Part VI</i>)	5	
6 Other distributions (<i>describe in Part VI</i>). See instructions	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions	8	
9 Distributable amount for 2020 from Section C, line 6	9	
10 Line 8 amount divided by Line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required-- <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2020:			
a From 2015.			
b From 2016.			
c From 2017.			
d From 2018.			
e From 2019.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016.			
b Excess from 2017.			
c Excess from 2018.			
d Excess from 2019.			
e Excess from 2020.			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2020

Open to Public Inspection

Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

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

Department of the Treasury Internal Revenue Service

Name of the organization THE GREATER KANAWHA VALLEY FOUNDATION

Employer identification number 55-6024430

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include Total number at end of year, Aggregate value of contributions to, Aggregate value of grants from, and Aggregate value at end of year.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

Table with 2 columns: Held at the End of the Year, and 2 rows: 2a Total number of conservation easements, 2b Total acreage restricted by conservation easements.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---|--------|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	226,701,059	130,033,310	117,146,641	105,627,238	110,866,437
b Contributions	460,747	64,631,356	4,063,725	59,584	46,614
c Net investment earnings, gains, and losses	45,321,528	42,247,329	17,346,610	16,336,801	2,808,972
d Grants or scholarships	5,609,319	5,240,704	4,916,768	2,052,417	1,813,795
e Other expenditures for facilities and programs	3,160,690	3,252,901	2,707,206	1,965,619	245,839
f Administrative expenses	1,908,305	1,717,331	899,692	858,946	77,010
g End of year balance	261,805,020	226,701,059	130,033,310	117,146,641	111,585,379

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Term endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | | |
|--|------------|-----------|
| (i) Unrelated organizations | Yes | No |
| (ii) Related organizations | Yes | No |
- b** If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? **3b**
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		415,329	40,625	374,704
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				374,704

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ORGANIZATION ENDOWMENT FUNDS HELD FOR OTHERS	7,572,780
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	7,572,780

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	53,547,640
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	38,035,886
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	38,035,886
3	Subtract line 2e from line 1	3	15,511,754
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	338,263
c	Add lines 4a and 4b	4c	338,263
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	15,850,017

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	16,388,034
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	16,388,034
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	639,251
c	Add lines 4a and 4b	4c	639,251
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	17,027,285

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 55-6024430

Name: THE GREATER KANAWHA VALLEY FOUNDATION

Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	THE FOUNDATION'S INTENDED USE OF ITS ENDOWMENT FUNDS IS TO MAINTAIN THE FUNDS IN PERPETUITY SO THEY CAN BE USED FOREVER FOR THEIR INTENDED USE, SUCH AS SCHOLARSHIP AWARDS, GRANTS TO ORGANIZATIONS TO FEED THE HUNGRY, PROVIDE SHELTER FOR THE HOMELESS, ETC.

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	FOR THE YEAR ENDED DECEMBER 31, 2020, THE FOUNDATION HAS NO MATERIAL UNCERTAIN TAX POSITIONS TO BE ACCOUNTED FOR IN THE FINANCIAL STATEMENTS. THE FOUNDATION RECOGNIZES INTEREST AND PENALTIES, IF ANY, RELATED TO UNRECOGNIZED TAX BENEFITS IN INTEREST EXPENSE. THE FOUNDATION RETURNS FOR YEARS ON OR AFTER DECEMBER 31, 2017 REMAIN SUBJECT TO EXAMINATION.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	CONTRIBUTIONS TO ORGANIZATIONAL FUNDS 52,188. BANK FEES NETTED INTO INVESTMENT INCOME 286,075.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS:	GRANTS FROM ORGANIZATIONAL FUNDS 291,818. EXPENSES CHARGED TO ORGANIZATIONAL FUNDS 61,358. BANK FEES NETTED INTO INVESTMENT INCOME 286,075.

Note: To capture the full content of this document as Filed, please select landscape mode (11" x 8.5") when printing.

**Schedule I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments and Individuals in the United States**

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Department of the
Treasury
Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

Name of the organization
THE GREATER KANAWHA VALLEY FOUNDATION

Employer identification number

55-6024430

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 212

3 Enter total number of other organizations listed in the line 1 table 0

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) SCHOLARSHIPS	370	840,517		FMV	
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	THE GRANTEES ARE REQUIRED TO SUBMIT A FINAL REPORT ONE YEAR AFTER RECEIPT OF THE GRANT MONEY THAT OUTLINES HOW THE FUNDS WERE SPENT AND COPIES OF ALL RECEIPTS AS BACKUP FOR THE EXPENSES IF REQUESTED.

Additional Data

Software ID:

Software Version:

EIN: 55-6024430

Name: THE GREATER KANAWHA VALLEY FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALDERSON-BROADDUS UNIVERSITY 101 COLLEGE HILL DRIVE BOX 2154 PHILIPPI, WV 26416	55-0357072	501C(3)	193,030				GENERAL SUPPORT
ALZHEIMER'S DISEASE & RELATED DISORDERS ASSOCIATION INC WV CHAPTER 1601 2ND AVENUE CHARLESTON, WV 25387	13-3039601	501C(3)	40,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BREAM MEMORIAL PRESBYTERIAN CHURCH PO BOX 6127 CHARLESTON, WV 253620127	55-0436695	CHURCH	76,564				GENERAL SUPPORT
FAIRLEA VOLUNTEER FIRE DEPARTMENT INC 250 3RD STREET LEWISBURG, WV 24901	55-0594472	501C(3)	5,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHARLESTON BALLET INC 100 CAPITOL STREET SUITE 302 CHARLESTON, WV 25301	55-0397803	501C(3)	32,003				GENERAL SUPPORT
GATEWAY INDUSTRIES INC 787-EDGAR AVE RONCEVERTE, WV 24970	55-0590745	501C(3)	10,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S THERAPY CLINIC INC 113 LAKEVIEW DRIVE CHARLESTON, WV 25313	55-0376118	501C(3)	35,000				GENERAL SUPPORT
CITY OF CHARLESTON PO BOX 2749 CHARLESTON, WV 25330		GOVERNMENT ENTITY	160,458				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COVENANT HOUSE INC 600 SHREWSBURY STREET CHARLESTON, WV 25301	31-1015583	501C(3)	196,000				GENERAL SUPPORT
DAYMARK INC 1592 WASHINGTON STREET EAST SUITE 2 2 CHARLESTON, WV 25311	55-0560842	501C(3)	5,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FESTIV-ALL CHARLESTON WEST VIRGINIA INC 108 1/2 CAPITOL ST CHARLESTON, WV 25301	27-0112863	501C(3)	54,000				GENERAL SUPPORT
FUND FOR THE ARTS 803 QUARRIER STREET SUITE 100 CHARLESTON, WV 25301	55-0614854	501C(3)	5,766				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREENBRIER COUNTY YOUTH CAMP INC 21-8 ANTHONY CREEK RD FRANKFORT, WV 24938	55-0396254	501C(3)	10,000				GENERAL SUPPORT
KANAWHA VALLEY COLLECTIVE INC 1 UNITED WAY SQUARE CHARLESTON, WV 25301	73-1629065	501C(3)	76,266				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MISSION WEST VIRGINIA 168 MIDLAND TRAIL SUITE 1 HURRICANE, WV 25526	31-1553133	501C(3)	47,500				GENERAL SUPPORT
OLD CHARLES TOWN LIBRARY INC 200 EAST WASHINGTON STREET CHARLESTON, WV 25414	55-0465896	501C(3)	30,489				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OLD CHARLES TOWN MUSEUM C/O OLD CHARLES TOWN LIBRARY 200 EAST WASHINGTON STREET CHARLESTON, WV 25414	55-0465896	501C(3)	15,245				GENERAL SUPPORT
GREENBRIER EAST HIGH SCHOOL BASEBALL 273 SPARTAN LN LEWISBURG, WV 24901	55-6000321	501C(3)	75,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRESTERA CENTER FOR MENTAL HEALTH SERVICES INC P O BOX 8069 HUNTINGTON, WV 25705	55-0492369	501C(3)	26,235				GENERAL SUPPORT
PRO-KIDS INC 209 MORRIS STREET CHARLESTON, WV 25301	55-0732998	501C(3)	31,200				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHRINER'S HOSPITALS FOR CHILDREN 2900 NORTH ROCKY POINT DRIVE TAMPA, FL 33607	36-2193608	501C(3)	17,412				GENERAL SUPPORT
ST JOHN'S EPISCOPAL CHURCH 1105 QUARRIER STREET CHARLESTON, WV 25301		CHURCH	66,354				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREENBRIER EAST SOCCER BOOSTERS 273 SPARTAN LANE LEWISBURG, WV 24901	55-6000321	SCHOOL	50,000				GENERAL SUPPORT
THE CLAY CENTER FOR THE ARTS AND SCIENCES (AVAMPATO DISCOVERY MUSEUM) ONE CLAY SQUARE CHARLESTON, WV 25301	55-0459183	501C(3)	155,514				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CLAY CENTER FOR THE ARTS AND SCIENCES OF WEST VIRGINIA ONE CLAY SQUARE CHARLESTON, WV 25301	55-0702401	501C(3)	207,430				GENERAL SUPPORT
THE FOUNDATION FOR THOMAS MEMORIAL AND ST FRANCIS HOSPITALS INC 4605 MACCORKLE AVENUE SW SOUTH CHARLESTON, WV 25309	55-0694220	501C(3)	5,036				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE GREATER KANAWHA VALLEY FOUNDATION P O BOX 3041 CHARLESTON, WV 25311	55-6024430	501C(3)	98,353				GENERAL SUPPORT
THE SALVATION ARMY 301 TENNESSEE AVENUE CHARLESTON, WV 25302	58-0660607	501C(3)	132,552				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SALVATION ARMY BOYS & GIRLS CLUB 301 TENNESSEE AVENUE CHARLESTON, WV 25302	58-0660607	501C(3)	20,000				GENERAL SUPPORT
UNION MISSION MINISTRIES INC PO BOX 11255 1210 SMITH STREET 3RD FLOOR CHARLESTON, WV 25321	55-6000896	501C(3)	25,477				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF CENTRAL WEST VIRGINIA INC ONE UNITED WAY SQUARE CHARLESTON, WV 25301	55-0402755	501C(3)	93,519				GENERAL SUPPORT
UNIVERSITY OF CHARLESTON 2300 MACCORKLE AVENUE CHARLESTON, WV 25304	55-0357039	501C(3)	770,315				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF TENNESSEE FOUNDATION INC 1610 UNIVERSITY AVENUE SUITE 202 KNOXVILLE, TN 37921	62-6001636	501C(3)	15,477				GENERAL SUPPORT
WASHINGTON AND LEE UNIVERSITY OFFICE OF THE UNIVERSITYH REGISTRAR 204 W WASHINGTON STREET LEXINGTON, VA 244502116	54-0505977	501C(3)	30,489				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREENBRIER VALLEY COMMUNITY FOUNDATION 809 JEFFERSON STREET S LEWISBURG, WV 24901	55-0763800	501C(3)	70,000				GENERAL SUPPORT
WEST VIRGINIA INDEPENDENT COLLEGES AND UNIVERSITIES 1411 VIRGINIA STR EAST SUITE 100 CHARLESTON, WV 25301	55-0465880	501C(3)	14,599				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WEST VIRGINIA MUSIC HALL OF FAME INC 1427 LEE STREET CHARLESTON, WV 25301	51-0523797	501C(3)	12,000				GENERAL SUPPORT
WEST VIRGINIA SYMPHONY ORCHESTRA INC PO BOX 2292 CHARLESTON, WV 25328	55-0339426	501C(3)	392,572				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST VIRGINIA UNIVERSITY FOUNDATION INC ONE WATERFRONT PLACE PO BOX 1650 MORGANTOWN, WV 26501	55-6017181	501C(3)	293,981				GENERAL SUPPORT
WEST VIRGINIA WESLEYAN COLLEGE 59 COLLEGE AVENUE BUCKHANNON, WV 26201	55-0357056	SCHOOL	231,147				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST VIRGINIA YOUTH SYMPHONY 110 WYOMING ST CHARLESTON, WV 25302	55-0711071	501C(3)	20,000				GENERAL SUPPORT
HERO HOUSE INC PO BOX 896 MADISON, WV 25130	47-4754035	501C(3)	7,500				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YWCA RESOLVE FAMILY ABUSE PROGRAM 1426 KANAWHA BOULEVARD EAST CHARLESTON, WV 25301	55-0357060	501C(3)	5,615				GENERAL SUPPORT
YWCA SOJOURNER'S SHELTER FOR HOMELESS WOMEN & FAMILIES 1426 KANAWHA BOULEVARD EAST CHARLESTON, WV 25301	55-0357060	501C(3)	42,500				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HIGH ROCKS EDUCATIONAL CORPORATION 195 THOMPSON ROAD HILLSBORO, WV 24946	55-0743755	501C(3)	42,000				GENERAL SUPPORT
KANAWHA HOSPICE CARE INC 1606 KANAWHA BLVD WEST CHARLESTON, WV 25387	34-1337316	501C(3)	272,460				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KANAWHA CHARLESTON HEALTH DEPARTMENT 108 LEE ST CHARLESTON, WV 25301		GOVERNMENT ENTITY	60,000				GENERAL SUPPORT
TRI-COUNTY YMCA PO BOX 737 SCOTT DEPOT, WV 25560	55-0702900	501C(3)	16,170				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUTNAM COUNTY PARKS & RECREATION COMMISSION ONE VALLEY DRIVE HURRICANE, WV 25526	55-0544279	GOVERNMENT ENTITY	16,170				GENERAL SUPPORT
MANNA MEAL INC 1105 QUARRIER STREET CHARLESTON, WV 25301	31-0977670	501C(3)	73,358				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMC FOUNDATION INC 3414 STAUNTON AVENUE SE CHARLESTON, WV 25304	31-0887133	501C(3)	134,437				GENERAL SUPPORT
CHILDHOOD LANGUAGE CENTER INC 1313 QUARRIER STREET CHARLESTON, WV 25301	55-0722166	501C(3)	10,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST VIRGINIA HEALTH RIGHT INC 1520 WASHINGTON STREEY EAST CHARLESTON, WV 25311	31-1066881	501C(3)	283,933				GENERAL SUPPORT
FACING HUNGER FOOD BANK 1327 7TH AVE HUNTINGTON, WV 25701	55-0625915	501C(3)	16,500				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KANAWHA COUNTY COMMISSION 409 VIRGINIA STREET EAST CHARLESTON, WV 25310	55-6000335	GOVERNMENT ENTITY	65,000				GENERAL SUPPORT
WEST VIRGINIA WOMEN WORK 201 NEW JERSEY STREET MORGANTOWN, WV 26501	55-0775351	501C(3)	47,254				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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THE FIRST TEE OF WEST VIRGINIA 2115 CHARLESTON TOWN CENTER CHARLESTON, WV 25389	55-0592904	501C(3)	10,000				GENERAL SUPPORT
CAMP APPALACHIA 167 FLETCHER ROAD SCOTT DEPOT, WV 25560	11-3735247	501C(3)	30,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHARLESTON BAPTIST TEMPLE 209 MORRIS STREET CHARLESTON, WV 25301	55-0361940	CHURCH	15,477				GENERAL SUPPORT
SALEM UNIVERSITY 223 WEST MAIN STREET SALEM, WV 26426	25-1914087	SCHOOL	10,039				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WEST VIRGINIA STATE UNIVERSITY FOUNDATION INC ROUTE 25 BARRON DRIVE 100 EAST HALL PO BOX 1000 INSTITUTE, WV 25112	55-6019228	501C(3)	183,868				GENERAL SUPPORT
GREENBRIER VALLEY THEATRE 1038 WASHINGTON ST E CHARLESTON, WV 24901	55-0484580	501C(3)	200,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GREENBRIER HUMANE SOCIETY 151 HOLLIDAY LANE LEWISBURG, WV 24901	55-0596790	501C(3)	75,000				GENERAL SUPPORT
KANAWHA STATE FOREST FOUNDATION 7500 KANAWHA STATE FOREST DRIVE CHARLESTON, WV 25314	55-0697959	501C(3)	7,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SHEPHERD'S CENTER OF GREENBRIER VALLEY 1133 WASHINGTON STREET E LEWISBURG, WV 24901	55-0773398	501C(3)	10,000				GENERAL SUPPORT
STEP BY STEP INC PO BOX 11440 CHARLESTON, WV 25339	55-0746556	501C(3)	103,550				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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NATIONAL SOCIETY OF COLONIAL DAMES OF AMERICA IN WEST VIRGINIA INC PO BOX 175 CHARLESTON, WV 25321	55-6019553	501C(3)	30,000				GENERAL SUPPORT
KANAWHA-CHARLESTON HUMANE ASSOCIATION 1248 GREENBRIER STREET CHARLESTON, WV 25311	55-0435381	501C(3)	16,808				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LEWIS COUNTY FAMILY RESOURCE NETWORK INC 240 COURT AVENUE WESTON, WV 26452	55-0775409	501C(3)	54,000				GENERAL SUPPORT
RISEN LORD CATHOLIC CHURCH 67 WALLBACK ROAD MAYSEL, WV 25133	55-0645313	501C(3)	22,500				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BENI KEDEM SHRINE TEMPLE 100 QUARRIER STREET CHARLESTON, WV 25301	55-0113615	501C(3)	48,898				GENERAL SUPPORT
AMERICAN CANCER SOCIETY PO BOX 720366 OKLAHOMA CITY, OK 73162	13-1788491	501C(3)	7,059				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LEWISBURG LITERARY GROUP 905 WASHINGTON STREET WEST SUITE D LEWISBURG, WV 24901	30-0737830		8,000				GENERAL SUPPORT
MOUNTAIN MISSION INC 1620 SEVENTH AVENUE CHARLESTON, WV 25387	55-6029616	501C(3)	81,372				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WEST VIRGINIA KIDS COUNT FUND INC 1 CREATIVE PLACE CHARLESTON, WV 25311	55-0692324	501C(3)	28,667				GENERAL SUPPORT
UNIVERSITY HEALTH CARE FOUNDATION 2500 HOSIPTAL DRIVE MARTINSBURG, WV 25401	31-1180750	501C(3)	45,734				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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YWCA OF CHARLESTON 1426 KANAWHA BOULEVARD EAST CHARLESTON, WV 25301	55-0357060	501C(3)	28,009				GENERAL SUPPORT
BOONE MEMORIAL HOSPITAL 701 MADISON AVENUE MADISON, WV 25130	55-0477361	501C(3)	7,500				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LEWISBURG VOLUNTEER FIRE DEPARTMENT PO BOX 151 LEWISBURG, WV 24901	31-0926893	501C(4)	5,000				GENERAL SUPPORT
LOGAN COUNTY CHARITABLE AND EDUCATIONAL FOUNDATION INC 214 STRATTON STREET POST OFFICE BOX 1367 LOGAN, WV 25601	31-1498923	501C(3)	5,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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JUST FOR KIDS INC 129 MAIN ST SUITE 406 BECKLEY, WV 25801	20-0642303	501C(3)	10,000				GENERAL SUPPORT
BUCKSKIN COUNCIL BOY SCOUTS OF AMERICA 2829 KANAWHA BLVD EAST CHARLESTON, WV 25311	55-0357013	501C(3)	110,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CHILDREN'S HOME SOCIETY OF WEST VIRGINIA INC PO BOX 2942 CHARLESTON, WV 25330	55-0360199	501C(3)	32,809				GENERAL SUPPORT
B'NAI JACOB SYNAGOGUE OF CHARLESTON 1599 VIRGINIA STREET EAST CHARLESTON, WV 25311	55-0402341	CHURCH	90,172				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SCHOENBAUM FAMILY ENRICHMENT CENTER 1701 5TH AVENUE SUITE 1 CHARLESTON, WV 25387	55-0735017	501C(3)	48,883				GENERAL SUPPORT
THE BASILICA OF THE CO-CATHEDRAL OF THE SACRED HEART 1114 QUARRIER STREET EAST CHARLESTON, WV 25301	55-0372493	CHURCH	5,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BELIEVE IN WEST VIRGINIA PO BOX 8622 SOUTH CHARLESTON, WV 25303	03-0515259	501C(3)	5,000				GENERAL SUPPORT
OLD STONE PRESBYTERIAN CHURCH 644 CHURCH STREET LEWISBURG, WV 24901	55-0387642	CHURCH	75,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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UNITED WAY OF GREENBRIER VALLEY INC 809 JEFFERSON STREET SOUTH LEWISBURG, WV 24901	55-0665618	501C(3)	55,000				GENERAL SUPPORT
COMMUNITIES IN SCHOOLS OF GREENBRIER COUNTY 1033 COUR STREET NORTH LEWISBURG, WV 24901	01-0857998	501C(3)	40,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MARVEL CENTER INC 489 RANDOLPH STREET EAST LEWISBURG, WV 24901	82-4290027	501C(3)	20,000				GENERAL SUPPORT
CARNEGIE HALL INC 611 CHURCH STREET LEWISBURG, WV 24901	55-0639668	501C(3)	25,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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APPALACHIA SERVICE PROJECT INC 4523 BRISTOL HIGHWAY JOHNSON CITY, TN 37601	62-0989383	501C(3)	33,500				GENERAL SUPPORT
FAMILY REFUGE CENTER PO BOX 249 LEWISBURG, WV 24901	31-1032360	501C(3)	20,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GREENBRIER COUNTY COMMITTEE ON AGING PO BOX 556 RUPERT, WV 25984	55-0553281	501C(3)	10,000				GENERAL SUPPORT
CITY OF WHITE SUPLHUR SPRINGS 589 W MAIN STREET WHITE SUPLHUR SPRINGS, WV 24986	55-6000272	GOVERNMENT ENTITY	50,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DAVIS STUART INC 163 COTTAGE DR LEWISBURG, WV 24901	55-0357022	SCHOOL	25,000				GENERAL SUPPORT
GREENBRIER HISTORICAL SOCIETY 814 WASHINGTON STREET WEST LEWISBURG, WV 24901	23-7015222	501C(3)	50,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GATEWAY INDUSTRIES INC 787 EDGAR AVE RONCEVERTE, WV 24970	55-0590745	501C(3)	10,000				GENERAL SUPPORT
LINCOLN COUNTY SCHOOLS 10 MARLAND AVE HAMLIN, WV 25523		SCHOOL	50,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CALVARY BAPTIST CHURCH PO BOX 6008 CHARLESTON, WV 25362	55-0357018	509A(1)	46,083				GENERAL SUPPORT
CHARLESTON URBAN RENEWAL AUTHORITY 815 QUARRIER STREET SUITE 244 CHARLESTON, WV 25301		GOVERNMENT ENTITY	40,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LUCKY PENNY 493 DRY CREEK ROAD PO BOX 757 WHITE SUPLHUR SPRINGS, WV 24986	84-5012850	501C(3)	10,000				GENERAL SUPPORT
KANAWHA COUNTY DENTAL HEALTH COUNCIL INC 100 FLORIDA STREET CHARLESTON, WV 25302	55-0582056	501C(3)	80,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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RELIGIOUS COALITION FOR COMMUNITY RENEWAL INC 1516 WASHINGTON STREET EAST CHARLESTON, WV 25311	55-0670839	501C(3)	20,456				GENERAL SUPPORT
MADISON BAPTIST CHURCH FOOD PANTRY 426 SECOND STREET MADISON, WV 25130	55-6021887	501C(3)	6,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MARSHALL UNIVERSITY FOUNDATION INCORPORATED 1 JOHN MARSHALL DRIVE HUNTINGTON, WV 25755	55-6011111	501C(3)	57,000				GENERAL SUPPORT
WV PROFESSIONAL DANCE COMPANY 110 ELLISON AVENUE BECKLEY, WV 25801	31-1489960	501C(3)	30,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MOUNTAINEER CLAY CRUSHERS 8030 POCAHONTAS TRL WHITE SUPLHUR SPRINGS, WV 24986	85-0490693	501C(3)	8,000				GENERAL SUPPORT
COUNTRY ROADS RESCUE INC 600 SHREWSBURY STREET CHARLESTON, WV 25301	82-3583402	501C(3)	30,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GREENBRIER COMMUNITY SCHOOL 3100 HOUFNAGGLE ROAD LEWISBURG, WV 24901	55-0760786	SCHOOL	250,000				GENERAL SUPPORT
LEWIS COUNTY FAMILY RESOURCE NETWORK INC 240 COURT AVE WESTON, WV 26452	55-0775409	501C(3)	20,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LEWISBURG BAPTIST CHURCH 246 GRAND AVENUE LEWISBURG, WV 24901	55-0727296	CHURCH	40,000				GENERAL SUPPORT
SCOTT DEPOT CHRIST FELLOWSHIP INC 167 FLETCHER ROAD SCOTT DEPOT, WV 25560	11-3735247	501C(3)	30,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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REGIONAL FAMILY RESOURCE NETWORK 1078 MAIN STREET ROOM 202 ELKVIEW, WV 25071	55-0731612	501C(3)	30,000				GENERAL SUPPORT
NATURE CONSERVANCY OF WV 435 WILSON STREET ELKINS, WV 26241	53-0242652	501C(3)	5,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PARTNERS IN HEALTH NETWORK INC 405 CAPITOL STREET CHARLESTON, WV 25301	55-0746643	501C(3)	39,350				GENERAL SUPPORT
WEST VIRGINIA CODING CLUB PO BOX 421 CHARLESTON, WV 25322	32-0505772	501C(3)	10,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WV COMMUNITY DEVELOPMENT HUB 424A SHREWSBURY STREET CHARLESTON, WV 25301	20-0022399	501C(3)	40,000				GENERAL SUPPORT
BOONE COUNTY 4-H LEADERS' ASSOCIATION PO BOX 946 MADISON, WV 25130	55-6000842	GOVERNMENT ENTITY	7,500				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PHILANTHROPY WEST VIRGINIA 191 SCOTT AVENUE MORGANTOWN, WV 26508	55-0721553	501C(3)	86,000				GENERAL SUPPORT
PUBLIC DEFENDER SERVICES ONE PLAYERS CLUB DRIVE CHARLESTON, WV 25311	55-0526580	GOVERNMENT ENTITY	95,000				GENERAL SUPPORT

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GREENBRIER COUNTY BOARD OF EDUCATION 197 CHESTNUT STREET LEWISBURG, WV 24901	55-6000321	SCHOOL	60,000				GENERAL SUPPORT
GREENBRIER VALLEY RESTORATION PROJECT INC PO BOX 484 LEWISBURG, WV 24901	46-1930328	501C(3)	240,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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RELIGIOUS COALITION FOR COMMUNITY RENEWAL INC 1516 WASHINGTON STREET EAST CHARLESTON, WV 25311	55-0670839	501C(3)	30,000				GENERAL SUPPORT
MORRIS MEMORIAL UNITED METHODIST CHURCH 4615 MACCORKLE AVENUE CHARLESTON, WV 25304		CHURCH	40,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SPRINGFIELD BAPTIST CHURCH 400 N MAIN STREET SPRINGFIELD, TN 37172	62-0605183	CHURCH	15,477				GENERAL SUPPORT
ARTS IN ACTION 2658 MAIN STREET HURRICANE, WV 25526	16-1664614	501C(3)	33,000				GENERAL SUPPORT

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RIVER CITY YOUTH BALLET ENSEMBLE 4110 MACCORKLE AVE SE CHARLESTON, WV 25302	55-0772369	501C(3)	12,000				GENERAL SUPPORT
FAITH IN ACTION OF THE GREATER KANAWHA VALLEY INC PO BOX 11623 CHARLESTON, WV 25339	46-5502293	501C(3)	48,600				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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STATE FAIR OF WEST VIRGINIA INC PO BOX 986 LEWISBURG, WV 24901	55-0326802	501C(3)	30,000				GENERAL SUPPORT
SYLVESTER PAVILLION PARK PO BOX 10 SYLVESTER, WV 25193	55-0526835	GOVERNMENT ENTITY	7,500				GENERAL SUPPORT

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KANAWHA VALLEY SENIOR SERVICES INC 2428 KANAWHA BLVD EAST CHARLESTON, WV 25311	55-0626556	501C(3)	5,100				GENERAL SUPPORT
MOUNT HOPE BAPTIST TEMPLE PO BOX 466 MOUNT HOPE, WV 25880	55-0579682	501C(3)	15,477				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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THE EDUCATION ALLIANCE-BUSINESS AND COMMUNITY FOR PUBLIC SCHOOLS 803 QUARRIER STREET CHARLESTON, WV 25301	55-0630914	501C(3)	26,000				GENERAL SUPPORT
WALKING MIRACLES 30 CARRIAGE WAY HURRICANE, WV 25526	36-4672568	501C(3)	15,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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THE GROUNDTRUTH PROJECT 10 GUEST STREET BOSTON, MA 02135	46-0908502	501C(3)	10,000				GENERAL SUPPORT
WV CITIZEN ACTION EDUCATION FUND 1500 DIXIE STREET CHARLESTON, WV 25311	11-3660992	501C(3)	56,000				GENERAL SUPPORT

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THE LIBRARY FOUNDATION OF KANAWHA COUNTY INC 123 CAPITOL STREET CHARLESTON, WV 25301	55-0739659	501C(3)	200,000				GENERAL SUPPORT
THE SECRET SANTA FOUNDATION INC PO BOX 3982 CHARLESTON, WV 25339	55-0708668	501C(3)	7,500				GENERAL SUPPORT

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THREE BRIDGES ARTS EXPERIENCE CORP 208 POPLAR POINT EST POCA, WV 25159	83-3108831	501C(3)	5,000				GENERAL SUPPORT
KANAWHA COUNTY BOARD OF EDUCATION 200 ELIZABETH STREET CHARLESTON, WV 25311	55-6000337	SCHOOL	17,600				GENERAL SUPPORT

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REA OF HOPE FELLOWSHIP HOME INC 1429 LEE STREET CHARLESTON, WV 25301	55-0784408	501C(3)	15,000				GENERAL SUPPORT
TRILLIUM COLLECTIVE LTD 867 COURT ST N LEWISBURG, WV 24901	55-0694400	501C(3)	5,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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TYLER MOUNTAIN CROSS LANES COMMUNITY SERVICES 5320 FRONTIER DRIVE CROSS LANES, WV 25313	55-0644279	501C(3)	18,000				GENERAL SUPPORT
COMMUNITY ACCESS INC 888 OAKWOOD RD SUITE 320 CHARLESTON, WV 25314	55-0718265	501C(3)	35,000				GENERAL SUPPORT

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UNITED WAY OF SOUTHERN WV INC 110 CROFT ST BECKLEY, WV 25801	55-0562858	501C(3)	50,000				GENERAL SUPPORT
WELLSPRING OF GREENBRIER INC 524 NICHOLAS STREET RUPERT, WV 25984			10,000				GENERAL SUPPORT

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WEST HAMLIN UNITED METHODIST CHURCH 118 LINCOLN STREET WEST HAMLIN, WV 25571	55-0659502	CHURCH	25,000				GENERAL SUPPORT
WEST VIRGINIA CENTER ON BUDGET AND POLICY INC 8 CAPITOL STREET 4TH FLOOR CHARLESTON, WV 25301	56-2653132	501C(3)	150,000				GENERAL SUPPORT

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WEST VIRGINIA CHILD ABUSE NETWORK 601 MORRIS ST SUITE 200 CHARLESTON, WV 25301	38-3784521	501C(3)	34,500				GENERAL SUPPORT
WEST VIRGINIA COUNCIL OF CHURCHES 2207 WASHINGTON STREET EAST CHARLESTON, WV 25311	55-3590196	501C(3)	20,000				GENERAL SUPPORT

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WEST VIRGINIA DEPARTMENT OF EDUCATION - WV SCHOOLS OF DIVERSION AND TRANSIT 1900 KANAWHA BOULEVARD EAST BUILDING 6 CHARLESTON, WV 25305	55-6000768	SCHOOL	10,200				GENERAL SUPPORT
WEST VIRGINIA FREE INC 1114 QUARRIER STREET CHARLESTON, WV 25301	55-0715930	501C(3)	30,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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WEST VIRGINIA HOME VISITATION PROGRAM (CORNERSTONE FAMILY INTERVENTIONS INC 350 CAPITOL STREET ROOM 427 CHARLESTON, WV 25143	55-0581968	501C(3)	75,000				GENERAL SUPPORT
CALDWELL PENTECOSTAL CHURCH PO BOX 95 CALDWELL, WV 24925	55-0625223	CHURCH	30,000				GENERAL SUPPORT

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WEST VIRGINIA LOCAL HEALTH INC (WVLHI) 176 DEER RIDGE FARM BARBOURSVILLE, WV 25504	55-0745648	501C(3)	100,000				GENERAL SUPPORT
WEST VIRGINIA PUBLIC BROADCASTING FOUNDATION INC 600 CAPITOL STREET CHARLESTON, WV 25301	55-0719285	501C(3)	35,000				GENERAL SUPPORT

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GREENBRIER EAST HOSA 273 SPARTAN LANE LEWISBURG, WV 24901	55-6000321	SCHOOL	10,000				GENERAL SUPPORT
GREENBRIER VALLEY AQUATIC CENTER 674 CHURCH ST LEWISBURG, WV 24901	83-0858673	501C(3)	475,000				GENERAL SUPPORT

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POLLEN8 INC PO BOX 8011 CHARLESTON, WV 25303	81-0777076	501C(3)	18,750				GENERAL SUPPORT
SCOTT HIGH SCHOOL 1 SKYHAWK PLACE MADISON, WV 25130	55-6000299	SCHOOL	7,486				GENERAL SUPPORT

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SOUTHERN APPLACHIAN LABOR SCHOOL PO BOX 127 KINCAID, WV 25119	55-0620198	501C(3)	16,500				GENERAL SUPPORT
THE WEBB SCHOOL PO BOX 488 BELL BUCKLE, TN 37020	62-0401875	501C(3)	15,477				GENERAL SUPPORT

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BIBLE CENTER CHURCH 100 BIBLE CENTER DRIVE CHARLESTON, WV 25309	55-0458932	501C(3)	15,000				GENERAL SUPPORT
ST MARK'S EPISCOPAL CHURCH 405 B STREET ST ALBANS, WV 25177	55-0486543	CHURCH	9,807				GENERAL SUPPORT

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TOWN OF ALDERSON-ALDERSON VOLUNTEER FIRE DEPARTMENT PO BOX 179 ALDERSON, WV 24910	55-6000141	GOVERNMENT ENTITY	10,000				GENERAL SUPPORT
WOMEN'S HEALTH CENTER OF WEST VIRGINIA INC PO BOX 20580 CHARLESTON, WV 20580	55-0559874	501C(3)	50,641				GENERAL SUPPORT

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KANAWHA INSTITUTE FOR SOCIAL RESEARCH & ACTION INC 131 PERKINS AVENUE DUNBAR, WV 25064	55-0727345	501C(3)	53,000				GENERAL SUPPORT
CODA MOUNTAIN ACADEMY OF MUSIC PO BOX 615 FAYETTEVILLE, WV 25840	46-2699615	501C(3)	42,650				GENERAL SUPPORT

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WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION 886 CHESTNUT RIDGE ROAD MORGANTOWN, WV 26506	55-0665758	501C(3)	5,929				GENERAL SUPPORT
WEST VIRGINIA VOLUNTARY ORGANIZATIONS ACTIVE IN DISASTER (WV VOAD) PO BOX 178 WILLIAMSTON, WV 25661	46-3022382	501C(3)	100,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WV AMERICAN CIVIL LIBERTIES UNION 405 CAPITOL STREET CHARLESTON, WV 25301	55-0681531	501C(3)	282,500				GENERAL SUPPORT
YOUNG LIFE KANAWHA VALLEY PO BOX 615 CHARLESTON, WV 25322	84-0385934	501C(3)	20,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL FEDERATION OF THE BLIND OF WEST VIRGINIA 833 CHAPELL RD CHARLESTON, WV 25304	55-6019542	501C(3)	8,000				GENERAL SUPPORT
YOUNG LIFE OF GREENBRIER COUNTY PO BOX 1330 LEWISBURG, WV 24901	84-6041371	501C(3)	7,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CABIN CREEK HEALTH SYSTEMS 104 ALEX LANE CHARLESTON, WV 25304	55-0709223	509A(1)	125,000				GENERAL SUPPORT
RECOVERY GROUP OF SOUTHERN WEST VIRGINIA INC 509 MAIN STREET LOGAN, WV 25601	46-4921739	501C(3)	30,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WV FOOD AND FARM COALITION 3820 MACCORKLE AVE SE CHARLESTON, WV 25304	46-2706460	509A(1)	110,000				GENERAL SUPPORT
HOUSING INNOVATIONS CORPORATION 1525 WASHINGTON STREET W CHARLESTON, WV 25302	59-3812040	501C(3)	32,100				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST VIRGINIA ORAL HEALTH COALITION PO BOX 11133 CHARLESTON, WV 25339	47-5292760	501C(3)	40,000				GENERAL SUPPORT
WEST VIRGINIA STATE UNIVERSITY RESEARCH & DEVELOPMENT CORPORATION 204 ACEOP ADMINISTRATION BLDG PO BOX 1000 INSTITUTE, WV 25112	55-0708567	501C(3)	23,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAIRNESS WEST VIRGINIA INSTITUTE 405 CAPITOL STREET SUITE 405 CHARLESTON, WV 25301	26-3991827	501C(3)	27,150				GENERAL SUPPORT
TEAM FOR WEST VIRGINIA CHILDREN INC 1002 THIRD AVENUE 3RD FLOOR HUNTINGTON, WV 25701	55-0663886	501C(3)	68,700				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MOUNTAINEER FOOD BANK INC 484 ENTERPRISE DRIVE GASSAWAY, WV 26624	55-0611100	501C(3)	115,975				GENERAL SUPPORT
NEW RIVER HEALTH ASSOCIATION 908 SCARBRO ROAD SCARBRO, WV 25917	55-0581968	501C(3)	70,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOODWILL INDUSTRIES OF KANAWHA VALLEY INC 215 VIRGINIA STREET WEST CHARLESTON, WV 25302	55-0380828	501C(3)	42,553				GENERAL SUPPORT
REBUILDING TOGETHER CHARLESTON PO BOX 2691 CHARLESTON, WV 25330	55-0753728	501C(3)	15,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE APPLACHIAN READING CENTER INC 429 THIRD AVENUE SOUTH CHARLESTON, WV 25303	20-0630486	501C(3)	83,250				GENERAL SUPPORT
ZION CHILD DEVELOPMENT CENTER INC 1720 5TH AVENUE CHARLESTON, WV 25387	27-2794180	501C(3)	142,050				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN FRIENDS SERVICE COMMITTEE 1501 CHERRY STREET PHILADELPHIA, PA 19102	23-1352010	501C(3)	150,000				GENERAL SUPPORT
AMERICAN RED CROSS 113 LAKEVIEW DRIVE CHARLESTON, WV 25313	53-0196605	501C(3)	45,245				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
APPALACHIAN CHILDREN'S CHORUS PO BOX 11342 CHARLESTON, WV 25339	55-0748791	501C(3)	9,500				GENERAL SUPPORT
BACKPACKBUDDYORG 145 WATERSIDE CIRCL WINFIELD, WV 25213	82-4678854	501C(3)	27,500				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BARN COMMUNITY GROUP 179 MEMORIAL DRIVE NELLIS, WV 25142	81-3325847	501C(3)	7,500				GENERAL SUPPORT
BIMBO COLES AND COMPANY PROJECT 1194 BARKLIN LANE LEWISBURG, WV 24901	82-4565624	501C(3)	5,779				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOB BURDETTE CENTER INC 1401 WASHINGTON STREET WEST CHARLESTON, WV 25387	55-0761069	501C(3)	50,000				GENERAL SUPPORT
BRIDGEVALLEY COMMUNITY AND TECHNICAL COLLEGE 2001 UNION CARBIDE DRIVE SOUTH CHARLESTON, WV 25303	27-1980955	SCHOOL	60,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CADCO FOUNDATION INC 1116 SMITH STREET CHARLESTON, WV 25301	55-0680725	501C(3)	37,000				GENERAL SUPPORT
CASA OF THE ELEVENTH JUDICIAL CIRCUIT WV INC 1046 WASHINGTON ST LEWISBURG, WV 24901	42-1528743	501C(3)	20,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR RURAL HEALTH DEVELOPMENT 75 CHASE DRIVE HURRICANE, WV 25526	55-0729764	501C(3)	34,300				GENERAL SUPPORT
CHARLESTON MAIN STREETS 1210 SMITH STREET 3RD FLOOR CHARLESTON, WV 25339	26-1857040	501C(3)	7,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHARLESTON MONTESSORI PO BOX 11875 CHARLESTON, WV 25339	27-2773110	501C(3)	10,000				GENERAL SUPPORT
CHARLESTON POLICE DEPARTMENT CITIZENS POLICE ACADEMY ALUMNI ASSOCIATION PO BOX 11016 CHARLESTON, WV 25339	84-3847465	501C(3)	5,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S THEATRE OF CHARLESTON PO BOX 11060 CHARLESTON, WV 25339	23-7441348	SCHOOL	12,500				GENERAL SUPPORT
CITY OF MONTGOMERY 706 THIRD AVENUE MONTGOMERY, WV 25136	55-6000213	GOVERNMENT ENTITY	37,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLAY COUNTY BOARD OF EDUCATION 285 CHURCH STREET CLAY, WV 25043	55-6000311	SCHOOL	50,000				GENERAL SUPPORT
CLAY COUNTY COMMISSION 246 MAIN STREET CLAY, WV 25043	55-6000310	GOVERNMENT ENTITY	8,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY CARE OF WEST VIRGINIA 122 CENTER ST CLAY, WV 25043	55-0599096	501C(3)	75,000				GENERAL SUPPORT
KANAWHA SALINES FOUNDATION 300 CAPITOL STREET CHARLESTON, WV 25301	81-1915737	501C(3)	15,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATURAL CAPITAL INVESTMENT FUND PO BOX 839 CHARLES TOWN, WV 25414	54-2058754	501C(3)	10,000				GENERAL SUPPORT

Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047
2020
Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization THE GREATER KANAWHA VALLEY FOUNDATION	Employer identification number 55-6024430
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Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax idemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	2	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
<input type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	No
b Any related organization?	5b	No
If "Yes," on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?	6a	No
b Any related organization?	6b	No
If "Yes," on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	No
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 MICHELLE FOSTER PRESIDENT AND CEO	(i)	199,427 -----	0 -----	0 -----	15,649 -----	12,626 -----	227,702 -----	0 -----
	(ii)	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----
2 KRISTIN MOUNTS CHIEF FINANCIAL OFFICER	(i)	149,458 -----	0 -----	0 -----	11,970 -----	11,513 -----	172,941 -----	0 -----
	(ii)	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----	0 -----

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
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**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2020

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990 for the latest information.**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
THE GREATER KANAWHA VALLEY FOUNDATION

Employer identification number
55-6024430

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous	X	6	1,876,238	FMV
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		No
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	Yes	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 32B:	THE SECURITIES ARE TRANSFERRED FROM THE DONOR TO THE FOUNDATION'S BANK. THE BANK WILL THEN SELL THE SECURITY AND PLACE THE PROCEEDS INTO THE FOUNDATION'S ACCOUNT.

SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2020**Open to Public Inspection**

Department of the Treasury

Name of the organization

THE GREATER KANAWHA VALLEY FOUNDATION

Employer identification number

55-6024430

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE FINAL VERSION OF THE FORM 990 IS EMAILED TO EACH BOARD MEMBER FOR REVIEW AND COMMENTS BEFORE THE FORM IS FILED.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE GOVERNING BOARD PROVIDES AN UPDATED LIST OF ORGANIZATIONS THEY ARE ASSOCIATED WITH THAT RECEIVE GRANTS FROM THE FOUNDATION. IF THE ORGANIZATION HAS SUBMITTED A GRANT REQUEST AND IS BEING VOTED ON TO RECEIVE FUNDING, THE BOARD MEMBER WILL ABSTAIN FROM VOTING ON THE GRANT AWARD DUE TO A CONFLICT OF INTEREST.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE GOVERNING BOARD REVIEWS DATA COMPILED FROM SURVEYS FROM SIMILAR ORGANIZATIONS WITHIN THE SAME ASSET RANGE FOR THE POSITION OF CEO, CFO AND ALL STAFF. THIS PROCESS IS DONE ANNUALLY AND WAS LAST PERFORMED IN DECEMBER 2020.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE FOUNDATION MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE FOR PUBLIC INSPECTION AT REGULAR BUSINESS HOURS AT ITS PRINCIPAL OFFICE. THE FOUNDATION'S FINANCIAL STATEMENTS ARE AVAILABLE FOR REVIEW AND/OR DOWNLOAD ON ITS WEBSITE AT WWW.TGKVF.ORG .

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	2020 CONTRIBUTIONS TO ORGANIZATIONAL FUNDS -52,188. 2020 GRANTS MADE FROM ORGANIZATIONAL FUNDS 291,818. 2020 EXPENSES PAID FOR ORGANIZATIONAL FUNDS 61,358.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 2C:	THE FOUNDATION HAS AN AUDIT COMMITTEE THAT HANDLES THE PROCESS OF OVERSIGHT OF THE AUDIT OF THE FINANCIAL STATEMENTS AND THE SELECTION OF AN INDEPENDENT AUDITOR. THIS PROCESS HAS NOT CHANGED SINCE PRIOR YEAR.