

Return of Organization Exempt From Income Tax

2013

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.

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2013 calendar year, or tax year beginning, 2013, and ending, 20

B Check if applicable: Address change, Name change, Initial return, Terminated, Amended return, Application pending. C Name of organization BARBOUR COUNTY COMMUNITY FOUNDATION. D Employer identification no. 31-1529922. E Telephone number (304) 823-3101. F Name and address of principal officer: ROGER BOLTON, CRIM AVENUE, BELINGTON, WV 26250.

I Tax-exempt status: 501(c)(3) selected. J Website: N/A. K Form of organization: Corporation selected. L Year of formation: 1998. M State of legal domicile: WV.

H(a) Is this a group return for subordinates? No selected. H(b) Are all subordinates included? No selected. H(c) Group exemption number.

Part I Summary

1 Briefly describe the organization's mission or most significant activities: COMMUNITY FOUNDATION

Table with 2 columns: Description and Amount. Rows include: 2 Check this box, 3-6 Number of members/volunteers, 7a-7b Revenue and taxable income.

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 8-12 Revenue items (Contributions, Program service, Investment, Other, Total).

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 13-19 Expense items (Grants, Benefits, Salaries, Fundraising, Other, Total, Revenue less expenses).

Table with 3 columns: Description, Beginning of Current Year, End of Year. Rows include: 20-22 Net Assets or Fund Balances (Total assets, Total liabilities, Net assets).

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 ROGER BOLTON, PRESIDENT. Date: 01-14-2016.

Paid Preparer Use Only: Preparer's name MELODY JONES, signature, date 01-14-2016, PTIN P00217050, firm name MELODY JONES CPA, EIN 550730109, address 304 BROWN AVENUE, BELINGTON WV 26250, phone 304-823-3101.

May the IRS discuss this return with the preparer shown above? (see instructions) Yes selected.

Return of Organization Exempt From Income Tax

2014

Department of the Treasury Internal Revenue Service

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

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Open to Public Inspection

A For the 2014 calendar year, or tax year beginning , 2014, and ending , 20

Form header section containing organization details: B Check if applicable, C Name of organization BARBOUR COUNTY COMMUNITY FOUNDATION, D Employer identification no. 31-1529922, E Telephone number (304) 823-3101, F Name and address of principal officer: ROGER BOLTON, CRIM AVENUE, BELINGTON, WV 26250, H(a) Is this a group return for subordinates? No, H(b) Are all subordinates included? No, H(c) Group exemption number, J Website: N/A, K Form of organization: Corporation, L Year of formation: 1998, M State of legal domicile: WV

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1 Briefly describe the organization's mission or most significant activities: COMMUNITY FOUNDATION, 2-7a Activities & Governance, 8-12 Revenue, 13-19 Expenses, 20-22 Net Assets or Fund Balances.

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.

Signature block section: Sign Here, Signature of officer: ROGER BOLTON, PRESIDENT, Date: 01-15-2016

Paid Preparer Use Only section: Print/Type preparer's name: MELODY JONES, Preparer's signature: Melody Jones, Date: 01-15-2016, Check self-employed: Yes, Firm's name: MELODY JONES CPA, Firm's address: 304 BROWN AVENUE, BELINGTON WV 26250, Firm's EIN: 550730109, Phone no.: 304-823-3101

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.