COMMITTEE ON NATURAL RESOURCES

Disclosure Form

As required by and provided for in House Rule XI, clause 2(g) and the Rules of the Committee on Natural Resources

[Insert title and date of hearing]

"Jobs	at	Risk:	Community	Impac	ts	of '	the	Obama	Administration'	s	Efforts	to	Rewrite
			/	the	Str	eam	Buf	fer Z	one Rule"				

For Individuals:	:			
1. Name:				
2. Address:				
3. Email Address:				
4. Phone Number:				

For Witnesses Representin	g Organizations:			
1. Name: JASON D	. BOSTIC	· .		
	tion(s) You are Rep		he Hearing:	
3. Business Address:	PO BOX 3923 Charleston WV	25339	200 Association Charleston, WV	Dr., Ste. 160 25311
4. Business Email Ad	dress:			
5. Business Phone Nu	mber:			,

Name/Organization West Virginia Coal Association

Title/Date of Hearing Jobs at Risk -- Community Impacts of the Obama Administration's

Efforts to Rewrite the Stream Buffer Zone Rule
September 26, 2011

- a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.
 - 10 years experience as primary coal industry representative dealing with issues of environmental regulations before state and federal agencies, WV Legislature and Congress
- b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

None

c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing.

Vice Presient with primary responsibility for environmental regulations and permitting (state and federal). West Virginia Coal Association

d. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (and /or other agencies invited) that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

None

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed.

None

f. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

Life-long resident of West Virginia from a family with generations of coal miners. Worked as a coal miner management trainee while attending college.

Name/Organization Jason Bostic/West Virginia Coal Association

Title/Date of Hearing Jobs at Risk -- Community Impacts of the Obama Administration's

Efforts to Rewrite the Stream Fubber Zone Rule

September 26, 2011

In addition, for witnesses representing organizations:

g. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

Member, Board of Directors, WV Water Research Institute Appointment -- Special Committee on Post-Mining Land Us.

h. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>and /or other agencies invited</u>) that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

Non

i. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

j. A list of any countries from which the organization(s) you represent at the hearing have received foreign donations and the total amount of donations received from each country, for the current year and the previous four years, by each organization.

None

k. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)).

Attached

Public Disclosure Copy **Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

benefit trust or private foundation) The organization may have to use a copy of this return to satisfy state reporting requirements.

A	For th	ne 2009 calendar year, or tax year beginning an	d ending								
В	Check i applicat	if Please C Name of organization		D Employer identifica	ation number						
	Addr		c.								
	Nam chan	ne type 5 5	······································	55-03	07050						
	Initia retur	See Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number							
	Term ated	P.O. Box 3923		(304)	342-4153						
		nded tions.		G Gross receipts \$	3,260,758.						
	Appl tion	Charlescon, WV 20029		H(a) Is this a group reti	um						
	pend	F Name and address of principal officer:William B. Raney		for affiliates?	Yes X No						
		same as C above		H(b) Are all affiliates inclu	ded? Yes No						
1	Tax-ex	xempt status: X 501(c) (6) ◀ (insert no.) 4947(a)(1) or 52	7	If "No," attach a lis	st. (see instructions)						
<u>J</u> 1	Webs	ite:▶ www.wvcoal.com		H(c) Group exemption	number 🕨						
***************************************	Form c	of organization: X Corporation Trust Association Other >	L Year	of formation: 2000 M	State of legal domicile: WV						
	1	Briefly describe the organization's mission or most significant activities: To	promote	the utiliza	tion of						
Governance	1 *	coal and the resulting social and econor			· · · · · · · · · · · · · · · · · · ·						
ı,	2	Check this box if the organization discontinued its operations or disp			ets.						
×e	3	· · · · · · · · · · · · · · · · · · ·		3	33						
Ö	4	Number of independent voting members of the governing body (Part VI, line 1b			33						
8	5	Total number of employees (Part V, line 2a)			4						
йtie	6	Total number of volunteers (estimate if necessary)			0						
Activities &	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12		7a	16,000.						
⋖	b				-3,316.						
				Prior Year	Current Year						
Φ	8	Contributions and grants (Part VIII, line 1h)		80,500.							
nu.	9	Program service revenue (Part VIII, line 2g)		3,008,056.	3,216,137.						
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		12,768.	3,749.						
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		10,000.	40,872.						
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,111,324.	3,260,758.						
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		4,000.	4,000.						
	14	Benefits paid to or for members (Part IX, column (A), line 4)									
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10))	635,411.	695,858.						
Expenses	16a	a Professional fundraising fees (Part IX, column (A), line 11e)									
×pe	b	o Total fundraising expenses (Part IX, column (D), line 25)			**************************************						
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		2,029,848.	2,475,050.						
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,669,259.	3,174,908.						
	19	Revenue less expenses. Subtract line 18 from line 12		442,065.	85,850.						
Net Assets or Fund Balances			Ве	eginning of Current Year	End of Year						
sset	20	Total assets (Part X, line 16)		1,050,920.	1,303,526.						
A PE	21	Total liabilities (Part X, line 26)	.,.,	185,934.	338,895.						
N.	22	Net assets or fund balances. Subtract line 21 from line 20	,,	864,986.	<u>964,631.</u>						
Pa	art II										
		Under penalties of perfury, I deciare that I have exampled this return, including accompanying schedules and complete. Declaration of preparer (other than officer) is based on all information of which preparer has	and statements, s any knowledge	and to the best of my knowledge	and belief, it is true, correct,						
		Carlle K 1/2		1 11/0/	r s da						
Sig		Signature of Officer		Date/							
Her	e			Duto							
		William B. Raney, President Type or print name and title									
Paic	4	Preparer's Date			's identifying number ructions)						
	ı parer's	signature employed employed									
	only	yours if Arnett' Foster, P.L.L.C.	1	EIN >							
ಗಾರ	Omy	self-employed), P. O. Box 2629									
		ZIP+4 Charleston, WV 25329		Phone no. ► (3	<u>304) 346-0441</u>						
May	y the I	IRS discuss this return with the preparer shown above? (see instructions)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		X Yes No						

	n 990 (2009) ert III Statemer	West Virgini of Program Service Ac	a Coal Association, Inc	55-030	07050	Page 2
1	···		one			
2	Did the organization	on undertake onu ejenificant prod	PDM convices display the second field			···
<i>-</i>	the prior Form 990		ram services during the year which were not		Yes	X No
3	Did the organization		nificant changes in how it conducts, any pro	gram services?	Yes	X No
4	Section 501(c)(3) a	and 501(c)(4) organizations and s	ch of the organization's three largest program ection 4947(a)(1) trusts are required to report ue, if any, for each program service reported	the amount of grants and		
4a	(Code: N/A) (Expenses \$	including grants of \$) (Revenue \$,
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other programserv	ices. (Describe in Schedule O.)				
10	(Expenses \$	including grant	s of \$) (Revenue \$)		

					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			1		X			
2	Is the organization required to complete Schedule B, Schedule of Contributors?			2		X			
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to cand	dates fo	or	ĺ					
	public office? If "Yes," complete Schedule C, Part I			3	<u> </u>	X			
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule		Ш	4					
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. is the organization subject to the section 6033(e) notice.								
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III			5	X				
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the re-								
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Scheo	lule D, F	Part I	6		X			
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,					Ì			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			7		X			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," cor								
	Schedule D, Part III			8		X			
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or part	rovide							
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D,	art IV		9		X			
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowm								
	If "Yes," complete Schedule D, Part V			10		X			
11	is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VII	, IX, or .							
	as applicable			11	X				
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,								
	Part VI.								
•	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.								
8	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its	total				20 a 64 20 a 65			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.								
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets report	rted in		Hayri V. Tytava					
	Part X, line 16? If "Yes," complete Schedule D, Part IX.								
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.								
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that address	sses							
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			-447.3 -XXV					
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," comple	e	ļ			\$18.			
	Schedule D, Parts XI, XII, and XIII.			12	X				
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes	No			A Ser			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional		X			534531			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			13		X			
14a	Did the organization maintain an office, employees, or agents outside of the United States?			14a		X			
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	ousines	s,						
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I			14b		X			
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	ation							
or entity located outside the United States? If "Yes," complete Schedule F, Part II									
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to in	dividua	ls			<u>X</u>			
	located outside the United States? If "Yes," complete Schedule F, Part III	· · · · · · · · · · · · · · · · · · ·	}	16		X			
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			17		X			
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part	/III, line:	s [
	1c and 8a? If "Yes," complete Schedule G, Part II	*********		18		X			
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII. line 9a? If "Yes	н							
	complete Schedule G, Part III			19		X			
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H			20		X			

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Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 X Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III X 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete Schedule J 23 X 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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 X 24a 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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a 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? If "Yes," complete Schedule L, Part I 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified 26 person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II X 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete X Schedule L, Part III 27 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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV X 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was X an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M X 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M X 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I X 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II X 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I \mathbf{X} 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 X 34 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 X 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Note, All Form 990 filers are required to complete Schedule O.

X

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009) West Virginia Coal Association, Inc. 55-0307050 Page 5
Statements Regarding Other IRS Filings and Tax Compliance Form 990 (2009) Part V

						Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of						
	U.S. Information Returns. Enter -0- if not applicable	1a	1	.6			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b		0		id sad	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eport	able gaming			2.14	
	(gambling) winnings to prize winners?	· · · · · · · · · · · · · · · · · · ·		. L	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
	filed for the calendar year ending with or within the year covered by this return	2a		4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. L	2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	instru	ictions)	1	249	包装	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	d by	this return?		За	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			. L	3b	X	<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	rity over, a				
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	.nt)?	. L	4a		X
b	If "Yes," enter the name of the foreign country:					Œ.	
	See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign	Bank	and				
	Financial Accounts.						41-9
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	action'	?	. L	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega	irding	Prohibited				
	Tax Shelter Transaction?				5c		
6а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne org	anization solicit				
	any contributions that were not tax deductible?				6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ions o	or gifts				
	were not tax deductible?			. L	6b		
7	Organizations that may receive deductible contributions under section 170(c).					eg Sid	图 40
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods	s and services	l			
	provided to the payor?		,		7a	·	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		//-///		7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as rec	quired				
	to file Form 8282?		······	.	7c	-	
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	· · · · · · · · · · · · · · · · · · ·	_			i A.Y.
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a property of the property of the pay premiums on a property of the property of the pay premiums on a property of the pay premium of the	ersor	nal				1886
	benefit contract?		********************		7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit continuous			ļ	7f		
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required'				7g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0			. -	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or				ķ.	1	
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exc		-			2014	Austria.
_	at any time during the year?				8		
9	Sponsoring organizations maintaining donor advised funds.			- 1		Dr. No	Projection (
	Did the organization make any taxable distributions under section 4966?				9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?			.	9b		<u> </u>
	Section 501(c)(7) organizations. Enter:		I				
	Initiation fees and capital contributions included on Part VIII, line 12	10a		-			
		10b	1				
	Section 501(c)(12) organizations. Enter:		I		60.0		
	Gross income from members or shareholders	11a					
	Gross income from other sources (Do not net amounts due or paid to other sources against						
	amounts due or received from them.)	11b	<u> </u>	-	.	4, 7,3	20 1 TV. 1
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form If "Yes." enter the amount of tax-exempt interest received or accrued during the year		1	F-	12a		
IJ	** * *** The amount of tax-exempt interest received of accrued during the year	12h	3	1	- 1		1

Form 990 (2009) West Virginia Coal Association, Inc. 55-0307050 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

		1 1		Yes	No
_	Enter the number of voting members of the governing body	<u>1a</u>	33		201
b	Enter the number of voting members that are independent		33		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation		f etc.	# 1441	1.3
_	officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under	•	i		
	of officers, directors or trustees, or key employees to a management company or other person?				X
4	Did the organization make any significant changes to its organizational documents since the prior			-	X
5	Did the organization become aware during the year of a material diversion of the organization's as				X
6	Does the organization have members or stockholders?		6_		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more				
	governing body?				X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other particles and the governing body subject to approval by members, stockholders, or other particles are approval by members.		7b	ļ	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	en during the year			
	by the following:		1000		
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be	reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		X
Sec.	tion B. Policies (This Section B requests information about policies not required by the Interna	l Revenue Code.)			
				Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of suc	ch chapters, affiliate:	з,		
	and branches to ensure their operations are consistent with those of the organization?		10b		İ
11	Has the organization provided a copy of this Form 990 to all members of its governing body before	e filing the form?	11		X
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			18.7	1,5
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		12a		Х
b	Are officers, directors or trustees, and key employees required to disclose annually interests that of	could give rise			
	to conflicts?		12b		1
¢	Does the organization regularly and consistently monitor and enforce compliance with the policy?	If "Yes," describe			
	in Schedule O how this is done		12c		
13	Does the organization have a written whistleblower policy?		13		X
14	Does the organization have a written document retention and destruction policy?				X
15	Did the process for determining compensation of the following persons include a review and appre	oval by independent	BAC.		9.4
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	n?	[25]		
а	The organization's CEO, Executive Director, or top management official		15a		X
b	Other officers or key employees of the organization				X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)				
l6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranç	gement with a			100
	taxable entity during the year?		16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to e	valuate its participat	ion		
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the o	rganization's			1
	exempt status with respect to such arrangements?				į
ect	ion C. Disclosure				
7	List the states with which a copy of this Form 990 is required to be filed None				
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	D-T (501(c)(3)s only) a	available for		
	public inspection. Indicate how you make these available. Check all that apply.				
	Own website Another's website X Upon request				
9	Describe in Schedule O whether (and if so, how), the organization makes its governing documents	, conflict of interest	policy, and fin	ancial	
	statements available to the public.	'			
	State the name, physical address, and telephone number of the person who possesses the books	and roopeds of the	nranization:	-	
0.	orate the name, physical address, and telephone number of the person who possesses the books	and records or the	or gamzanom, s	_	

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

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. Use Schedule J-2 if additional space is needed.
- 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. See instructions for definition of "key employee."

Check this box if the organization did not compensate any current officer, director, or trustee

- 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, and 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)		(C)			***************************************		(D)	(E)	(F)
Name and Title	Average		Position (check all that apply)		Reportable	Reportable	Estimated			
	hours	(cl	neck	k all t	that	app	ly)	compensation	compensation	amount of
	per week	ndividual trustee or director	ļ					from the	from related organizations	other compensation
		10 to	8			pape		organization	(W-2/1099-MISC)	from the
		rustee	trust		94	Suadu		(W-2/1099-MISC)	,	organization
		duata	nstitutional trustee	_	Key employee	Highest compensated employee	<u></u>			and related
		hidivi	Institic	Officer	Key e	Highe	Ротте			organizations
James O. Bunn										
Chairman	0.50	X						0.	0.	0.
Kevin S. Crutchfield										
<u>1st Vice Chairman</u>	0.50	X					ĺ	0.	0.	0.
Gary G. White										
<u>2nd Vice Chairman</u>	0.50	Х						0.	0.	0.
Ben Hatfield										
Secretary	0.50	X					ļ	0.	0.	0.
John Snider										
Assistant Secretary	0.50	X						0.	0.	0.
Paul Vining										
Treasurer	0.50	X						0.	0.	0.
James L. Laurita Jr.										
Assistant Treasurer	0.50	X						0.	0.	0.
Daniel T. Pochick									:	
Associate Division Chair	0.50	Х				ļ		0.	0.	0.
Andrew Jordan										
Immediate Past Chairman	0.50	X						0.	0.	0.
Jim Bunn II	0 50									_
Member	0.50	X						0.	0.	0.
Nick Carter Member	0 50									_
Donald R. Donell	0.50	Х						0.	0.	0.
Member	0.50	х							^	^
Patrick C. Graney III	0.50	Δ						0.	0.	0.
Member	0.50	v						0.	0.	0
Ralph Hamilton	0.50	<u>A</u>						V •	V.	0.
Member	0.50	х						0.	0.	0.
Warren Hylton	0.50	21		-					U •	<u> </u>
Member	0.50	x		ŀ				0.	0.	0.
Greg Jessee					•				0.	<u> </u>
Member	0.50	x	ļ					0.	0.	0.
James C. Justice II										
Member	0.50	Х	<u> </u>					0.	0.	0.
			_		_					000

rustees, Key E (B)	mple	oyee	s, a	nd l	⊣iah	est	Compensated Employ	ees (continued)	
(15)								[
1 ' '			_ ((-			(D)	(E)	(F)
							'	'	Estimated
	<u> </u>	necr	alit	inat	app	1y)		,	amount of other
	ector						1		compensation
7.001	or dig	93			ated				from the
	ustee	truste		93	bens		(W-2/1099-MISC)	,	organization
	sal tr	ienal		yold	tcon /ee				and related
	Individ	Institut	Officer	Кеуеп	Highes employ	Former			organizations
0.50	X						0.	0.	0.
0.50	X						0.	0.	0.
0.50	X						0.	0.	. 0.
0.50	X						0.	0.	0.
0.50	X						0.	0.	0.
0.50	X						0.	0.	0.
						ļ		***************************************	
0.50	X						0.	0.	0.
						į			•
0.50	X						0.	0.	0.
				}					
0.50	X						0.	0.	0.
						-			
0.50	Х							0.	0.
		-/			>				5,915.
	0.50 0.50 0.50 0.50 0.50 0.50	hours per week veek veek veek veek veek veek veek	hours per week	hours per week Check all Per week Per	hours per week 1012011	hours per week (check all that app per week and property of the per week and per week and property of the per week and per week a	hours	hours	hours per week

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

3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on		14797	11.10.2.1
	line 1a? If "Yes," complete Schedule J for such individual	3	X	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization	g Williams		Sar to
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to	\$10.25	7.473	i de la composition della comp
	the organization? If "Yes," complete Schedule J for such person	5		X

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
Jackson Kelly, PLLC PO Box 11276, Charleston, WV 25339	Legal	124,446.
Spillman Thomas and Battle, 300 Kanawha Blvd. E. #100, Charleston, WV 25301	Legal	114,872.

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

Form 990 (2009) West Virginia Coal As Part VIII Statement of Revenue			ssociation,	Inc.	<u>55-0307</u>	050 Page 9			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants	1	b c d e f	Membership dues Fundraising events Related organizations	1c 1d 1d 1e 1e 1f 1a-1f: \$					
Program Service Revenue	2	b c d e	Member dues Meetings All other program service reve		813920 813920	2641422. 574,715.	2641422. 574,715.		
			Total. Add lines 2a-2f			3216137.			. #EQ#6.ecs/a Zar
000000	3 4 5		Investment income (including other similar amounts)	exempt bond p	proceeds	3,749.			3,749.
	6	b	Gross Rents Less: rental expenses Rental income or (loss)	(i) Real	(ii) Personal				
	7	a b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	(i) Securities	(ii) Other				
Other Revenue	8 :	d Net gain or (loss) a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 & b Less: direct expenses b. Net income or (loss) from fundraising events							
- Part of the same	Ŀ	a b c	Gross income from gaming ac Part IV, line 19 Less: direct expenses Net income or (loss) from gami Gross sales of inventory, less	tivities. See a b ing activities					
	ŀ	b	and allowances Less: cost of goods sold Net income or (loss) from sales Miscellaneous Revenue	a b of inventory	Puginger Code				
	11 a	o C	MTM Coalition R Publication Inc Auto Fair	eimburs ome	Business Code 900099 900099 900099	23,872. 16,000. 1,000.		16,000.	23,872.
2700	12	€	All other revenue Total. Add lines 11a-11d Total revenue. See instructions.			40,872. 3260758.	3216137.	16,000.	28,621.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete columns (A) but are not required to complete columns (B) (C) and (D)

	All other organizations must comp			· · · · · · · · · · · · · · · · · · ·	
	not include amounts reported on lines 6b, 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 governments and				
	organizations in the U.S. See Part IV, line 21	4,000.			
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,			00 W 340 850 540 B	
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16			· 漢字 图象字列 表示字	[15] [15] [15] [15] [15] [15] [15] [15]
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	188,138.			
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	262,759.			
8	Pension plan contributions (include section 401(k)	20211336			
Ŭ	and section 403(b) employer contributions)	29,312.			
9	Other employee benefits	183,640.			
10		32,009.			
	Payroll taxes Fees for services (non-employees):	32,009.			
11		,			
	Management	250 405			
	Legal	258,495.			
	Accounting	36,017.			
d	Lobbying		NAME OF THE AND ADDRESS OF THE ANALYSIS	es presidentes de la compania de la	
е	Professional fundraising services. See Part IV, line 17			April 1914 - Albert 1914 - Albert 1914	
f	Investment management fees				
g	Other	205,450.			
12	Advertising and promotion				
13	Office expenses	60,661.			
14	Information technology	14,411.			
15	Royalties		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
16	Occupancy	62,131.			
17	Travel	71,682.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	573,554.			
20	Interest				
21	Payments to affiliates		——————————————————————————————————————		
22	Depreciation, depletion, and amortization	9,988.			
23	Insurance	8,543.			
24	Other expenses, Itemize expenses not covered				
	above. (Expenses grouped together and labeled				
	miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				20 000
а	Public relations	1,087,199.			
	Bad debts	65,016.		, , , , , , , , , , , , , , , , , , , ,	
c	Contributions	11,142.			
ų	Dues and subscriptions	8,564.	***************************************		
	Other taxes	2,197.			
	All other expenses	• الكبريك			
	Total functional expenses. Add lines 1 through 24f	3,174,908.			
		3,1/4,308.		······································	
26	Joint costs. Check here Jif following	Laboration			
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

Balance Sheet Part X (A) (B) Beginning of year End of year 532,201. 850,141. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 250,235. 2 251,352. Pledges and grants receivable, net 3 3 4 Accounts receivable, net 233,892. 162,019. 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L ត Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and déferred charges 14.835. 26,599. 9 10a Land, buildings, and equipment: cost or other 68,485. basis. Complete Part VI of Schedule D 10a 55,070. 19,382. b Less: accumulated depreciation 10b 10c 13,415. Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 Other assets. See Part IV, line 11 375. 15 0. 15 1,050,920. 303,526. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 Accounts payable and accrued expenses 130,752. 17 280,382. 17 18 Grants payable 18 19 Deferred revenue 17,127. 19 Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D .iabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities. Complete Part X of Schedule D 55,182. 41,386. 25 Total liabilities. Add lines 17 through 25 185,934. 338,895. 26 Organizations that follow SFAS 117, check here 🕨 🗓 and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 864,986. 27 964,631. Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here
and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32

Total net assets or fund balances

Total liabilities and net assets/fund balances

303,526. Form **990** (2009)

964,631.

864,986.

050,920.

33

-		······	2009) West Virginia Coal Association, Inc. 55-0307	050	Pa	ge 12
1	Par	t XI	Financial Statements and Reporting	·	•	
					Yes	No
	1	Acco	unting method used to prepare the Form 990: Cash Accrual X Other Modified accr	- 4.		1, 1-1
		If the	organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			1. 2.
	2a	Were	the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	b	Were	the organization's financial statements audited by an independent accountant?	2b	X	
	C	lf "Ye	es" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
		reviev	w, or compilation of its financial statements and selection of an independent accountant?	2c		X
		If the	organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
	d	If "Yes	s" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a	1 A 4 1 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A		3.4
			plidated basis, separate basis, or both:			
		X	Separate basis Consolidated basis Both consolidated and separate basis			
	За .	Asar	result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
		Act ar	nd OMB Circular A-133?	3a		X
	b	f "Yes	s," 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.

Form **990** (2009)

3b

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ. See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

- Section 30 (C/O) Organizations. Complete Parts FA and B. Do not complete Part FC.

- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

	Section 5	01(c)(4), (5), or (6) organiza	tions: Complete Part III.							
Nan	ne of orga	nization				Emplo	yer ide	ntification	numb	er
		West Vi	rginia Coal Ass	ocíation, Ir	nc.		55-	03070	50	
Pe	irt I-A	Complete if the org	ganization is exempt un	der section 501(c) or is a section 5	27 or	ganiza	ation.	***************************************	
1	Provide a	a description of the organi	zation's direct and indirect polit	ical campaign activities	s in Part IV.				***************************************	
2	Political e	expenditures				▶ \$				
Pa	rt I-B	Complete if the org	ganization is exempt un	der section 501(c)(3).					
1	Enter the	amount of any excise tax	incurred by the organization un	nder section 4955		> \$_				
2	Enter the	amount of any excise tax	incurred by organization mana-	gers under section 495	55	▶ \$_				
			on 4955 tax, did it file Form 472					Yes	\square N	0
4a	Was a co	rrection made?			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		🗀	Yes		0
		describe in Part IV.								
			ganization is exempt un	· · · · · · · · · · · · · · · · · · ·						
			d by the filing organization for s			▶ \$ _				
2			ization's funds contributed to c	-						
						▶ \$_				
3		· ·	s. Add lines 1 and 2. Enter here		*					
			***************************************					1		
			1120-POL for this year?					Yes	N	0
5			nployer identification number (E							
			he amount paid from the filing							
			ivered to a separate political or d, provide information in Part IV		eparate segregated tun-	d or a	political	action co	mmittee	ż
	(1710): 111	· · · · · · · · · · · · · · · · · · ·								
		(a) Name	(b) Address	(c) EIN	(d) Amount paid fr filing organization			nount of p itions rece		لم
					funds. If none, ente	1		ptly and d		.u
								red to a se		
						Ì		cal organi: one, ente		
							11 1:	Olie, ellie	0	
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For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. LHA

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 West Virginia Coal Association, Inc. 55-0307050 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

			a)		((b)
		Yes	1	No	Am	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or			400		ri e batan di de
	local legislation, including any attempt to influence public opinion on a legislative matter		112.71	er Profit in		
	or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C					:	***************************************
d						
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?			***************************************		
g	met a construction of the					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					,
i	Other activities? If "Yes," describe in Part IV					
j	Total. Add lines 1c through 1i	10.00 M 10.00 M	37. SA	il vai		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ART art	
b	If "Yes," enter the amount of any tax incurred under section 4912	111111	0.60	1.4855		
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	7 6 V 18 V				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				(and)Jaky	
Par	t III-A Complete if the organization is exempt under section 501(c)(4), secti	on 501(c)	(5),	or se	ction	
	501(c)(6).			,		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		X
1	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?			1 2		X
3	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1	on 501(c)	(5),	2 3 or se	X ection	X
3	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? t:III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa "Yes."	on 501(c) rt III-A, li	(5), ne 3	2 3 or se is a	X ection nswered	X
з Par	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa "Yes." Dues, assessments and similar amounts from members	on 501(c) rt III-A, li	(5), ne 3	2 3 or se	X ection nswered	X
3 Par	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **III-B*** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	on 501(c) rt III-A, li	(5), ne 3	2 3 or se is a	X ection nswered	X
3 Par 1 2	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **III-B*** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	on 501(c) rt III-A, li	(5), ne 3	2 3 or se is a	X ection nswered 2,64	X 1
3 Par 1 2	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? t:III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	on 501(c) rt III-A, li	 (5), ne 3	2 3 or se is a	X ection nswered 2,64	X
3 Par 1 2 a b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **III-B*** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	on 501(c) rt III-A, li	(5), ne 3	2 3 or se is a 1 2 2a 2b	X ection nswered 2,64	X 1,422. 4,815.
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Schedule C (Form 990 or 990-EZ) 2009 Part II-A Complete if the or	West Virgi	nia Coal As	sociation, on 501(c)(3) and fi	Inc. 55-0	307050 Page 2
(election under se	ction 501(h)).		(-)(-)		
A Check ▶ ☐ if the filing organiz	ation belongs to an aff	iliated group.			
B Check Lifthe filing organiz	ation checked box A a	nd "limited control" pr	ovisions apply.		
	nits on Lobbying Expe nditures" means amo)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to in	fluence public opinion	(grass roots lobbying)			
b Total lobbying expenditures to in	fluence a legislative bo	dy (direct lobbying)	***************************************		
c Total lobbying expenditures (add	lines 1a and 1b)				
d Other exempt purpose expenditu	res	****************************			
e Total exempt purpose expenditur	es (add lines 1c and 1d	d)	*************************		
f Lobbying nontaxable amount. En	ter the amount from th	e following table in bo	th columns,		
If the amount on line 1e, column (a)	or (b) is: The lob	bying nontaxable am	ount is:		
Not over \$500,000	20% of	the amount on line 1e	,		
Over \$500,000 but not over \$1,00	00,000 \$100,00	00 plus 15% of the exc	cess over \$500,000.		
Over \$1,000,000 but not over \$1,		00 plus 10% of the exc	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17	7,000,000 \$225,00	00 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000,	000.			
g Grassroots nontaxable amount (e	nter 25% of line 1f)		,,,,		
h Subtract line 1g from line 1a. If ze					
i Subtract line 1f from line 1c. If zer					
j If there is an amount other than zo		line 1i, did the organiz	ation file Form 4720	_	
reporting section 4911 tax for this	year?				Yes No
(Some organi	zations that made a s	eraging Period Under ection 501(h) election e instructions for line	Section 501(h) n do not have to comp es 2a through 2f on pa	olete all of the five	
	Lobbying Exper	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					p.v.
d Grassroots nontaxable amount					
e Grassroots ceiling amount			James de la companya		
(150% of line 2d, column (e))					
(o))				e governmente (ar her	
f Grassroots Johbying expenditures		•			

Schedule C (Form 990 or 990-EZ) 2009

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public

Name of the organization Employer identification number West Virginia Coal Association, Inc. 55-0307050 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year _____ Aggregate contributions to (during year) 2 Aggregate grants from (during year) Aggregate value at end of year 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? 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" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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. Held at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) _________2c Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ 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)? In Part XIV, 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" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, 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 (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

-		<u>rginia Coa</u>					<u> 55 – 03</u>			
Pa	rt III Organizations Maintaining (······································		***************************************						
3	Using the organization's acquisition, access (check all that apply):	ion, and other recor	ds, check any of th	e following th	at are a s	significant	use of its	collectio	า item	!S
а	Public exhibition	(Loan or ex	kchange progi	ams					
b	Scholarly research	•								
c	Preservation for future generations							······································		
4	Provide a description of the organization's c	ollections and expla	in how they further	the organizat	ion's exe	empt purpo	ose in Par	t XIV.		
5	During the year, did the organization solicit of									
	to be sold to raise funds rather than to be m	aintained as part of	the organization's	collection?	, , ,			Yes		No
Pa	rt IV Escrow and Custodial Arran reported an amount on Form 990, Pa		lete if organization	answered "Ye	s" to Fo	rm 990, Pa	rt IV, line	9, or		
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for contribution	ons or other a	ssets no	t included			***************************************	***************************************
	on Form 990, Part X?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						Yes		No
b	If "Yes," explain the arrangement in Part XIV									
								Amount		
C	Beginning balance			,		1c				
d	Additions during the year								***************************************	
e	Distributions during the year									
f	Ending balance		*********************	. , , , , , , , , , , , , , , , , , , ,		1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21?				, , , , , , , , , , , , ,	Yes		No
	If "Yes," explain the arrangement in Part XIV									
га	rt V Endowment Funds. Complete		nswered "Yes" to F	form 990, Pari						
		(a) Current year	(b) Prior year	(c) Two year	rs back	(d) Three y	ears back	(e) Four	years	<u>back</u>
la	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			Bee Easter		ALTYF BIRT				
b	Contributions			1988 VA-164. A				PARKATE	1820-119	Q93(9)*
C	Net investment earnings, gains, and losses									
ď	Grants or scholarships						1997 - Erbakia Name	V) 2 (3 (3)	<u> </u>	200 file
e	Other expenditures for facilities									
	and programs			1 2008 14 15 16 as 1						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Administrative expenses					ji olojekaj Postanom		- 95500 m - 54499 m		
g	End of year balance			1491 (A) 159 154 A				(E. 45 co. P.)	25 17	
2	Provide the estimated percentage of the year									
a	Board designated or quasi-endowment		%							
a	Permanent endowment Term endowment	% %								
						h				
Sa	Are there endowment funds not in the posse	ession of the organiz	ation that are neid	and administr	erea tor t	ne organiz	ation	Г		
	by: (i) unrelated organizations								Yes	No
	V								***************************************	***************************************
h	(ii) related organizations If "Yes" to 3a(ii), are the related organizations	listed as required a	n Schodula D2	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				3a(ii)		
4	Describe in Part XIV the intended uses of the							30	i	
Par	t VI Investments - Land, Building			0 Part X line	10					
<u></u>	Description of investment	(a) Cost or o	ther (b) Co	st or other s (other)	(c) A	ccumulate preciation	d	(d) Book	value	9
1a	Land									
	Buildings									
С	Leasehold improvements			······································						************
	Equipment								***************************************	
	Other			68,485.		55,0	70.	1:	3 4	15.
	. Add lines 1a through 1e. (Column (d) must e						>	1:	3,4	15.

Schedule D (Form 990) 2009 West Virgin Part VII Investments - Other Securities. Se	ia Coal Asso	<u>ciation, Ir</u>	nc. 5	55-0307050 Page 3
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of va	
Financial derivatives				
Closely-held equity interests				
Other				
				·
Total (Col (b) must soul Farm 000 Part V sol (D) in 40) b				o uma espera, las la folke autorisado se esta les les con-
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ► Part VIII Investments - Program Related. Se	on Farm COO. Dort V. live		eren grouperen ekkeren modek, ere	
		13.	(c) Method of va	luation:
(a) Description of investment type	(b) Book value	Co	st or end-of-year n	
			VI.V.	

				4,4,
otal. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶ Part IX Other Assets. See Form 990, Part X, line	ر م		esi miegłodzieskóka e	
	Description			(b) Book value
(-7		,		(5) 5001 (14160
	——————————————————————————————————————			

otal. (Column (b) must equal Form 990, Part X, col (B) line	15.)			b
Part X Other Liabilities. See Form 990, Part X,	line 25.	ft \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
. (a) Description of liability ederal income taxes		(b) Amount		
Deferred compensation		41,386.		
January Composition of the Compo		±1,500.		
	· · · · · · · · · · · · · · · · · · ·			
otal. (Column (b) must equal Form 990, Part X, col (B) line	25.)	41,386.		
FIN 48 Footnote, in Part XIV, provide the text of the foot			*	

	edule D (Form 990) 2009 West Virginia Coal Associa	tion,	Inc.		<u> 55 – </u>	0307050	Page 4
	rt XI Reconciliation of Change in Net Assets from Form 990 to		γ	iai Stat	emen	··	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1		3,260	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		3,174,	
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3		85,	850.
4	Net unrealized gains (losses) on investments		,,,,,,,,,,,,,	4			
5	Donated services and use of facilities			5			
6	Investment expenses			6		·	
7	Prior period adjustments			7			
8	Other (Describe in Part XIV.)			8			795.
9	Total adjustments (net). Add lines 4 through 8			9		13,	795.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 ar	nd 9		10	······	99,	645.
	t XII Reconciliation of Revenue per Audited Financial Stateme				Return		
1	Total revenue, gains, and other support per audited financial statements	,,,,,,,,,,,,,,			1	3,260,	758.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 !					
а	Net unrealized gains on investments						
þ	Donated services and use of facilities						
c	Recoveries of prior year grants	. 2c					
ď	Other (Describe in Part XIV.)	2d					
е	Add lines 2a through 2d				2e		0.
3	Subtract line 2e from line 1				3	3,260,	758.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1					
а	Investment expenses not included on Form 990, Part VIII, line 7b						
b	Other (Describe in Part XIV.)						
C	Add lines 4a and 4b				4c ·		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				5	3,260,	758.
	t XIII Reconciliation of Expenses per Audited Financial Statem				Retu		
1	Total expenses and losses per audited financial statements				1	3,161,	<u>113.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1					
a	Donated services and use of facilities	2a			17601		
þ	Prior year adjustments	2b					
C	Other losses]		
d	Other (Describe in Part XIV.)						_
	Add lines 2a through 2d				2e		0.
3	Subtract line 2e from line 1				3	<u>3,161,</u>	<u>113.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1					
	Investment expenses not included on Form 990, Part VIII, line 7b						
	Other (Describe in Part XIV.)	4b	13	3,795.			
	Add lines 4a and 4b				4c		<u>795.</u>
Dar	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) t XIV Supplemental Information				5	3,174,	908.
>omp	elete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	ll, lines 1a	and 4; Parl	IV, lines 1	b and 2	b; Part V, line	1; Part
∖,iiiie Dave	2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp	olete this p	part to prov	de any ad	ditional	information.	
car	t XI, Line 8 and Part XIII, Line 4b: Cur	rent	year r	aymer	ICS I	o forme	r
ς f ∈	idong andon governoo name mente that were						
<u></u>	icers under severance agreements that were	e exp	ensea	III CI	е г.	ınancıaı	
= + =	tements in prior years.						
<u> </u>	cements in prior years.				***************************************	****	***************************************
		· · · · · · · · · · · · · · · · · · ·					
			, , , , , , , , , , , , , , , , , , ,	***************************************			
						e .	

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

Attach to Form 990. See separate instructions. OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Employer identification number

	West Virginia Coal Association, Inc. 55-036	705	0	
P	art Questions Regarding Compensation		***************************************	
			Yes	No
ia	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,		X41.4	74.3
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	X First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
				3 745, 3 GAV
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		X
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	X	
				1473
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			13.40 13.40
	CEO/Executive Director. Check all that apply.			111
	Compensation committee Written employment contract	13.16		
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee	2.1		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			W.W.
а	Receive a severance payment or change-of-control payment?	4a	X	
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	***	X
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	, and the second			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			6 J.
	contingent on the revenues of:			
а	The organization?	5a		2147
b	Any related organization?	5b		
	If "Yes" to line 5a or 5b, describe in Part III.	V000	i vario i	v-1854
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			70
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" to line 6a or 6b, describe in Part III.	- 174-0	jan j	WASS.
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2009

55-0307050

West Virginia Coal Association, Inc.

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J1 if additional space is needed.

Schedule J (Form 990) 2009

For each individual whose compensation must be reported in 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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

And the state of t		3) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	(0)	(E)	(F)
	.				Retirement and	Nontaxable	Total of columns	Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(D)-(I)(B)	reported in prior Form 990 or
***************************************								Form 990-EZ
		155,505.	6,125.	2,475.	0	5,915.	170,020.	.0
William B. Raney	(E)	0.	0.	0.	0	0.		0
	(1)	0.	0.	13,795.	0.	0.	13,795.	0
Benjamin C. Greene	(II)	o	0	0.	0	•	0.	0
	€		***************************************					
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	(E)			A CALLERY AND A	THE RESERVE OF THE PROPERTY OF			A A A A A A A A A A A A A A A A A A A
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	(E)							
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	(E)							
	(3)				-			
	(III)							-
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	8	Attended	THE CONTRACTOR OF THE CONTRACT			, (m)	THAT PERSON AND THE P	THE STANDARD OF THE STANDARD O
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							Schedul	Schedule J (Form 990) 2009

SCHEDULE J-2

(Form 990)

Continuation Sheet for Form 990

Open to Public

Department of the Treasury Internal Revenue Service

Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. See the Instructions for Form 990.

Inspection

OMB No. 1545-0047

Name of the Organization

Employer Identification number West Virginia Coal Association, Inc. 55-0307050

Part I Continuation of Officers, D								ovees, and Highes	st Compensated	
(A)	(B)				<u>- ()</u> C)			(D)	(E)	(F)
Name and title	Average			Pos		3		Reportable	Reportable	Estimated
regine und the	hours	(c				app	dv)	compensation	compensation	amount of
	per	(0,	100	T	liai	T	, (y)	from	from related	other
	week					ag.		the	organizations	compensation
		io o	-			light		organization	(W-2/1099-MISC)	from the
		ır dire				ted ea	ŀ	(W-2/1099-MISC)		organization
		stee	ruste			en sa				and related
		al fre	l lenc		phyee	comj		-		organizations
		Individual frustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former			
D. Stephen Walker	·	=	=	5	SŽ	 	32			
Member	0.50	х						0.	0.	_
John H. Wellford	0.50	Λ				-		U.	U.	0.
Member	0.50	37					•	^	0.	
Kenneth G. Woodring	0.50	Δ				 		0.	U •	0.
Member	0 50	*7						0	_	^
Timothy P. Zeli	0.50	X						0.	0.	0.
Member	0 - E0	77								_
Mike Zervos	0.50	X						0.	0.	0.
	Λ ΕΛ	77							_	
Member	0.50	X.						.0.	0.	0.
Louis Southworth, II	0 50								_	_
Counsel	0.50	X				ļ		0.	0.	0.
William B. Raney	40.00							45.45	_	
President/CEO	40.00			X				164,105.	0.	5,915.
Benjamin C. Greene								40 505		_
Former President							X	13,795.	0.	0.
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SCHEDULE J-2

(Form 990)

Continuation Sheet for Form 990

➤ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

➤ See the Instructions for Form 990.

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the Organization

West Virginia Coal Association, Inc.

Employer Identification number 55-0307050

Part I Continuation of Officers, D	<u>jillita C</u>	ue.	<u> </u>	75;	SO	(En	ati.	TOD, INC.	t Componented I	
	ì	us	LEE				ilbii		T	
(A) Name and title	(B)				C)			(D)	(E)	(F)
varie and title	Average hours	/_		Pos			. 11	Reportable	Reportable	Estimated
	per	(C	neci	(an	mat	app)ly)	compensation from	compensation from related	amount of other
+	week					88		the	organizations	compensation
	, wook	ě				ploy		organization	(W-2/1099-MISC)	from the
		dire.				ed err		(W-2/1099-MISC)	(**************************************	organization
		16.0	ustee			ensa				and related
		i trus	nal tr		oyee	dwa				organizations
		ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Богтег	İ		
		ħij	<u>ج</u>	#	\$	F	50.			***************************************
D. Stephen Walker										
Member	0.50	X	-				ļ	0.	0.	0.
John H. Wellford										
Member	0.50	X	ļ					0.	0.	0.
Kenneth G. Woodring										
Member	0.50	X						0.	0.	0.
Timothy P. Zeli										
Member	0.50	X	ļ					0.	0.	0.
Mike Zervos					ĺ					
Member	0.50	X						0.	0.	0.
Louis Southworth, II										
Counsel	0.50	X						0.	0.	0.
William B. Raney										
President/CEO	40.00			X				164,105.	0.	5,915.
Benjamin C. Greene										
Former President							X	13,795.	0.	0.
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

OMB No. 1546-0047
2009
Open to Public Inspection

Name of the organization Employer identification number West Virginia Coal Association, Inc. 55-0307050 Form 990, Part VI, Section B, line 11: Form 990 is reviewed by the President/CEO before it is submitted to the IRS. Form 990, Part VI, Section C, Line 19: The organization's governing documents and financial statements are available upon request either by mail or in person at the organization's office during regular business hours. Form 990, Part XI, Line 1 Accounting method used to prepare the Form 990. Modified Accrual Form 990, Part XI, Line 2c. Selection of independent accountant and approval of the financial statements is subject to approval of the entire Board of Directors. Form 990, Part VI, Section B, Line 15a Approval process for CEO compensation. Compensation for the President/CEO is set by the compensation committee, subject to final approval by the entire Board of Directors.

** PUBLIC DISCLOSURE COPY ** **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A	For th	e 2008 calendar year, or tax year beginning and ending						
В	Check i applicat	cle: Please use IRS	D Employer identifi	cation number				
	Addr	and Jahal or						
	Nam chan	ge type. Doing Business As	55-0	307050				
	Initia returi	n See Number and street (or P.U. box it mail is not delivered to street address) Room/sur	e E Telephone numbe	ır				
	Term ation	Specific Instruct P.O. Box 3923	(304) 342-4153					
	Amer	Oity or town, state or country, and ZIP + 4	G Gross receipts \$	3,111,324.				
	Appli tion	Charleston, WV 25329	H(a) Is this a group re					
	pend	F Name and address of principal officer:WILLIam B. Raney	for affiliates? Yes X No					
		same as C above	H(b) Are all affiliates inc	cluded? Yes No				
		empt status: X 501(c) (6) ◀ (insert no.) 4947(a)(1) or 527	lf "No," attach a	list. (see instructions)				
		te: > www.wvcoal.com	H(c) Group exemption					
			r of formation; 2000 r	✓ State of legal domicile: WV				
Pa	art I	Summary	1 a 1					
e S	1	Briefly describe the organization's mission or most significant activities: To promot		ation of				
Governance		coal and the resulting social and economic be						
ērn	2	Check this box						
ò	3	Number of voting members of the governing body (Part VI, line 1a)		33				
⋖	4	Number of independent voting members of the governing body (Part VI, line 1b)		33				
ies	5	Total number of employees (Part V, line 2a)	5	5				
Activities	6	Total number of volunteers (estimate if necessary)		0				
Act		Total gross unrelated business revenue from Part VIII, line 12, column (C)		10,000.				
	b	Net unrelated business taxable income from Form 990-T, line 34		-9,631.				
			Prior Year	Current Year				
ne	8	Contributions and grants (Part VIII, line 1h)		80,500.				
Revenue	9	Program service revenue (Part VIII, line 2g)	3,209,623.	7				
Re	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> 27,657.</u>					
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	10,000.					
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,247,280.					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,000.	4,000.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)		COF (3.1				
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	684,551.	635,411.				
ens		Professional fundraising fees (Part IX, column (A), line 11e)						
Ϋ́		Total fundraising expenses (Part IX, column (D), line 25)						
_		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,150,910.					
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,839,461.					
<u>C</u>	19	Revenue less expenses. Subtract line 18 from line 12	407,819.	442,065.				
Net Assets or Fund Balances	00	Table and the Control of Control	Beginning of Year	End of Year				
Asse Bak	20	Total assets (Part X, line 16)	697,079.	1,050,920.				
let /	21	Total liabilities (Part X, line 26)	315,287 <u>.</u>	185,934.				
D ₂	22 rt II	Net assets or fund balances. Subtract line 21 from line 20 Signature Block	381,792.	864,986.				
1 0	11 5 33		and to the best of my knowled	The and helief it is true correct				
		Under penalties of perfury, I declare that I have examined this return fincluding accompanying schedules and statements and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	e.	/				
C: mar		- Williand & Karey	1/1//3	3/01				
Sign		Signature of officer	Date	107				
Here	2	William B. Raney, President						
		Type or print name and title						
		Prepararis Dates Dates		rer's identifying number				
Paid			elf- mployed > (see in	structions)				
	arer's	Firm's name (or Arriott & Foster P. T. C.	EIN >					
Use	Only	self-employed), P. O. Box 2629	D-157					
		address and Charleston, WV 25329	Phone no > (304) 346-0441				
Mav	the I	RS discuss this return with the preparer shown above? (see instructions)	1 110110 1101 7	X Yes No				

	n 990 (2008) art III Statement of	West Virginia Coa f Program Service Accomplis	1 Association, Inc. shments (see instructions)	55-030	07050	Page 2
1	Briefly describe the org	****	<u> </u>			
2	the prior Form 990 or 9	90-EZ?	ces during the year which were not listed		Yes	X No
3	Did the organization ce	e new services on Schedule O. ase conducting, or make significant c e changes on Schedule O.	hanges in how it conducts, any program	services?	Yes	X No
4	Describe the exempt pu Section 501(c)(3) and 5	urpose achievements for each of the o	organization's three largest program serv 47(a)(1) trusts are required to report the a , for each program service reported.			
4a	(Code: N/A) (Expenses \$	including grants of \$) (Revenue \$)
						4100001114
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
	·					_ :
·····						
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program services (Expenses \$	s. (Describe in Schedule O.) including grants of \$) (Revenue \$)		
4e	Total program service		(Must equal Part IX, Line 25, c	olumn (B).)		

<u> </u>				,
	r		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	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any accounts where 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	6		X
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	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; 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	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			37
46	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part 1	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity	4.5		X
16	located outside the United States? If "Yes," complete Schedule F, Part II Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		Δ.
.0		16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	X	
	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? If "Yes," answer questions 24b-24d and complete Schedule K.			
	If "No", go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		ļ
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		ļ
d	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
	prior year? If "Yes," complete Schedule L, Part I	25b	ļ	<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			
	contributor, or to a narrow related to euch an individual? If "Vee" complete Schedule I Part III	1 27	j	l X

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	:	X
35	is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
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? If "Yes," complete Schedule R, Part VI	37		X

Form 990 (2008) West Virginia Coal Association, Inc.

Part V Statements Regarding Other IRS Filings and Tax Compliance

					Yes	No				
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		47							
	U.S. Information Returns. Enter -0- if not applicable	1a		15						
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b		0						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and to	eporta	able gaming							
	(gambling) winnings to prize winners?	·	ş,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1c		X				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return	2a		_5						
ď	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns? _		2b	X					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	instru	ctions)							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ed by t	his return?	За	X					
b	The state of the s									
4a	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a									
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	. 4a		X				
þ	If "Yes," enter the name of the foreign country:			-	-					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank a	and							
_	Financial Accounts.			5a	-	X				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?									
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			. 5b		X				
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity		-							
_	Tax Shelter Transaction?	5c	 							
	Did the organization solicit any contributions that were not tax deductible?			<u>6a</u>		X				
a	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts									
7	were not tax deductible?									
7	Organizations that may receive deductible contributions under section 170(c).									
	Did the organization provide goods or services in exchange for any quid pro quo contribution of more									
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	ļ					
U	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?									
ч	to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year			<u>7c</u>	-					
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p		ol .							
·				70						
· f	benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract.	raato		7e	-	i				
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?				 					
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0				-					
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec			··· <u>/-11</u>	<u> </u>					
-	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring or		. ,							
	excess business holdings at any time during the year?									
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			8						
а	Did the organization make any taxable distributions under section 4966?			9a		ļ				
	Did the organization make any taxable distributions under section 4900? Did the organization make a distribution to a donor, donor advisor, or related person?									
0	Section 501(c)(7) organizations. Enter: N/A									
a	Initiation fees and capital contributions included on Part VIII, line 12	10a								
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b								
1	Section 501(c)(12) organizations. Enter: N/A			-						
a	Gross income from members or shareholders									
b	Gross income from other sources (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)	11b								
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	10411	?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			***************************************					

Form 990 (2008) West Virginia Coal Association, Inc. 55-0307050 Page 6

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management		}								
	Formach (Man) seasons to Page 0.76 hadron and four MALTHUR.		Yes	No							
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,										
	processes, or changes in Schedule O. See instructions.										
1a	3										
b	Enter the number of voting members that are independent 1b 33	3									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision										
	of officers, directors or trustees, or key employees to a management company or other person?										
4											
5											
6											
7a											
	governing body?										
b	b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?										
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	7b		X							
7.7	by the following:										
а	The governing body?	8a	X								
	Each committee with authority to act on behalf of the governing body?	8b	X								
9a		9a		Χ							
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	94		23							
b		Oh									
10	and branches to ensure their operations are consistent with those of the organization? Was a copy of the Form 200 provided to the organization's governing body before it was filed? All organizations must	9b									
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	40	_	X							
4 4		10		<u> </u>							
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			v							
200	organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies	11	<u> </u>	X							
Jec	HOLL D. F. OHOICS										
40	Described a control of the control o		Yes	No							
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X							
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise										
	to conflicts?	12b	ļ	ļ							
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			2							
	in Schedule O how this is done	12c									
13	Does the organization have a written whistleblower policy?	13		X							
14	Does the organization have a written document retention and destruction policy?	14		X							
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:										
а	The organization's CEO, Executive Director, or top management official?	15a		X							
þ	Other officers or key employees of the organization?	15b		X							
	Describe the process in Schedule O. (see instructions)										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a										
	taxable entity during the year?	16a	1	X							
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation										
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's										
	exempt status with respect to such arrangements?	16b									
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ► None										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	e for									
	public inspection. Indicate how you make these available. Check all that apply.										
	Own website Another's website X Upon request										
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fin	ancial								
, ,	statements available to the public.	1411	ur sterstedt								
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiz	ation: I	>								
-0	William B. Raney, President - (304) 342-4153	anom,	-								
	P.O. Box 3923. Charleston, WV 25339										

Form 990 (2008) West Virginia Coal Association, Inc. 55-03 Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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, and 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)	West Translation	(C)					(D)	· (E)	(F)
Name and Title	Average hours	10	Position (check all that apply)				h d	Reportable compensation	Reportable compensation	Estimated amount of
	per week	Individual trustee or director	Institutional trustee			saled		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
James O. Bunn	7,00								-	
Chairman	0.50	X	ļ		<u> </u>			0.	0.	0.
Kevin S. Crutchfield			-							
1st Vice Chairman	0.50	X	-					0.	0.	0.
Gary G. White										
2nd Vice Chairman	0.50	X	ļ.,		ļ	-		0.	0.	0.
Ben Hatfield									_	_
Secretary	0.50	X		ļ	ļ	ļ		0.	. 0.	0.
John Snider	0 = 0			}						_
Assistant Secretary	0.50	X			<u> </u>	 		0.	0.	0.
Paul Vining	0 50	7.7						_		0
Treasurer James L. Laurita Jr.	0.50	A						0.	0.	0.
Assistant Treasurer	0.50	v						0.	0.	0.
Daniel T. Pochick	0.50							V •	V •	<u> </u>
Associate Division Chair	0.50	v	İ					0.	0.	0.
Andrew Jordan	0.00				-	-			V •	
Immediate Past Chairman	0.50	x						0.	0.	0.
Louis Southworth, II									V.	
Counsel	0.50	X						0.	0.	0.
Jim Bunn II										
Member	0.50	X	Ì					0.	0.	0.
Nick Carter										
Member	0.50	X	<u></u>					0.	0.	0.
Donald R. Donell					ļ					
Member	0.50	X						0.	0.	0.
Patrick C. Graney III										
Member	0.50	X						0.	0.	0.
Ralph Hamilton	_									
Member	0.50	X	ļ	ļ	ļ	ļ		0.	0.	0.
Warren Hylton	0 " 0							_		_
Member	0.50	X				-		0.	0.	0.
Greg Jessee	0 50	7.						•	•	^
Member	0.50	X	Ļ.,	L	L	1		0.	0.	0.

Part VII Section A. Officers, Directors, Tru	ıstees, Key E	mple	oyee	es,	and	High	nes	t Compensated Employ	ees (continued)			
(A)	(B)				(C)			(D)	(E)	(F)		
Name and title	Average				sitior	1		Reportable	Reportable			ed
	hours	(c	hecl	k al	ll that	t app	oly)	compensation	compensation		amount	of
	per	ě						from	from related		other	
	week	gire.				pa	-	the	organizations		mpensa	
		lee or	Spie		İ	eusati		organization (W-2/1099-MISC)	(W-2/1099-MISC)	- t	from th ganizat	
		il frus	na! In		aako	dwo		(VV-2/1099-WIGO)		į.	nd relat	
·		Individual trusfee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	量			1	ganizati	
		=	Sui	ŧ	150	H 88	Ē					
James C. Justice II												
Member	0.50	X						0.	0			0.
Jimmy Brock											***************************************	
Member	0.50	X			İ			0.	0			0.
Mark Schuerger						<u> </u>	1					
Member	0.50	X					ļ.	0.	0			0.
Butch Smith				İ								
Member	0.50	X						0.	0			0.
Daniel D. Smith					1		\vdash					
Member	0.50	X						0.	0			0.
Wayne H. Stanley				1		†····	1-			-	***************************************	
Member	0.50	x		-			1	0.	0			0.
J. Christopher Supcoe		<u></u>		ļ	1		ļ			•		
Member	0.50	X					١.	0.	0	_		0.
Ralph Sutton					+		 			•		
Member	0.50	x			ĺ		-	0.	0			0.
Dave Thomas	0.50	125		-	-	 	-	y •		•		<u> </u>
Member	0.50	X		İ				0.	0			0.
Wayne Thomas	0.50	-23	ļ			 	ļ	•		•		<u> </u>
Member	0.50	X					- Marian	0.	0	}		0.
1b Total	· · · · · · · · · · · · · · · · · · ·	W-4-				—	1	167,913.	0		33,4	
Total number of individuals (including those	in 1a) who re	ceiv	ed n	nore	e tha	n \$1	ഹ					<u> </u>
compensation from the organization	iii raj mio io	0011	00 11	,,,,,,	0 1110	W		,ooo iii i oportabio	1	*		1
Somperiodicar non-tho-organization		******	******								Yes	Νo
3 Did the organization list any former officer,	director or tru	stee	ke:	v er	mnlo	Vee	or	highest compensated er	nnlovee on			
line 1a? If "Yes," complete Schedule J for si				•	•			ing root companion of		3	Х	
4 For any individual listed on line 1a, is the su									the organization	-	1	
and related organizations greater than \$150										4	X	
5 Did any person listed on line 1a receive or a										1		
the organization? If "Yes, " complete Schedu					-					5		X
Section B. Independent Contractors			•								/	
1 Complete this table for your five highest con	mpensated in	depe	ende	ent (conti	racto	ors	that received more than	\$100,000 of compe	nsatior	from	
the organization.	•											
(A)								(B)			(C)	
Name and business	address							Description of s	ervices	Compensation		
Jackson Kelly, PLLC	·											
PO Box 11276, Charleston, WV 25339								Legal	1.11	1	117,869.	
								11.00				
2 Total number of independent contractors (in from the organization	ncluding those	e in '	i) W	no i	recei	ved	mo	re than \$100,000 in com	pensation			

West Virginia Coal Association, Inc. 55-0307050 Form 990 (2008) Part VIII Statement of Revenue (D) (B) (C) (A) Revenue excluded from Total revenue Related or Unrelated tax under sections 512, exempt function business revenue revenue 513, or 514 Contributions, gifts, grants and other similar amounts 1 a Federated campaigns 1a b Membership dues 1b c Fundraising events 10 d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above _____ 1f 80,500. g Noncash contributions included in lines 1a-1f: \$ 80,500 h Total. Add lines 1a-1f Business Code Program Service Revenue 2 a Member dues 900099 2428359 2428359. b Meetings 900099 579,697. 579,697. f All other program service revenue g Total. Add lines 2a-2f 3008056. Investment income (including dividends, interest, and 12,768. 12,768. other similar amounts) 4 Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ of contributions reported on line 1c). See Part IV, line 18 _____a b Less: direct expenses ______b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances _____a b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 10,000. 11 a Publications 511120 10,000. d All other revenue e Total, Add lines 11a-11d 10,000. 3008056. 10,000. 12,768. 3111324. Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e

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) but are not required to complete columns (B), (C), and (D). (**D**) Fundraising (A) (B) Do not include amounts reported on lines 6b, Total expenses Program service Management and 7b, 8b, 9b, and 10b of Part VIII. expenses. general expenses expenses Grants and other assistance to governments and 4,000. organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 185,053. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 265,919. Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 34,630. Other employee benefits 118,327. 31,482. Payroll taxes 10 Fees for services (non-employees): a Management 162,080. Legal 32,933. Accounting ď Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees 192,414. Other ____ Advertising and promotion 12 Office expenses 56,408. 13 Information technology 2,099. 14 15 Royalties 59,184. 16 Occupancy Travel 76.428. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 515,689. 19 20 Interest Payments to affiliates 21 11,871 Depreciation, depletion, and amortization 22 5,411. 23 Insurance ************************************* Other expenses, Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 808,423 Public relations Bad debts 87,185. Dues and subscriptions 9,583. d Contributions 8,400. 1,740. Other taxes f All other expenses 2,669,259 Total functional expenses. Add lines 1 through 24f Joint Costs. Check here | if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Part X | Balance Sheet (A) (B) Beginning of year End of year 250,969. 532,201. Cash - non-interest-bearing 1 Savings and temporary cash investments 2 248,534. 250,235. 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 233,892. 4 151.951. 4 Receivables from current and former officers, directors, trustees, key 5 employees, or other related parties. Complete Part II of Schedule L 5 6 Receivables from other disgualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 8 Prepaid expenses and deferred charges 16,598. 14,835. 9 10a Land, buildings, and equipment: cost basis 10a b Less: accumulated depreciation. Complete Part VI of Schedule D _________10b 45,083 29,027. 19,382. 10c Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 375. 15 Total assets. Add lines 1 through 15 (must equal line 34) 697,079. 1,050,920. 16 16 130,752. Accounts payable and accrued expenses 142,640. 17 17 18 Grants payable _____ 18 19 Deferred revenue 72,525. 0. 19 Tax-exempt bond liabilities 20 20 Escrow account liability. Complete Part IV of Schedule D 21 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 3,812. 23 23 Unsecured notes and loans payable 24 24 Other liabilities. Complete Part X of Schedule D 96,310. 25 55,182. 25 315,287. 185,934. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here > X and complete lines 27 through 29, and lines 33 and 34. Vet Assets or Fund Balances Unrestricted net assets 381,792. 864,986. 27 27 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 381,792. 864,986. 33 Total liabilities and net assets/fund balances 697,079 050,920. Part XI | Financial Statements and Reporting Yes No Accounting method used to prepare the Form 990: Cash Cash 2a Were the organization's financial statements compiled or reviewed by an independent accountant? Х 2a b Were the organization's financial statements audited by an independent accountant? 2b c If "Yes" to lines 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? Х 2c 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? Х b If "Yes," did the organization undergo the required audit or audits?

** PUBLIC DISCLOSURE COPY **

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

Employer identification number

2008

W	est Virginia Coal Association, Inc.	55-0307050
Organization type (check		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(6) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	·
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
for both the General Rule a	is covered by the General Rule or a Special Rule. (Note. Only a section 501(c)(7), (8), or nd a Special Rule. See instructions.)	(10) organization can check boxes
General Rule		•
	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in mon plete Parts I and II.	iey or property) from any one
Special Rules		
509(a)(1)/170(b)(1)	c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of (A)(vi), and received from any one contributor, during the year, a contribution of the grea 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and I	iter of (1) \$5,000 or (2) 2% of the
aggregate contrib	c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one utions or bequests of more than \$1,000 for use exclusively for religious, charitable, scient brevention of cruelty to children or animals. Complete Parts I, II, and III.	
some contribution \$1,000. (If this box etc., purpose. Do	c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one is for use exclusively for religious, charitable, etc., purposes, but these contributions did is checked, enter here the total contributions that were received during the year for an inot complete any of the parts unless the General Rule applies to this organization becalle, etc., contributions of \$5,000 or more during the year.)	not aggregate to more than exclusive ly religious, charitable, use it received nonexclusively
they must answer "No" on	at are not covered by the General Rule and/or the Special Rules do not file Schedule B (F Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

	-	•	
Page	.L. of	- 2	of Part

Name of organization

Employer identification number

West V	'irq	inia	Coal	Assc	ciation,	Inc.

55-0307050

Part I	Contributors (see instructions)		
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
1		\$ 15,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
2		\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
3		\$ 5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
4		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5		\$ 13,500.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No. 6	Name, address, and ZIP + 4	\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Page 2 of 2 of Part I

Name of organization

Employer identification number

West Virginia Coal Association, Inc.

55-0307050

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$\$,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

To be completed by organizations described below.

Attach to Form 990 or Form 990-EZ.

Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)); Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

* S	ection 501(c)(4), (5), or (6) organiza	ations: Complete Part III	ky rakj, ulen		
	of organization	adons. Complete Fart III.		Emp	oloyer identification number
	West Vi	irginia Coal Asso	ociation. In	nc.	55-0307050
Par	t I-A To be completed b	irginia Coal Asso by all organizations exem	npt under section	501(c) and section 5	27 organizations.
	See the instructions for				
1 F	Provide a description of the organi	zation's direct and indirect politic	cal campaign activities	in Part IV.	
2	Political expenditures	***************************************			
3 /	Volunteer hours	*****			
				·	
Par		y all organizations exem	npt under section	501(c)(3).	
	See the instructions for S			, , , , , , , , , , , , , , , , , , ,	
1 8	Enter the amount of any excise tax	incurred by the organization un	der section 4955		
2 6	Enter the amount of any excise tax	cincurred by organization manag	gers under section 495	5	
	f the organization incurred a section				
	Was a correction made?				Yes No
	f "Yes," describe in Part IV. t I-C To be completed b	y all organizations exem	nt under section	501(c), except section	on 501(c)(3).
	See the instructions for S		.pc anao. ooonon	, , , , , , , , , , , , , , , , , , , ,	
1 F	Enter the amount directly expende		action 527 exempt fund	ction activities	
	Enter the amount of the filing organ				*
	exempt function activities		-		\$
3 7	Total of direct and indirect exempt	function expenditures. Add lines	s 1 and 2 and enter he		
	orm 1120-POL, line 17b	'			\$
	Did the filing organization file Form				
	State the names, addresses and e				
	Enter the amount paid and indicate				
	promptly and directly delivered to		such as a separate se	egregated fund or a political	action committee (PAC).
[f additional space is needed, prov	ide information in Part IV.			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and promptly and directly
				funds. If none, enter -0-	delivered to a separate
					political organization.
					If none, enter -0
			i		
		1			
· · · · · · · · · · · · · · · · · · ·	The part of the last of the la				
		1	1		{

Schedule C (Form 990 or 990-EZ) 2008 Part II-A To be completed by	West	Virgi	nia Coal As	ssociation, I	Inc. 55-	0307050 Page 2
(election under sec					inea i oim o i	,0
A Check ▶ ☐ if the filing organiza						
B Check 🕨 🔃 if the filing organiza	ation check	ed box A ar	nd "limited control" pr	ovisions apply.		
	its on Lobt ditures" m		nditures ints paid or incurred	.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	luence pub	lic opinion (grassroots lobbying)			
b Total lobbying expenditures to infl	luence a leç	gislative boo	dy (direct lobbying)			
c Total lobbying expenditures (add	lines 1a and	d 1b)				
d Other exempt purpose expenditur	res		***************************************			
e Total exempt purpose expenditure						
f Lobbying nontaxable amount. Ent						
If the amount on line 1e, column (a)	or (b) is:		bying nontaxable an	11		3
Not over \$500,000			the amount on line 1e		•	
Over \$500,000 but not over \$1,00			0 plus 15% of the ex			
Over \$1,000,000 but not over \$1,6				cess over \$1,000,000.		
Over \$1,000,000 but not over \$17	,000,000	\$225,000 plus 5% of the excess over \$1,500,000. \$1,000,000.				
Over \$17,000,000		Φ1,000,	200.			
g Grassroots nontaxable amount (ea	nter 25% o	f line 1f)				
h Subtract line 1g from line 1a. Ente					······································	
i Subtract line 1f from line 1c. Enter						
j If there is an amount other than ze						
reporting section 4911 tax for this	year?		***************************************			Yes No
	zations tha	t made a s		r Section 501(h) n do not have to compl a through 2f of the instr		
	Lobb	ying Exper	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2	2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount	ļ			72,000 610		
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
c Total lobbying expenditures						
_						
d Grassroots non-taxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))]		****			
f Grassroots Johnving expenditures	-					Average

Schedule C (Form 990 or 990-EZ) 2008

Schedule C (Form 990 or 990-EZ) 2008 West Virginia Coal Association, Inc. 55-0307050 Page 3

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768

(election under section 501(h)). See the instructions for Schedule C for details.

Part IV Supplemental Information		(a)	(b)
iocal legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Pald starf or management (include compensation in expenses reported on lines 10 through 11)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Railies, demonstrations, seminars, conventions, speeches, lectures, or any other means? i Other activities in line 1 cause the organization to be not described in section 501(c)(3)? b if Yes, 'enter the amount of any tax incurred under section 4912 c if Yes,' enter the amount of any tax incurred by organization managers under section 4912 d if the filling organization incurred a section 4912 tax, did if life Prim 4/20 for this year? Part III-A] To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details. Yes No Were substantially all (90% or more) dues received nondeductible by members? 1		Yes	No	Amo	unt
or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 10 through 1i)? c Media advertisements? d Mailings to membras, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other meens? i Other activities? If "Yes," describe in Part IV. j Total lines 1 c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred by organization managers under section 4912 of if "Yes," enter the amount of any tax incurred by organization managers under section 4912 of if the filing organization incurred a section 4912 tax, old if file Form 4720 for this year? Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details. Were substantially all (90% or more) dues received nondeductible by members? 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in house lobbying expenditures from the prior year? 3 X Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), so section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." See Schedule C Instructions for details Dues, assessments and similar amounts from members 2 1 2, 428, 359 Section 182(e) non-deductible lobbying and political expenditures (do not include amounts of political expension as a substantial political expension of the excess does the organization agree to carryover for the reasonable estimate of nond	During the year, did the filing organization attempt to influence foreign, national, state or				
a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1o through 19? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? i Other activities if "ress," describe in Part IV j Total lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 c if "res," enter the amount of any tax incurred under section 4912 d if the filing organization incurred a section 4912 tax, did if the Form 4720 for this year? Part III-A] To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details. 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carryover lobbying and political expenditures from the prior year? 3 X Part III-B] To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." See Schedule C instructions for details. 1 Dues, assessments and similar amounts from members 2 2 Section 15(c) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2 Dues, assessments and similar amounts from members 3 Aggregate amount reported in section 603(e)(1)(A) notices of nondeductible section 162(e) dues 4 In actions were sent and the amount on line 2 exceeds the amount on line 3, what portion of th	local legislation, including any attempt to influence public opinion on a legislative matter				
b Pald staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, (egislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? i Other activities? If "Yes," describe in Part IV j Total lines 1c through 1 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred by organization managers under section 4912 d if the filling organization incurred a section 4912 tax, did if file Form 4720 for this year? Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details. Yes No 1 Were substantially all (90% or more) dues received noneductible by members? 1 Yes Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carnyover lobbying and political expenditures from the prior year? 2Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." See Schedule C instructions for details. 1 Dues, assessments and similar amounts from members 2 Section 182(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total b Carryover from last year c Total b Carryover from last year c Total c Directions were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of	or referendum, through the use of:				
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Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

Employer identification number

	West Virginia Coal Associ				<u> 55-0307050</u>
Pa	rt I Organizations Maintaining Donor Advised Funds or	r Other Si	milar Funds or	Accou	Ints. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.		· · · · · · · · · · · · · · · · · · ·		
	(a) Do	nor advised	funds	(b) Fun	ds and other accounts
1	Total number at end of year				
2	Aggregate agetyleutions to (duving upper)				
3	Aggregate grants from (during year)		7		
4	Aggregate value at end of year				
5	Did-the organization inform all donors and donor advisors in writing that the				
	are the organization's property, subject to the organization's exclusive lega	al control?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writ	ing that gran	t funds may be use	d only	
	for charitable purposes and not for the benefit of the donor or donor advisor				
Pa	rt II Conservation Easements. Complete if the organization ans	wered "Yes"	to Form 990, Part N	V, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all t	hat apply).			
	Preservation of land for public use (e.g., recreation or pleasure)	Preser	vation of an historic	ally impo	ortant land area
	Protection of natural habitat	Preser	vation of certified hi	storic st	ructure
	Preservation of open space				
2	Complete lines 2a-2d if the organization held a qualified conservation contra	ribution in the	e form of a conserva	ition eas	ement on the last day
	of the tax year.				
					Held at the End of the Year
а	Total number of conservation easements				·
b	Total acreage restricted by conservation easements			2b	
С	Number of conservation easements on a certified historic structure include	ed in (a)		2c	
d	Number of conservation easements included in (c) acquired after 8/17/06			2d	
3	Number of conservation easements modified, transferred, released, extinge	uished, or ter	rminated by the orga	anizatior	n during the taxable
	year >				
4	Number of states where property subject to conservation easement is local	ited 🕨			
5	Does the organization have a written policy regarding the periodic monitori	ng, inspectio	n, violations, and		<u> </u>
	enforcement of the conservation easements it holds?				Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing e	asements du	uring the year 🕨		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing ease	ements durin	g the year 🕨 \$		
8	Does each conservation easement reported on line 2(d) above satisfy the r	equirements	of section 170(h)(4)	(B)(i)	
	and section 170(h)(4)(B)(ii)?				Yes No
9	In Part XIV, describe how the organization reports conservation easements				and balance sheet, and
	include, if applicable, the text of the footnote to the organization's financial	statements :	that describes the c	organizat	tion's accounting for
	conservation easements.		····		
Par	t III Organizations Maintaining Collections of Art, Histo			r Simil	ar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, li	ine 8.			
1a	If the organization elected, as permitted under SFAS 116, not to report in it	ts revenue st	atement and balanc	ce sheet	works of art, historical
	treasures, or other similar assets held for public exhibition, education, or re	search in fur	therance of public s	service, p	provide, in Part XIV, the text o
	the footnote to its financial statements that describes these items.				
þ	If the organization elected, as permitted under SFAS 116, to report in its re	venue stater	ment and balance sh	heet wor	ks of art, historical treasures,
	or other similar assets held for public exhibition, education, or research in f	urtherance o	f public service, pro	vide the	following amounts relating to
	these items:				
	(i) Revenues included in Form 990, Part VIII, line 1				\$
	(ii) Assets included in Form 990, Part X				
2	If the organization received or held works of art, historical treasures, or other	er similar ass	ets for financial gair	n, provic	le
	the following amounts required to be reported under SFAS 116 relating to	these items:			
а	Revenues included in Form 990, Part VIII, line 1				\$
b	Assets included in Form 990, Part X		•	>	\$

		<u>rginia Coa</u>					<u> 55 – 03</u>			
Pa	rt III Organizations Maintaining C	Collections of A	rt, Historical T	reasures,	or Oth	er Simila	ar Asse	ts (cont	inued)	ł
3	Using the organization's accession and other	r records, check any	of the following th	at are a signif	icant us	e of its coll	ection ite	ms (ched	k all	
	that apply):									
а	Public exhibition	d	Loan or exc	change progr	ams-					
b	Scholarly research	e	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how they further	the organizati	ion's exe	empt purpo	se in Par	t XIV.		
5	During the year, did the organization solicit of	or receive donations	of art, historical tre	asures, or oth	er simila	ır assets		_	PARMATRA	-
,	to be sold to raise funds rather than to be m	aintained as part of t	he organization's c	ollection?			<u></u>	Yes		No
Pa	rt IV Trust, Escrow and Custodia reported an amount on Form 990, Pa		. Complete if orgar	nization answ	ered "Ye	s" to Form	990, Par	t IV, line	9, or	
1a	Is the organization an agent, trustee, custod	ian or other intermed	Jiary for contributio	ns or other as	sets no	t included				
	on Form 990, Part X?		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					Yes		No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:			,				
								Amoun	<u>t</u>	
С	Beginning balance	***************************************	***************************************			1c				
d	Additions during the year	,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				1d				
е	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on F							Yes		No
<u>b</u>	If "Yes," explain the arrangement in Part XIV.									
Pa	rt V Endowment Funds. Complete i	f organization answe	ered "Yes" to Form	990, Part IV,	line 10.					
		(a) Current year	(b) Prior year	(c) Two year	rs back	(d) Three ye	ears back	(e) Four	years	back
1a	Beginning of year balance									
b	Contributions			· .						
С	Investment earnings or losses	·								
d	Grants or scholarships									
е	Other expenditures for facilities							•		
	and programs									
f	Administrative expenses					•				
g	End of year balance									
2	Provide the estimated percentage of the year		is:	+						
а	Board designated or quasi-endowment		%							
	Permanent endowment		_							
		%								
	Are there endowment funds not in the posse	ession of the organiza	ation that are held	and administe	ered for t	the organiz	ation			
	by:								Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations									
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Schedule R?					3b		
4	Describe in Part XIV the intended uses of the					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Pai	t VI Investments - Land, Building			0, Part X, line	10.	w				
	Description of investment	(a) Cost or o basis (investr	ther (b) Cos	st or other s (other)	Ĭ	Depreciation	n	(d) Boo	k valu	е
1a	Land									
	Buildings									
c	Leasehold improvements									
d	Equipment	Y								
	Other			64,465.		45,08	33.	1	9,3	82.
	. Add lines 1a-1e. (Column (d) should equal Fo			· = 1 = 	 		N			82.

Schedule D (Form 990) 2008

Schedule D (Form 990) 2008 West Virgin Part VII Investments - Other Securities. S	nia Coal Asso	ociation, In	c. 55-0	307050 Page 3
(a) Description of security or category		912.	(c) Method of valuation	7:
(including name of security)	(b) Book value	Cos	ot or end-of-year market	
Financial derivatives and other financial products				
Closely-held equity interests				
Other				
	The state of the s			***************************************
	}			
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.) ▶				
Part VIII Investments - Program Related.	See Form 990, Part X, lin	e 13.		,
(a) Description of investment type	(b) Book value	Cos	(c) Method of valuation at or end-of-year market	
		000	to or or your market	vaido
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.) ► Part IX Other Assets. See Form 990, Part X, line				
	15. Description			(b) Book value
		:		<u> </u>

	**************************************	**************************************		
	, was the same and			
Total. (Column (b) should equal Form 990, Part X, col (B) I. Part X Other Liabilities. See Form 990, Part X,			>	
(a) Description of liability	ine 25.	(b) Amount		
ederal income taxes				
Deferred compensation		55,182.		•
		, . ,	•	
' <u>otal. (Column (b) should equal Form 990, Part X, col (B) I.</u> n Part XIV, provide the text of the footnote to the organiz:		55,182.		

	dule D (Form 990) 2008 West Virginia Coal Associat			55-0	<u> </u>	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to I	Financia	al Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		3,111	324.
2	Total expenses (Form 990, Part IX, column (A), line 25)				2,669	,259.
3	Excess or (deficit) for the year. Subtract line 2 from line 1				442	,065.
4	Net unrealized gains (losses) on investments					
5	Donated services and use of facilities		5			
6	Investment expenses					
7	Prior period adjustments					
8	Other (Describe in Part XIV)				41	,129.
9	Total adjustments (net). Add lines 4-8				41	,129.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10			<u>,194.</u>
Pa	t XII Reconciliation of Revenue per Audited Financial Statemen	nts With	Revenue per	Return		
1	Total revenue, gains, and other support per audited financial statements			1	3,113	824.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments	2a				
b	Donated services and use of facilities	2b				
С	Recoveries of prior year grants					
d	Other (Describe in Part XIV)	2d	2,500			
e	Add lines 2a through 2d			2e	2	,500.
3	Subtract line 2e from line 1			3	3,111	,324.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV)	4b				
С	Add lines 4a and 4b			4c		0.
5	Total revenue, Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)			5	3,111	,324.
Pai	t XIII Reconciliation of Expenses per Audited Financial Stateme			r Retu	rn	
1	Total expenses and losses per audited financial statements			1	2,630	,630.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
С	Losses reported on Form 990, Part IX, line 25					
d	Other (Describe in Part XIV)		2,500			
е	Add lines 2a through 2d			2e	2	,500.
3	Subtract line 2e from line 1			3	2,628	,130.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		I I I		
b	Other (Describe in Part XIV)		41.129			
	Add lines 4a and 4b				41	,129.
	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)				2,669	
	t XIV Supplemental Information			1 2 1		<u> </u>
···	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,	lines 1a a	nd 4. Part IV lines	1h and :	Ph. Part V line	4: Part
	t XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	111100 100	110 1,1 0.11110			.,
	t XI, Line 8 and Part XIII, Line 4b: Curr	ent v	ear navme	nts	to forme	a r
		<u> </u>	car payme.			
of f	icers under severance agreements that were	evne	nged in t	he f	inancia:	1
<u></u>	TOTA GIROT DO VOLGILO COMOTICO CIRCO MOLO	<u> </u>	<u> </u>			=
at s	tements in prior years.					
	COMCILED III DITOI YOULD!					
Par	t XII, Line 2d and Part XIII, Line 2d: In	tra-c	rganizati	on t	ransact	ions
	C MIL, Diffe Ma and rate Mill, Diffe Ma, 11	· Cara C	rguirraucr	<u> </u>	Lambace	10110
th:	t were not eliminated in consolidation whe	n the	financia] <u>e</u> t	atement	S
عددت	e word not eliminated in consolidation whe	11 C11C	<u> </u>	<u> </u>	<u> </u>	
WAY	e prepared.					
1	<u> </u>					

SCHEDULE I (Form 990)			Grants and	Grants and Other Assistance to Organizations,	to Organizations	ń	,	OMB No. 1545-0047
Department of the Treasury Internal Revenue Service		Comp	Governments, and Individuals in the U.S. ▼ Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.	Governments, and Individuals in the U.S. panization answered "Yes," on Form 990, ★ Attach to Form 990.	uals in the U.S. " on Form 990, P? n 990.	art IV, lines 21 or 22.		2008 Open to Public
Name of the organization Part I General Info	organization West Virginia Cos General Information on Grants and Assistance	inia Coal	Association	n, Inc.	PARTITION TO THE PARTITION OF THE PARTIT	**************************************		Employer identification number 55-0307050
1 Does the organiza	Does the organization maintain records to substantiate the amount of the	substantiate the		or assistance, the	grantees' eligibility	/ for the grants or assi	grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
criteria used to av	critena used to award the grants of assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	tance? sedures for monit	oring the use of grant	funds in the United	States			Yes X No
artı	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	iovernments and	d Organizations in the	e United States, C	omplete if the orga	anization answered "Y	es" on Form 990, Part	IV, line 21, for any
recipient th	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1	5,000. Check this	box if no one recipier	nt received more th	an \$5,000. Use Pa	Irt IV and Schedule I-1	(Form 990) if additional space is needed	al space is needed
1 (a) Name and add	1 (a) Name and address of organization or government	(p) 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
nia Uni , Inc.	versity - PO Box 1650 -			4				Julius W. Singleton, Jr.
Morgantown, WV 265	WV 265U/1650	55-6017181	501(c)(3)	2 000.	0			Scholarship
West Virginia University Foundation, Inc PO Bo Morgantown, WV 265071650	a University Inc PO Box 1650 - WV 265071650	55-6017181	501(c)(3)	2,000,	0			Edwin W. Miles Memorial Scholarship
200,000								
								-
		**************************************						Top Anna Committee and Committ
2 Enter total number	Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations	nd government or	ganizations	William Towns and the second s			Milatola II	1.
	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990	tion Act Notice,	see the Instructions	for Form 990,				Schedule I (Form 990) 2008

!	Coal Asso	Association,	Inc.	- Partition - Part	55-0307050 Page 2
Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule F1 (Form 990) if additional space is needed.	nited States. Coned.	nplete if the organiz	ation answered "Yes	" on Form 990, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	ide the informatio	n required in Part I,	line 2, and any other	additional information.	
		ATT ALL TO A TO A TO A TO A TO A TO A TO		TOTAL TOTAL	
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832102 12-18-08					Schedule I (Form 990) 2008

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

➤ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No. 1545-0047

2008

Open to Public Inspection

Employer identification number

Name of the organization

Department of the Treasury

West Virginia Coal Association, Inc. 55-0307050 **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 in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. X First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If line 1a is 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 X 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, Χ trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations X Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a: Receive a severance payment or change of control payment? X Participate in, or receive payment from, a supplemental nonqualified retirement plan? X 4b Participate in, or receive payment from, an equity-based compensation arrangement? Χ 4c 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) and 501(c)(4) organizations must complete lines 5-8. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? b Any related organization? If "Yes," to line 5a or 5b, describe in Part III, For persons listed in 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? b Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III. 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

Schedule J (Form 990) 2008

Page 2

West Virginia Coal Association, Inc.

Schedule J (Form 990) 2008

55-0307050

For each individual whose compensation must be reported in 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. Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

Value 10 Company of the Company of t							***************************************
	(B) Breakdown of	(B) Breakdown of W:2 and/or 1099-MISC compensation	SC compensation	(C)	(D)	(E)	(F)
(A) Name	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(i)-(D)	Compensation reported in prior Form 990 or Form 990-EZ
	140,11	5,83	8,173.	15,075.	18,335.	187,528.	.0
William B. Raney			í	0	.0	0	0
	(i)	CONTROL OF A STATE OF THE STATE	13,795.	0	.0	13,795.	0
Benjamin C. Greene	(ii) 0.		0	0.	0	0	0
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	(i)	CONTRACT OF THE PROPERTY OF TH		NATIONAL PROPERTY AND AND AND AND AND AND AND AND AND AND			

Schedule J (Form 990) 2008

SCHEDULE J-2

(Form 990) Department of the Treasury internal Revenue Service

Continuation Sheet for Form 990

OMB No. 1545-0047

Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Open to Public Inspection

Name of the Organization

West Virginia Coal Association

Employer Identification number 55-0307050

West Virg	<u>ginia C</u>	oa	1 /	As	SO	cia	at:	ion, Inc.	55-030	7050
Part I Continuation of Officers, D		rus	tee			En	plo	· ·		Employees
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average				ition			Reportable	Reportable	Estimated
	hours	(C	heci	k all	that	app	ly)	compensation	compensation	amount of
	per week			-		93		from the	from related organizations	other compensation
	Week	10		ļ		yold		organization	(W-2/1099-MISC)	from the
	1	direc				ed err		(W-2/1099-MISC)	(=,, •)	organization
		o sate	ustee	Ì		ensa				and related
		altıyı	I Euc		foyer	l moo				organizations
		Individual trustee or director	nstitutional trustee	Officer	Key employee	Righest compensated employee	Former			
	//	Ē	Ĕ	15	25	Z.	Œ.			
Duke Vetor			ļ			-			_	
Member	0.50	X	ļ	ļ	ļ		_	0.	0.	0.
D. Stephen Walker							ļ	_		_
Member	0.50	X	ļ	ļ	ļ	ļ	ļ	0.	0.	0.
John H. Wellford									_	_
Member	0.50	X	_		<u> </u>			. 0.	0.	0.
Kenneth G. Woodring		ļ						_		_
Member	0.50	X		-	-			0.	0.	0.
Timothy P. Zeli	2 = 2								•	
Member	0.50	X	-	ļ	ļ	-		0.	0.	0.
Mike Zervos	0 = 0							•	•	
Member	0.50	X						0.	0.	0.
William B. Raney										
President/CEO	40.00	ļ		X				154,118.	0.	33,410.
Benjamin C. Greene								40 505	•	
Former President		ļ		ļ	-		X	13,795.	0.	0.
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Addition	W. S. S. S. S. S. S. S. S. S. S. S. S. S.									
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SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization Employer identification number West Virginia Coal Association, Inc. 55-0307050 Form 990, Part VI, Section A, line 10: Form 990 is reviewed by the President/CEO before it is submitted to the IRS. Form 990, Part VI, Section C. Line 19: The organization's governing documents and financial statements are available upon request either by mail or in person at the organization's office during regular business hours. Form 990, Part XI, Line 1 Accounting method used to prepare the Form 990. Modified Accrual Form 990, Part XI, Line 2c. Selection of independent accountant and approval of the financial statements is subject to approval of the entire Board of Directors. Form 990, Part VI, Section B, Line 15a Approval process for CEO compensation. Compensation for the President/CEO is set by the compensation committee, subject to final approval by the entire Board of Directors.

Department of the Treasury Internal Revenue Service

Depreciation and Amortization (Including Information on Listed Property)

See separate instructions.

Attach to your tax return.

990

Sequence No 67

OMB No. 1545-0172

Name(s) shown on return Business or activity to which this form relates Identifying number West Virginia Coal Association, Inc. Form 990 Page 10 55-0307050 Part I | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 250,000. 1 Maximum amount. See the instructions for a higher limit for certain businesses 1 2 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation 3 800,000. Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation for qualified property (other than listed property) placed in service during the tax year 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 11.871 16 Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2008 17 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (b) Month and year placed (c) Basis for depreciation (business/investment use only - see instructions) (d) Recovery (a) Classification of property (e) Convention (f) Method (a) Depreciation deduction period in service 3-year property 19a 5-year property b 7-year property c d 10-year property 15-year property е 20-year property f 25-year property S/I 25 yrs. g 27.5 yrs. MM S/L h Residential rental property 27.5 yrs. MM S/L 39 yrs. MM S/L i Nonresidential real property MM S/L Section C - Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20 a Class life S/L 12-year b 12 yrs. S/L 40-year MM S/L Part IV Summary (See instructions.) 21 Listed property, Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 11,871. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

23

FORM 4002	(2008) W	rest v:	irginia	Coal	Association	1, Inc.	55-030/	USU Pag	θ 2
Part V	Listed Property (Include	de automob	oiles, certain ot	her vehicle	es, cellular telephones,	certain computers	, and property used fo	r entertainm	ent
	recreation, or amuseme	ent.)			·	•	•		
	Note: For any vehicle for	or which yo	u are using the	standard	mileage rate or deduct	ting lease expense,	complete only 24a, 24	b, columns	(a)

	through (c) of S	section A, all	of Section B,	and Sec	ation C if	applica	ble.								
Se	ction A - Depreciation a	nd Other In	formation (Ca	aution: 3	See the i	instructio	ons for li	mits fo	or passeng	er auton	nobiles.)				
	a Do you have evidence to s						es [No	T-1	·		nce writt	ten?	Yes	No
	(a) Type of property (fist vehicles first)	(b) Date placed in service	(c) Business/ investment use percenta		(d) Cost or ther basis	Bas	(e) sis for depressiness/inve	eciation stment	(f) Recovery period	(Me	g) hod/ ention	(Depre	h) eciation action	Ele sectio	(i) cted on 179
25	Special depreciation allo		L		unlaged	in cond		·	DV 1/00* 05	J				U.	ost
20	used more than 50% in										25				
26	Property used more than					*11:-41-14-	1 * * * * * * * * * * * * * * * * * * *	* 1,414.11.11			20				
20	Topony acoustinos and		1	%	•				1	1					
		<u> </u>		%											
******				%		-			-						
27	Property used 50% or le	ee in a muali	*				·····								
An I				%					T	S/L·					
		!		%	· · · · · · · · · · · · · · · · · · ·					S/L -					
				%						S/L -					
28	Add amounts in column	(h) lines 25	l		o and or	lino 21	page 1		L		28				
	Add amounts in column											L	. 29		
	7 IOG GITTOGITTE IT COLGITAT	111, 11110 2.0. 1.			B - Infor					*********					
lf y	mplete this section for vel ou provided vehicles to yo se vehicles.		by a sole prop	rietor, p	artner, o	r other '	more th	an 5%	owner,"				ng this s	ection fo	or
				(a)	(1	b)		(c)	(6	d)	(-	e)	(1	f)
30	Total business/investment r	miles driven d	uring the	Vel	nicle	Vel	nicle .	V	ehicle/	Veh	icle	Veh	icle	Veh	icle
	year (do not include comm	nuting miles)	********						.,						~~~~
31	Total commuting miles d	riven during	the year												
32	Total other personal (nor	ncommuting) miles												
	driven							<u> </u>							
33	Total miles driven during	the year.													
	Add lines 30 through 32				.,		,						,		
34	Was the vehicle available	e for person	al use	Yes	No	Yes	No	Yes	No.	Yes	No	Yes	No	Yes	No
	during off-duty hours?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,													
35	Was the vehicle used pri			l]	Ì							
	than 5% owner or relate														
36	Is another vehicle availab	ole for perso	nal												
	use?						<u> </u>								
	swer these questions to d ners or related persons.		- Questions f you meet an e	•	-								re not m	ore than	1 5%
	Do you maintain a writter	n policy stat	ement that or	ohlbits a	all persor	nal use r	of vehicl	es. inc	ludina coi	nmutina	by you	r		Yes	No
	employees?				-				•	-		•			
38	Do you maintain a writter	n policy stat	ement that pr	ohibits r	personal	use of v	ehicles.	excer	at commut	ina. by v	our				<u> </u>
	employees? See the inst		•	•				,		0. , ,					
39	Do you treat all use of ve														
	Do you provide more tha												,		~
	the use of the vehicles, a		•											1	-
	Do you meet the requirer														
	Note: If your answer to 3													·	
Pa	art VI Amortization	/ / /	,, =	., ., ., .,		000									
	(a) Description of	costs	Date	(b) amortization begins		(c) Amortizat amount			(d) Code section		(e) Amortiza period or per			(f) nortization r this year	
42	Amortization of costs that	at begins du	ring your 200	8 tax yea	ar:										
		-													

43 Amortization of costs that began before your 2008 tax year

44 Total. Add amounts in column (f). See the instructions for where to report

43

44

*** PUBLIC DISCLOSURE COPY ***

Form 990

Department of the Treasure

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 black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

2007 Open to Public

OMB No. 1545-0047

A For the 2007 calendar year, or tax year beginning and ending D Employer identification number C Name of organization Address change iabel o west Virginia Coal Association, Inc. 55-0307050 Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Initial Specific P.O. Box 3923 (304) 342-4153 Inethic Termin-ation F Accounting method: Cash Accrual City or town, state or country, and ZIP + 4 X Other (specify) ➤ Modified ac Charleston, WV 25329 Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts Application pending H and I are not applicable to section 527 organizations. must attach a completed Schedule A (Form 990 or 990-EZ). H(a) Is this a group return for affiliates? Yes X No G Website: ▶www.wvcoal.com H(b) if "Yes." enter number of affiliates ▶ Organization type (check only one) ► X 501(c) (6) (insert no.) 4947(a)(1) or [N/AH(c) Are all affiliates included? (If "No," attach a list.) K Check here F if the organization is not a 509(a)(3) supporting organization and its gross H(d) is this a separate return filed by an or-Yes X No receipts are normally not more than \$25,000. A return is not required, but if the organization ganization covered by a group ruling? chooses to file a return, be sure to file a complete return. Group Exemption Number Check ► X if the organization is **not** required to attach L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 3,247,280. Sch. B (Form 990, 990-EZ, or 990-PF). Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances Contributions, gifts, grants, and similar amounts received: a Contributions to donor advised funds b Direct public support (not included on line 1a) 1b c Indirect public support (not included on line 1a) d Government contributions (grants) (not included on line 1a) 1d e Total (add lines 1a through 1d) (cash \$ noncash \$ 1e 530,470. 2 Program service revenue including government fees and contracts (from Part VII, line 93) 2 2,679,153. Membership dues and assessments 3 27,657. 4 Interest on savings and temporary cash investments 5 Dividends and interest from securities 5 6 a Gross rents - 6a Net rental income or (loss). Subtract line 6b from line 6a 60 Other investment income (describe 7 8 a Gross amount from sales of assets other (A) Securities (B) Other than inventory 8a b Less: cost or other basis and sales expenses 8b Gain or (loss) (attach schedule) d Net gain or (loss). Combine line 8c, columns (A) and (B) 8d Special events and activities (attach schedule). If any amount is from gaming, check here of contributions reported on line 1b) ... a Gross revenue (not including \$ Less: direct expenses other than fundraising expenses c Net income or (loss) from special events. Subtract line 9b from line 9a 9 c 10 a Gross sales of inventory, less returns and allowances _______ 10a Less: cost of goods sold 10h Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a 10c 10,000. 11 Other revenue (from Part VII, line 103) 11 3,247,280. 12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11 12 13 13 Program services (from line 44, column (B)) 14 14 Management and general (from line 44, column (C)) 15 Fundraising (from line 44, column (D)) 15 16 16 Payments to affiliates (attach schedule) 2,839,461. Total expenses. Add lines 16 and 44, column (A) 17 17 Excess or (deficit) for the year. Subtract line 17 from line 12 407,819. 18 18 Net assets or fund balances at beginning of year (from line 73, column (A)) <39,822.> 19 19 Other changes in net assets or fund balances (attach explanation) See Statement 1 13,795. 20 20 Net assets or fund balances at end of year. Combine lines 18, 19, and 20 21 381,792.

Part II Statement of All organizations must complete column (A), Columns (B), (C), and (D) are required for section 501(c)(3) **Functional Expenses** and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others Do not include amounts reported on line (B) Program (C) Management (D) Fundraising IstoT (A) 6b, 8b, 9b, 10b, or 16 of Part I. services and general 22a Grants paid from donor advised funds (attach schedule) 0 - noncash \$___ If this amount includes foreign grants, check here Statement 3 22b Other grants and allocations (attach schedule) (cash \$ 4,000 . noncash \$ 4,000. If this amount includes foreign grants, check here 23 Specific assistance to individuals (attach schedule) 23 24 Benefits paid to or for members (attach schedule) 24 25a Compensation of current officers, directors, key 187,539. employees, etc. listed in Part V-A 25a b Compensation of former officers, directors, key employees, etc. listed in Part V-B 13,795. 25b c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 26 Salaries and wages of employees not included on lines 25a, b, and c 322,938. 26 27 Pension plan contributions not included on 35,074. lines 25a, b, and c 27 28 Employee benefits not included on lines 125,205. 25a · 27 28 35,602. 29 Payroll taxes Professional fundraising fees 30 40,325. 31 Accounting fees 31 292,809. Legal fees 32 27,223. 33 Supplies 33 18,133. Telephone 34 59,184. 35 35 Postage and shipping 36 Occupancy 36 Equipment rental and maintenance 37 Printing and publications 38 73,883. 39 Travel 39 498,535. Conferences, conventions, and meetings ... 40 41 Interest 41 12,000 Depreciation, depletion, etc. (attach schedule) Other expenses not covered above (itemize): 43a 43b b 43c 43d 43e 43f See Statement 2 1,093,216. 43g 44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), 2,839,461. carry these totals to lines 13-15) Joint Costs. Check Life if you are following SOP 98-2. Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes X No If "Yes," enter (i) the aggregate amount of these joint costs \$ N/AN/A; (ii) the amount allocated to Program services \$ N/AN/A (iii) the amount allocated to Management and general \$; and (iv) the amount allocated to Fundraising \$

West	Virginia	Coal	Association,	Inc.

55-0307050

Form 990 (2007)

Page 3

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Wł	nat is the organization's primary exempt purpose? See Statement 4	Program Service Expenses
olie	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of ents served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) ganizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Reguired for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
а	N/A	
	· · · · · · · · · · · · · · · · · · ·	
b	(Grants and allocations \$) If this amount includes foreign grants, check here	
~		
С	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	
ď		
	(Grants and allocations \$) if this amount includes foreign grants, check here	
е	Other program services (attach schedule)	
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	
Ĺ	Total of Program Service Expenses (should equal line 44, column (B), Program services)	

Form **990** (2007)

		Balance Sheets (See the instructions.)				T	
Not	te: Who	ere required, attached schedules and amount uid be for end-of-year amounts only.	s within the	description column	(A) Beginning of year		(B) End of year
	45	Cook non-interest baseline			89,100.	45	250,969.
	46	Cash · non-interest-bearing Savings and temporary cash investments			193,439.		248,534.
	10	cavings and temporary cash investments.			173,437.	40	240,004.
	47 a	Accounts receivable	47a	331,951.			
	b		,	180,000.	109,377.	47c	151,951.
	48 a						
	b					48c	
	49	Grants receivable			· · · · · · · · · · · · · · · · · · ·	49	
	50 a	Receivables from current and former officer					
		key employees				50a	
	b	Receivables from other disqualified persons					
Assets		4958(f)(1)) and persons described in section		В)		50b	***************************************
Ass		Other notes and loans receivable					
	1					51 c	
	52 53	Inventories for sale or use			106,865.	52	16,598.
	1 "	Prepaid expenses and deferred charges Investments - publicly-traded securities			100,003.	53	10,390.
		Investments - publicity-traded securities		,		54a	
	1	Investments - land, buildings, and		L COST LIVIV		54b	
	00 2	equipment: basis	55a				
	1.	oquipment basis	000				
	b	Less: accumulated depreciation	55b			55 c	
	56	Investments - other				56	
	57 a			62,239.	· .· · ·		
	b	Less: accumulated depreciation Stmt 5		33,212.	41,027.	57c	29,027.
	58	Other assets, including program-related investmen	nts				
		(describe ► Accrued interest	recei	.vable)	3,958.	58	0.
	59	Total assets (must equal line 74). Add lines			543,766.		697,079.
	60	Accounts payable and accrued expenses			384,307.	60	142,640.
	61	Grants payable				61	W/4
ø	62	Deferred revenue			107,275.	62	72,525.
Liabilities	63	Loans from officers, directors, trustees, and				63	
ap	64 a	Tax-exempt bond liabilities		Object C	0 224	64 a	2 030
	1 .	Mortgages and other notes payable		STIIL 6	9,234.	64 b	3,812.
	65	Other liabilities (describe Deferred	compen	Sacron)	82,772.	65	96,310.
	66	Total liabilities. Add lines 60 through 65			583,588.	66	315,287.
		nizations that follow SFAS 117, check here	X X a	nd complete lines	303,300.	00	313,207.
	w. 5	67 through 69 and lines 73 and 74.	, , , , , , , , , , , , , , , , , , ,	ia complete lines			
Sec	67	Unrestricted			<39,822.	>67	381,792.
anc	68	Temporarily restricted				68	
Ba	69					69	
בַ	Orga	nizations that do not follow SFAS 117, che					, i , , , , , , , , , , , , , , , , , ,
ű.		complete lines 70 through 74.					
S	70	Capital stock, trust principal, or current fund	is			70	
Net Assets or Fund Balances	71	Paid-in or capital surplus, or land, building, a				71	
Ä	72	Retained earnings, endowment, accumulate				72	
Se	73	Total net assets or fund balances. Add lines 67 th			**		
	7.	(Column (A) must equal line 19 and column (B) m			<39,822.		381,792.
	74	Total liabilities and net assets/fund balance	ces. Add line	s 66 and 73	543,766.	74	697,079.

<u> </u>	art IV-A Reconciliation of Revenue per Audited Fina instructions.)								
a	Total revenue, gains, and other support per audited financial stateme	ents				а	3,	247 , 280	•
b	Amounts included on line a but not on Part I, line 12:								
1	Net unrealized gains on investments	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	b1						
2	Donated services and use of facilities		b2						
3	Recoveries of prior year grants		b3						
4			b4						
	Add lines b1 through b4					b		0	
E	Subtract line b from line a					C	3,	247,280	
d	Amounts included on Part I, line 12, but not on line a:	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
1	Investment expenses not included on Part I, line 6b	80	d1						
2			d2						
	Add lines d1 and d2					d		0	
6	Total revenue (Part I. line 12), Add lines c and d				>	6	3,	247,280	
Pa	Total revenue (Part I, line 12). Add lines c and d	ancial Statements	Vith Ex	penses	per	Reti	ırn		
а	Total expenses and losses per audited financial statements					a		825,666	
b	Amounts included on line a but not on Part I, line 17:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						***************************************	
1	Donated services and use of facilities		b1						
2	Prior year adjustments reported on Part I, line 20					1 8			
3						1			
	Other (specify):		h4						
	Add lines b1 through b4					ь		0	_
£	Subtract line b from line a					c	2.	825,666	_
ď	Amounts included on Part I, line 17, but not on line a:								
1	Investment expenses not included on Part I, line 6b		d1						
	Other (specify): Former officer severance p		d2	13,7	0.5	1			
_	7777	avuut 1		1.3./	7.) .	1000000			
	Add lines d1 and d2			· · · · ·				13,795	_
Α	Add lines d1 and d2 Total expenses (Part I line 17) Add lines c and d					d	2.	13,795 839,461	
e Pa	Total expenses (Part I, line 17). Add lines c and d					d e		839,461	
e Pa		ey Employees (List eare not compensated.) (So	ach perso ee the insi	n who wa	san o	d e officer	, dired	839,461 ctor, trustee,	
e Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke	ey Employees (List ea	ach perso ee the inst (C) Com	n who wa	san o	d e officer	, direc	839,461 etor, trustee,	•
e Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com	n who wa tructions.) pensation aid, enter	san o	d e officer	, direc	839,461 etor, trustee,	•
Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com	n who wa tructions.) pensation aid, enter	san o	d e officer	, direc	839,461 etor, trustee,	•
Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com (If not p	n who wa tructions.) spensation aid, enter 3)	(D) Co	d e officer ontribut loyee b s & def ensation	, directions to enefit erred n plans	839, 461 ctor, trustee, (E) Expense account and other allowanc	es
Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com (If not p	n who wa tructions.) pensation aid, enter	(D) Co	d e officer ontribut loyee b s & def ensation	, directions to enefit erred n plans	839, 461 ctor, trustee, (E) Expense account and other allowanc	es
Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com (If not p	n who wa tructions.) spensation aid, enter 3)	(D) Co	d e officer ontribut loyee b s & def ensation	, directions to enefit erred n plans	839, 461 ctor, trustee, (E) Expense account and other allowanc	es
Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com (If not p	n who wa tructions.) spensation aid, enter 3)	(D) Co	d e officer ontribut loyee b s & def ensation	, directions to enefit erred n plans	839, 461 ctor, trustee, (E) Expense account and other allowanc	es
Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com (If not p	n who wa tructions.) spensation aid, enter 3)	(D) Co	d e officer ontribut loyee b s & def ensation	, directions to enefit erred n plans	839, 461 ctor, trustee, (E) Expense account and other allowanc	es
Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com (If not p	n who wa tructions.) spensation aid, enter 3)	(D) Co	d e officer ontribut loyee b s & def ensation	, directions to enefit erred n plans	839, 461 ctor, trustee, (E) Expense account and other allowanc	es
Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com (If not p	n who wa tructions.) spensation aid, enter 3)	(D) Co	d e officer ontribut loyee b s & def ensation	, directions to enefit erred n plans	839, 461 ctor, trustee, (E) Expense account and other allowanc	es
Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com (If not p	n who wa tructions.) spensation aid, enter 3)	(D) Co	d e officer ontribut loyee b s & def ensation	, directions to enefit erred n plans	839, 461 ctor, trustee, (E) Expense account and other allowanc	es
Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com (If not p	n who wa tructions.) spensation aid, enter 3)	(D) Co	d e officer ontribut loyee b s & def ensation	, directions to enefit erred n plans	839, 461 ctor, trustee, (E) Expense account and other allowanc	es
Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com (If not p	n who wa tructions.) spensation aid, enter 3)	(D) Co	d e officer ontribut loyee b s & def ensation	, directions to enefit erred n plans	839, 461 ctor, trustee, (E) Expense account and other allowanc	es
Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com (If not p	n who wa tructions.) spensation aid, enter 3)	(D) Co	d e officer ontribut loyee b s & def ensation	, directions to enefit erred n plans	839, 461 ctor, trustee, (E) Expense account and other allowanc	es
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Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com (If not p	n who wa tructions.) spensation aid, enter 3)	(D) Co	d e officer ontribut loyee b s & def ensation	, directions to enefit erred n plans	839, 461 ctor, trustee, (E) Expense account and other allowanc	es
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Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com (If not p	n who wa tructions.) spensation aid, enter 3)	(D) Co	d e officer ontribut loyee b s & def ensation	, directions to enefit erred n plans	839, 461 ctor, trustee, (E) Expense account and other allowanc	es
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Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com (If not p	n who wa tructions.) spensation aid, enter 3)	(D) Co	d e officer ontribut loyee b s & def ensation	, directions to enefit erred n plans	839, 461 ctor, trustee, (E) Expense account and other allowanc	es
Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com (If not p	n who wa tructions.) spensation aid, enter 3)	(D) Co	d e officer ontribut loyee b s & def ensation	, directions to enefit erred n plans	839, 461 ctor, trustee, (E) Expense account and other allowanc	es
Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com (If not p	n who wa tructions.) spensation aid, enter 3)	(D) Co	d e officer ontribut loyee b s & def ensation	, directions to enefit erred n plans	839, 461 ctor, trustee, (E) Expense account and other allowanc	es
Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com (If not p	n who wa tructions.) spensation aid, enter 3)	(D) Co	d e officer ontribut loyee b s & def ensation	, directions to enefit erred n plans	839, 461 ctor, trustee, (E) Expense account and other allowanc	es
Pa	Total expenses (Part I, line 17). Add lines c and d art V-A Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List earlier not compensated.) (Si	ach perso ee the inst (C) Com (If not p	n who wa tructions.) spensation aid, enter 3)	(D) Co	d e officer ontribut loyee b s & def ensation	, directions to enefit erred n plans	839, 461 ctor, trustee, (E) Expense account and other allowanc	es

Port V.A. Current Officers Directors Trustees and K			55-030/0	
Part V-A Current Officers, Directors, Trustees, and K		 		Yes No
75 a Enter the total number of officers, directors, and trustees permitted		siness at board	33	
meetings				
b Are any officers, directors, trustees, or key employees listed in Form	n 990, Part V-A, or highest o	compensated emp	loyees	
listed in Schedule A, Part I, or highest compensated professional a				
Part II-A or II-B, related to each other through family or business rel	ationships? If "Yes," attach	a statement that is	- 1	
the individuals and explains the relationship(s)		***************************************		75b X
© Do any officers, directors, trustees, or key employees listed in Form	n 990, Part V-A, or highest c	ompensated empl	ovees	
listed in Schedule A, Part I, or highest compensated professional a	nd other independent contr	actors listed in Sci	nedule A,	
Part II-A or II-B, receive compensation from any other organizations		able, that are relat	ed to the	
organization? See the instructions for the definition of "related orga	enization."	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		75c X
If "Yes," attach a statement that includes the information described	d in the instructions.			
d Does the organization have a written conflict of interest policy?	-1-1			75d X
Part V-B Former Officers, Directors, Trustees, and K	ey Employees That R	eceived Com	pensation or	Other
Benefits (If any former officer, director, trustee, or key e				
the year, list that person below and enter the amount of co	ompensation or other benef			
(A) Name and address	(D) I cope and Advances	(C) Compensation	(D) Contributions to employee benefit	
(A) Name and address	(B) Loans and Advances	(if not paid, enter -0-)	minne & deformed	account and other allowances
Benjamin C. Greene		/	Companion plans	22.07 0.13 (0.13)
P.O. Box 3923				The state of the s
Charleston, WV 25329	0.	13,795.	0.	0.
Older Lob Colly WV 20020	V •	13,755.		· · ·
~				7
·				
				3
				or many part of the control of the c
· - · · · · · · · · · · ·				
·				
~ ~ ~				
	:			
Part VI Other Information (See the instructions.)				Yes No
76 Did the organization make a change in its activities or methods of c	onducting activities? If "Yes	s," attach a detaile	d	1 1 .
statement of each change			- Inme	76 X
77 Were any changes made in the organizing or governing documents	but not reported to the IRS	;?		77 X
If "Yes," attach a conformed copy of the changes.				
78 a Did the organization have unrelated business gross income of \$1,00	00 or more during the year o	covered by this ret	urn?	78a X
b If "Yes," has it filed a tax return on Form 990-T for this year?	***************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		78b X
79 Was there a liquidation, dissolution, termination, or substantial conf				79 X
80 a Is the organization related (other than by association with a statewi	- ·		600	
membership, governing bodies, trustees, officers, etc., to any other		, -	1	BOa X
b If "Yes," enter the name of the organization▶ N/A				
-	and check whether it is	exempt or	nonexempt	
81 a Enter direct and indirect political expenditures. (See line 81 instruct			0.	
b Did the organization file Form 1120-POL for this year?	•			B1b X
				Form 990 (2007)

Forr	990 (2007) West Virginia Coal Association,	Inc.	55-030	7050	р	age 7
Pa	rt VI Other Information (continued)				Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities	es at no cha	rge or at substantially			
	less than fair rental value?			82a		X
þ	, ,			100 000		
	amount as revenue in Part I or as an expense in Part II.		27/2			
	(See instructions in Part III.)		N/A	_	***	
83 a				83a	X	
b				83b	ļ	Х
84 a				84a		Λ
U	If "Yes," did the organization include with every solicitation an express statement that such			84b	1000000000	
85 a	tax deductible? 501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?			852		X
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			85b		X
_	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless			000		
	waiver for proxy tax owed for the prior year.	o ina organi	241011 70001704 4			
c	Dues, assessments, and similar amounts from members	85c	2,679,153	•		
d	Section 162(e) lobbying and political expenditures		173,379		60.000	
9	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	1 1	284,244			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	1	<110,865	.>		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		N/A	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount	ount on line	85f			
	to its reasonable estimate of dues allocable to nondeductible lobbying and political expend	litures for th				ĺ
	following tax year?		N/A	85h		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on	i i	37/3			
	line 12	1 1	N/A	1000000		
b	Gross receipts, included on line 12, for public use of club facilities	1 1	N/A	-		
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A	-		
þ	Gross income from other sources. (Do not net amounts due or paid to other sources	87b	N/A			
99 2	against amounts due or received from them.) At any time during the year, did the organization own a 50% or greater interest in a taxable			1888		
00 a	or an entity disregarded as separate from the organization under Regulations sections 301.			0.0000000		
	If "Yes," complete Part IX			88a	10021000012	Х
b	At any time during the year, did the organization, directly or indirectly, own a controlled ent					
	section 512(b)(13)? If "Yes," complete Part XI			► 88b		X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year u					
	section 4911 \triangleright N/A ; section 4912 \triangleright N/A ; section	4955 🟲	N/A			
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 exce					
	transaction during the year or did it become aware of an excess benefit transaction from a	prior year?		2000		
	if "Yes," attach a statement explaining each transaction			89b		
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during	- ·				
_	sections 4912, 4955, and 4958		0.			
đ	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.	000	0000000	v
6	All organizations. At any time during the tax year, was the organization a party to a prohibite			89e		X
1	All organizations. Did the organization acquire a direct or indirect interest in any applicable in			891		Λ
g	For supporting organizations and sponsoring organizations maintaining donor advised funds or a fund maintained by a sponsoring organization, have excess business holdings at any ti			89g	************	\$00000000
90 a	List the states with which a copy of this return is filed NOne	ane uallig	and yours the Att.	USY	1	1
	Number of employees employed in the pay period that includes March 12, 2007		90b			5
	The books are in care of William B. Raney, President		hone no. ▶ (304)	342	-41	
	Located at ▶ P.O. Box 3923, Charleston, WV		Z1P+4 ►			
b	At any time during the calendar year, did the organization have an interest in or a signature	or other au			Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other			91b		Х
	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report	of Foreign E	Bank			1
	and Financial Accounts.					

Part VI Other Information (continued)	
c At any time during the calendar year, did the organization maintain an office outside of the United States?	Yes N
If "Yes," enter the name of the foreign country N/A	
Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here	>
	/A
art VII Analysis of Income-Producing Activities (See the instructions.)	
Intelliged hyginass income Evoluted by continued 512 513 or 514	E)
dicated. (A) (B) (C) (D) Related	cr exempt
DUSITIESS Amount Amount	n income
	30,470
G	
d	
e	
Medicare/Medicaid payments	
Fees and contracts from government agencies	
	79,153
Interest on savings and temporary cash investments 14 27,657 .	
Dividends and interest from securities	25.41.541.0774.27.000
Net rental income or (loss) from real estate:	
a debt-financed property	
not debt-financed property	
Net rental income or (loss) from personal property	
Other investment income	
Gain or (loss) from sales of assets	
other than inventory	
Net income or (loss) from special events	
Gross profit or (loss) from sales of inventory	
Other revenue:	
Publications 511120 10,000.	
Subtotal (add columns (B), (D), and (E)) 10,000. 27,657. 3,2	00 623
	09,623 47,280
Total (add line 104, columns (B), (D), and (E)) e: Line 105 plus line 1e, Part I, should equal the amount on line 12. Part I.	±/,200
int VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)	······
e No. Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organiz	
exempt purposes (other than by providing funds for such purposes).	11011 \$
See Statement 8	
art IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)	
(A) (B) (C) (D)	E)
ame, address, and EIN of corporation, Percentage of partnership, or disregarded entity ownership interest Nature of activities Total income End-	of-year sets
%	
N/A %	
%	
%	
irt X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instruction	:.)
) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	X
) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	XN
ote: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).	
Fo	m 990 (200

Form 990 Other C	hanges in Net A	Assets or Fun	d Balances	Statement	1
Description				Amount	
Payment to former offic	er under severa	ance agreemen	t	13,7	95.
Total to Form 990, Part	I, line 20			13,7	95.
Form 990	Other	Expenses		Statement	2
	(A)	(B) Program	(C) Management	(D)	
Description			Fundraisi	ng	
Other professional services Dues and	12,066.			-	
subscriptions Public relations	6,850. 860,015.				
Bad debts Taxes	192,133. 2,444.				
Insurance Contributions	8,358. 11,350.				
Total to Fm 990, ln 43	1,093,216.				

	990 Cash Grants and Allocations to Others			
Class of Activity/Donee's Name an	nd Address		Amount	
Scholarships Julius W Shingleton Jr. Scholarsh WVU Foundation, Inc. PO Box 1650 Morgantown, WV 26507-1650	ip		2,00	00.
Scholarships Edwin W. Wiles Memorial Scholarsh WVU Foundation, Inc. PO Box 1650 Morgantown, WV 26507-1650	ip		2,00	00.
Total Included on Form 990, Part	II, line 22b		4,00	00.
Form 990 Statement of Organiza	tion's Primary Deart III	Exempt Purpose	Statement	4
Explanation				
To promote the utilization of coa benefits.	l and the result	ting social and	economic	
Form 990 Depreciation of Ass	ets Not Held for	r Investment	Statement	
Description	Cost or Other Basis	Accumulated Depreciation	Book Value	9
Vehicles, furniture & equipment	62,239.	33,212.	29,02	77.
				_ , .

Lender's Name	Form 990		Other No	tes an	d Loans Pay	able		Statement	•
United Bank \$488/month including interest Date of Maturity Original Interest Note Date Loan Amount Rate 08/19/05 08/19/08 15,945. 6.41% Security Provided by Borrower Purpose of Loan Vehicle Purchase vehicle Relationship of Lender None Description of Consideration FMV of Consideration Balance Due	T 3 1		_						
Date of Maturity Original Interest Note Date Loan Amount Rate 08/19/05 08/19/08 15,945. 6.41% Security Provided by Borrower Purpose of Loan Vehicle Purchase vehicle Relationship of Lender None Description of Consideration FMV of Consideration Balance Due	Lender's	Name	Term	s of R	epayment ————				
Note Date Loan Amount Rate 08/19/05 08/19/08 15,945. 6.41% Security Provided by Borrower Purpose of Loan Vehicle Purchase vehicle Relationship of Lender None Description of Consideration FMV of Consideration Balance Due	United Ba	nk			including				
Security Provided by Borrower Purpose of Loan Vehicle Purchase vehicle Relationship of Lender None FMV of Consideration Balance Due									
Vehicle Relationship of Lender None Description of Consideration Purchase vehicle FMV of Consideration Balance Due	08/19/05	08/19/08	15,	945.	6.41%				
Relationship of Lender None FMV of Description of Consideration Consideration Balance Due	Security	Provided by	Borrower	Purp	ose of Loan				
None FMV of Description of Consideration Consideration Balance Due	Vehicle			Purc	hase vehicle	е			
Description of Consideration Ealance Due	Relations	hip of Lend	er						
Description of Consideration Consideration Balance Due	None								
Cash 0. 3,81	Descripti	on of Consi	deration					Balance Du	ıe
	Cash						0.	3,8	12
Total included on Form 990, Part IV, line 64, Column B 3,81	motol :	Inded on Tax	000 D	L T.7	1: (1 0-	T		~ ~	\ 1 ^

Form 990 Part V-A	List of Current Off Trustees and Key Em		ectors,	State	ement 7
Name and Address	Title Avrg Hr		mpen- tion	Employee Ben Plan Contrib	Expense
William B. Raney P.O. Box 3923 Charleston, WV 25339	Presiden 40.00		45,956.	39,108.	2,475.
Andrew Jordan P.O. Box 3923 Charleston, WV 25339	Chairman 0.50		0.	0.	0.
Kevin S. Crutchfield P.O. Box 3923 Charleston, WV 25339	1st Vice 0.50	Chairman	0.	0.	0.
Ben Hatfield P.O. Box 3923 Charleston, WV 25339	Secretary 0.50	Y	0.	0.	0.
John Snider P.O. Box 3923 Charleston, WV 25339	Assistan 0.50	t Secretar	y 0.	0.	0.
Paul Vining P.O. Box 3923 Charleston, WV 25339	Treasure: 0.50	c	0.	0.	0.
Kent Hartsog P.O. Box 3923 Charleston, WV 25339	Assistan 0.50	t Treasure	o.	0.	0.
Daniel T. Pochick P.O. Box 3923 Charleston, WV 25339	Associate 0.50	e Division	Chairma 0.	a 0.	0.
Kevin J. Bealko P.O. Box 3923 Charleston, WV 25339	Director 0.50		0.	0.	0.
James O. Bunn P.O. Box 3923 Charleston, WV 25339	Director 0.50		0.	0.	0.
Jim Bunn, II P.O. Box 3923 Charleston, WV 25339	Director 0.50		0.	0.	0.

West Virginia Coal Associati	lon, Inc.		55-03	307050
Steve Capelli P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
Nick Carter P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
Donald R. Donell P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
Patrick C. Graney III P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
Ralph Hamilton P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
Warren Hylton P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
James C. Justice II P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
James L. Laurita Jr. P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
Peter B. Lilly P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
Gary Patterson P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
Mark Schuerger P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
Butch Smith P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
Daniel D. Smith P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.

West Virginia Coal Associa	ation, Inc.		55	-0307050
Wayne H. Stanley P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
J. Christopher Supcoe P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
Ralph Sutton P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
Dave Thomas P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
Wayne Thomas P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
Duke Vetor P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
D. Stephen Walker P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
John H. Wellford P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
Gary G. White P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
Kenneth G. Woodring P.O. Box 3923 Charleston, WV 25339	Director 0.50	0.	0.	0.
Timothy P. Zeli P.O. Box 3923 Charleston, WV 25329	Director 0.50	0.	0.	0.
Mike Zervos P.O. Box 3923 Charleston, WV 25329	Director 0.50	0.	0.	0.
Totals Included on Form 990,	Part V-A	145,956.	39,108.	2,475.

Form	990 Part VIII - Relationship of Activities to Accomplishment of Exempt Purposes	Statement 8
Line	Explanation of Relationship of Activities	
93a 94	Meetings provide a forum to keep members informed o other matters affecting the coal mining industry. Provide means to promote the utilization of coal by disseminating to members and the public factual infocal mining industry.	assembling and

Internal Revenue Service

OGDEN, UT 84201-0074

For assistance, call: #

1-877-829-5500

Notice Number: CP211A Date: September 22, 2008

Taxpayer Identification Number:

55-0307050

Tax Form: 990

Tax Period: December 31, 2007

066199.538664.0215.004 1 MB 0.369 530



WEST VIRGINIA COAL ASSOCIATION INC PO BOX 3923 CHARLESTON 25339-3923236

APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT ORGANIZATION RETURN - APPROVED

We have received your Form 8868, Application for Extension of Time to File an Exempt Organization Return, for the return (form) and tax period identified above.

We have approved your request and have extended the due date to file your return to November 15, 2008.

Please attach a copy of this letter to your return when you file it. It is evidence that we granted an extension of time to file your return. A copy is provided for your records.

If you have any questions, please call us at the number shown above, or you may write us at the address shown at the top left of this letter.

Reminder - You May Be Required to File Electronically

Exempt organizations may be required to file certain returns electronically. For tax years ending on or after December 31, 2006, the electronic filing requirement applies to exempt organizations with \$10 million or more in total assets if the organization files at least 250 returns in a calendar year, including income, excise, employment tax and information returns. Private foundations and charitable trusts will be required to file Forms 990-PF electronically regardless of their asset size, if they file at least 250 returns annually. For more information, go to www.irs.gov. Click "Charities and Non-Profits" and look for the "e-file for Charities and Non-Profits" tab.

For tax forms, instructions and information visit <u>www.irs.gov</u>. (Access to this site will not provide you with your specific taxpayer account information.)