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Form **990-EZ**

Short Form 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

OMB No 1545-1150

Open to Public Inspection

Department of the Treasury

private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

Internal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements. For the 2008 calendar year, or tax year beginning and ending 2009 JUN 2008 MAY Check if applicable C Name of organization D Employer identification number Address use IRS label or Name change 54-1081488 print or GREATER NORFOLK CORPORATION type]Initial return Number and street (or P.O. box, if mail is not delivered to street address) Room/suite E Telephone number Termination Specific 207 GRANBY STREET 301 (757)622-2242Instruc-City or town, state or country, and ZIP + 4 Amended F Group Exemption Application pending NORFOLK, VA 23510 Number > • Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed G Accounting method: X Cash Schedule A (Form 990 or 990-EZ). Other (specify) H Check X if the organization is not Website: ► N/A Organization type (check only one)— X 501(c) (6) ◀ (insert no.) 494<u>7(a)(1)</u> or 527 required to attach Schedule B (Form 990, 990-EZ, or 990-PF) Check In the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return. Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) Part I Contributions, gifts, grants, and similar amounts received Program service revenue including government fees and contracts 2 2 3 Membership dues and assessments 3 154,440. 4 Investment income Gross amount from sale of assets other than inventory 5a Less: cost or other basis and sales expenses Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule) 5c Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here Gross revenue (not including \$ of contributions reported on line 1) 6a b Less: direct expenses other than fundraising expenses 6b Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 6c Gross sales of inventory, less returns and allowances co Less: cost of goods sold 7b ® Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c Other revenue (describe INTEREST INCOME 536. 8 154,976. Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 9 Grants and similar amounts paid (attach schedule) 10 10 11,369. 11 Benefits paid to or for members 11 119,192. Salaries, other compensation, and employee benefits 12 12 1,775. Professional fees and other payments to independent contractors 13 13 14,277. SEE STATEMENT 3 14 Occupancy, rent, utilities, and maintenance 14 Printing, publications, postage, and shipping 1,505. 15 15 Other expenses (describe SEE STATEMENT 32,285. 16 16 180,403. 17 Total expenses. Add lines 10 through 16 17 SO-S <25,427.> Excess or (deficit) for the year (Subtract line 17 from line 9) 18 18 Net Assets Net assets or fund balances at beginning of yes (from Jpe)对, Lolubin 2010 0 19 (must agree with end-of-year figure reported brightor year's return) 19 99,611. Other changes in net assets or fund balances lattach explan 20 20 74,184 21 Net assets or fund balances at end of year. Combine lines at through 21 Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ. Part II (See the instructions for Part II.) (A) Beginning of year (B) End of year Cash, savings, and investments 99,758. 22 73,845. 22 Land and buildings 23 23 SEE STATEMENT 2) 2,775. 3,897 Other assets (describe 24 24 103,655. 76,620. 25 25 Total assets Total liabilities (describe > ACCOUNTS PAYABLE 4,044. 2,436. 26 26

27

Net assets or fund balances (line 27 of column (B) must agree with line 21)

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

99,611

	n 990-EZ (2008) GREATER NORFOLK CORPORATI	ON			<u>54-</u>	10814	88 Page 2
	art III Statement of Program Service Accomplishmen		e instructions for	Part III.)		(D E)	penses
	at is the organization's primary exempt purpose? <u>SEE</u> STATEMENT					(Required and (4) or	for 501(c)(3) ganizations and
	cribe what was achieved in carrying out the organization's exempt purposes. In a vided, the number of persons benefited, or other relevant information for each pr		oncise manner, de	escribe the services		4947(a)(1 for others) trusts; optional
	SEE STATEMENT 5	ogram title.				TOT OTHERS	·)
20	SEE STRIEMENT S					1	
							
	(Grants \$) If this amount includes foreign of	rants, chec	k here			28a	
29							
	(Grants \$) If this amount includes foreign of	rants, chec	k here			29a	
30							
			 		 -		
	(Grants \$) If this amount includes foreign of	rants, chec	k here	<u> </u>		30a	
31	Other program services (attach schedule)			_			
22	(Grants \$) If this amount includes foreign of Total program service expenses (add lines 28a through 31a)	rants, chec	K nere		<u></u>	31a 32	
	art IV List of Officers, Directors, Trustees, and Key E	mplovee	S. List each one ev	en if not compensated	(See the	1 3Z	for Part IV)
<u>. </u>	uiciv 1.000.000, 1.1000.000, 1.1000.000, 1.1000.000, 1.1000.000, 1.1000.000, 1.1000.000, 1.1000.000, 1.1000.		CIST BACT ON B	en il not compensated		ontributions	
	(a) Name and address		d average hours	(c) Compensation	to e	employee	(e) Expense
	(a) Name and address		k devoted to osition	(If not paid, enter -0)		efit plans & leferred	account and other allowances
		"	osition	-0,		pensation	ounce anowanees
BZ	ARRY BISHOP	EXECUI	CIVE VP				
PC) BOX 3224, NORFOLK, VA 23514	40.	.00	92,000.		0.	0.
SI	EE ATTACHED FOR BOARD MEMBERS	BOARD	MEMBERS	- NONE C	OME	ENSA	
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832	172			<u> </u>	<u> </u>		<u> </u>
034	116					Form	990-F7 (2008)

Pa	ort V Other Information (Note the statement requirements in the instructions for Part VI)			
<u> </u>			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not	<u> </u>		
••	reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.	ļ		
а	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy			
•	tax requirements?	35a]	x
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	N/	_
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Sch. N	36	/	X
	Enter amount of political expenditures, direct or indirect, as described in the instructions.		_	
	Did the organization file Form 1120-POL for this year?	37Ь		x
	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made	0,0	\vdash	
004	in a prior year and still unpaid at the start of the period covered by this return?	38a		x
h	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A	- 50a	 	<u> </u>
39	Section 501(c)(7) organizations. Enter:	1		
	Initiation fees and capital contributions included on line 9 39a N/A			
b	Gross receipts, included on line 9, for public use of club facilities 39b N/A	†		Į .
	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	1		
104	section 4911 \triangleright N/A ; section 4912 \triangleright N/A ; section 4955 \triangleright N/A			
h	Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or			
-	did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I	40ь	N/	Α
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under	100	/	<u> </u>
·	sections 4912, 4955, and 4958	1		
d	Enter amount of tax on line 40c reimbursed by the organization			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
·	transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed. NONE		<u> </u>	
	The books are in care of ► THE CORPORATION Telephone no. ► (757)	622	-22	42
	Located at ▶ 207 GRANBY STREET, SUITE 203, NORFOLK, NORFOLK, ZIP+4 ▶ 2			
b	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		Yes	No
	account)?	42b		Х
	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 and Financial Accounts.			
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	<u> </u>	_x
	If "Yes," enter the name of the foreign country:			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		>	
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/A		
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			
	Form 990-EZ	44	L	X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be			
	completed instead of Form 990-EZ	45	L	X

Form 990-EZ (2008)

46 Did tl	he organization engage in direct or indirect political campaign activi	ities on behalf of or in opposition to d	candidates for public	_		Yes	No
office	e? If "Yes," complete Schedule C, Part I				46		
7 Did ti	the organization engage in lobbying activities? If "Yes," complete	Schedule C, Part II		L	47		
	e organization operating a school as described in section 170(b)(1)	•	ule E	L	48		_
19a Did tl	he organization make any transfers to an exempt non-charitable rel	ated organization?		L	49a		
	es," was the related organization(s) a section 527 organization?			Ĺ	49b_		
	plete this table for the five highest compensated employees (other tompensation from the organization. If there is none, enter "None."	than officers, directors, trustees and	key employees) who	each received m	ore tha	an \$10	0,000
	(a) Name and address of each employee paid more than \$100,000 N/A	(b) Title and average hours per week devoted to position	(c) Compensation	(D) Contributions to employee benefit plans & deferred compensation	(E	E) Expe	and
51 Com	ber of other employees paid over \$100,000 iplete this table for the five highest compensated independent contr	actors who each received more than	\$100,000 of compet	nsation from the o	organi	zation.	If the
	nne, enter "None." N/A (a) Name and address of each independent contractor paid in	more than \$100,000	(b) Type of ser	vice (c	c) Com	pensal	ion
15 110	N/A	more than \$100,000	(b) Type of ser	vice (c	c) Com	pensal	ion
	N/A (a) Name and address of each independent contractor paid in the second sec		(b) Type of ser	vice (c	Com	pensal	ion
	N/A (a) Name and address of each independent contractor paid is ber of other independent contractors each receiving over \$100,000 Under penalties of periory. I declare that I have examined this return, included	Ing accompanying schedules and statemen	its, and to the best of m				ion
	ber of other independent contractors each receiving over \$100,000 Under penalties of perjury, I declare that I have examined this return, include correct, and complete Destration of preparer (other than efficer) is based to signature of officer. Signature of officer.	Ing accompanying schedules and statemen	nts, and to the best of miknowledge				ion
Total numl	N/A (a) Name and address of each independent contractor paid in the part of other independent contractors each receiving over \$100,000. Under penalties of perjury, I declare that I have examined this return, include correct, and complete. Declaration of preparer (other than efficer) is based of the part of officer. Signature of officer. Type or print name and title.	Ing accompanying schedules and statement on all information of which preparer has any	nts, and to the best of miknowledge		ef, it is	true,	
Total numl Sign Here	ber of other independent contractors each receiving over \$100,000 Under penalties of perjury, I declare that I have examined this return, include correct, and complete Destration of preparer (other than efficer) is based of Signature of officer Type or print name and title Preparer's signature GOODMAN & COMPANY, I is stif-employed). ONE COMMERCIAL PLACE	Ing accompanying schedules and statement on all information of which preparer has any Section 11 2009 Cheen on L.P.	eck if self-ployed Pres	y knowledge and bell Date Date parer's identifying No	umber (true,	7)
Total numl Sign Here Paid Preparer's	her of other independent contractors each receiving over \$100,000 Under penalties of perjury, I declare that I have examined this return, include correct, and complete Declaration of preparer (other than efficer) is based of the penalties of perjury. I declare that I have examined this return, include correct, and complete Declaration of preparer (other than efficer) is based of the penalties of perjury. I specification of preparer (other than efficer) is based of the penalties of penalties. Firm's name (or yours GOODMAN & COMPANY, I	Ing accompanying schedules and statement on all information of which preparer has any Section 11 2009 Cheen on L.P.	its, and to the best of miknowledge Color of the best of the best of miknowledge Color of the best of the best of miknowledge Color of the best of the best of the best of miknowledge Color of the best of	y knowledge and bell Date Date 757.6	umber (See Inst	7)

FORM 990-EZ	OTHER EXPENSES		STATEMENT	1
DESCRIPTION			AMOUNT	
PAYROLL TAXES TRAVEL CONFERENCES AND MEETINGS MISCELLANEOUS INTERNET & FAX TELEPHONE & COMMUNICATION OFFICE INSURANCE			9,14 72 10,88 1,86 1,85 2,80 5,02	11. 30. 56. 54.
TOTAL TO FORM 990-EZ, LINE 16			32,28	35.
FORM 990-EZ	OTHER ASSETS		STATEMENT	2
DESCRIPTION		BEG. OF YEAR	END OF YEA	AR
SECURITY DEPOSIT OTHER DEPRECIABLE ASSETS		800. 3,097.	80	00.
TOTAL TO FORM 990-EZ, LINE 24		3,897.	2,7	75.
FORM 990-EZ OCCUPANCY, RENT	, UTILITIES AND MA	AINTENANCE	STATEMENT	3
DESCRIPTION			AMOUNT	
DEPRECIATION OTHER EXPENSES			1,12 13,15	
TOTAL TO FORM 990-EZ, LINE 14			14,2	77.

FORM 990-EZ	INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS		STATE	MENT	4
DIRECTLY OR	ANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL PRACT?	[] YES	[X]	NO
	ANIZATION, DURING THE YEAR, PAY PREMIUMS, INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?.	. [] YES	[X]	NO

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STATEMENT

5

TO FOCUS ON THOSE INITIATIVES THAT HAVE THE POTENTIAL TO ENHANCE NORFOLK'S AND THE REGION'S COMPETITIVENESS AND QUALITY OF LIFE, INCLUDING THE CONTINUED GROWTH AND DEVELOPMENT OF THE PORT OF VIRGINIA AND THE MODELING AND SIMULATION INDUSTRY IN NORFOLK AND THE REGION; ENHANCING NORFOLK'S AND THE REGION'S ABILITY TO ATTRACT AND RETAIN YOUNG TALENT; PARTNERING WITH NORFOLK PUBLIC SCHOOLS IN SUPPORT OF THE NPS LEADERSHIP ACADEMY AND SUPPORTING EFFORTS TO ENSURE A HIGH SPEED PASSENGER RAIL CONNECTION TO SOUTH HAMPTON ROADS.

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STATEMENT

6

TO FOCUS ON THOSE INITIATIVES THAT HAVE THE POTENTIAL TO ENHANCE NORFOLK'S AND THE REGION'S COMPETITIVENESS AND QUALITY OF LIFE, INCLUDING THE CONTINUED GROWTH AND DEVELOPMENT OF THE PORT OF VIRGINIA AND THE MODELING AND SIMULATION INDUSTRY IN NORFOLK AND THE REGION; ENHANCING NORFOLK'S AND THE REGION'S ABILITY TO ATTRACT AND RETAIN YOUNG TALENT; PARTNERING WITH NORFOLK PUBLIC SCHOOLS IN SUPPORT OF THE NPS LEADERSHIP ACADEMY AND SUPPORTING EFFORTS TO ENSURE A HIGH SPEED PASSENGER RAIL CONNECTION TO SOUTH HAMPTON ROADS.

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization 990-EZ (Including Information on Listed Property)

➤ See separate instructions.

► Attach to your tax return.

OMB No 1545-0172

Attachment Sequence No 67

Name(s) shown on return

Business or activity to which this form relates

Identifying number

GREATER NORFOLK CORPO	RATION		FOR	M 990-1	EZ PAGE	1	54-1081488
Part Election To Expense Certain Prope	rty Under Section 1	79 Note: If yo	ou have any lis	sted property,	complete Part	V before yo	ou complete Part I.
1 Maximum amount See the instruction:	s for a higher limit	for certain b	usinesses			. 1	<u>250,000.</u>
2 Total cost of section 179 property place	ed in service (see	instructions) .			2	
3 Threshold cost of section 179 property	y before reduction	ın limitation				3	800,000.
4 Reduction in limitation. Subtract line 3	from line 2 If zero	or less, ente	er -0-	_		4	
5 Dollar limitation for tax year Subtract line 4 from lin	e 1 If zero or less, enter	-0- If married fil	ing separately, se	e instructions		5	
6 (a) Description of pr	roperty		(b) Cost (busin	ness use only)	(c) Elected	cost	
	<u>-</u>						
7 Listed property. Enter the amount from	n line 29			7			
8 Total elected cost of section 179 proper	-	 s in column (i	 c) lines 6 and			8	
9 Tentative deduction. Enter the smaller	•	3 111 001011111 (o), iii les e and	•		9	
10 Carryover of disallowed deduction from		007 Form 45	 :62	•	•	10	
	•		-	ral ar tipa E		-	
		•		•	-	11	
12 Section 179 expense deduction. Add I						12	
13 Carryover of disallowed deduction to 2 Note: Do not use Part II or Part III below for				▶ 13			
Part II Special Depreciation Allows	ance and Other L	epreciation	(Do not inclu	ide iisted prop	perty)	1	
14 Special depreciation for qualified prop	- '	ted property) placed in se	rvice during ti	ne tax year	14	
15 Property subject to section 168(f)(1) el	ection		•	•		15	
16 Other depreciation (including ACRS)				<u> </u>		16	1,122.
Part III MACRS Depreciation (Do no	ot include listed p)			
		Se	ection A				
17 MACRS deductions for assets placed	in service in tax y	ears beginnir	ng before 200	8		_ 17	
18 If you are electing to group any assets placed in se							
Section B - Assets	Placed in Service	e During 20	08 Tax Year	Using the Ge	neral Deprecia	tion Syste	em
(a) Classification of property	(b) Month and year placed in service	(business/i	or depreciation nvestment use instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property	_]						
b 5-year property							
c 7-year property							
d 10-year property							
e 15-year property							
f 20-year property	1						
g 25-year property				25 yrs		S/L	
	,			27 5 yrs.	ММ	S/L	
h Residential rental property	/			27 5 yrs	MM	S/L	
	 		-	39 yrs.	MM	S/L	
 Nonresidential real property 		 			MM	S/L	
Section C - Assets	Placed in Service	During 200	8 Tax Year U	sing the Alte			tem
20a Class life					T	S/L	
b 12-year	╡			12 yrs.		S/L	
	 				NAMA	S/L	
				40 yrs.	MM		
<u> </u>	- 00					1 1	
21 Listed property. Enter amount from lin						21	
22 Total. Add amounts from line 12, lines			-				1 100
Enter here and on the appropriate line	-	•	•	itions - see ins	str .	22	1,122.
23 For assets shown above and placed in	•	e current yea	ar, enter the				
portion of the basis attributable to sec				23			Fa 4866 (0000)
11025 1 HA For Paperwork Reduction	n ACT NOTICE Sec	senarate in	STRUCTIONS				Form 4562 (2008)

m 4562 (2008)	GRE	ATER NO	RFOL	K COI	RPOF	RATIC	N_				54-	1081	488	Page 2
recreation, or a	musement.)	•							•	·		_		
Note: For any t through (c) of S	venicie for wi Section A. all	hich you are u I of Section B.	sing the and Sec	standard tion C if	mileag applica	ge rate oi ible	dedu	cting lease	e expens	e, comp	ete only	i 24a, 24	b, colun	nns (a)
							mits fo	or passeng	er auton	nobiles.))			
Do you have evidence to s	support the bu	siness/investm	ent use cla	aimed?	TY	'es	No	24b lf "Y	es." is th	ne evide	nce writt	en?	Yes	No
(a)	(b)	(c)	T		<u> </u>				Γ-					<u></u>
Type of property	Date			Cost or		sis for depre		Recovery	1			• 1	Elec	cted
(list vehicles first)	Service			her basıs	(bu			period	Conv	rention	dedu	ction		
Special depreciation alle	owance for o	ualified listed	property	nlaced i	n servi	ce dunn	the t	ax vear an	d	T	-			
			p p ,	places.		00 001	,	an your an	u .	25		ł		
			ess use.							1 20				
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Property used 50% or k	es in a quali	L							L		1			
1 Toperty asea 3070 of the	333 III a qual				\neg				6/1		Г			
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	<u> </u>							 						
Add	(h) lines 05	L				4		<u> </u>	5/L -	28 elated person exception to comple				
		_				, page 1				28	<u> </u>			
Add amounts in column	(I), line 26. E											29		
							_							
	our employe	es, first answ	er the qu	estions i	n Sect	ion C to	see if y	you meet a	an excep	otion to	completi	ng this s	ection to	or
			,			_								
			(a)			(b) (c)		(d)	(4)	(f)	
Total business/investment	miles driven d	luring the	Veh	ncle	Ve	hicle		/ehicle	Vel	ncle	Veh	ıcle	Vehi	ıcle
year (do not include comi	muting miles)													
Total commuting miles	driven during	the year					ļ							
Total other personal (no	ncommuting	g) miles												
driven		ē												
Total miles driven during	g the year.													
Add lines 30 through 32	2		}	1			1							
_		nal use	Yes	No	Yes	No	Yes	s No	Yes	No	Yes	No	Yes	No
	•													
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•						}		į	İ					
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_	ible for perso	Jilai											İ	
<u>use:</u>	Section C	Ougations	for Empl	levers M	ba Daa	uida Val	<u> </u>	for Use b	. Their I					
war those augstions to									_			m	ara than	50/
•	dereilimie ii	you meet an e	skceptioi	i to com	neurig	Section	D IQI V	renicies us	ea by ei	прюуее	s who ar	e not m	ore trian	370
	n nakov oto	tement that a	robibito c	ll paraga	al was	of walawal		dudina son						l Na
<u> </u>	en policy sta	tement mat p	ronibits a	ııı person	ai use	or venici	es, inc	iuaing cor	nmuting	, by you	r		res	No
• • • • • • • • • • • • • • • • • • • •			-1-1-1							-	•			
-		•	•			•	-			our/			1	1
, ,					icers, o	directors	, or 1%	6 or more	owners	•	•			<u> </u>
•	-								-	-			<u> </u>	
•		-	•		nforma	ition from	your	employee	s about					
								•					<u> </u>	
•								•	-	-			-	<u> </u>
Note: If your answer to	37, 38, 39, 4	0, or 41 is "Ye	s," do no	ot comple	ete Sec	ction B fo	r the c	covered ve	hicles.					<u> </u>
art VI Amortization														
(a)	f costs	Date	(b)		(c)		\top	(d)		(e)	thon	۸~	(f)	
	f costs	Date	(b) amortization begins		(C) Amortiza amour	able nt		(d) Code section		(e) Amortiza period or per	tion rcentage	Am	(f) nortization this year	
(a)			amortization begins	ar:	Amortiza	uble it		Code		Amortiza	tion rcentage	Arr for	ortization	
	recreation, or a Note: For any through (c) of Setion A - Depreciation at Do you have evidence to set (a) Type of property (list vehicles first) Special depreciation alloused more than 50% in Property used more than 50% in Property used more than 50% or lead to the provided vehicles to you provided vehicles to you provided vehicles to you provided vehicles to you provided vehicle available during off-duty hours? Was the vehicle available during off-duty hours? Was the vehicle available during off-duty hours? Was the vehicle available during off-duty hours? Was the vehicle available during off-duty hours? Was the vehicle available during off-duty hours? Was the vehicle available during off-duty hours? Was the vehicle available another vehicle available another vehicle available another vehicle available another vehicle available another vehicle available another vehicle available another vehicle available another vehicle available. Bo you maintain a written employees? See the insense or related persons. Do you maintain a written employees? See the insense of the vehicles, Do you meet the require the vehicles, Do you meet the require the vehicles of the vehicles. Note: If your answer to	Listed Property (Include a recreation, or amusement.) Note: For any vehicle for we through (c) of Section A, all stion A - Depreciation and Other In Do you have evidence to support the but (a) Type of property (list vehicles first) Special depreciation allowance for coused more than 50% in a qualified by Property used more than 50% in a qualified by Property used more than 50% in a qualified by Property used for vehicles used out provided vehicles to your employers evehicles. Total business/investment miles driven during the year (do not include commuting miles) Total commuting miles driven during through 32 Was the vehicle available for person during off-duty hours? Was the vehicle used primarily by a than 5% owner or related person? Is another vehicle available for person use? Section Commutation and written policy state employees? Do you maintain a written policy state employees? See the instructions for Do you provide more than five vehicle use of the vehicles, and retain the Do you meet the requirements conceined for the provides of the vehicles, and retain the Do you meet the requirements conceined for the provides of the vehicles, and retain the Do you meet the requirements conceined for provides of the vehicles, and retain the Do you meet the requirements conceined for the provides of the vehicles, and retain the policy of the use of the vehicles, and retain the policy of the use of the vehicles, and retain the policy of the use of the vehicles, and retain the policy of the use of the vehicles, and retain the policy of the use of the vehicles, and retain the policy of the use of the vehicles, and retain the policy of the use of the vehicles, and retain the policy of the use of the vehicles, and retain the policy of the use of the vehicles of the vehicles of the vehicles of the vehicles of the vehicles of the vehicles of the vehicles of the vehicles of the vehicles of the vehicles of the vehicles of the vehicles of the vehicles of the vehicles of the vehicles of the vehicles of the vehicles of the veh	Listed Property (Include automobiles, concerceation, or amusement.) Note: For any vehicle for which you are unthrough (c) of Section A, all of Section B, a	Action A - Depreciation and Other Information (Caution: Samples of property (list vehicles first)) Special depreciation and Other Information (Caution: Samples of placed in service) Special depreciation allowance for qualified listed property used more than 50% in a qualified business use. Property used more than 50% in a qualified business use. Property used more than 50% in a qualified business use. Property used more than 50% in a qualified business use. Property used some of the service in the service	Listed Property (Include automobiles, certain other vehicle recreation, or amusement.) Note: For any vehicle for which you are using the standard through (c) of Section A, all of Section B, and Section C if it in A - Depreciation and Other Information (Caution: See the in Do you have evidence to support the business/investment use claimed? (a)	Listed Property (Include automobiles, certain other vehicles, cel recreation, or amisement.) Note: For any vehicle for which you are using the standard mileag through (c) of Section A, all of Section B, and Section C if application A - Depreciation and Other Information (Caution: See the instruction D you have evidence to support the business/investment use claimed? [Include	Listed Property (Include automobiles, certain other vehicles, cellular telerecetation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or through (c) of Section A. Depreciation and Other Information (Caution: See the instructions for ling to you have evidence to support the business/investment use claimed? (a) (b) (c) (d) (Cost or place in use percentage and other business/investment use claimed? (ist vehicles first) (list vehicles first)	Listed Property (Include automobiles, certain other vehicles, cellular telephone recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deduction. A Depreciation and Other Information (Caution: See the instructions for limits for through (c) of Section A, all of Section B, and Section C it applicable. To you have evidence to support the business/investment use claimed? (a) (b) (c) (a) (b) (c) (c) (c) (c) (c) (d) (c) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain retention, or amisoment.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease through (c) of Section A, all of Section B, and Section C I applicable Item A - Depreciation and Other Information (Caution: See the instructions for limits for passing in Digital part of passing of the business/investment use claimed? Item A - Depreciation and Other Information (Caution: See the instructions for limits for passing on the passing of the passing o	Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computer vehicles on the content of	Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and received to receive the content of	Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property received for which you are using the standard mileage rate or deducting lease expense, complete only through (o) 5 Section A, all of Section C it applicable. Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only through (o) 5 Section A, all of Section C it applicable. Do you have wednece to support the business/investment use claimed? Yes No	Listed Property (include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for responsible for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24 intend 16 of Section A, and Section B, and Section C 16 applicable Property (of property and 16 the information (Caution: See the instructions for limits for passenger automobiles). 10 you have evidence to support the business/investment use claimed? 10 you have evidence to support the business/investment use claimed? 10 you have evidence to support the business/investment use claimed? 10 you have evidence to support the business/investment use claimed? 10 you have evidence to support the business/investment use claimed? 10 you have evidence to support the business with th	Listed Property (Include automobies, certain other vehicles, cellular telephones, certain computers, and property used for enterts received for enterts and property used for enterts received for enterts and property described for which you are using the standard miseage rate or deducting lease expense, complete only 24a, 24b, column from the following of the intermation (Caution: See the instructions for limits for passenger automobiles). By our base walkers to support the business/fivestimation (Caution: See the instructions for limits for passenger automobiles). By our base walkers to support the business/fivestimation (Caution: See the instructions for limits for passenger automobiles). By our base walkers to support the business/fivestimation (Caution: See the instructions for limits for passenger automobiles). By our law and the standard mobiles are property placed in service to limit for passenger automobiles. The complete of the passenger automobiles are applied to the passenger automobiles. The complete of the passenger automobiles are applied to the passenger automobiles. The complete of the passenger automobiles are applied to the passenger automobiles. The complete of the passenger automobiles are applied to the passenger automobiles. The complete of the passenger automobiles are applied to the passenger automobiles. The complete of the passenger automobiles are applied to the passenger automobiles. The complete of the passenger automobiles are applied to the passenger automobiles. The complete of the passenger automobiles are applied to the passenger automobiles. The complete of the passenger automobiles are applied to the passenger automobiles. The complete of the passenger automobiles are applied to the passenger automobiles. The complete of the passenger automobiles are applied to the passenger automobiles. The complete of the passenger automobiles are applied to the passenger automobiles. The complete of the passenger automobiles are applied to the passenger automobiles. The co

Form 4562 (2008)

43

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

Form 8868 (Rev. April 2009) Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev 4-2009)

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box	▶ X
● If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of	
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previous	sly filed Form 8868.
Part 1 Automatic 3-Month Extension of Time. Only submit original (no copies needed).	
A corporation required to file Form 990-T and requesting an automatic 6-month extension · check this box and	complete
Part I only	▶ 🗀
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to reques to file income tax returns.	st an extension of time
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extended below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 elect (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electron www.irs.gov/efile and click on e-file for Chanties & Nonprofits.	ronically if (1) you want the additional roonsolidated Form 990-T. Instead.
Type or Name of Exempt Organization	Employer identification number
print GREATER NORFOLK CORPORATION	54-1081488
File by the due date for Number, street, and room or suite no. If a P.O. box, see instructions	74-1001400
filing your return See 207 GRANBY STREET, NO. 301	
Instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. NORFOLK, VA 23510	
Check type of return to be filed (file a separate application for each return):	
Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 990-EZ Form 990-T (trust other than above) Form	m 4720 m 5227 m 6069 m 8870
THE CORPORATION The books are in the care of ▶ 207 GRANBY STREET, SUITE 203, NORFOLK Telephone No. ▶ (757) 622-2242 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) box ▶ If it is for part of the group, check this box ▶ and attach a list with the names and EINs of	f this is for the whole group, check this
1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time JANUARY 15, 2010 , to file the exempt organization return for the organization name	
is for the organization's return for:	ed above. The extension
► calendar year or	
► X tax year beginning JUN 1, 2008 , and ending MAY 31, 2009	
2 If this tax year is for less than 12 months, check reason: Initial return Final return	Change in accounting period
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	Change in accounting period 3a \$
 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated 	3a \$
 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 	
 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, 	3a \$
 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 	3a \$

LHA

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.