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Return of Private Foundation

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

OMB No 1545-0052

		the Treasury Note. The foundation in			to use a copy of this			rtına reauırements.	2009
_		r year 2009, or tax year beginning	,			, and e			
		I that apply: Initial return			Initial return of a fo	•		Final return	
		Amended return			Address chan	ge .		Name change	
	the IRS	Name of foundation						A Employer identification r	number
	erwise							20-0081041	
	print r type.	Number and street (or P O box number if mail is n				•	Room/suite	B Telephone number	
	Specifi	5859 HARBOUR VIEW B	ΓΛΓ). <u>,</u>	SUITE 30	0		(757)935-90	
	ructions							C If exemption application is per D 1 Foreign organizations,	
H (heck tv	rpe of organization: X Section 501(c)(3	3) exe	mpt n	rivate foundation			Foreign organizations meet check here and attach com	ing the 85% test,
	¬ ′	on 4947(a)(1) nonexempt charitable trust	<u> </u>		axable private founda	ition			
I Fa		et value of all assets at end of year J Acco				Accr	rual	E If private foundation statu under section 507(b)(1)(/	
(fr	om Pa	rt II, col. (c), line 16)			ecify)			F If the foundation is in a 60)-month termination
	\$	3,021,625. (Part I, c	olum	nn (d)	must be on cash l	oasis)		under section 507(b)(1)(l	3), check here 🕨 🔲
Pa	 (Analysis of Revenue and Expenses The total of amounts in columns (b), (c), and (d) may n necessarily equal the amounts in column (a))	ot		ı) Revenue and penses per books		vestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
		ontributions, gifts, grants, etc., received	-		260,000.			N/A	
		heck fitte foundation is not required to attach Schill terest on savings and temporary	' -						
	•	terest on savings and temporary ash investments ividends and interest from securities	-		109,897.	1.0	9,897.		TATEMENT 1
		ross rents	-		100,007.		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	, , , , , , , , , , , , , , , , , , ,)IAIBMBNI I
	l	et rental income or (loss)							
d)		et gain or (loss) from sale of assets not on line 10			<204,253.	>			
Revenue	b G	ross sales price for all sets on line 6a	_						
eve	7 c	apital gain net income (from Part IV, line 2)	-				0.		
ш		et short-term capital gain		1					
	9 Ir	ncome modifications RECEIVED	┰┝	 			·		·
	IU4 ar	and allowances less Cost of goods sold	13	\vdash					
		ross profit of (loss) NOV 1 5 2019	19						
		ther income	188						
		otal. Add lines 1 through 11 DEN UT			165,644.	10	9,897.		
		ompensation of officers directors, trustees, etc		.	0.		0.		0.
	l	ther employee salaries and wages	-						
S	1	ension plans, employee benefits	-						
Sus	1	egal fees .ccounting fees	ŀ			'			
Expenses	l	ther professional fees	r						· · · · · · · · · · · · · · · · · · ·
Ve B		nterest							
rati	18 T	axes STMT 2			3,726.		0.		0.
nist	19 D	epreciation and depletion	-						~
Ē	20 0	occupancy	-						
Ψ	21 T	ravel, conferences, and meetings	ŀ						
Operating and Administrative	22 P 23 0	rinting and publications Other expenses STMT 3	-		32,206.		0.		0.
atin	24 T	otal operating and administrative	Ī	-	32,200.				
pera	e	xpenses. Add lines 13 through 23			35,932.		0.		0.
Õ	25 C	Contributions, gifts, grants paid			141,000.				141,000.
•		otal expenses and disbursements						1	
:		add lines 24 and 25			176,932.		0.		141,000.
;		Subtract line 26 from line 12:			-11 200				
)	L	xcess of revenue over expenses and disbursements	-		<11,288.		9,897.	 	
		let investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)	-		•	10	<u> </u>	N/A	·
0235		released that the etter for the grant of outer of						-1/20	

For	m 99	0-PF (2009) THE OVERTON FAMILY FOUND	DATION	20-	0081041	Page 2
Б		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	f year	
	art	Balance Sneets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market	Value
	1	Cash - non-interest-bearing	<2.>			
	1	Savings and temporary cash investments				
		Accounts receivable ►	***			
		Less: allowance for doubtful accounts				
	4	Pledges receivable				·
	7	Less: allowance for doubtful accounts				
	_	Grants receivable				
	_				_	
	6	Receivables due from officers, directors, trustees, and other				
	_	disqualified persons .				
	7	Other notes and loans receivable				
		Less: allowance for doubtful accounts				
ets	l	Inventories for sale or use		-		
Assets	1	Prepaid expenses and deferred charges		· ·····		
•	10a	Investments - U.S. and state government obligations				
	b	Investments - corporate stock				
	C	Investments - corporate bonds				
	11	Investments - land, buildings, and equipment basis				
		Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other STMT 4	2,937,403.	2,926,113.	3,021	,625.
	14	Land, buildings, and equipment; basis ▶			•	
		Less accumulated depreciation				
	15	Other assets (describe ►				
	16	Total assets (to be completed by all filers)	2,937,401.	2,926,113.	3,021	.625.
	17	Accounts payable and accrued expenses				
S	18	Grants payable				
	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
Ϊģ	1	Mortgages and other notes payable				
<u>"</u>		Other liabilities (describe)				
		The state of the s				
	23	Total liabilities (add lines 17 through 22)	0.	0.		
_	-	Foundations that follow SFAS 117, check here		<u> </u>		
		and complete lines 24 through 26 and lines 30 and 31				
ės	24	Unrestricted				
anc	25	Temporarily restricted				
Net Assets or Fund Balances	26	Permanently restricted				
ğ	20	Foundations that do not follow SFAS 117, check here		·		
Ē		and complete lines 27 through 31.				
þ	27	Capital stock, trust principal, or current funds	0.	0.		
ets	27	· · · · · · · · · · · · · · · · · · ·	0.	0.		
SS	28	Paid-in or capital surplus, or land, bldg., and equipment fund	2,937,401.			
at A	29	Retained earnings, accumulated income, endowment, or other funds		2,926,113.		
ž	30	Total net assets or fund balances	2,937,401.	2,926,113.		
		Table link illains and make some through believed	2 027 401	2 026 112		
_	31	Total liabilities and net assets/fund balances	2,937,401.	2,926,113.		
P	art	Analysis of Changes in Net Assets or Fund Ba	alances			
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30			
•		st agree with end-of-year figure reported on prior year's return)		1	2,937	401
2	•	r amount from Part I, line 27a		2		, 101. , 288.>
		r increases not included in line 2 (itemize)		3	<u> </u>	0.
		lines 1, 2, and 3		4	2,926	
-		eases not included in line 2 (itemize)		5	4,340	0.
-		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (h) line 30	6	2,926	
<u>~</u>		Taring of Taring Of			Form 990-P	

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Form **990-PF** (2009)

See the Part VI instructions.

			0081			Page 4
Pai	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	<u>948 -</u>	see ir	<u>ıstru</u>	ctior	<u>1S)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1			1,0	99.
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
	Add lines 1 and 2	3			1,0	99.
-	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			_ , -	0.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5			1.0	99.
	Credits/Payments:				- , 	
	, ,					
	Backup withholding erroneously withheld 6d 6	,	ı		2 4	00
-	Total credits and payments. Add lines 6a through 6d	7			<u> </u>	<u>00.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9			<u> </u>	
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			1,3	01.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax	11				<u>0.</u>
	rt VII-A Statements Regarding Activities				V	Ni.
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın		-	Yes	
	any political campaign?			1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or				
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?			1c		_X_
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ▶ \$ 0 .					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		_X_
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	e law				
	remain in the governing instrument?			6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	If "Yes," complete Part II, col. (c), and Part XV					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	VA					l
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					İ
-	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calc	endar		_		
•	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X
	The state of the s	•	Forr	n 990	-PF	

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P	art·X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	2,569,353.
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	2,569,353.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,569,353.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	38,540.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,530,813.
6	Minimum investment return Enter 5% of line 5	6	126,541
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part.)	nd certaii	
1	Minimum investment return from Part X, line 6	1	126,541.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)	1	
C	Add lines 2a and 2b	2c	1,099
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	125,442.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	125,442
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	125,442
P	art XII Qualifying Distributions (see instructions)	·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	141,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	141,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	1,099
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	139,901.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies	for the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,	·			
line 7				125,442.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			140,359.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ► \$ 141,000.				
a Applied to 2008, but not more than line 2a	 		140,359.	
b Applied to undistributed income of prior	i	_		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.	·····		
d Applied to 2009 distributable amount				641.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carvover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:	:			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				· · · · · · · · · · · · · · · · · · ·
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				124,801.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004	_			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010	_			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				Eorm 990-DE (2000)

	RTON FAMILY				81041 Page 10
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling o			1		
foundation, and the ruling is effective fo	•	-	▶ └		
b Check box to indicate whether the found		ig foundation described i		4942(j)(3) or49	942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year	4 > 0000	Prior 3 years	1,0000	ļ ,, <u>-</u>
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly				-	
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter:(1) Value of all assets					
, ,					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter;					
(1) Total support other than gross					
investment income (interest,				1	
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from				-	
an exempt organization					
· •					
(4) Gross investment income Part XV Supplementary Info	rmation (Comple	te this part only i	if the foundation	had \$5,000 or m	ore in accets
at any time during t	•			· παα φο,σσο στ πι	ore in assets
1 Information Regarding Foundation					
a List any managers of the foundation wh	₹	than 2% of the total centr	ributions received by the	a foundation hafara the ala	co of any toy
year (but only if they have contributed n			ilbullons received by the	e loundation before the cio	se of ally tax
NONE					
b List any managers of the foundation wh	a own 100/ or more of th	a stack of a corneration (or on aqually large part	upp of the augustatus of a s	artaarahin ar
other entity) of which the foundation ha			or arrequally large pure	ion of the ownership of a p	armership of
NONE					
	ion Cront Citt Loon	Cabalavakin ata Du			
2 Information Regarding Contribute Check here ► X if the foundation of					
the foundation makes gifts, grants, etc.					
	·				
a The name, address, and telephone num	per of the person to whor	n applications should be	auuresseu;		
b The form in which applications should to	ne submitted and informat	tion and materials they sh	rould include:		· · · · · · · · · · · · · · · · · · ·
c Any submission deadlines:			· · · · · · · · · · · · · · · · · · ·	-	
					
d Any restrictions or limitations on award	s, such as by geographica	al areas, charitable fields,	kınds of ınstitutions, or	other factors:	

Grants and Contributions Paid During the	If some set as a set	Payment	T	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
Paid during the year				
SEE STATEMENT 5				
Total			▶ 3a	141,0
Approved for future payment				
NONE				
110112				
			ļ	
Total			<u>▶</u> 3b	

Form 990-PF (2009) THE OVERTON FA	-			20-0	0081041 Page 1
Part XVI-A Analysis of Income-Prod	ucing Activiti	es			
Enter gross amounts unless otherwise indicated.	Unrelated	business income		by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a	_		_		
b	_				
c	_				
d	_				
e	_		_		-
f	-		_		
g Fees and contracts from government agencies	-		_		
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	109,897.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					<u> </u>
b Not debt-financed property					
6 Net rental income or (loss) from personal property			_		
7 Other investment income					

than inventory 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory

8 Gain or (loss) from sales of assets other

11 Other revenue:

Part XVI-B

12 Subtotal Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e)

(See worksheet in	line 13 instructions to verify calculations.)
Part XVI-B	Relationship of Activities to the Accomplishment of Exempt Purposes

0

356.

13

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

								<u>.</u>		
2a	ls the	foundation directly or indirectly	affiliated with, or re	lated to, one or	more tax-exempt	organizatior	ns described			
	ın sec	tion 501(c) of the Code (other t	han section 501(c)(3)) or in sectioi	n 527?				Yes	X No
t	If "Yes	s," complete the following sched				·.				
		(a) Name of orga	nization	(b) Type of organiz	ation		(c) Description	of relationship	
		N/A								
		enalties of perjury, I declare that I han						of my knowledge ar	nd belief, it is true, correct	. ,
	and con	iplete Declaration of preparer (other	pan taxpayer or nouciar	y) is based on air	/ .		ny knowledge			
	N _	//COM			11/10/	10	min	· gc/		
Here	Sı	gnature of officer or trustee			Date		Title			
Ì		Preparer's				Date,		Check if self-	Preparer's identifyii	ng number
Sign	er's	signature /	2.01	Cla		11/4		employed 🕨 🗌		
•	Paid Preparer's Use Only	Firm's name (or yours WILFO	RE & ASSO	CIATES	PC	/ /		EIN ►		
	F S S	ıl self-employed), 652	INDEPENI	DENCE P	ARKWAY S	TE 11	0	ļ		
		address, and ZIP code CHESA	PEAKE, VA	<u> 23320</u>				Phone no.	757-456-0)111
	-								Form 990-	PF (2009)

02-02-1

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, or 990-PF.

OMB No 1545-0047

2009

Employer identification number

THE OVERTON FAMILY FOUNDATION 20-0081041 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF). but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

Employer identification number

THE OVERTON FA	AMILY F	TOUNDAT	'IC	N
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THE O	VERTON FAMILY FOUNDATION	2(20-0081041		
Part I	Contributors (see instructions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
1	BSJ, LLC 5859 HARBOUR VIEW BLVD SUITE 300 SUFFOLK, VA 23435		Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
<u>2</u>	ETHERIDGE CONSTRUCTION CORPORATION 5859 HARBOUR VIEW BLVD SUITE 300 SUFFOLK, VA 23435	 \$	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
3	FAIRWAYS CROSSING LLC 5859 HARBOUR VIEW BLVD SUITE 300 SUFFOLK, VA 23435	\$\$	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
4	OVERYORK LLC 5859 HARBOUR VIEW BLVD SUITE 300 SUFFOLK, VA 23435	_ _ \$	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
5	ROBERT S BASS 533 HATCHER TRACE CHESAPEAKE, VA 23322	 \$	Person X Payroll		
(a) N o.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
6	VICTOR R. WILFORE 1151 KINGSBURY DRIVE		Person X Payroll		
923452 02-1	CHESAPEAKE, VA 23322	Schedule R (Form	990 990-F7 or 990-PF) (2009)		

Name of organization

Employer identification number

THE O	VERTON FAMILY FOUNDATION	2(20-0081041		
Part I	Contributors (see instructions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
7	WILLIAM S. OVERTON 5859 HARBOUR VIEW BLVD SUITE 300 SUFFOLK, VA 23435	\$50,000. 	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 Complete Part II if there is a noncash contribution.)		

FORM 990-PF DIVIDENI	S AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	1	
OURCE		GROSS AMOUNT		CAPITAL GAINS DIVIDENDS		COLUMN (A) AMOUNT		
MERRILL LYNCH -	•	109,897.			0.	109,897.		
TOTAL TO FM 990-PF, PART I, LN		N 4 109,8		0.		109,897.		
FORM 990-PF		TAX	ES			STATEMENT	2	
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST- COME	(C) ADJUSTED NET INCOM			
FOREIGN TAXES INCOME TAXES		2,121. 1,605.		0.			0.	
TO FORM 990-PF, PG 1, LN 18		3,726.		0.			0.	
TO FORM 990-PF, PG 1, LN 18 =			XPENSES	0.		STATEMENT	3	
FORM 990-PF	0 (EXPE	THER E	XPENSES (B) NET INV	EST-	(C) ADJUSTED NET INCOM	(D) CHARITA	3 BLE	
FORM 990-PF DESCRIPTION INVESTMENT MANAGEMENT FEES	O (EXPE PER	THER E	(B) NET INV	EST-	ADJUSTED	(D) CHARITA	3 BLE	
	O (EXPE PER 3	THER E	(B) NET INV	EST-COME	ADJUSTED	(D) CHARITA	3 BLE ES	
FORM 990-PF DESCRIPTION INVESTMENT MANAGEMENT FEES STATE REGISTRATION TO FORM 990-PF, PG 1, LN 23	O (EXPE PER 3	THER E. A) NSES BOOKS 2,181. 25. 2,206.	(B) NET INV	EST- COME	ADJUSTED	(D) CHARITA	3 BLE 0. 0.	
FORM 990-PF DESCRIPTION INVESTMENT MANAGEMENT FEES STATE REGISTRATION TO FORM 990-PF, PG 1, LN 23 FORM 990-PF	O (EXPE PER 3	THER E A) NSES BOOKS 2,181. 25. 2,206. ER INV	(B) NET INV MENT IN	EST- COME 0. 0.	ADJUSTED	(D) CHARITA E PURPOS	3 BLE ES 0. 0.	
FORM 990-PF DESCRIPTION INVESTMENT MANAGEMENT FEES STATE REGISTRATION	O (EXPE PER 3	THER E A) NSES BOOKS 2,181. 25. 2,206. ER INV	(B) NET INV MENT IN ESTMENTS	EST- COME 0. 0.	ADJUSTED NET INCOM	(D) CHARITA E PURPOS STATEMENT FAIR MARKE	3 BLE ES 0. 0. 4	

	AND CONTRIBUTIONS DURING THE YEAR	STATEMENT 5		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT	
ADVANCING NATIVE MISSIONS PO BOX 5303 CHARLOTTESVILLE, VA 22905	N/A OUTREACH MINISTERIES			
CAMPUS CRUSADE FOR CHRIST 211 DRADER ROAD NW BLACKSBURG, VI GINIA 2406				
FAITH BIBLE COLLEGE 107 SEEKEL STREET NORFOLK, VA 23505	•			
FEED THE CHILDREN P.O. BOX 36 OKLAHOMA CITY, OK 731019989	N/A TO HELP CHILDREN IN NEED.		1,500.	
FIRST BAPTIST CHRISTIAN SCHOOL 237 N. MAIN STREET SUFFOLK, VA 23434	N/A TRAINING AND RESOURCES OUTREACH MINISTERIES		10,000.	
GLAD TIDINGS 53 HARRISTOWN RD PARADISE, PA 17562	N/A OUTREACH MINISTERIES		10,000.	
GRACE LIFE INTERNATIONAL 1337 HUNDRED OAKS DRIVE STE EE CHARLOTTE TH CAROLIN	N/A OUTREACH MINISTERIES			
HARVEST FELLOWSHIP 19290 BATTERY PARK RD SMITHFIELD, VA 23430	N/A OUTREACH MINISTERIES		10,000.	

THE OVERTON FAMILY FOUNDATION		20-0081041
LEADERSHIP TRAINING INTERNATIONAL PO BOX 9882 CHESAPEAKE, VA 23321	N/A TRAINING AND RESOURCES OUTREACH MINISTERIES	5,000.
LIBERTY UNIVERSITY 1971 UNIVERSITY BOULEVARD LYNCHBURG, VI GINIA 2450	N/A TRAINING AND RESOURCES OUTREACH MINISTERIES	12,500.
MOODY ADAMS EVANGELISTIC ASSOCIATION 11715 BRICKSOME AVE B-3 BATON RUGE, LA 70816	N/A OUTREACH MINISTERIES	10,000.
NCF 10200 W. 75TH ST. STE 267 SHAWNEE MISSION, KS 66204	N/A OUTREACH MINISTERIES	
NORTH AMERICAN MISSION BOARD 4200 NORTH POINT PARKWAY ALPHARETTA RGIA 30022	N/A TRAINING AND RESOURCES OUTREACH MINISTERIES	5,500.
PRD, INC 448 THISTLEY LANE CHESAPEAKE, VA 23322	N/A OUTREACH MINISTERIES	13,000.
PRISON FELLOWSHIP P.O. BOX 1550 MERRIFIELD, VA 221161550	N/A OUTREACH MINISTERIES	
RIVER OAK CHURCH 140 KEMPSVILLE ROAD CHESAPEAKE, VA 23320	N/A OUTREACH MINISTERIES	12,500.
RIVER OAK CHURCH - IMB 140 KEMPSVILLE ROAD CHESAPEAKE, VA 23320	N/A OUTREACH MINISTERIES	
SEMILLA PO BOX 65078 VIRGINIA BEACH, VA 234675078	N/A TO HELP CHILDREN IN NEED.	5,000.

THE OVERTON FAMILY FOUNDATION	20	-0081041
	NING AND RESOURCES EACH MINISTERIES	
STONEBRIDGE SCHOOL N/A 1629A JOLLIFF RD CHESAPEAKE, VA TRAI 23321 OUTR	NING AND RESOURCES EACH MINISTERIES	15,000.
UKRAINE CHILDREN'S PROJECT N/A PO BOX 9665 CHESAPEAKE, VA TO H 23321 NEED	ELP CHILDREN IN	1,000.
UNION MISSION N/A PO BOX 3203 NORFOLK, VA HELP 235143203 NEED	ING INDIVIDUALS IN	10,000.
	NING AND RESOURCES EACH MINISTERIES	5,000.
YOUNG LIFE N/A PO BOX 520 COLORADO SPRINGS, CO OUTR 80901	EACH MINISTERIES	5,000.
WITNESS TO HOPE MINISTRIES N/A 1305 HAWTHORNE CIRCLE OAKDALE, OUTR PA 15071	EACH MINISTERIES	10,000.
TOTAL TO FORM 990-PF, PART XV, LINE 3A		141,000.

Form 8868	(Rev. 4-2009)			Page 2
Note. Only	re filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo y complete Part II if you have already been granted an automatic 3-month extension on a previously filed re filing for an Automatic 3-Month Extension, complete only Part I (on page 1).		3868	▶ X
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	opies r	eeded)	
Type or	Name of Exempt Organization	Empl	oyer identifi	cation number
print	THE OVERTON FAMILY FOUNDATION	2	0-0081	041
File by the extended due date for	Number, street, and room or suite no. If a PO. box, see instructions. WILFORE & ASSOCIATES, PC. 652 INDEPENDENCE PA	For If	RS use only	
filing the return See instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions CHESAPEAKE, VA 23320	,		
Forr	be of return to be filed (File a separate application for each return): m 990 Form 990-EZ Form 990-T (sec 401(a) or 408(a) trust) Form 1041-A m 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720	=	orm 5227 orm 6069	Form 8870
STOP! Do	o not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	d Form 886	3.
Teleph	ALTON S OVERTON soks are in the care of ▶ 5859 HARBOUR VIEW BLVD., SUITE 300 - SU one No ▶ (757) 935-9070 FAX No. ▶ irganization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If it is for part of the group, check this box ▶ □ and attach a list with the names and EINs of all	ıs ıs fo	r the whole g	roup, check this
4 I rec	quest an additional 3-month extension of time until NOVEMBER 15, 2010			
5 For	calendar year 2009 , or other tax year beginning, and ending _			
	is tax year is for less than 12 months, check reason Initial return Final return	Ш	Change in a	counting period
	te in detail why you need the extension FORMATION FROM A THIRD PARTY HAS NOT YET BEEN RECEIVED TO SHEET THE PROPERTY OF THE	ED		
	us application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any refundable credits. See instructions	8a	\$	1,515.
	is application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	<u> </u>	Ψ	1,313.
tax	payments made Include any prior year overpayment allowed as a credit and any amount paid	8b	\$	1,515.
	ance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit			
	n FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	\$	0.
llador a	Signature and Verification	haat -	f mu knoudede	o and hokaf
	alties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the prrect, and complete, and that I am authorized to prepare this form.	e Dest O	i my knowiedę	je ano venet,
Signature I	Title >	Date	•	

923832 05-26-09 Form 8868 (Rev. 4-2009)