

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury

## **Return of Private Foundation**

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

2009

OMB No 1545-0052

Intern	al Hev	venue Service Note. The Touridation may i	be able to use a copy of this	return to sausiy state repor	ting requirements.			
For	calen	dar year 2009, or tax year beginning		, and ending				
G Check all that apply: Initial return Initial return of a former public charity Final return								
	Amended return Address change Name change							
Use	the	Name of foundation			A Employer identification	number		
	abel.	•						
Oth	erwi	se, DIANE & MICHAEL CANNE	Y FOUNDATION		20-3949382			
	print	•	livered to street address)	Room/suite	<b>B</b> Telephone number			
	r type	E 3003 MEMBER TIME ELLE	<u>E</u>		703-547-55	01		
	Spec				C If exemption application is p			
	ucut	PURCELLVILLE, VA 201	32		D 1. Foreign organizations	, check here		
H C	heck	type of organization: $\bot X \bot$ Section 501(c)(3) ex	empt private foundation		<ol><li>Foreign organizations me check here and attach co</li></ol>	mputation		
	Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation	E If private foundation sta	tus was terminated		
I Fa	ır ma	rket value of all assets at end of year   J   Accounti	•	Accrual	under section 507(b)(1)	(A), check here		
(fr	om F	Part II, col. (c), line 16)	her (specify)		F If the foundation is in a t	60-month termination		
	\$	186,420. (Part I, colu	mn (d) must be on cash b	basis)	under section 507(b)(1)	(B), check here		
Pa	rt l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes		
		necessarily equal the amounts in column (a))	expenses per books	income	income	(cash basis only)		
	1	Contributions, gifts, grants, etc., received						
	2	Check X if the foundation is not required to attach Sch. B	,	*				
	3	Interest on savings and temporary cash investments				^		
	4	Dividends and interest from securities	4,014.	4,014.	4,014.	STATEMENT 1		
	5a	Gross rents				*		
	b	Net rental income or (loss)						
•	6a	Net gain or (loss) from sale of assets not on line 10	<1,800.	>				
Revenue	b	Gross sales price for all assets on line 6a 6,000.						
ĕ	7	Capital gain net income (from Part IV, line 2)		0.				
Œ	8	Net short-term capital gain			0.			
	9	Income <sub>r</sub> modifications C.E.I./E.D						
	10a	Incomermodifications Gross sales less returns— CEIVED and allowances						
		Less Cost of goods sold						
	C	Gross profit or (loss) V 2 2 2010 Cther income						
	11	Other indome						
	12	Total. Add lines 1 through 1 1 1 1	2,214.	4,014.	4,014.			
	13	Compensation of officers directors trustees etc	0.	0.	0.	0.		
	14	Other employee salaries and wages						
	15	Pension plans, employee benefits						
36	16a	Legal fees _						
De L	b	Accounting fees						
Ä	C	Other professional fees						
<u>®</u>	17	Interest						
SCFM パーロ NUV 2 G ZUIU Operating and Administrative Expenses	18	Taxes						
nis /	19	Depreciation and depletion						
~E	20	Occupancy						
`ĕ ĕ	21	Travel, conferences, and meetings						
≘ ĕ	22	Printing and publications						
ج ق	23	Other expenses						
量	24	Total operating and administrative		_				
, ed	ŀ	expenses. Add lines 13 through 23	0.	0.	0.	0.		
٥٠	25	Contributions, gifts, grants paid	6,130.			6,130.		
Š	26	Total expenses and disbursements.				_		
<u> </u>	L	Add lines 24 and 25	6,130.	0.	0.	6,130.		
	27	Subtract line 26 from line 12:						
	a	Excess of revenue over expenses and disbursements	<3,916.					
	þ	Net investment income (if negative, enter -0-)		4,014.				
	C	Adjusted net income (if negative, enter -0-)			4,014.			
9235	U1 -	LLIA For Privacy Act and Panerwork Reduction	Act Notice see the instruc	tione		Form <b>990-PF</b> (2009)		

Part II Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only			Beginning of year	End o	
<u></u>	arc	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
٠	2	Savings and temporary cash investments	839.	112.	112.
	3	Accounts receivable >	, –		
	ľ	Less: allowance for doubtful accounts			
	4	Pledges receivable ▶	;	7 .	, "
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other		·	
		disqualified persons			
	7	Other notes and loans receivable	-		
	ŀ	Less: allowance for doubtful accounts		**************************************	
υį	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges		<del>,</del>	<u> </u>
As	-	Investments - U.S. and state government obligations		<del> </del>	
		Investments - corporate stock			
		Investments - corporate bonds			
	ı	Investments - land, buildings, and equipment, basis	4 ,	i •	, ,-
	l''	Less accumulated depreciation		-	
	12	Investments - mortgage loans			
	13	Investments - other STMT 2	218,432.	215,423.	186,308.
		Land, buildings, and equipment basis	220,2020	220,1201	200,000
	'7	Less accumulated depreciation		<del></del>	
	15	Other assets (describe )		•	
	13	Other assets (describe			
	16	Total assets (to be completed by all filers)	219,271.	215,535.	186,420.
_	17		217,271	213,333.	100,420
	l				· * *
	18	Grants payable			. ,
Liabilities	19	Deferred revenue			,
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable			
	22	Other liabilities (describe )		<del> </del>	
		<b>7</b>	0	0.	
	23	Total liabilities (add lines 17 through 22)	0.	<u> </u>	
	İ	Foundations that follow SFAS 117, check here			
S	l	and complete lines 24 through 26 and lines 30 and 31.			j
ည		Unrestricted			
alai	25	Temporarily restricted			<u> </u>
80	26	Permanently restricted			
Š	1	Foundations that do not follow SFAS 117, check here			
or Fund Balance	l	and complete lines 27 through 31.	<u>,</u>	^	
ţ	27	Capital stock, trust principal, or current funds	0.	0.	
550	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	!
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	219,271.	215,535.	
ž	30	Total net assets or fund balances	219,271.	215,535.	}
			242 254	242-	İ
_	31	Total liabilities and net assets/fund balances	219,271.	215,535.	
P	art	III Analysis of Changes in Net Assets or Fund B	alances		
_		···	<del></del>		<del></del>
1		I net assets or fund balances at beginning of year - Part II, column (a), line			
	•	st agree with end-of-year figure reported on prior year's return)	. 1	219,271.	
		r amount from Part I, line 27a	2	<3,916.>	
		r increases not included in line 2 (itemize)   CASH INVEST	3	180.	
4	Add	lines 1, 2, and 3		4	215,535.
5	Deci	eases not included in line 2 (itemize)		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	. 6	215,535.
			· · · · · · · · · · · · · · · · · · ·		Form <b>990-PF</b> (2009)

923511 02-02-10

Part IV   Capital Gains	and Lo	sses for Tax on In	vestmen	t Income						
		nd(s) of property sold (e.g. or common stock, 200 shs			I, b	How ac - Purch - Dona		(c) Date a (mo., da		(d) Date sold (mo., day, yr.)
1a 500 INDEX FUND	ADM:	IRAL		·			P			04/16/10
b 500 INDEX FUND							P			07/23/10
c 500 INDEX FUND	ADM:	IRAL					P			11/05/10
<u>d</u>			****							
<u>e</u>					Ц,				<del></del>	<u> </u>
(e) Gross sales price	(f) l	Depreciation allowed (or allowable)		st or other basis expense of sale		(h) Gain or (loss) (e) plus (f) minus (g)				(g)
a 1,000.				1,48					_	<489.
ь 2,500.				3,29						<796.
c 2,500.				3,01	2.					<515.
<u>d</u>					$\dashv$					<u>-</u>
Complete only for assets showin	o gain in	column (h) and owned by t	he foundation	on 12/31/69	-			) Gains (Co	ol (þ) usin	minus
		(i) Adjusted basis		cess of col. (i)	$\dashv$		col.	(k), but n	ot less tha	n -0-) <b>or</b>
(i) F.M.V. as of 12/31/69	·	as of 12/31/69		col. (j), if any				Losses (	from col. (	(h))
a					$\dashv$					<489.
b						•				<796.
С								-		<515.
đ										_
_e				· · · · · · · · · · · · · · · · · · ·	_					
2 Capital gain net income or (net ca	pital loss)	If gain, also enter If (loss), enter -0-			}	2				<1,800.
3 Net short-term capital gain or (los	s) as defi					1				-
If gain, also enter in Part I, line 8,			- (-).		]					
If (loss), enter -0- in Part I, line 8					<u>၂</u>	3				<515·
<b>L</b>		ection 4940(e) for					nent Inc	ome		
(For optional use by domestic private	foundation	ons subject to the section 4	940(a) tax on	net investment in	come	e.)				
If section 4940(d)(2) applies, leave th	nis part bl	ank.								
			aunt of anusur	on in the bose nor	40					Yes X No
Was the foundation liable for the sect If "Yes," the foundation does not qual				•	1007					Yes A No
1 Enter the appropriate amount in 6		<del></del>			es.					
(a)	I	(b)		,	(c)			1		(d)
Base periód years Calendar year (or tax year beginnir	ng in)	Adjusted qualifying dist	rıbutions	Net value of no			use assets	1 (		oùtión ratio vided by col. (c))
2008		1.	4,359.	-	-	15	0,472	•		.095426
2007			8,188.				0			.000000
2006		1	4,448.	-			0			.000000
2005			0.				0	•		.000000
2004	<u> </u>							<u> </u>		
										005406
2 Total of line 1, column (d)	F 4	and the second s	- h 0 t - 5					2		.095426
3 Average distribution ratio for the	-	•	n line 2 by 5,	or by the number	or ye	ars				.023857
the foundation has been in exister	nce ii iess	than 5 years						3		.023637
4 Enter the net value of noncharitab	da-uca ac	eate for 2000 from Part V I	ine 5					4		183,624.
4 Enter the net value of nonchantab	iie-use as	5615 101 2005 110111 Fait A, 1				•		"	<del></del> -	103,024.
5 Multiply line 4 by line 3								5		4,381.
- manapiy mio + by mio o		•	-			•				
6 Enter 1% of net investment incom	ne (1% of	Part I. line 27b)						6		40.
	,	,,					•			
7 Add lines 5 and 6								7		4,421.
-							•		-	
8 Enter qualifying distributions from	n Part XII,	line 4						8		6,130.
If line 8 is equal to or greater than	line 7, ct	neck the box in Part VI, line	1b, and comp	lete that part using	g a 19	% tax r	ate.			
See the Part VI instructions.		·····								
000504 00 00 10										orm <b>QQO_DE</b> (2000)

	DIANE & MICHAEL CANNET FOUNDATION	4	0-3945	<u> </u>		i age s
Pa	ort VII-A Statements Regarding Activities (continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		-			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)			11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	•		$\vdash$	-	<del></del>
				40		х
10	August 17, 2008?			12	V	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?			13	Х	
	Website address ► N/A		<del></del>		<u> </u>	
14		hone no.			501	
	Located at ► 15865 WENNER FARM LANE, PURCELLVILLE, VA	Z	IP+4 <b>►</b> 20	132		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here				<b>&gt;</b>	
	and enter the amount of tax-exempt interest received or accrued during the year		15	N	/A	
Pa	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Require	d				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			,	Yes	No
12	During the year did the foundation (either directly or indirectly):					1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	☐ Van	X No			3
		168	14V			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		₩.			
	a disqualified person?		X No			1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	└── Yes	X No		.*	
	(5) Transfer any income or assets to a disqualified person (or make any of either available					
	for the benefit or use of a disqualified person)?	Yes	X No			;
	(6) Agree to pay money or property to a government official? (Exception. Check "No"					ļ
	If the foundation agreed to make a grant to or to employ the official for a period after					
	termination of government service, if terminating within 90 days.)	☐ Von	X No	< -	1	304
L		169	۱۹۷ رخف			
D	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		NT / 7			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?		N/A	1b		<del></del> ,
	Organizations relying on a current notice regarding disaster assistance check here		▶∟			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not cor	rected				
	before the first day of the tax year beginning in 2009?			1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating for	oundation		П		₩.
	defined in section 4942(j)(3) or 4942(j)(5)):					
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s	) beginning			,	
	before 2009?		X No			9
	If "Yes," list the years	03	170			
	· · · · · · · · · · · · · · · · · · ·					₩
0	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to					
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No"	and attach	NT / 3			
	statement - see instructions.)		N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.					
	<b>&gt;</b>					1
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time					
	during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified p					
_	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(		ose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Sc					
		neuule C,	N/A			ļ
	Form 4720, to determine if the foundation had excess business holdings in 2009)		M/M	3b		<del></del>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitat	ie purpose th	at			J
	had not been removed from jeonardy before the first day of the tay year beginning in 20002			I Ah I		X

orm 990-PF (2009) DIANE & MICHAEL CANNEY F			20-39493	82	Page 6
Part VII-B. Statements Regarding Activities for Which F	form 4720 May be r	sequirea (contin	uea)	, 1 .	<del></del>
5a During the year did the foundation pay or incur any amount to:	40.45(-))0		es 🗶 No	'	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es Lad No	:	1
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire		es X No		
any voter registration drive?	,		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?		10	es Lad No		,
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section		es X No		
509(a)(1), (2), or (3), or section 4940(d)(2)?			ES LAL NO		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f		[ <del>]</del>	,	
the prevention of cruelty to children or animals?			es 🗶 No	the	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations	37 / 3		
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b	<del>                                     </del>
Organizations relying on a current notice regarding disaster assistance check hi				ŧ	1
c if the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				*	'
expenditure responsibility for the grant?	•	[/A	es L No	`	*
If "Yes," attach the statement required by Regulations section 53.4945	• •				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on			<b>´</b>	*
a personal benefit contract?		Y	es 🗶 No 📗		_ [
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		L	6b	X
If "Yes" to 6b, file Form 8870		_			
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y	es 🗶 No 📙		
b If yes, did the foundation receive any proceeds or have any net income attributa				7b	
Part VIII Information About Officers, Directors, Trusto	ees, Foundation Ma	nagers, Highly	y		
			<del></del> .		
List all officers, directors, trustees, foundation managers and their		T	T (40 -		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	<b>(e)</b> Ex   accoun	pense nt, other
	to position	`enter'-0-)	and deferred compensation	allow	ances
DIANE CANNEY	PRESIDENT AND	DIRECTOR	{		
L5865 WENNER FARM LANE					
PURCELLVILLE, VA 20132	10.00	0.	0.	Ì	0.
MICHAEL F. CANNEY	VP AND DIRECT	OR			
L5865 WENNER FARM LANE					
PURCELLVILLE, VA 20132	10.00	0.	0.		0.
				ŀ	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e) Ex	rpense nt, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) compensation	and deferred compensation		ances
NONE					
		Ī			
				[	
				1	
		<u> </u>			
-					
	· ·.		t		
			1		
Total number of other employees paid over \$50,000	<del>-</del>		<u> </u>		0
Annual Committee and antibudy and being and declared		<del>-</del>	Form	990-PF	(2009)
				-	

Part VIII Information About Officers, Directors, Trustees, For Paid Employees, and Contractors (continued)	undation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none	enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		İ
	<del>_</del>	<del></del>
Total number of others receiving over \$50,000 for professional services		<u></u> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevan number of organizations and other beneficiaries served, conferences convened, research pape	statistical information such as the	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax y	ear on lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total, Add lines 1 through 3	<b>—</b>	0.

:P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undations, se	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	- <u> </u>
	Fair market value of all other assets	1c	186,420.
d	Total (add lines 1a, b, and c)	1d	186,420.
	Reduction claimed for blockage or other factors reported on lines 1a and		<u> </u>
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	186,420.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,796.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	183,624.
6	Minimum investment return. Enter 5% of line 5	6	9,181.
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.)	and certain	<u> </u>
1	Minimum investment return from Part X, line 6	1	9,181.
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	40.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	9,141.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	9,141.
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	9,141.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	6,130.
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	··
þ	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	6,130.
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	40.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	6,090.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for th	ne section

4940(e) reduction of tax in those years.

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,	00,940	rears prior to 2000		
line 7				9,141.
2 Undistributed income, if any, as of the end of 2009 a Enter amount for 2008 only			0.	
b Total for prior years:			- 0.	
g rounter prior yours.	ļ	0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				*
b From 2005				
c From 2006 14,500.				
dFrom 2007 5,672.				
eFrom 2008 6,911.				
f Total of lines 3a through e	27,083.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: $\triangleright$ \$ 6,130.				
a Applied to 2008, but not more than line 2a			0.	_
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	١			
(Election required - see instructions)	0.		* *	6,130.
dApplied to 2009 distributable amount	0.			0,130.
e Remaining amount distributed out of corpus  5 Excess distributions carryover applied to 2009	3,011.			3,011.
(If an amount appears in column (d), the same amount must be shown in column (a) )	3,011.			3,011.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	24,072.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'		, i		
undistributed income for which a notice of deficiency has been issued, or on which			:	
the section 4942(a) tax has been previously		0		
assessed		0.		
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions		0.		, <u>, , , , , , , , , , , , , , , , , , </u>
e Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract			<u> </u>	
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
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	24,072.	-,		
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006 11,489.				
c Excess from 2007 5,672.				
d Excess from 2008 6,911.				
e Excess from 2009				Form 000 DE (2000)

Form **990-PF** (2009)

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

c Any submission deadlines:

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient Purpose of grant or contribution show any relationship to Foundation **Amount** any foundation manager status of Name and address (home or business) or substantial contributor recipient a Paid during the year ILLINOIS STATE UNIVERSITY 1,130. SCHOLARSHIP WOUNDED WARRIOR PROJECT CHARITABLE 2,500. CONTRIBUTION 2,500. JOHNS HOPKINS UNIVERSITY CHARITABLE CONTRIBUTION 6,130. ▶ 3a Total b Approved for future payment NONE **▶** 3b Total 923611 02-02-10

Form: 990-PF (	(2009) DIANE & MICHA	EL CANNEY	FOUNDATION	1	<u> 20-</u> 3	39 <b>4</b> 9382 Page 1
Part XVI-	Analysis of Income-Prod	lucing Activiti	es			
Enter gross an	nounts unless otherwise indicated.	Unrelated	business income		by section 512, 513, or 514	(e)
Emor gross an		(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Drogram e	ervice revenue:	Business code	Amount	sion	Amount	function income
-	GIVICO TOVOTIDO.			+		
å		_	-··	╀		
D		_		+-+		
c		_		$\bot$		
d		_				
е		_				
1					·	
g Fees an	d contracts from government agencies	_			Ì	
_	ip dues and assessments		<u> </u>			
	savings and temporary cash		<del></del>	<del>  -                                   </del>		<del></del>
investment		1				
				14	4,014.	
	and interest from securities			14	4,014.	
	ncome or (loss) from real estate:		<u></u>			
	nanced property					
<b>b</b> Not deb	ot-financed property					
6 Net rental i	ncome or (loss) from personal					
property						
7 Other inves	stment income					
	ss) from sales of assets other					
than invent	•					<1,800
	e or (loss) from special events				-	
	•					
-	it or (loss) from sales of inventory	<u> </u>		+		
11 Other rever	nue:					
a		_		ļļ.		
b		_				
c						
d						
е						
12 Subtotal. A	add columns (b), (d), and (e)	_	0.		4,014.	<1,800
	line 12, columns (b), (d), and (e)		·		13	<1,800 2,214
	et in line 13 instructions to verify calculations.					_,
Part XVI-	B Relationship of Activities	s to the Accor	mplishment of E	xempt F	urposes	
Line No.	Explain below how each activity for which in	ncome is reported in	column (e) of Part XVI-A	A contribute	d importantly to the accomp	plishment of
▼	the foundation's exempt purposes (other th	an by providing fund	ds for such purposes).			
8 L	IQUIDATE TO CASH FOR	PURPOSES	OF DONATIN	IG FUN	NDS	
<del></del>						
<del>-  -</del>						
<del></del>	<del></del>					
			- ·-			
<del> </del>					<del></del>	
<del></del>	<del></del>		<u></u>			
		·			<del>-</del>	
<del></del>	<del></del>				<del></del>	
		<del> </del>			<del></del>	<del></del>

923621 02-02-10

	formation Regardante	arding Transfers To and Transactions a ations	nd Relationships With Nonc	haritable	-
1 Did the organiza	ition directly or indirect	ly engage in any of the following with any other organization	n described in section 501(c) of	Y	es No
the Code (other	than section 501(c)(3)	organizations) or in section 527, relating to political organi	zations?		
a Transfers from t	the reporting foundatio	n to a noncharitable exempt organization of:			
(1) Cash		-		1a(1)	X
(2) Other assets	S			1a(2)	X
<b>b</b> Other transactio	ns:				
\ <i>'</i>	sets to a noncharitable	•		1b(1)	X
` '		arıtable exempt organization		1b(2)	X
(3) Rental of fa	cilities, equipment, or o	other assets		1b(3)	X
· ·	ment arrangements			1b(4)	X
(5) Loans or loa			•	1b(5)	X
, ,		ership or fundraising solicitations		1b(6)	$\frac{X}{X}$
		g lists, other assets, or paid employees s," complete the following schedule. Column (b) should alw		10	
column (d) the		dation. If the foundation received less than fair market valuer assets, or services received.  (c) Name of noncharitable exempt organization	e in any transaction or sharing arrangeme  (d) Description of transfers, transactions,		gements
(2)/		N/A			<u> </u>
			-		
				-	

2a	Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described
	in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes	[X]	١
-----	-----	---

b	If "Yes," complete the following schedule.	complete the following schedule.							
	(a) Name of organization	(b) Type of organization	(c) Description of relationship						
	N/A								

. '	· · ·				
	Under penalties of perjury, I declare that I have examined this return, including accounting and complete Declaration of preparer (other than taxpayer or fiduciary) is based on			of my knowledge and	d belief, it is true, correct,
	Ware Canne	1/1/13/2011	^	ulent	
	Signature of officer or trustee	Date	Title		
	Preparer's	Da	11/12/19	Check if self-	Preparer's identifying number
	signature	1	111010	employed 🕨 📙	<u> </u>
		L.L.P.	/ /	EIN ►	
	if self-employed), 1430 SPRING HILL RO	AD, STE 300			
	address, and ZIP code MCLEAN, VA 22102-3	-		Phone no.	703-970-0400
	<del></del>				- 000 DE (000

703-970-0400 Phone no. Form **990-PF** (2009)

FORM 990-PF DIVIDENDS AN	ND INTEREST FROM	SECURITIES	STATEMENT 1	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT	
VANGUARD - 500 INDEX FUND ADM VANGUARD - PRIME MONEY MKT FUND	4,012.	0.	4,012.	
TOTAL TO FM 990-PF, PART I, LN 4	4,014.	0.	4,014.	
FORM 990-PF OT	THER INVESTMENTS		STATEMENT 2	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
VANGUARD 500 INDEX FUND	COST	215,423.	186,308.	
TOTAL TO FORM 990-PF, PART II, LI	INE 13	215,423.	186,308.	
	T XV - LINE 1A FOUNDATION MANAGE	ERS	STATEMENT 3	

NAME OF MANAGER

DIANE CANNEY MICHAEL F. CANNEY

Form	8868 (Rev. 4-2009)				Page 2		
Note  If y	you are filing for an <b>Additional (Not Automatic) 3-Month Extension, complete only Part II</b> and che . Only complete Part II if you have already been granted an automatic 3-month extension on a previous are filing for an <b>Automatic 3-Month Extension, complete only Part I</b> (on page 1).	ously filed I	Form		<b>▶</b> 🗓		
Pai	t II Additional (Not Automatic) 3-Month Extension of Time. Only file the orig	ınal (no co	pies r	needed).			
Time	Name of Exempt Organization · "		Employer identification number				
print	t DIANE & MICHAEL CANNEY FOUNDATION		20-3949382				
File by extend due da filing th	led Number, street, and room or suite no. If a P.O. box, see instructions  ate for GOODMAN AND COMPANY 1430 SPRING HILL ROAD SUI			RS use onl	y		
return	See City, town or post office, state, and ZIP code. For a foreign address, see instructions.	•	Ŷ	/	* \$		
Chec	Check type of return to be filed (File a separate application for each return).  Form 990  Form 990-EZ  Form 990-PF  Form 990-T (trust other than above)  Form 4720  Form 6069						
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.							
OFFICERS  • The books are in the care of ▶ 15865 WENNER FARM LANE - PURCELLVILLE, VA 20132  Telephone No. ▶ 703-547-5501 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)  If this is for the whole group, check this						
	· ¬						
4	I request an additional 3-month extension of time until NOVEMBER 15, 2010.						
5	2000	ending					
6							
7	,						
•	ADDITIONAL TIME IS NEEDED TO REVIEW DOCUMENTS FRO	M THI	RD	PARTY	PROVIDER.		
8a	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.		8a	\$	80.		
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimate	ted	ķ				
	tax payments made Include any prior year overpayment allowed as a credit and any amount paid						
	previously with Form 8868.	Ì	8b	\$	122.		
С	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, dej	oosit					
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions			\$	0.		
Signature and Verification							
	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements ue, correct, and complete, and that I am authorized to prepare this form.	, and to the	best o	f my knowle	dge and belief,		
Signa	ture ▶ Title ▶		Date	<b>•</b>			

Form **8868** (Rev. 4-2009)