

# 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



SCANNED JUN 0 7 2010

Internal Revenue Service

## **Return of Private Foundation**

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2009

For cal	enda	ir year 2009, or ta	ix yea	r beginning			, and e	inding		
<b>G</b> Ghe	ck all	I that apply		Initial return		Initial return of a f	•	charity	Final return	1
				Amended return		Address char	ige	<u></u>	Name change	
Use th	e IRS	Name of found	ation						A Employer identification	n number
lab	el.								F 4 0754101	
Other	wise,	' <del></del>		NDATION				<del>,</del>	54-0754191	<u> </u>
pr			• • •			elivered to street address)		Room/suite	B Telephone number	
or ty	-		<u>ock</u>	LANDING_	DR	IVE, SUITE 1	06	<u> </u>	757-240-56	50
See Sp Instruc		T City of town, Si							C If exemption application is p	pending, check here
	ALIONS	, MEMBORT	NE	WS, VA 2	<u>36</u>	06			D 1. Foreign organization	s, check here
H Che	ck ty	pe of organization	. [	X Section 501(c)(	3) e>	empt private foundation			Foreign organizations me check here and attach co	omputation
	Secti	on 4947(a)(1) nor	nexem	pt charitable trust		Other taxable private found			E If private foundation sta	tus was terminated
l Fair	mark	et value of all asse	ts at e	nd of year   J Acco	untı	ng method Cash	X Acc	rual	under section 507(b)(1	)(A), check here
(fror	n Pai	rt II, col (c), line				her (specify)			F If the foundation is in a	60-month termination
▶\$			<u>961</u>	,240 . (Part I, o	olu	mn (d) must be on cash	basis)		under section 507(b)(1	)(B), check here▶ L
Part	م لڻڻ	Analysis of Reven The total of amounts necessanly equal the	ın colur	nns (b), (c), and (d) may n	ot	(a) Revenue and expenses per books		rvestment ome	(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
	1 C	ontributions, gifts,	grant	s, etc , received					N/A	
;			-	is not required to attach Sch. E						
	n In	terest on savings and	i tempo	orary		3,777.		3,777.		STATEMENT 1
		ividends and inter	est fro	m securities		14,466.	1	4,466.		STATEMENT 2
		ross rents								
		et rental income or (lo	ss)							
	6a N	et gain or (loss) from s	sale of a	assets not on line 10		<3,085.	>			
2	L G	ross sales price for al ssets on line 6a		12,404						
Revenue		apital gain net income	e (from	Part IV, line 2)	_			0.		
اکت	8 N	et short-term capi	tal gai	n	_					
		come modification	•		ĺ	· · · · · · · · · · · · · · · · · · ·		'11		11 11 11 11 11 11 11 11 11 11 11 11 11
1	Oa Gi	ross salet less return nd allowances	₹E(	EIVED	1					
		ess Cost of goods so		100		<del>'</del>	!	<del>-114411-1</del>		
		ross profit on (loss								
1	1 0	ther income?	JUN	0 ~ 14						
1:		otal Add ines 11	hroua		~]	15,158.	1	8,243.	-	
1:		ompensation of office			الــــــ	0.		0.		0.
1		ther employee sale								
1		ension plans, emp		•						
		egal fees	.,							
e		ccounting fees		STMT 3		5,750.		0.		0.
쫎		ther professional 1	iees	STMT 4		1,589.		1,589.		0.
§ 1		iterest								
E 1		axes		STMT 5		333.		0.		0.
1 str		epreciation and de	pletio							
E 2		ccupancy								
P 2		ravel, conferences	, and i	meetings						
P 2		rinting and publica		•						
g 2		ther expenses		STMT 6		1,818.		0.		0.
agi 2		otal operating and	d adm	inistrative						
Operating and Administrative Expenses		xpenses Add line				9,490.		1,589.		0.
0 2		ontributions, gifts				24,281.				39,281.
		otal expenses and	-							
		dd lines 24 and 25				33,771.	L	1,589.		39,281.
2		ubtract line 26 fro		12						
				ses and disbursements		<18,613.	<b>&gt;</b>		<u> </u>	<u></u>
		et investment inc	-				1	6,654.		
	C A	djusted net incom							N/A	
923501	^				tion	Act Notice, see the instruc	tions.			Form <b>990-PF</b> (2009)

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions. 923501 02-02-10

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	Ellu ol yea	
Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value		(c) Fair Market Value
1 Cash - non-interest-bearing	2,815.	3,004.	3,004.
2 Savings and temporary cash investments	630.	15,130.	15,130
,3 Accounts receivable ►			
Less allowance for doubtful accounts			
4 Pledges receivable ►			
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			
Less allowance for doubtful accounts			
9 Prepaid expenses and deferred charges	1,200.	632.	632
10a Investments - U.S. and state government obligations STMT 7	405,306.	403,985.	398,028
b Investments - corporate stock STMT 8	544,753.	497,231.	543,715
c Investments - corporate bonds			<u> </u>
11 Investments - land, buildings, and equipment basis			<del>(************************************</del>
Less accumulated depreciation  12 Investments - mortgage loans			
13 Investments - other			
	-n ,	7	
Less accumulated depreciation	Ì		
15 Other assets (describe ► INTEREST RECEIVABLE)	16.	731.	731.
15 Other assets (describe - TIVIENTED T RECEIT VILLED)		, 0 2 0	
45 Tatal accets /to be completed by all filers)	954,720.	920,713.	961,240.
16 Total assets (to be completed by all filers)	331/1201	451.	, , , , , , , ,
17 Accounts payable and accrued expenses	30,000.	15,000.	
18 Grants payable	30,000.	13/0001	
g 19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons			
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other kelebatives (december 1972)	845.	0.	
22 Other liabilities (describe > ACCRUED EXCISE TAX)	043.		
	20 045	15,451.	
23 Total liabilities (add lines 17 through 22)	30,845.	13,431.	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.	000 075	005 262	
	923,875.	905,262.	
25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.			
27 Capital stock, trust principal, or current funds			
28 Paid-in or capital surplus, or land, bldg , and equipment fund			
25 Temporarily restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here 28 and complete lines 27 through 31. 29 Capital stock, trust principal, or current funds 29 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances			
30 Total net assets or fund balances	923,875.	905,262.	
31 Total liabilities and net assets/fund balances	954,720.	920,713.	
Part III Analysis of Changes in Net Assets or Fund Bal	ances		
Total net assets or fund balances at beginning of year - Part II, column (a), line 30		<del></del>	
(must agree with end-of-year figure reported on prior year's return)		1	923,875
		2	<18,613
Enter amount from Part I, line 27a		3	0.
Other increases not included in line 2 (itemize)		4	905,262
Add lines 1, 2, and 3	•	5	0.
Decreases not included in line 2 (itemize)	ma /h\ line 20	6	905,262
5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	mir (n), mis so		Form <b>990-PF</b> (2009)

Page 3

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)					acquired chase nation	(c) Date ac (mo , day	quired y, yr )	(d) Date sold (mo , day, yr )
1a BANK OF NEW YO	RK MELON				P			
_b _,								
_c				-				
_d	<del></del>							<del> </del>
_e		1						<del></del> -
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				n or (loss) f) minus (	g)
a 12,404.			15,48	9.				<3,085
_b	<u>-</u>		<del> </del>					
_C								
_d								
_e		<u> </u>						
Complete only for assets showin	g gain in column (h) and owned by					Gains (Col		
(i) F M V as of 12/31/69	(j) Adjusted basis		cess of col (i)	}	COI	(k), but no Losses (fi	rom col (f	1-0-) ur 1))
	as of 12/31/69	Over	col (j), if any				<u>`</u>	-2.005
_a		<del> </del>						<3,085
_b		<del> </del>			_			
_ <del>C</del>		<del></del>						
_d								
_e			<del></del>		Τ			
2 Capital gain net income or (net ca	pital loss) $ \begin{cases} & \text{if gain, also ente} \\ & \text{if (loss), enter -C} \end{cases} $	r in Part I, line )- in Part I, line	7 7	} 2	<u> </u>			<3,085
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) a	nd (6)			-			
If gain, also enter in Part I, line 8,		• •					/-	
if (loss), enter -0- in Part I, line 8				] 3	<u> </u>		N/A	
Part V Qualification U	nger Section 4940(e) foi	Reduced	Tax on Net	investr	nent inc	<u>ome</u>		
If section 4940(d)(2) applies, leave the Was the foundation liable for the sect If "Yes," the foundation does not qual 1. Enter the appropriate amount in e	ion 4942 tax on the distributable an	omplete this pa	ırt			. — . — .		Yes X No
(a)		actions perore	making any entires			<del></del>		(d)
Base periód vears	(b) Adjusted qualifying dis	tributions	Net value of non	(C) Icharitable	-use assets	(0)	Distribi	ition ratio ded by col (c))
Calendar year (or tax year beginnin	19 1117	7,067.	1101 141140 01 11011		1,417		or (b) uivi	.047474
2008		6,907.			6,048			.042410
2007		0,231.	<del></del>		3,831			.057154
<u>2006</u> 2005		9,200.			7,713			.075593
		14,253.			5,431		-	.079828
2004		14,233.		1,03	3/431	<del>'                                     </del>		.075020
2 Total of line 1, column (d)								.302459
3 Average distribution ratio for the 5	waar basa pariod - divide the total	on line 2 by 5	or by the number of	of voore		2		.502153
the foundation has been in exister		on line 2 by J,	or by the number o	n years		3		.060492
the loundation has been in exister	ice ii iess tiiaii 3 years					-		• • • • • • • • • • • • • • • • • • • •
4 Enter the net value of noncharitab	le-use assets for 2009 from Part X,	line 5				4		875,273
5 Multiply line 4 by line 3						5		52,947.
								167.
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6		
7 Add lines 5 and 6						7		53,114.
8 Enter qualifying distributions from	Part XII, line 4				•	8		39,281.
If line 8 is equal to or greater than See the Part VI instructions	line 7, check the box in Part VI, line	tb, and comp	lete that part using	a 1% tax	rate			

Form	1 990-PF (2009) NOLAND FOUNDATION 54-0	07541	191		Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	see in	strı	ıctio	ns)
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)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%			3	33.
	, of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0.
3	Add lines 1 and 2			3	33.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			3	33.
6	Credits/Payments				
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 965.				
b	Exempt foreign organizations - tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d			_	<b>~</b> F
7				9	<u>65.</u>
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached 8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				32. 72.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 360 - Refunded ▶ 11				<u>/2.</u>
	rt VII-A Statements Regarding Activities	<del></del>		Vaa	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	-		res	No X
	any political campaign?	}-	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	-	16		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				
	distributed by the foundation in connection with the activities.		4.		х
	Did the foundation file Form 1120-POL for this year?	-	1c		
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation   \$\int \text{\$0.} \te				
_	(1) On the residence 1				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$\infty\$ \$\\$\$				
•			2		х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	<b> </b>			
2	If "Yes," attach a detailed description of the activities.  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				
3	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		Х
12	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	-	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-	5		X
·	If "Yes," attach the statement required by General Instruction T.		<del></del>		
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 law				
	remain in the governing instrument?		6	X	
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				
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)	_			
	of each state as required by General Instruction G? If "No," attach explanation	. [	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar				
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	L	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

Pa	ert 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			
	. August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► THE FOUNDATION Telephone no ► 757-24		<u>650</u>	
	Located at ► 11832 ROCK LANDING DRIVE, SUITE 106, NEWPORT NEWS ZIP+4 ►23	600		т
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	NT.	/A	· []
<u>n</u>	and enter the amount of tax-exempt interest received or accrued during the year	1/1	/ A.	
PE	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>	Yes	No
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		162	140
18	During the year did the foundation (either directly or indirectly)  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No			
	(.) Industrial and the second and th			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)  a disqualified person?  Yes X No			
	a disqualition person			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	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 )			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	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 corrected			х
	before the first day of the tax year beginning in 2009?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	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?			
<b>p.</b>	If "Yes," list the years ▶,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
D	· ·			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)	2b		
_	cutomon oscillation,	20		
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
ou	during the year?			
h	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2009.)	3b		
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	1	х
		m <b>990</b>	-PF	

11832 ROCK LANDING DR. STE 106   0.25   0. 0. 0. 0.	Formt 990-PF (2009) NOLAND FOUNDATION			54-07541	91	<u> Page 6</u>
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(s))?  (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drime?  (3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an individual for travel, study, or other similar purposes?  (5) Provide for any purpose other than reliquous, Charlable, scentific, literary, or educational purposes, or for the prevention of crulety to children or animals?  (5) Provide for any purpose other than reliquous, Charlable, scentific, literary, or educational purposes, or for the prevention of crulety to children or animals?  (6) Provide for any purpose other than reliquous, Charlable, scentific, literary, or educational purposes, or for the prevention of crulety to children or animals?  (6) Provide for any purpose other than reliquous, Charlable, scentific, literary, or educational purposes, or for the prevention of crulety to children or animals?  (7) Provide a grant to an individual for the registery of the crue for the scentific of the crue registery of the crue for the the	Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	nued)		
(2) Influence the outcome of any speedic public election (see section 4955), or to carry on, directly or indirectly, any votar registration driver.  (3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an individual for travel, study, or other similar purposes?  (5) Provide a grant to an individual for travel, study, or other similar purposes?  (6) Provide for any purpose other than religious, charitable, economic, literary, or educational purposes, or for the prevention of cruelity to drived are of a grant to an individual for travel, study, or other similar purposes, or for the prevention of cruelity to drived are of any purpose of the financial contract of the prevention of cruelity to drived any analyses of the provided of the pro	5a During the year did the foundation pay or incur any amount to					
any voter registation drive?  (3) Provide a grant to an indendual for fravel, study, or other similar purposes?  (4) Provide a grant to an organization other than a charitable, etc., organization described in section  508(3)(1), (2), or (3), or section 496(6)(2)?  (5) Provide to ray purpose other than entiplicus, charitable, scientific, literary, or educational purposes, or for the prevention of creekly to children or animats?  If any answer is 'ves 150 (1)(4), did any of the transactions fall to quality under the exceptions described in Regulations section 53 4945 or in a current notice regarding dissater assistance (see instructions)?  Organizations seriling on a current notice regarding dissater assistance (see instructions)?  Organizations seriling in a current notice regarding dissater assistance (see instructions)?  N/A   Yes   No    If 'Yes' cold, but in the statement required by Regulations section 53 4945-5(a).  8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contact?  If 'Yes' to Si, the Form #377.  If 'Yes' to Si, the	(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section \$00(4)(1), (2), or (3), or section \$490(0)(2)?  (5) Provide for any purpose other than echaritable, etc., organization described in section \$00(4)(1), (2), or (3), or section \$490(0)(2)?  (6) Provide for any purpose other than echaritable, etc., organization described in section \$190(0)(2)?  (7) Provide for any purpose other than echaritable, scientific, literary, or educational purposes, or for the prevention of curely to chiefer or animals.  (8) It if any answers "Nes' to \$54(1)(5), did any of the transactions fail to quality under the exceptions described in Regulations section \$540(3) or a current netice regarding disaster assistance (see instructions)?  Organizations relying on a current netice regarding disaster assistance (see instructions)?  Organizations relying on a current netice regarding disaster assistance (see instructions)?  Organizations relying on a current netice regarding disaster assistance (see instructions)?  Organizations relying on a current netice regarding disaster assistance (see instructions)?  Organizations relying on a current netice regarding disaster assistance (see instructions)?  Organizations relying on a current netice regarding disaster assistance (see instructions)?  If "Yes," attach the statement required by Regulations section \$3.4945-5(d).  By the transaction of the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes," attach the statement required by Regulations section \$3.4945-5(d).  By the transaction of the transaction of the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes," at any time dump life tax year, was the foundation assistance the tax because it maintained and the year, pay premiums on a personal benefit contract?  If "Yes," at any time dump life tax year, was the foundation assistance the tax because it maintained tax times and year.  If year, to the foundation receives a variety of th	(2) Influence the outcome of any specific public election (see section 4955),	or to carry on, directly or indi				
(4) Provide a grant to an organization other than a charitable, etc., organization described in section  509(3)(1), (2), or (3), or section 4940(d)(2)?  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  If any answers "Yes to 501(1)(6), did any of the transactions fall to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding diseaster assistance (see instructions)?  Organizations relying on a current notice regarding diseaster assistance (see instructions)?  Organizations relying on a current notice regarding diseaster assistance (see instructions)?  If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," stant the statement required by Regulationss section 53 4945-5(d).  8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes," that the statement required by Regulations section 53 4945-5(d).  8b Did the foundation, during the year, receive any funds, directly or indirectly, to ap pyremiums on a personal benefit contract?  If "Yes," the form 8870  7a At any time during the tax year, was the foundation aparty to a prohibited tax sheller transaction?  year to 6b, the Form 8870  7a At any time during the tax year, was the foundation analysis and their compensation.  It is all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address. Directors, Trustees, Foundation Managers, Highly  It is all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address. Directors, Trustees, Foundation Managers, Highly  It is all officers, directors, trustees, foundation managers and their compensation.  (b) Time part of the trustees of the part	any voter registration drive?					
Sol(a)(1), (2), or (3), or section 4940(t)(2)?  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruety to children or animal?  It is not a prevention of cruety to children or animal?  It is not section 53 4945 or in a current notice regarding disaster assistance check here  If the answers "se's to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53 4945-5(c).  8a bid the foundation, during the year, asy premiums, directly or indirectly, on a personal benefit contract?  If "Yes," attach the statement required by Regulations section 53 4945-5(c).  8a bid the foundation, during the year, asy premiums, directly or indirectly, on a personal benefit contract?  If "Yes," to 65, the Form 8870  7a tax in time directly the grant processes of have any reflected to the transaction?  Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII   Part VIII   Promation About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII   Promation About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII   Promation About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII   Promation About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII   Promation About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII   Promation About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII   Promation About Officers, Direct	. (3) Provide a grant to an individual for travel, study, or other similar purposes		Yı	es X No		
(6) Provide for any purpose other than religious, charlable, scientific, literary, or educational purposes, or for the prevention of cuelly to childred or animals?  If any answer is "Yes" to Sat (1)-(3), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance clack here companies on the provided of the provide	(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				
b If any answer is "Yes" to 56 (1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  If the answer is "Yes" to destina 54(), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attract the statement required by Regulations section 53 4945-5(d).  Ba Did the foundation, during the year, receive any funds, directly or indirectly, on a personal benefit contract?  If "Yes" to 65, the Form 8870  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  If yes, did the foundation access any proceeds or have any net income attributable to the transaction?  It is all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Title, and average hours per week devolved to position  If all any trust in the state of the sta	509(a)(1), (2), or (3), or section 4940(d)(2)?		Y	es X No		
b If any answer is "Yes" to 53 (1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?    Comparison selving on a current notice regarding disaster assistance check here if the answer is "Yes" to question 54(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?    Wes" attach the statement required by Regulations section 53 4945-5(c).   Ba Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?   Wes" attach the statement required by Regulations section 53 4945-5(c).   Ba Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   Wes" attach the statement required by Regulations section 53 4945-5(c).   Ba Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   Wes" attach the statement required by Regulations are statement required by Regulations and party to a prohibited tax sheller transaction?   Wes" attach the statement required any fine and statement of the transaction?   Part Viii	(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or				
section 53 4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  or if the answer is "Yes" to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes, "Interact the statement required by Pregulations section 53 4945-5(d).  8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes, "Interact the statement required by Pregulations section 53 4945-5(d).  8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes, "In the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes, "In the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes, "In the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes, "In the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes, "In the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes, "In the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes, "In the year of year, ye	the prevention of cruelty to children or animals?		Yı	es X No		
Organizations relying on a current notice regarding disaster assistance check here  If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section S3 4945-Sc(0).  Ba Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes," attach the statement required by Regulations section S3 4945-Sc(0).  Ba Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes," Dob, the Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  7b Information About Officers, Directors, Trustees, Foundation Managers, Highly  The Trust Time of the transaction of the highest-paid employees (other than those included on time 1). If none, enter "NONE."  1 1832 ROCK LANDING DR. STE 106  1829 Compensation of five highest-paid employees (other than those included on time 1). If none, enter "NONE."  2 1830 Compensation of the highest-paid employees (other than those included on time 1). I	b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations			
the the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53 4945-5(d).  8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to 6b, file Form 8370  If "Yes and the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes" to 6b, file Form 8370  If yes to 6b, file Fo	section 53 4945 or in a current notice regarding disaster assistance (see instri	uctions)?		N/A	5b	
expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53 4945-5(d). 6a Did the foundation, during the year, peave any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to 8b, file Form 8370  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Title, and average (c) Compensation (f) Compens	Organizations relying on a current notice regarding disaster assistance check l	here				
## "Yes," attach the statement required by Regulations section \$3 4945-5(d).  \$a bit the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  ## "Yes" to \$b\$, file Form 8370  ## If "Yes" to \$b\$, file Form 8370  ## If "Yes" to \$b\$, file Form 8370  ## It yes, did the foundation during the tax year, was the foundation a party to a prohibited tax shelter transaction?  ## Information About Officers, Directors, Trustees, Foundation Managers, Highly  ## Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  ## It List all officers, directors, trustees, foundation managers and their compensation.  ## It is all officers, directors, trustees, foundation managers and their compensation.  ## It is all officers, directors, trustees, foundation managers and their compensation.  ## It is all officers, directors, trustees, foundation managers and their compensation.  ## It is all officers, directors, trustees, foundation managers and their compensation.  ## It is all officers, directors, trustees, foundation managers and their compensation.  ## It is all officers, directors, trustees, foundation managers and their compensation.  ## It is all officers, directors, trustees, foundation managers and their compensation.  ## It is all officers, directors, trustees, foundation managers and their compensation.  ## It is all officers, directors, trustees, foundation managers, Highly  ## It is all officers, directors, trustees, foundation managers, Highly  ## It is all officers, directors, trustees, foundation managers, Highly  ## It is all officers, directors, trustees, foundation managers, Highly  ## It is all officers, directors, trustees, foundation managers, Highly  ## It is all officers, directors, trustees, foundation managers, Highly  ## It is all officers, directors, trustees, foundation managers, Highly  ## It is all officers, directors, trustees, foundation managers, Highly  ## It is all officers, directors, trustees, foundati	c If the answer is "Yes" to question 5a(4), does the foundation claim exemption to					
\$\text{8} Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? 7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? 7b If It was, did the foundation receives any proceeded or have any net income attributable to the transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Part VIII Promation About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Promation About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Informa	expenditure responsibility for the grant?	D.	1/A Y	es L No		
a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes ' Did, the Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Itls, and average hours per week devoted to position  PRUSTEE  1 1832 ROCK LANDING DR. STE 106  NEWPORT NEWS, VA 23606  0.25  0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0	If "Yes," attach the statement required by Regulations section 53 494	15-5(d).				
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If 'Yes' to 8b, file Form 8870 7a At any time during the taxy say was the foundation a party to a prohibited tax shelter transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  (a) Name and address (b) Itile, and average hours give week devoked to position  (a) Name and address (b) Itile, and average hours give week devoked to position  (b) Itile, and average hours give week devoked to position  (c) Compensation (In or paid, enter 'BO)  (d) Compensation (In or paid, enter object sheeting a detected compensation.  (e) Expense account, other enter object sheeting a detected compensation.  (a) Name and address (b) Itile, and average hours give the enter object sheeting a detected compensation.  (b) Itile, and average hours give the paid the property of the paid to the transaction?  (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (e) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (e) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (f) Compensation of compensation of the highest-paid employees (other than those included on line 1). If none, enter "NONE."  (g) Name and address of each employee paid more than \$50,000  (g) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (g) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (g) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (g) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "	<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	,			
11 "Yes" to 6b, file Form 8870   Tax At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?   NA 7b	·		Ye	es X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  1 List all officers officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Information About Officers, Directors, Tr	<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	<u> X</u>
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?    Part VIII	If "Yes" to 6b, file Form 8870					
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors   List all officers, directors, trustees, foundation managers and their compensation.   List all officers, directors, trustees, foundation managers and their compensation.   (a) Name and address	7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Ye			4
1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address (a) Name and address (a) Name and address (b) Title, and average hours per week devoted to position (into paid, enter 0.) (into paid determed account, other allowances (into paid determed account, oth					7b	Ц
(a) Name and address (b) Title, and average hours per week devoted to position (find paid). (e) Expense account, other allowances (e) Compensation (find paid). (find paid) entire the proposation of the highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address  (b) Title, and average hours per week devoted to position  (c) Compensation (find paid). (e) Expense account, other allowances compensation (find paid). (find paid	Paid Employees, and Contractors		anagers, Highly	/ 		
LLOYD U. NOLAND, III  11832 ROCK LANDING DR. STE 106 NEWPORT NEWS, VA 23606  DESIJAMIN WILLIAMS, III  11832 ROCK LANDING DR. STE 106 NEWPORT NEWS, VA 23606  NEWPORT NEWS, VA 23606  O.25  O. O. O.  O.  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Compensation  (d) Compensation  (e) Expense account, other allowances  (e) Expense account, other allowances	List all officers, directors, trustees, foundation managers and their		1430	(d) a	r <del></del>	
11832 ROCK LANDING DR. STE 106   0.25   0. 0. 0.   0.	(a) Name and address	hours per week devoted	(If not paid,	employee benefit plans and deferred	(e) E accour allov	xpense nt, other vances
NEWPORT NEWS, VA 23606  LAWRENCE O. MYERS  11832 ROCK LANDING DR. STE 106  NEWPORT NEWS, VA 23606  DENJAMIN WILLIAMS, III  TRUSTEE  11832 ROCK LANDING DR. STE 106  NEWPORT NEWS, VA 23606  O. 25  O. 0.  O. 0.  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Compensation employees to the employee account, other account, other allowances  (e) Expense account, other allowances	LLOYD U. NOLAND, III	TRUSTEE				
AWRENCE O. MYERS  11832 ROCK LANDING DR. STE 106  NEWPORT NEWS, VA 23606  BENJAMIN WILLIAMS, III  11832 ROCK LANDING DR. STE 106  NEWPORT NEWS, VA 23606  Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Computations to employee breitiplans account, other allowances	11832 ROCK LANDING DR. STE 106	Ţ				
11832 ROCK LANDING DR. STE 106 NEWPORT NEWS, VA 23606 BENJAMIN WILLIAMS, III TRUSTEE  11832 ROCK LANDING DR. STE 106 NEWPORT NEWS, VA 23606  O.25 O. 0. 0.  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation of debrid compensation address of each employee paid more than \$50,000  NONE	NEWPORT NEWS, VA 23606	0.25	0.	0.		0.
NEWPORT NEWS, VA 23606  BENJAMIN WILLIAMS, III  11832 ROCK LANDING DR. STE 106  NEWPORT NEWS, VA 23606  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation of position  (d) Combuttors to employee benefit plans and deterred compensation of position  (e) Expense account, other allowances	LAWRENCE O. MYERS	TRUSTEE				
BENJAMIN WILLIAMS, III  11832 ROCK LANDING DR. STE 106  NEWPORT NEWS, VA 23606  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Compensation employee breefiplans and debred compensation allowances.	11832 ROCK LANDING DR. STE 106					
11832 ROCK LANDING DR. STE 106 NEWPORT NEWS, VA 23606  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation employee benefit pairs account, other allowances	NEWPORT NEWS, VA 23606		0.	0.		<u> </u>
NEWPORT NEWS, VA 23606  Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation and deterring and deterring and devoted compensation (c) Compensation (		TRUSTEE				
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Computations to employee briefit plans and deterred compensation  (e) Expense account, other allowances				_		
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans additional compensation allowances  (e) Expense exployee benefit plans and determed compensation  (d) Contributions to employee benefit plans account, other allowances	NEWPORT NEWS, VA 23606	0.25	0.	0.		<u>0.</u>
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans added to allowances  (e) Expense account, other allowances			1			
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans additional compensation allowances  (e) Expense exployee benefit plans and determed compensation  (d) Contributions to employee benefit plans account, other allowances	<del></del>	]				
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans added to allowances  (e) Expense account, other allowances	0.0	landad and line d). Manage				
(a) Name and address of each employee paid more than \$50,000  NONE  (c) Compensation employee benefit plans and determed compensation account, other allowances	Compensation of five nignest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(a) F	YDADSA
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	accour	nt, other
	NONE				l	
		ļ <u>-</u>			<del></del>	
		-				
			<b>_</b>			
		-				
			<del> </del>			
		1				
Cotal number of other employees paid over \$50,000	Total number of other employees paid over \$50,000	1	1	<b>•</b>		

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

	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, se	e 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	886,613. 1,989.
b	Average of monthly cash balances	1b	1,989.
C	Fair market value of all other assets	10	. <del></del>
đ	Total (add lines 1a, b, and c)	1d	888,602.
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	888,602.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	13,329.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	875,273.
6	Minimum investment return. Enter 5% of line 5	6	43,764.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	<del>-</del>
1	Minimum investment return from Part X, line 6	1	43,764.
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 )		
C	Add lines 2a and 2b	2c	333.
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	43,431.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	43,431.
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	43,431.
_	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		20 201
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	39,281.
b	Program-related investments - total from Part IX-B	1b	
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		
а	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	39,281.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	39,281.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	qualifies for th	ie section

Form **990-PF** (2009)

## 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,				40.401
line 7				43,431
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only		,,,'  ,,'',,-;  <del>       ,,  ,                      </del>	0.	***************************************
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2009	1 1.1 11	V •		
a From 2004   30,606				
b From 2005 27,555				
c From 2006 29, 369	. 1			
d From 2007 46,907				
e From 2008	1			
f Total of lines 3a through e	134,437.			
4 Qualifying distributions for 2009 from				
Part XII, line 4 ►\$ 39, 281				
a Applied to 2008, but not more than line 2a	7		0.	
b Applied to undistributed income of prior			, , , , , , , , , , , , , , , , , , , ,	
years (Election required - see instructions)		0.		I and a second
c Treated as distributions out of corpus	V			
(Election required - see instructions)	0.			tt
d Applied to 2009 distributable amount				39,281
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	4,150.			4,150
6 Enter the net total of each column as indicated below:			***************************************	
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	130,287.			
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				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	26,456.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	103,831.			
IO Analysis of line 9				
a Excess from 2005 27,555	<u>.</u>			
b Excess from 2006 29, 369				
c Excess from 2007 46,907	<u>.</u>			
d Excess from 2008				
e Excess from 2009				Form <b>990-PF</b> (2009

54-0754191

Form 990-PF (2009)

NOLAND FOUNDATION

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Y Recipient	f recipient is an individual	Payment	T	<del>-   -</del>	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Aı	mount
a Paid during the year	or substantial contributor	recipient			
SEE STATEMENT 9					
Total  b Approved for future payment VIRGINIA HISTORICAL SOCIETY PO BOX 7311 RICHMOND, VA 23286	NONE	ORG	EDUCATION, HEALTH AND WELFARE		9,281. 5,000.
Total		<u> </u>	<u> </u>	3h 1	5,000.

#### Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated	Unrelated	Dusiness income		d by section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a			1		
b		<del> </del>	1		
c	1 1				
d	I I				
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					<del></del>
3 Interest on savings and temporary cash			Î		
Investments			14	3,777.	
4 Dividends and interest from securities			14	3,777. 14,466.	
5 Net rental income or (loss) from real estate		1-10 - 1 111 110 110 110 110 110 110 110	1		
a Debt-financed property	-		1		
b Not debt-financed property			+		
		<del></del>	<del>                                     </del>	<del></del>	
6 Net rental income or (loss) from personal	1		1 1		
property		<del>_</del>	<del> </del>		<del></del>
7 Other investment income	<del> </del>	·	<del> </del>	<del>  </del> -	<del></del>
8 Gain or (loss) from sales of assets other			1.0	42 005	
than inventory			18	<3,085.>	•
9 Net income or (loss) from special events	<del>                                     </del>	** <del></del>	<del>                                     </del>		
10 Gross profit or (loss) from sales of inventory			<del>                                     </del>		
11 Other revenue	1 1		1 1		
a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0.	.]	15,158.	0.
13 Total. Add line 12, columns (b), (d), and (e)			_	13	15,158.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t	o the Accon	nplishment of E	xempt I	Purposes	
Line No. Explain below how each activity for which inco	me is reported in i	column (e) of Part XVI-	A contribut	ed importantly to the accomp	dishment of
the foundation's exempt purposes (other than				ou importantly to the decomp	
		<u> </u>			
			<del></del>		
				<del></del>	
<del></del>	<del></del>				
				<del>,</del>	<del></del>
				<del></del>	
<del></del> -				<del></del>	
			<del></del>	_ <del></del>	
<del></del>					
		<del></del>		. <u>.</u>	
				<del></del>	
		<u>.                                    </u>			
				<del>-</del>	
-					

			ND FOUNDATION		54-07	54191	Pa	ge 13_
P	art X'	/II Information Re	egarding Transfers To	and Transactions ar	nd Relationships With Nonch	aritable		
		Exempt Organ	ıizations					
1			rectly engage in any of the followi	-			Yes	No
	the C	ode (other than section 501(c	c)(3) organizations) or in section 5	27, relating to political organiz	ations?			:
a		• •	lation to a noncharitable exempt or	rganization of				
	(1) (					1a(1)		<u>X</u>
		Other assets				1a(2)		X
b		transactions						
		Sales of assets to a noncharita	-			1b(1)		<u>X</u>
			encharitable exempt organization			1b(2)		X
		Rental of facilities, equipment,				1b(3)		X
		Reimbursement arrangements	ı			1b(4)		<u>X</u>
		oans or loan guarantees				1b(5)		X
			embership or fundraising solicitation			1b(6)		<u>X</u>
			ailing lists, other assets, or paid en	· ·	lys show the fair market value of the goods		 tc	
u		=	· · · · · · · · · · · · · · · · · · ·		in any transaction or sharing arrangement		ιο,	
		• • •	other assets, or services received	eu iess (ilali iali illaiket value	in any transaction of snaming arrangement	, SHOW III		
(a)	ine no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions, an	d shanno arra	ngeme	nts
		(4)	N/A		(4, 5			
_								
_				<del></del>				
_								
				<del></del>				
			<del></del>	<del></del>				
				***				
_								
		<del></del>						
		-						
						<u> </u>		
					<u> </u>			
2a	is the	foundation directly or indirect	tly affiliated with, or related to, one	or more tax-exempt organiza	tions described			_
			r than section 501(c)(3)) or in sec	tion 527?		Yes	X	No
<u>b</u>	If "Yes	s," complete the following scho		1.65=	(12)			
		(a) Name of org	janization	(b) Type of organization	(c) Description of relation	snip		
_		N/A						
		_ <del></del>	<del></del>					
			<del></del>					
Т	Under p	enalties of penury. I declare that I h	ave examined this return, including accor	mpanying schedules and statemen	ts, and to the best of my knowledge and belief, it i	s true, correct		
			er than axpayer or fiduciary) is based on					
1		Flow) L M	Kanelin	15-26-10	•			
2	र्डा	nature of officer or trustee	· · · · · · · · · · · · · · · · · · ·	Date	Title			
֡֡֓֞֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֓֓֓֓֡֡֓֓֓֡֡֡֡		Preparer's		Dat	e Check if Prepa	rer's identifyin	g numi	oer
ğ	Preparer's Use Only	signature	all_	05	/12/10 self- employed ►			
"   ·	Sare Or	Firm's name (or yours CHER	RY BEKAERT & H	OLLAND, L.L.P	• EIN ►			_
١	ret Use		CENTRAL PARK AV					
_ ]			INIA BEACH, VA_			7)456-	240	00_
					F	orm <b>990-1</b>	PF (2	2009)

#### 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

internal He	renue Service		File a separate a	application for ea	ach return.					
● If you	are filing for an Addit	tional (Not Automati	nsion, complete only c) 3-Month Extensio been granted an auto	n, complete on	l <b>y Part II</b> (on p	_			▶ [3	<b>₹</b>
Part I	Automatic	3-Month Extens	sion of Time. Only	submit original	(no copies ne	eded).				
A corpor Part I on	•	Form 990-T and requ	esting an automatic 6	-month extensio	on - check this	box and com	plete		▶ □	
	corporations (includii come tax returns.	ng 1120-C filers), par	tnerships, REMICs, an	nd trusts must us	se Form 7004	to request an	exten	sion of time		
noted be (not auto you mus	elow (6 months for a comatic) 3-month exter t submit the fully con	corporation required to sion or (2) you file Fo	ronically file Form 886i to file Form 990-T). Ho orms 990-BL, 6069, or age 2 (Part II) of Form Nonprofits.	wever, you cann 8870, group ret	not file Form 8 turns, or a cor	3868 electroni mposite or co	cally if nsolida	(1) you want ated Form 990	the addition 0-T. Instea	onal
Type or	Name of Exempt	Organization					Empl	oyer identific	ation nur	mber
print							_	4 07541	0.1	
File by the	NOLAND FO	UNDATION					5	4-07541	91	
due date for filing your return See			If a P.O. box, see insti DRIVE, SUIT							
instructions	City, town or post NEWPORT N		ode. For a foreign a	address, see ins	tructions.					
Fo. X Fo.  The b Telepi	none No. ► <u>757-</u> organization does not	Form 99 Form 10  THE FOU  NEWPORT  240-5650  t have an office or pla	NDATION - 1 NEWS, VA 2 ace of business in the	1832 ROC 3606 FAX No. D	check this box	x	27 69 70 VE,		. ▶ □	
		-	on's four digit Group I is box ▶ □ and a							
 ıs f	AUGUST 15, or the organization's X calendar year 2 tax year beginni	2010 , to return for: 009 or	r a corporation require file the exempt organ		•			The extension	I	
2 If ti	his tax year is for less	than 12 months, che	eck reason: In	itial return	Final	return		Change in acc	ounting p	eriod
	his application is for F prefundable credits. S		, 990-T, 4720, or 6069	, enter the tenta	ative tax, less	any	За	\$	3	33.
<b>b</b> If the	his application is for F	Form 990-PF or 990-T	, enter any refundable	credits and est	timated		ĺ		_	
	-		verpayment allowed a				3b	\$	9	65.
de <sub>l</sub>			nclude your payment sing EFTPS (Electroni		•		3c	\$		0.
							0070	-0.4-		

FORM 990-PF INTEREST ON SAV	INGS AND TEM	IPORARY CASH	INVESTMENTS	STATEMENT 1
SOURCE				AMOUNT
VARIOUS				3,777.
TOTAL TO FORM 990-PF, PART I	, LINE 3, CO	DLUMN A		3,777.
FORM 990-PF DIVIDENT	OS AND INTER	EST FROM SE	CURITIES	STATEMENT 2
SOURCE	GROSS	C AMOUNT	APITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
VARIOUS		14,466.	0.	14,466.
TOTAL TO FM 990-PF, PART I, I	LN 4	14,466.	0.	14,466.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
ACCOUNTING FEES	5,750.	•	0.	0.
TO FORM 990-PF, PG 1, LN 16B	5,750.		0.	0.
FORM 990-PF	OTHER PROFES	SIONAL FEES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
INVESTMENT ADVISORY FEES	1,589.	1,58	9.	0.
TO FORM 990-PF, PG 1, LN 16C	1,589.	1,58	9.	0.

FORM 990-PF	TAX	KES			STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
EXCISE TAX	333.	· · · · · · · · · · · · · · · · · · ·	0.			0.
TO FORM 990-PF, PG 1, LN 18	333.		0.			0.
FORM 990-PF	OTHER E	XPENSES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
ADMINISTRATIVE EXPENSES	1,818.	<del></del>	0.			0.
TO FORM 990-PF, PG 1, LN 23	1,818.		0.			0.
	STATE/CITY G U.S GOV'	. OTHER		IGATIONS OK VALUE	STATEMENT FAIR MARKE VALUE	
DESCRIPTION	U.S	. OTHER			FAIR MARKE	T
DESCRIPTION  US GOVERNMENT OBLIGATIONS	U.S GOV'	. OTHER		OK VALUE	FAIR MARKE VALUE	T 28.
DESCRIPTION  US GOVERNMENT OBLIGATIONS	U.S GOV' X	OTHER GOV'T		OK VALUE 403,985.	FAIR MARKE VALUE 398,0	T 28.
DESCRIPTION  US GOVERNMENT OBLIGATIONS  TOTAL U.S. GOVERNMENT OBLIGAT	U.S GOV'' X FIONS VERNMENT OBL	OTHER GOV'T		OK VALUE 403,985.	FAIR MARKE VALUE 398,0	T 28.
DESCRIPTION  US GOVERNMENT OBLIGATIONS  TOTAL U.S. GOVERNMENT OBLIGAT  TOTAL STATE AND MUNICIPAL GOVE  TOTAL TO FORM 990-PF, PART II	U.S GOV'' X FIONS VERNMENT OBL	OTHER T GOV'T		0K VALUE 403,985. 403,985.	FAIR MARKE VALUE 398,0	T 28.
DESCRIPTION  US GOVERNMENT OBLIGATIONS  TOTAL U.S. GOVERNMENT OBLIGAT  TOTAL STATE AND MUNICIPAL GOV	U.S GOV' X TIONS VERNMENT OBL	OTHER T GOV'T	ВОС	0K VALUE 403,985. 403,985.	FAIR MARKE VALUE 398,0 398,0	28. 28.
DESCRIPTION  US GOVERNMENT OBLIGATIONS  TOTAL U.S. GOVERNMENT OBLIGAT  TOTAL STATE AND MUNICIPAL GOV  TOTAL TO FORM 990-PF, PART II	U.S GOV' X TIONS JERNMENT OBL I, LINE 10A  CORPORAT	OTHER T GOV'T	ВОС	A03,985.  403,985.	FAIR MARKE VALUE  398,0  398,0  STATEMENT  FAIR MARKE	28. 28. 8

FORM 990-PF

STATEMENT

	DURING THE YEAR		EMENT 9
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
CNUEF ONE UNIVERSITY PLACE NEWPORT NEWS, VA 23606	NONE EDUCATION, HEALTH AND WELFARE	ENDOWMENT FUND	1,000.
DSAVP PO BOX 1237 YORKTOWN, VA 23692	NONE EDUCATION, HEALTH AND WELFARE	CHARITABLE ORG	2,000.
FOODBANK OF THE VA PENINSULA 9912 HOSIER ST. NEWPORT NEWS, VA 23601	NONE EDUCATION, HEALTH AND WELFARE	CHARITABLE ORG	1,500.
NATIONAL MULTIPLE SCLEROSIS 1 MORTON DRIVE, SUITE 106 CHARLOTTESVILLE, VA 22903	NONE EDUCATION, HEALTH AND WELFARE	CHARITABLE ORG	1,500.
JAMESTOWN-YORKTOWN FOUNDATION PO BOX 3605 WILLIAMSBURG, VA 23187	NONE CULTURE AND ART	FOUNDATION	1,607.
NEWPORT NEWS POLICE RELIEF 9710 JEFFERSON AVE. NEWPORT NEWS, VA 23605	NONE EDUCATION, HEALTH AND WELFARE	CHARITABLE ORG	1,000.
PENINSULA FINE ARTS CENTER 101 MUSEUM DR NEWPORT NEWS, VA 23606	NONE CULTURE AND ART	CHARITABLE ORG	2,000.
SALVATION ARMY PO BOX 7529 HAMPTON, VA 23666	NONE EDUCATION, HEALTH AND WELFARE	CHARITABLE ORG	1,500.

GRANTS AND CONTRIBUTIONS

" NOLAND FOUNDATION		54	1-0754191
VIRGINIA ATHLETIC FOUNDATION PO BOX 400833 CHARLOTTESVILLE, VA 22904	NONE EDUCATION, HEALTH AND WELFARE	CHARITABLE ORG	4,924.
PENINSULA COMMUNITY FOUNDATION 2400 WASHINGTON AVENUE NEWPORT NEWS, VA 23607	NONE EDUCATION, HEALTH AND WELFARE	CHARITABLE ORG	5,000.
VIRGINIA HISTORICAL SOCIETY PO BOX 7311 RICHMOND, VA 23286	NONE CULTURE AND ART	CHARITABLE ORG	15,000.
VIRGINIA LIVING MUSEUM 524 J.CLYDE MORRIS BLVD NEWPORT NEWS, VA 23601	NONE CULTURE AND ART	CHARITABLE ORG	2,250.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		39,281.