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Form	9	9	0	-P	F
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Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052

		nt of the Trevenue Se		Note	: The	foundation	n may t					te Founda		te re	porting	requ	rements		2(009	
_			year 2009										9, and e							, 20	_
_			hat apply			ial return				nitial r	eturn o	of a former	public cl	hant	 y				Final ref	turn	_
					Am	ended re	eturn		_	\Box	Addres	ss change	•	٦	[⊤] Na	me o	hange		-	•	
_			Name of fo	oundat	ion												<u> </u>	tufic	cation numb	oer	_
	lse th	e IRS	j																		
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		ecific	City or tow											—–			emption appli	catio			Т
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			NORFOL	ĸ v	ъ 23	3510									Į				ns, check here	. —	L
ū	Cho	ck tupo	of organiz			Sectio	n 501/	c)(3)	ovom	nt new	ata fai	undation.							ns meeting the re and attach	,	٦
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1			947(a)(1) n									vate found			——] E	If pr	vate foundate	on si	tatus was term	inated	٦
'			t value of a				J Acco		•	•	_^) (·	asn A	ccrual			unde	er section 507	7(b)(1)(A), check he	ere . ►	ل
	•	ear (iro ► \$	m Part II, o	534,					(spec		t he or	cash bası		-	F				a 60-month ter	_	٦
			sis of Rev				<u> </u>		,,,,,,	1) 11103	00 01	Casil basi	3)			una	er section 507	/(b)(1)(B), check he	ursements	⊥
L	arti	total o	f amounts II	renue n colun	nns (b), (c), and	(d)	1 (enue a		(b) Net in	vestmen	t	(c)	Adju:	sted net	Í		antable	
		may n	ot necessar	nly equ	ıal the	amounts	in			nses pe ooks	er	ınc	ome			inco	me			poses	
-			n (a) (see p					├				18 3 3 1 A	" 243V	3387	2 / mgt-	"C, 3.44	1 608 m 1 120	Ų		asis only)	<u>~</u>
	1		ions, gifts, grant	ts, etc , re e found	eceived l lation is	(attach sched not requi	fule) . red to	2 460	, 38°	, ,,	97 - 39% -1/ 5 (1);	17.4° E 27.				A 18	3 \$\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	\rightarrow	<u> </u>	3 & X. W	3
	2	Check	atta لـــا	ich Sch	В			43.5	1 /3/		<i>-√ું</i> લાં. 521.				S. Varia	رم در دود ر	The state	ŕ		1 18 18	<u>//</u>
	3		on savings ar	•	-		nents	├					5,52					-	ATCH	1233 83	₩ .
	4		nds and inte			•		<u> </u>		642,		_	642,29	\rightarrow				-	<u>- ATCH</u>	2 3	<u> </u>
			rents	-					185 3		249.	T 16788	-24			J (80	- بند - المار - المار - المار - الم	-	7, 13	<u> </u>	<u></u>
	b	Net rent	al income or	(loss) _			<u>-249</u> .	~ 13	525 July	`	35°	- 15 M			(<u> </u>	-			-
ě			or (loss) fron ales price for					Description.		237,		3,45 5 4 V		× 6	· - 6/4 · .	Jek. ,	28 3858 *******	- 1	- 1, X.3	*	<u>></u>
en			on line 6a	<u> </u>		4,914,	430.	_	\$ 1 mg/		~ Z\$ ()	18 1 %	ئىمىدىك دەملا ئىدىنى	300	W (3 %	\$7.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	~ Q	<u>3₹7, -</u>	1.03/	<u> </u>
Revenue	7	Capital	gain net ind	come (f	from P	Part IV, line	≘2).	(355) 200	** >>\	····	47,47				(%), '	****	V. 36	· *	34" .	1 20 1 10 10	
_	8	Net sho	ort-term cap	ıtal gar	n .		<u></u>				**		, **,	*/"\\ X					,	<u> </u>	_
	9		modificatio		RE(CEIVE	ΞĐ.	200		^	7.5 V		FL	344				_	, ,	, v. , »* _e ,	.
		and allo	wances 🕂 ·	٠			==	ان			~ , ,			."		:_	47		· · · -		_`
	b	Less Co	ost of goods s	50 ¹² .	1011	1 = 2	n 10	8	-					-	<u> </u>		_ <	-	•		
	С	Gross (profit or (05	š) (atta	ich Veci	hedulle) 🛃	nìi .	S										4	· · · · ·	(%)	_
	11	Other i	ncome (atta	ch sch	edule))		页			702.		8,07	$\overline{}$				-4	<u>ATCH</u>	3	
_	12	Total /	Add linesi 1 1	hrough)14 _E	ali Ni	HT.		-2,	587,			655,64	0.				4		<u> </u>	_
	13	Comper	sation of offic	ers;din	ectors.	inustees te			<u> </u>		0.			\dashv				_			
	14	Other e	employee sa	lanes a	and w	ages		<u> </u>					_					4			_
Operating and Administrative Expenses	15		n plans, em								00-			_				4			
en:		-	ees (attach								221.		22					<u>0.</u>			0.
X			iting fees (a					<u> </u>	_		333.		2,33	-				0.			0.
e E	С	•	professional	-		-	.*	<u></u>		<u> 190,</u>			190,64	$\overline{}$				4			_
aţį	17	Interes	t. ATTA	CHM	ENT	'. 7		<u></u>			357.		6,35					4			
str	18	Taxes (a	attach schedu	ile) (see	page 14	4 of the instru	ctions)* 1	<u> </u>		16,	334.		16,33	34.				4			
Ē	19	Deprec	aation (attac	ch sche	edule)	and deple	tion .											\dashv			
h	20	Occupa	ancy					<u></u>										4			
φp	21	Travel,	conference	s, and	meeti	ngs		<u></u>					 -					_			
a	22		g and public					<u></u>]				\perp			
ing	23	Other e	expenses (a	ttach s	chedu	ıle) ATC	н. 9.	L_		1,	290.		1,29	0.0				_			
rati	24	Total o	perating an	ıd adm	inistra	ative expe	enses.							1				Ī			
þ			es 13 throug	_				<u></u>		217,	-		217,18	2.				0.			0.
O	25	Contrib	utions, gifts	, grant	s paid	STMT.	Α.			330,		-		. `				_	4	,330,80	0.
_	26	Total exp	enses and dis	burseme	ents Ad	dd lines 24 a	and 25			547,			217,18	2.			(0.	4	,330,80	٥.
	27	Subtra	ct line 26 fro	m line	12 [.]			. , 5		·	a - 5"	÷					<i>,</i>	٠, [, -	
	a	Excess	of revenue over	r expens	es and	disbursemei	nts , .		-7,	135,	746.	 _		Ţ., `		٠, '		; [(C 15	
	ь	Net inv	estment in	come	(if neg	gative, ent	er -0-)	· \	<u>*- </u>				438,45	8.	17.	` .	,	_[·	2 , `	_
	٦.	Δdinet	ed net inco	me (if	negati	ive enter	-0-1	1 %						Т			-0-	- T			_

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. * ATCH 6 JSA **
9E1410 1 000 TR4082 E014 5/19/2010 12:27:40 PM V 09-6.1 790221 ATCH 8

Form 990-PF (2009)

	art II	Balance Sheets description column should be for end-of-year	Beginning of year	End (of year
		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	10,922.		
	2	Savings and temporary cash investments	614,188.		
	3	Accounts receivable	T		The Miles of the Control
		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			
	1	disqualified persons (attach schedule) (see page 16 of the instructions)			
	7	Other notes and loans receivable (attach schedule)	3. 11. 11. 11. 11. 11. 11. 11. 11. 11. 1	DESTRUCTION DE PERSON	
	İ	Less allowance for doubtful accounts			750000000000000000000000000000000000000
	8	Inventones for sale or use			
ssets	9	Prepaid expenses and deferred charges			
Ass	10 a	Investments - U S and state government obligations (attach schedule) **	75,310.	75,330.	75,330.
_		Investments - corporate stock (attach schedule) ATCH 11			
		Investments - corporate bonds (attach schedule)	33,200,007	20,002,003.	2177517010.
	11	Investments land huldings >	3 13 1/25 2 3 37	100 th 12 5 36 56 1	desire and sold in the
		and equipment basis Less accumulated depreciation	هدار المراجعة المحادث المدرو	[1300/16/12/16/26/19/26/19/26/19/26/19/26/19/26/19/26/26/19/26/26/26/26/26/26/26/26/26/26/26/26/26/	But Mile Bish (142 882)
	42	(attach schedule)			
	12 13	Investments - mortgage loans Investments - other (attach schedule) ATCH 12	41 519 500	37,342,521.	37,342,521.
	14	Land, buildings, and	11, 510, 599.		
		equipment basis Less accumulated depreciation			Let the Letter Cont
		equipment basis Less accumulated depreciation (attach schedule)			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	65 274 606	50 220 060	50 524 401
_				58,238,860.	59,534,481.
	17	Accounts payable and accrued expenses			
	18	Grants payable			Shipper of the state of the sta
Liabilities	19	Deferred revenue			一、記述機会 うり
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			The state of
Ē	21	Mortgages and other notes payable (attach schedule)			×20
_	22	Other liabilities (describe			
					(1) 3 (8 × 1) 1/2 1
_	23	Total liabilities (add lines 17 through 22)			The second of the second
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
lances	24	Unrestricted			
au	25	Temporarily restricted			
Bal	26	Permanently restricted			المن ما المن المن المن المن المن المن ال
٦	27 28 29 30	Foundations that do not follow SFAS 117,			
Ξ		check here and complete lines 27 through 31. ▶ X			,
ŏ	27	Capital stock, trust principal, or current funds			*
ţ	28	Paid-in or capital surplus, or land, bldg , and equipment fund			* , ,
SS	29	Retained earnings, accumulated income, endowment, or other funds	65,374,606.	58,238,860.	~ `
Ť	30	Total net assets or fund balances (see page 17 of the			
ž		instructions)	65,374,606.	58,238,860.	•
	31	Total liabilities and net assets/fund balances (see page 17			
		of the instructions)	65,374,606.	58,238,860.	`
P	art II	Analysis of Changes in Net Assets or Fund	Balances		
_		net assets or fund balances at beginning of year - Part II, or		igree with	
				•	65,374,606.
2				· · · · · · · · · 	-7,135,746.
				· · · · · · · · · 	
		linos 1 2 and 2			58,238,860.
		eases not included in line 2 (itemize)			33,230,000.
		net assets or fund balances at end of year (line 4 minus line	5) - Part II. column (b)		58,238,860.
<u>~</u>	· Old	** ATCH 10		<u> </u>	Form 990-PF (2009)
		AICH IC	,		1 01111 0 0 0 1 T (2003)

Р	art IV Capital Gains	s and Losses for Tax on Inv	estment Income			
_	• •	I describe the kind(s) of property sold (e ick warehouse, or common stock, 200 s		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	SEE PART IV SCHE	OULE				<u> </u>
b						
_c						
_ <u>d</u>						
<u>e</u>		· · · · · · · · · · · · · · · · · · ·				
	(e) Gross sales pnce	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
a						
<u>b</u>		· ·				
<u>_c</u>		· · · · · · · · · · · · · · · · · · ·				
<u>_d</u>						
_ <u>e</u>	 					
<u>_C</u>	omplete only for assets show	wing gain in column (h) and owned			Gains (Col (h) g	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	(k), but not less to Losses (from co	
_a						
_b						
_ <u>c</u>						
_ d						
<u>e</u>						
2	Capital gain net income or (net capital loss) {	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2	-3,	237,085.
3		or (loss) as defined in sections 1222	' '			
		ine 8, column (c) (see pages 13 and				
	If (loss), enter -0- in Part I, I	ine 8	ed Tax on Net Investment Inco	3		
Wa		ne section 4942 tax on the distributa	ble amount of any year in the base	penod?	\Box	Yes X No
		ot qualify under section 4940(e) Do	<u> </u>			
1		unt in each column for each year, se	ee page 18 of the instructions before	making		
_ c	(a) Base penod years alendar year (or tax year beginnung in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ration (col (b) divided by	
_	2008	2,631,768.	29,685,409.			0.088655
_	2007	7,521,414.	38,264,878.			0.196562
_	2006	13,257,633.	39,038,536.			0.339604
_	2005	11,796,684.	48,313,977.			0.244167
	2004	3,981,500.	54,060,403.			0.073649
2	Total of line 1, column (d)			2		0.942637
3	•	or the 5-year base period - divide th	•			
	number of years the found	ation has been in existence if less the	nan 5 years	3		0.188527
4	Enter the net value of nonc	charitable-use assets for 2009 from	Part X, line 5	4	56,	715,280.
5	Multiply line 4 by line 3		• • • • • • • • • • • • • • • • • • • •	5	10,	692,362.
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)	· · · · · · · · · · · · · · · · · · ·	6		4,385.
7	Add lines 5 and 6			7	10,	696,747.
8	Enter qualifying distribution If line 8 is equal to or gre	eater than line 7, check the box i	in Part VI, line 1b, and complete t	8 hat part		330,800. c rate See the

Form	990-PF (2009) 54-1879266		1	Page 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the in-	structi		
-1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1		7.50	16/2
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)			22
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		8,7	69.
	here ▶ ☐ and enter 1% of Part I, line 27b	377		y 64
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%		\$. J	
	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-) 2			
3	Add lines 1 and 2		8,7	69.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	1.2.462	8,7	69.
6	Credits/Payments			
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 16,254.		1. 3. 3. 3.	ndf g
	Exempt foreign organizations-tax withheld at source 6b 0.			14. 1
	Tax paid with application for extension of time to file (Form 8868) 6c 0.			** !
	Backup withholding erroneously withheld 6d 6d		1.6.2	54
7	Total credits and payments Add lines 6a through 6d	_	16,2	54.
8 9	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
			7 /	85.
11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. Enter the amount of line 10 to be Credited to 2010 estimated tax 7, 485. Refunded 11		1,4	05.
	VII-A Statements Regarding Activities			
1a		، ﴿ فِعْنَيْ	Yes	No
	participate or intervene in any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1ь		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	\$ 8.53 }	6-35(°	19.7 E
	published or distributed by the foundation in connection with the activities			$\mathcal{F}_{q_{i,j}}$
С	Did the foundation file Form 1120-POL for this year?	1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	3.	***	" بَدُّنَّيَّ " نَکُتُي
	(1) On the foundation \$ (2) On foundation managers \$	1	3.7	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		* · ·	~-1
	on foundation managers \$	£3	. 2	4
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		
_	If "Yes," attach a detailed description of the activities		1 5	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		, ;	v
4-	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3 4a		- <u>X</u> -
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			
5	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?	4b 5		X
3	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	٤		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	, T		
-	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	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the		-	
	instructions) VA,	,	As "	
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	8Ь	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		٠, ٠	
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			
	27)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			.,
	names and addresses	10		X
	F	om 99	V-PF (2009)

. 4b X

Х

3b

4a

X No

3a Did the foundation hold more than a 2% direct or indirect interest in any business

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
 b 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?

	t VII-B Statements Regarding Activities fo	r Which Form 47	20 May, Be Requi	red (contir	ued)	
5 a	During the year did the foundation pay or incur any amount	to				44 42 8C
	(1) Carry on propaganda, or otherwise attempt to influence		945(e))?	Yes	X No	
	(2) Influence the outcome of any specific public election (s	ee section 4955), or to	o carry on.			
	dispetiti as indispetiti pari riatas sanistrativa decino	•	• •	Yes	X No	
	(3) Provide a grant to an individual for travel, study, or other				X No	15 34 1 1 1 1 1 1 1 1
	(4) Provide a grant to an organization other than a charital			res		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (se	· · · · · ·		Yes	X No	
		· ·		. Lifes	N NC	
	(5) Provide for any purpose other than religious, charitable			<u> </u>	Г у Т	
	purposes, or for the prevention of cruelty to children or				X No	
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans					13.2 ac 28.2 at 18.2
	Regulations section 53 4945 or in a current notice regard				··	5b
	Organizations relying on a current notice regarding disaster	r assistance check he	re	🕨	•	
C	If the answer is "Yes" to question 5a(4), does the foundation	n claim exemption from	m the tax			
	because it maintained expenditure responsibility for the gra	nt?		Yes	No.	
	If "Yes," attach the statement required by Regulations secti					
6a	Did the foundation, during the year, receive any funds, dire-	ctly or indirectly, to pa	v premiums			
	on a personal benefit contract?			Yes	X No	in the second se
b	Did the foundation, during the year, pay premiums, directly			. —		6b X
	If "Yes" to 6b, file Form 8870					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
7 a	At any time during the tax year, was the foundation a party	to a prohibited tax she	elter transaction?	Yes	X No	
	If yes, did the foundation receive any proceeds or have any	•	•			7b X
	t VIII Information About Officers, Directors			Highly Pa	id Emp	
	and Contractors		_	• • •	•	• •
<u> </u>	List all officers, directors, trustees, foundation man	(b) Title, and average	(c) Compensation	ge 22 of the		
	(a) Name and address	hours per week devoted to position	(If not paid, enter	employee bene	fit plans	(e) Expense account, other allowances
		devoted to position		and deferred com	pensation	
 ΤΔ	TACHMENT 13		0.		0.	^
211						
						0
					0.	
					0.	
	Compensation of five highest-paid employees (othe	r than those includ	ded on line 1 - see pa	age 23 of the		
2	Compensation of five highest-paid employees (othe If none, enter "NONE."		ded on line 1 - see pa	(d) Contribut	e instruc	tions).
	Compensation of five highest-paid employees (othe If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	ded on line 1 - see pa	(d) Contributi	e instruc	tions).
(a	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average		(d) Contribut	e instruc	tions).
	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contribute employee be plans and de	e instruc	tions). (e) Expense account, other allowances
(a	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contribute employee be plans and de	e instruc	tions).
(a	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contribute employee be plans and de	e instruc	tions). (e) Expense account, other allowances
(a	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contribute employee be plans and de	e instruc	tions). (e) Expense account, other allowances
(a	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contribute employee be plans and de	e instruc	tions). (e) Expense account, other allowances
(a	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contribute employee be plans and de	e instruc	tions). (e) Expense account, other allowances
(a	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contribute employee be plans and de	e instruc	tions). (e) Expense account, other allowances
(a	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contribute employee be plans and de	e instruc	tions). (e) Expense account, other allowances
(a	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contribute employee be plans and de	e instruc	tions). (e) Expense account, other allowances
(a	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contribute employee be plans and de	e instruc	tions). (e) Expense account, other allowances
NON	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contribute employee be plans and de	e instruc	tions). (e) Expense account, other allowances

Part VIII	and Contractors (continued)	agers, Highly Paid Empi	oyees,	
3 Five high	est-paid independent contractors for professional services (see page 23 o	f the instructions). If none,	enter "NC	NE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Comp	ensation
NONE				
			-	
		 	ļ	
Total number	er of others receiving over \$50,000 for professional services		▶	NONE
Part IX-A	Summary of Direct Charitable Activities			
	ation's four largest direct chantable activities during the tax year. Include relevant statistical information as and other beneficianes served, conferences convened, research papers produced, etc.	such as the number	Expe	nses
1 NONE				
2				
3				
4				
Part IX-B		tions)		
	wo largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amo	unt
1 NONE				
2				
-	am-related investments See page 24 of the instructions			
3 NONE				
			I	

Form 990-PF (2009)

Pa	Minimum Investment Return (All domestic foundations must complete this part Foreig see page 24 of the instructions.)	n foundation	S,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	772,23	
	purposes		
а	Average monthly fair market value of securities	1a	18,130,408.
b	Average of monthly cash balances	1b	39,448,556.
С		1c	0.
d		1d	57,578,964.
е		1034 2 13	· · · · · · · · · · · · · · · · · · ·
	1c (attach detailed explanation)	10.54 2, 11.5 11.5 12.5 13.5 13.5 13.5 13.5 13.5 13.5 13.5 13	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	57,578,964.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		0.70.07000
	of the instructions)	4	863,684.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	56,715,280.
6	Minimum investment return. Enter 5% of line 5	6	2,835,764.
Pa	Int XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private		2703077011
	foundations and certain foreign organizations check here and do not complete this pa		
1	Mınımum investment return from Part X, line 6	1	2,835,764.
	Tax on investment income for 2009 from Part VI, line 5 2a 8,769.		2703377011
 b	Income tax for 2009 (This does not include the tax from Part VI) 2b		
	Add lines 2a and 2h	2c	8,769.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,826,995.
4	Recoveries of amounts treated as qualifying distributions	4	2,020,333.
5	Add lines 3 and 4	5	2,826,995.
6	Deduction from distributable amount (see page 25 of the instructions)	6	2,020,333.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
•	line 1 · · · · · · · · · · · · · · · · · ·	7	2,826,995.
_			2,020,993.
Pa	rt XII Qualifying Distributions(see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	Santanis	
·a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	4,330,800.
b	Decrees related assessment to talk for a De LIV D	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.	-10	0.
-	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		<u> </u>
а	Suitability test (prior IRS approval required)	3a	0.
ь	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	4,330,800.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	-	4,330,000.
•	Enter 1% of Part I, line 27b (see page 26 of the instructions)	_	NI / Ti
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	N/A 4,330,800.
J	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth		
	qualifies for the section 4940(e) reduction of tax in those years	iei trie roundat	IIOII

Form 990-PF (2009)

Fa	Undistributed income (see page	26 of the instruction	ns)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years pnor to 2008	(c) 2008	(d) 2009
	line 7	The course of the state of the	. "	. ,	2,826,995.
2	Undistributed income, if any, as of the end of 2009	S. T. Allen	1 ay 1 1	,	The state of the s
а	Enter amount for 2008 only	1 3 1 (3-3 2)	34 7	,	7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7
þ	Total for pnor years 20 07 ,20 06 ,20 05	C 4 / / / / / / / / / / / / / / / / / /	0.	· · · · · · · · · · · · · · · · · · ·	2. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
3 a	Excess distributions carryover, if any, to 2009 From 2004 1,376,980.			2	
b	From 2005 9, 421, 817.	الرائد والمقدة	39 - Jac 4		
С	From 2006 11,350,440.		. 4		
d	From 2007 5, 685, 342.	1 2 1 1 1 A	All the state of the state of	·	The same of the same
е	From 2008 1,149,852.		, , ,		
f	Total of lines 3a through e	28,984,431.		, 2, 1	
4	Qualifying distributions for 2009 from Part XII, line 4 > \$ 4,330,800.		Charles and the second		The state of the s
_		· · · · · / / / / / / / / / / / / / / /	,		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Applied to 2008, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)			, , ,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
С	Treated as distributions out of corpus (Election		est of the	, ,	
	required - see page 26 of the instructions)	(2.5. 4.3%) 2	* × × × × × × × × × × × × × × × × × × ×	, ,, ,	The Later Contraction of the
d	Applied to 2009 distributable amount	See the second of the	7	, ,	2,826,995.
е	Remaining amount distributed out of corpus	1,503,805.	See Yes	· ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	Jan 2 2 24 1 1 1 3 3 1 4 1 4 1 4 1 4 1 4 1 4 1 4
5	Excess distributions carryover applied to 2009	5 . 7 . 6 9 1 6 1 7 92		·	
	(If an amount appears in column (d), the same amount must be shown in column (a))				3 4 2000
6	Enter the net total of each column as			, (3)	The state of the state of the
	indicated below:		* `` ~	.*	
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	30,488,236.			
b	Prior years' undistributed income Subtract	which was at		,	*
_	Inne 4b from line 2b Enter the amount of pnor years' undistributed	1	0.		
·	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has	.,			
	been previously assessed				<u> </u>
d	Subtract line 6c from line 6b Taxable	/ y *	,		· ·
e	amount - see page 27 of the instructions Undistributed income for 2008 Subtract line		0.		
Ĭ	4a from line 2a Taxable amount - see page				•
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines				•
	4d and 5 from line 1. This amount must be	ŧ			
7	distributed in 2010				
•	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)				
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	1,376,980.			
9	Excess distributions carryover to 2010.				
-	Subtract lines 7 and 8 from line 6a	29,111,256.	ļ		•
10	Analysis of line 9	,			
	Excess from 2005 9, 421, 817.		i		•
	Excess from 2006				
	Excess from 2007 5, 685, 342.				
d	Excess from 2008 1,149,852.		ļ		
е	Excess from 2009 1,503,805.			•	

Form 990-PF (2009)

Pa	rt XIV Private Oper	rating Foundations	see page 27 of the	instructions and	d Part VII-A, questio	on 9) NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter that	it it is a private	operating	
	foundation, and the ruling	is effective for 2009, ente	r the date of the ruling		▶	
b	Check box to indicate who	ether the foundation is a p	vate operating foundation	n described in secti	on .	4942(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	<u> </u>	(e) Total
2 0	justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(6) 10421
	I or the minimum investment					
	return from Part X for each year listed					
b	85% of line 2a					
_	Qualifying distributions from Part					
٠	XII, line 4 for each year listed					
d	Amounts included in line 2c not					
	used directly for active conduct					
e	of exempt activities			1		
	directly for active conduct of					
	exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
_	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying					
	under section					
ь	4942(j)(3)(B)(i)					
	enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test - enter			 		
	(1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on securities					
	loans (section 512(a)(5)), or royalties)					
	(2) Support from general					
	public and 5 or more exempt organizations as					
	provided in section 4942					
	(j)(3)(B)(iii)					
	port from an exempt organization					Į
	(4) Gross investment income					
Pa					oundation had \$5,	000 or more in assets
	at any time	during the year - se	e page 28 of the ir	structions.)		
1		g Foundation Manager				
а	List any managers of	the foundation who I	nave contributed mor	e than 2% of the	total contributions	received by the foundation
	before the close of an	y tax year (but only if the	ney have contributed	more man \$5,000) (See section 507(d)(2))
	FRANK BATT					
-b	List any managers of	the foundation who	own 10% or more of	of the stock of a	corporation (or an e	qually large portion of the
	ownership of a partner	rship or other entity) o	f which the foundation	n has a 10% or gi	reater interest	
	NONE		2001			
2	َ	g Contribution, Grant,				
	Check here ► X If	the foundation only	makes contributions	to preselected	charitable organization	ons and does not accept
					page 28 of the inst	tructions) to individuals or
		ther conditions, comple				
а	The name, address, ar	nd telephone number o	f the person to whom a	applications shoul	d be addressed	
_	The form in which app	leastern should be sub-	mitted and information	and materials the	w should include	
D	The form in which app	lications should be sub-	milled and information	and materials the	y should madde	
c	Any submission deadle	ines				
	-					
d	Any restrictions or factors	limitations on awards	, such as by geogr	aphical areas, c	haritable fields, kind	s of institutions, or other
	Idadois					

Part XV Supplementary Information (3 Grants and Contributions Paid Du	ring the Year or App	roved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Anodik
a Paid during the year				
VARIOUS - SEE ATTACHED				4,330,800
]		
			İ	
			ļ	
Total			▶ 3a	4,330,800
b Approved for future payment			,	
	Ì			
	ı	1 1	1	

Enter gross a	imounts unless otherwise indicated	Unrelat (a)	ted business income (b)	(c)	section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	service revenue	Business code	Amount	Exclusion code		(See page 28 of the instructions)
b						
с —						
e						
f						
g Fees	and contracts from government agencies					
2 Members	thip dues and assessments					
3 Interest on	savings and temporary cash investments			14	5,521.	<u> </u>
4 Dividends	s and interest from securities			14	642,294.	
5 Net renta	I income or (loss) from real estate	7,77 39		Bre go	30 may 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A. A. A. M. A. C.
a Debt-	-financed property					
b Not d	debt-financed property			16	-249.	
6 Net rental	income or (loss) from personal property					
7 Other inv	estment income					
8 Gain or (lo	ss) from sales of assets other than inventory	<u> </u>		18	-3,237,032.	
9 Net incon	ne or (loss) from special events	<u> </u>				
0 Gross pro	ofit or (loss) from sales of inventory	ļ				
	venue a		 			
	ER PARTNERSHIP UBTI	522100	<u>-6,372.</u>			· · · · · · · · · · · · · · · · · · ·
c OTH	ER PARTNERSHIP INCOME			18	794.	
	IGATION PROCEEDS	1		18	7,280.	
d LIT	TONTION TROUBBBB					
е		78.16.2		V I was an Xed		
e	Add columns (b), (d), and (e)	Military .	-6,372.			
e 12 Subtotal 13 Total. Ad	Add columns (b), (d), and (e) Id line 12, columns (b), (d), and (e)					-2,587,764.
e 12 Subtotal 13 Total. Ad See workshe Part XVI-	Add columns (b), (d), and (e)	venfy calculate to the Acc	ions) complishment of Ex	empt Pur	13	
e 2 Subtotal 3 Total. Ad	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Ex	empt Purp	ooses (e) of Part XVI-A con	tributed importantly to
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Ex	empt Purp	ooses (e) of Part XVI-A con	tributed importantly to
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Ex	empt Purp	ooses (e) of Part XVI-A con	tributed importantly t
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Ex	empt Purp	ooses (e) of Part XVI-A con	tributed importantly t
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Ex	empt Purp	ooses (e) of Part XVI-A con	tributed importantly t
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Ex	empt Purp	ooses (e) of Part XVI-A con	tributed importantly t
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Ex	empt Purp	ooses (e) of Part XVI-A con	tributed importantly t
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Ex	empt Purp	ooses (e) of Part XVI-A con	tributed importantly to
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Ex	empt Purp	ooses (e) of Part XVI-A con	tributed importantly t
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Ex	empt Purp in column her than t	ooses (e) of Part XVI-A con	tributed importantly t
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Exch income is reported exempt purposes (ot	empt Purp in column her than t	ooses (e) of Part XVI-A con	tributed importantly t
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Exch income is reported exempt purposes (ot	empt Purp in column her than t	ooses (e) of Part XVI-A con	tributed importantly t
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Exch income is reported exempt purposes (ot	empt Purp in column her than t	ooses (e) of Part XVI-A con	tributed importantly t
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Exch income is reported exempt purposes (ot	empt Purp in column her than t	ooses (e) of Part XVI-A con	tributed importantly t
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Exch income is reported exempt purposes (ot	empt Purp in column her than t	ooses (e) of Part XVI-A con	tributed importantly t
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Exch income is reported exempt purposes (ot	empt Purp in column her than t	ooses (e) of Part XVI-A con	tributed importantly t
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Exch income is reported exempt purposes (ot	empt Purp in column her than t	ooses (e) of Part XVI-A con	tributed importantly t
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Exch income is reported exempt purposes (ot	empt Purp in column her than t	ooses (e) of Part XVI-A con	tributed importantly t
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Exch income is reported exempt purposes (ot	empt Purp in column her than t	ooses (e) of Part XVI-A con	tributed importantly to
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Exch income is reported exempt purposes (ot	empt Purp in column her than t	ooses (e) of Part XVI-A con	tributed importantly to
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Exch income is reported exempt purposes (ot	empt Purp in column her than t	ooses (e) of Part XVI-A con	tributed importantly to
e 2 Subtotal 3 Total. Ad See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calculate to the According for whice	complishment of Exch income is reported exempt purposes (ot	empt Purp in column her than t	ooses (e) of Part XVI-A con	tributed importantly to

	rt XVII	Information		Transfers To an	d Transa	ctions	and Rel		ips With	Nonc		able
		Exempt Orga							·····	1. 33	_	
1	Did t	he organization directly ction 501(c) of the C	y or indirectly Gode (other than	engage in any of section 501(c)(3)	the following organizations	y with	any other section 527	organızatıor ′relatıng	n described to political	A 133	1	No
	organ	izations? fers from the reporting fou						,	to polluous			
٠		ash		, -							. 7 0	х
		ther assets										$\frac{\lambda}{X}$
Ŀ		transactions									- ا ق يُرد الا	J 32.
		ales of assets to a noncha	aritable exempt o	rganization							3 3/2	X
		urchases of assets from a										Х
		ental of facilities, equipme										Х
		eimbursement arrangeme										Х
		oans or loan guarantees										_ X
	(6) P	erformance of services or	membership or f	undraising solicitations						1b(6)		X
c	Shanr	ng of facilities, equipment,	mailing lists, oth	er assets, or paid empli	oyees					. 1c		X
d	I If the	answer to any of	the above is	"Yes," complete the	following s	chedule	Column (b) should	always sho	w the	faır r	narke
		of the goods, other										
	value	in any transaction of	r shanng arran	gement, show in α	olumn (d) th	e value	of the go	ods, other	assets, or	servic	es rec	eived
(a)	Line no	(b) Amount involved	(c) Name of	nonchantable exempt orga	nization	(d) De	scription of tran	sfers, transa	ctions, and sha	ring arrar	ngemen	ls
		N/A		·		N/A					_	
						-						
		•			_							
			-									
											 .	
												
									 .			
			_	\		_						
2a		foundation directly or										 1
		n 501(c) of the Code (oth		501(c)(3)) or in section	5277			• • • • •		Y	es <u>X</u>	No
	If "Yes	 complete the following (a) Name of organization 		(h) Type of o		 -		(a) Dagge				
		(a) Name of organization	<u> </u>	(b) Type of o	rganization			(c) Descrip	otion of relation	snip		
_												-
	-		-									
	Under belief,	penalties of perjury, I decli it is true, correct, and com	are that I have ex plete Declaration	amined this return, inclu- of preparer (other than ta	ding accompan	ying schi	edules and sta	tements, and	to the best	of my k	nowledg	e and
		. 1.	1 R 00	7. Sh	- 1		10-2010	_				
63	- c.	gnature of officer or trustee	n wind	~ //\		Data .	10-0010	7 /2 Tdlp	ESIDEN	<u> </u>		
ler	· 51	griature of unicer of trustee		· · · · · · · · · · · · · · · · · · ·	15-1	Date	_	nde	Droparad	ıdor#f		
Sign Here	Paid eparer's se Only	Preparer's signature	Milu	no-	Date 11/5/2	010	Check if self-emplo	oyed ▶	Preparer's number (\$ page 30 of P00367	See Signa the instru	iture on	ı
-,	Pai epa se C	Firm's name (or yours if	KPMG 1	LLP				FIN ►	13-5565	_		_

23510-3310 Phone no 757-616-7000 Form **990-PF** (2009)

self-employed), address,

and ZIP code

2100 DOMINION TOWER

VA

NORFOLK,

AIMEE & FRANK BATTEN, JR. FOUNDATION 54-1879
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

C/	<u>APITAL GA</u>	INS AND LO	<u>SSES FO</u>	<u>R TAX ON</u>	<u>INVEST</u>	M	<u>IENT INCON</u>	ME
Kind of F	Property		Desc	ription		19 10 10	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
452,948.		MERRILL LYNC 892,274.	CH X07 ST			P	VAR -439,326.	VAR
4,458,729.		MERRILL LYNC 7,256,145.	CH X07 LT			Р	VAR -2797416.	VAR
0.		ICAHN LT 3,043.				Р	VAR -3,043.	VAR
2,700.		ICAHN ST				P	VAR 2,700.	VAR
TOTAL GAIN (L	oss)				• • • • •		3237085.	
							:	
		<u> </u>				Ш		

- INTEREST ON TEMPORARY CASH INVESTMENTS PART I FORM 990PE,

NET INVESTMENT INCOME	924. 2,034. 2,563.	5,521.
REVENUE AND EXPENSES PER BOOKS	924. 2,034. 2,563.	5,521.
DESCRIPTION	MERRILL LYNCH XX24 MERRILL LYNCH XX07 FLOWTHROUGH INTEREST FROM PARTNERSHIP	TOTAL

- DIVIDENDS AND INTEREST FROM SECURITIES PART I FORM 990PF,

NET INVESTMENT INCOME	223,952. 410,782. 7,085. 475.
REVENUE AND EXPENSES PER BOOKS	223,952. 410,782. 7,085. 475. 642,294.
DESCRIPTION	MERRILL LYNCH X24 MERRILL LYNCH X07 MERRILL LYNCH X07 PAYMENTS IN LIEU FLOWTHROUGH DIVIDENDS FROM PARTNERSHIP TOTAL

TR4082 E014

ATTACHMENT

- OTHER INCOME PART FORM 990PF, DESCRIPTION
OTHER INCOME FROM PARTNERSHIPS
LITIGATION PROCEEDS

-5,578. 7,280. AND EXPENSES PER BOOKS

REVENUE

INVESTMENT INCOME

7,280.

TOTALS

8,074.

1,702.

ATTACHMENT 3

ATTACHMENT

PART I - LEGAL FEES

FORM 990PE,

CHARITABLE <u>PURPOSES</u>		O
ADJUSTED NET INCOME		•0
NET INVESTMENT INCOME	221.	221.
REVENUE AND EXPENSES PER BOOKS	221.	221.
		TOTALS
DESCRIPTION	WILCOX & SAVAGE	

790221

ATTACHMENT

- ACCOUNTING FEES PART I FORM 990PF,

	CHARITABLE	PURPOSES	
ADJUSTED	NET	INCOME	
NET	INVESTMENT	INCOME	2,333.
REVENUE AND	EXPENSES	PER BOOKS	2,333.
		DESCRIPTION	KPMG

TOTALS

ATTACHMENT 5

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

	NET	INVESTMENT	INCOME	182,576.				190,647.
REVENUE	AND	EXPENSES	PER BOOKS	182,576.	7,500.	421.	150.	190,647.
			DESCRIPTION	MERRILL LYNCH XX07-INVESTMENT	SIGNATURE FINANCIAL MANAGEMENT	MERRILL LYNCH XX07 - CERT. FEE	EMA ANNUAL FEE	TOTALS

FORM 990PE, PART I - INTEREST EXPENSE

NET INVESTMENT <u>INCOME</u>	6,357.
REVENUE AND EXPENSES PER BOOKS	6,357.
DESCRIPTION	INVESTMENT INTEREST EXPENSE TOTALS

ATTACHMENT 8

54-1879266

TAXES PART I FORM 990PF,

AND EXPENSES PER BOOKS REVENUE

NET INVESTMENT INCOME

16,338.

16,338.

TOTALS

TAXES - FOREIGN PARTERNSHIP - FOREIGN TAXES

DESCRIPTION

16,334.

12:27:40 PMV 09-6.1

		N		•	
REVENUE	AND	EXPENSES	PER BOOKS	1,265.	25.

ET	INCOME 1,265.
----	------------------

1,290

,290.

TOTALS

25.

54-1879266

AIMEE & FRANK BATTEN, JR. FOUNDATION

FORM 990PE,

75,330.

75,330.

75,330.

TREASURY FUND

DESCRIPTION

75,330.

ENDING FMV

ENDING BOOK VALUE

ATTACHMENT 10

AIMEE & FRANK BATTEN, JR. FOUNDATION

790221

12:27:40 PMV 09-6.1 5/19/2010 TR4082 E014

ATTACHMENT 11

CORPORATE STOCK PART II FORM 990PE,

DESCRIPTION

ENDING BOOK VALUE

ENDING FMV

21,797,010.

MERRILL LYNCH XX07

TOTALS

20,501,389.

21,797,010. 20,501,389.

OTHER INVESTMENTS

FORM 990PE,

ATTACHMENT 12

ENDING BOOK VALUE

ENDING

INSTITUTIONAL FUND

DESCRIPTION

TOTALS

37,342,521.

37,342,521.

37,342,521.

37,342,521.

FOUNDATION
JR.
BATTEN,
FRANK
ઝ
AIMEE

ATTACHMENT 13	NS EXPENSE AND OTH		0
AT	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS		
lì	COMPENSATION	.0	0
FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRES., SEC., TREAS.,	GRAND TOTALS
FORM 990PF, PART VIII -	NAME AND ADDRESS	FRANK BATTEN, JR. 7438 FLICKER POINT NORFOLK, VA 23505	

0

EXPENSE ACCT AND OTHER ALLOWANCES

Aimee & Frank Batten, Jr. Foundation

Date	Description	
1/12/2009	SAT-7	25,000 00
1/12/2009	Prison Fellowship	50,000 00
1/12/2009	Kids Across America Foundation	25,000 00
1/12/2009	Scriptures Inuse	50,000 00
1/12/2009	The God's Story Project	50,000 00
1/12/2009	Bob Boyd Evangelistic Association	25,000 00
1/12/2009	Urban Discovery Ministries	25,000 00
1/12/2009	Intervarsity Christian Fellows	15,000 00
1/12/2009	Crisis Pregnancy Center of Tidewater	55,000 00
1/12/2009	Recovery for the city	5,000 00
1/12/2009	World Mission Prayer League	50,000 00
2/2/2009	Bearers of Light Ministries	20,000 00
2/3/2009	Kanakuk Ministnes	25,000 00
2/3/2009	Disciple Nations Alliance	25,000 00
2/20/2009	Project Light	75,000 00
2/23/2009	Youth Outreach Urban Resources	50,000 00
3/3/2009	Tabernacle Church of Norfolk	137,000 00
3/3/2009	Lafewind International	250,000 00
3/24/2009	Wycliffe Bible Translators	789,000 00
4/1/2009	Duke University Law School	100,000 00
4/13/2009	the Children's Hospital of the King's Daughters	300,000 00
4/14/2009	Kids Across Amenca	50,000 00
4/15/2009	Campus Crusade for Christ	12,000 00
5/1/2009	Elam Ministries	50,000 00
5/13/2009	the National Institution for Learning Development	50,000 00
5/22/2009	the Tabernacle Church of Norfolk	75,000 00
5/27/2009	The Evangelical Alliance Missionary	120,000 00
7/10/2009	Mid Atlantic Teen Challenge	25,000 00
7/13/2009	Physicians for Peace	25,000 00
7/13/2009	The God's Story Project	50,000 00
7/14/2009	Echo	25,000 00
7/16/2009	Scriptures in Use	50,000 00
7/22/2009	Norfolk Christian Schools	25,000 00
9/1/2009	Tabernacle Church of Norfolk	88,800 00
9/21/2009	Intervarsity Christian Fellows	20,000 00
9/21/2009	Harvest Foundation	25,000 00
9/22/2009	Rafiks Foundation	1,000,000 00
9/23/2009	Disciple Nations Alliance	25,000 00
9/29/2009	Bethany Christian Services	5,000 00
10/1/2009	EVMS Foundation	2,500 00
10/6/2009	Opportunity International	25,000 00
10/23/2009	Bountiful Grains Trust	50,000 00
10/23/2009	Lifewind International	100,000 00
10/27/2009	Echo	25,000 00
10/28/2009	Urban Discovery Ministries	11,000 00
11/2/2009	United Way of South Hampton Roads	50,000 00
11/16/2009	Harvest Foundation	75,000 00
11/18/2009	Access College Foundation	45,000 00
11/19/2009	Chrysler Museum of Art	5,000 00
12/21/2009	Tabernacle Church of Norfolk	75,500.00

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service Name of estate or trust **Capital Gains and Losses**

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

Employer identification number

2009

	AIMEE & FRANK BATTEN, JR. FOUND				54-18792	66		
	: Form 5227 filers need to complete onlyPar							
Par	Short-Term Capital Gains and Lo	1		ear or Less	(e) Cost or other	hacic	(f) Gain or (loss) for	
_	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(see page 4 of the instructions)	the	the entire year Subtract (e) from (d)	
1a			-					
					 			
						_		
	Fatastha abad tara and allow from from	o Cabadula D 4	l 4b			41	426 626	
D	Enter the short-term gain or (loss), if any, from	n schedule D-1	, line ib			1b	-436,626.	
2	Short-term capital gain or (loss) from Forms	4684, 6252, 678	31, and 8824			_2		
3	Net short-term gain or (loss) from partnership	•		• •		3		
4	Short-term capital loss carryover Enter the a Carryover Worksheet			· · · · · · · · · · · ·		4	()	
5	Net short-term gain or (loss). Combine lines column (3) on the back	s 1a through 4 i	n column (f) Er	nter here and on line 1	13,	5	-436,626.	
Par	Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year							
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other ((see page 4 of t instructions)		(f) Gain or (loss) for the entire year Subtract (e) from (d)	
6a				-				
_								
		<u> </u>	<u> </u>	·				
			·					
	Enter the long-term gain or (loss), if any, from	Schedule D-1	line 6h			6b	-2,800,459.	
U							270007133.	
7	Long-term capital gain or (loss) from Forms 2	439, 4684, 625	2, 6781, and 88	324		7		
8	Net long-term gain or (loss) from partnerships	s, S corporation	s, and other es	tates or trusts		_8		
9	Capital gain distributions					9		
10	Gain from Form 4797, Part I					10	53.	
11	Long-term capital loss carryover. Enter the ar	mount, if any, fr	om line 14 of th	e 2008 Capital Loss		11	()	
12	Net long-term gain or (loss). Combine lines column (3) on the back	6a through 11 i	in column (f) E	nter here and on line	14a,		-2,800,406.	
							/.800.406	

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2009

Schedule D (Form 10	41) 2009			•		Page 2
	immary of Parts I and II aution: Read the instructions before	completing this p	art.	(1) Beneficiaries' (see page 5)	(2) Estate's or trust's	(3) Total
13 Net short-t	erm gain or (loss)		13		 	-436,626.
14 Net long-te	erm gain or (loss):					
a Total for ye	ar		14a			-2,800,406.
b Unrecaptur	ed section 1250 gain (see line 18 of the w	rksht)	14b			
	aın		14c			
	ain or (loss). Combine lines 13 and 14a		15			-3,237,032.
Note: If line 15, α	olumn (3), is a net gain, enter the gain on Form	1041, line 4 (or Form	990-7	, Part I, line 4a) If lines	14a and 15, column	(2), are net gains, go
	ot complete Part IV If line 15, column (3), is a					
Part IV Ca	pital Loss Limitation					
16 Enter here	and enter as a (loss) on Form 1041, line 4	(or Form 990-T, Pa	art I, lir	ne 4c, if a trust), the sn	naller of	
a The loss or	line 15, column (3) or b \$3,000				16 (3,000.)
Note: If the loss of	on line 15, column (3), is more than \$3,000.	or if Form 1041, page	e 1, lın	e 22 (or Form 990-T, In	ne 34), is a loss, con	plete the Capital Loss
	eeton page 7 of the instructions to figure your			 		
	x Computation Using Maximum Ca	-				5 5
	 complete this part only if both lines 1 on Form 1041, line 2b(2), and Form 104 				nount is entered in	Part I or Part II and
	s part and complete the worksheet on page					
•	, col (2) or line 14c, col (2) is more than a	•	0/10 1/			
	11, line 2b(1), and Form 4952, line 4g are					
Form 990-T tru	sts. Complete this part only if both line	s 14a and 15 are	e gain	s, or qualified divide	ends are included	in income in Part I
of Form 990-T,	and Form 990-T, line 34, is more than	zero Skip this pai	rt and	complete the works	sheet on page 8 d	of the instructions if
either line 14b, d	col (2) or line 14c, col (2) is more than z	ero				
7 Enter taxab	ele income from Form 1041, line 22 (or Fo	rm 990-T. line 34)		17	\$7.	
	maller of line 14a or 15 in column (2)		•	· · · · · · · · · · · · · · · · · · ·		
	s than zero	18				
	state's or trust's qualified dividends				12.00	
	1041, line 2b(2) (or enter the qualified				1	
	duded in income in Part I of Form 990-T)	19				
20 Add lines 1	′ • • •	20			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	or trust is filing Form 4952, enter the			~ (4) ***		
	m line 4g, otherwise, enter -0-	21		4.6	\$ X	
	e 21 from line 20 If zero or less, enter -0-			22	.,	
	e 22 from line 17 If zero or less, enter -0-		• • •	23		
LO CODUCCUM	C 22 Hom line 17 11 2010 01 1039, Citter -0-		• • •	23		
24 Enter the s	maller of the amount on line 17 or \$2,300			24	.2 2.0	
	ant on line 23 equal to or more than the an			• • • • • • • • • • • • • • • • • • • •	(**)	
	Skip lines 25 and 26, go to line 27 and che				£	
<u></u>	nter the amount from line 23			25	2~	
	e 25 from line 24			20	2	
_		the smaller of line 17 or line	. 22	27	5-	
res. :	Skip unes 27 und 30, go to une 31	the smaller of line 17 or line	122	21		
99 Enter the a	mount from line 26 (If line 26 is blank, ente	or -0-)		28		
28 Enter the a	mount nom line 20 (if line 20 is blank, end	=1-0-)	• • •	20		
20 Cubbook lin	a 20 from line 27			100		
	e 28 from line 27					
•	tax on the amount on line 23. Use the					
(see the Sc	chedule Ginstructions in the instructions	101 Form 1041) .			31	
32 Add lines 3					32	
	tax on the amount on line 17 Use th					
	chedule G instructions in the instructions					
34 Tax on all	taxable income. Enter the smaller of life	ne 32 or line 33 h	nere a	ind on Form 1041, S	schedule	

G, line 1a (or Form 990-T, line 36) .

Schedule D (Form 1041) 2009

SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D (Form 1041)

▶ See instructions for Schedule D (Form 1041).

► See instructions for Schedule D (Form 1041).

► Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

2009

Department of the Treasury Internal Revenue Service Name of estate or trust

AIMEE & FRANK BATTEN, JR. FOUNDATION

Employer identification number 54-1879266

(a) Description of property (Example 100 sh 7% preferred of "Z" Co) (b) Date acquired (mo , day, yr) (c) Date sold (mo , day, yr) (mo , day, yr) (d) Sales price (see page 4 of the instructions) (see page 4 of the instructions) (f) Gain or (loss) Subtract (e) from (d) VAR VAR 452,948. 892,274. -439,326	AIMEE & FRANK BATTEN, JR.	roundation	oto Hold One Ve		54-1879266	
MERRILL LYNCH X07 ST VAR VAR 452,948. 892,274439,326 ICAHN ST VAR VAR 2,700. NONE 2,700					(a) Cost or other basis	
MERRILL LYNCH X07 ST VAR VAR 452,948. 892,274439,326 ICAHN ST VAR VAR 2,700. NONE 2,700		acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(see page 4 of the instructions)	(see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
	1a MERRILL LYNCH X07 ST	VAR	VAR	452,948.	892,274.	-439,326.
	ICAHN ST	VAR	VAR	2,700.	NONE	2,700.
	•					•
						· -· -
						
		-				
						
						<u> </u>

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2009

-436,626.

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b . . .

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

Employer identification number

Part II Long-Term Capital Gains	and Losses - Asse	ts Held More TI	nan One Year		
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
6a MERRILL LYNCH X07 LT	VAR	VAR	4,458,729.	7,256,145.	-2,797,416.
ICAHN LT	VAR	VAR	NONE	3,043.	-3,043.
6b Total. Combine the amounts in colu	mn (f). Enter here and	on Schedule D, lu	ne 6b		-2,800,459.

AIMEE AND FRANK BATTEN JR.

2009 ANNUAL STATEMENT SUMMARY

Your Tex Reporting Statement information that follows is a personal summary of your account activity and is not reported to the IRS.

The Capital Gain and Loss Transaction section is provided to facilitate your review and may not include return of capital, sales toad deferral, or wash sales adjustments. RICs (which may include may not have been adjusted on your statement to reflect such mutual federal continuous and unit investment trusts) may reclassify principal distributions as capital gains. The cost basis for the advisor distribution reclaims and enterest account reflect the tax basis on the date of distribution. Other methods for calculating gain (loss) are available. The cost basis for mass Original Issue Discount ("Old") obligations includes the accretion of Old. For purposes of allocating original purchase of the component of old. For purposes of allocating original purchase according to a remarketing event, we assumed the fair market value of the date security of a purchase. The difference between your original cost and the amount allocable to the debt component was allocated to the purchase contract. In making adjustments to the cost basis of the purchase contract, it was assumed that the unit holder included contract adjustments in income received. In calculating gain (loss), unless otherwise noted, it was assumed that an election was in effect to amortize premium paid on the purchase of taxable bonds,

Dividend and Interest details are repeated in the following pages for your convenience. Additionally, we have included items such as margin interest and select account fees if applicable. Please discuss the deductibility of these items with your tax advisor. For select clients, we have also included a summary of Visa charges and checking activity.

Merrill Lynch is neither a tax return proparer or tax advisor. Please see your tax advisor for more information.

2009 CAPITAL GAIN AND LOSS TRANSACTIONS

		ZUUS CAPITAL	ZUUS CAPITAL GAIN AND LOSS IKANSACTIONS			
Security Description	Quantity	Date Acquired Quantity Cover of Short	Date Liquideted Amortization/Accretion Short Sale Year-to-Date Life-to-Date	Sales Price	Cost Basis	Cost Basis Gain or (Loss)
SHORT TERM CARITAL LOSSES						
HANMI FINL CORP COM	26400,0000	02/19/09	11/11/09	33,075.71	40,246.80	(7,171.09)
TIME WARNER INC NEW	17390.0000 32290.0000 2633.0000	08/08/08 08/13/08 08/26/08 Security Subtotal	02/19/09 02/19/09 02/19/09	133,691.82 248,240.90 20,242.13 402.174.85	269,545.00 502,626.14 41,929.99	(135,863,18) (254,385,24) (21,687,86)
UCBH HLDGS INC NEW	20100.0000	02/19/09	07/21/09	17,671.47	37,926.69	(20,255.22)
		Short Term Capit	Short Term Capital Losses Subtotal	452,922.03	892,274.62	(439,352.58)
NET SHORT TERM CAPITAL GAIN (LOSS)	(SS)		OTHER TRANSACTIONS:	26.40	0	(439,352.59) 26.40
LONG TERM CAPITAL GAINS				452,948	892,274	(439,326)
CNOOC LTD ADR	0000.0099	90/30/80	02/19/09	592,793.50	569,935.08	22,858.42
HUANENG PWR INTL SP ADR	2700.0000	08/30/06	02/19/09	74,939,15	71,976.60	2,962.55
INTERCONTINENTALEXCHANGE	1650.0000	90/80/60	04/21/09	137,667.51	106,150.94	31,516.57



Taxpayer No. 54-1879266

Page 9 of 23

AIMEE AND FRANK BATTEN JR.

2009 ANNUAL STATEMENT SUMMARY

		2009 CAPITAL	Ö			
1	٠٠,,,٠٠٠ ح	Cov of Start S	Date Liquidated Amortization/Accretion אייריירי איריירי אירירירי Grip Grip Cristion	Sales Price	Cost Basis	Gain or (Loss)
HONG KONG EXCHANGES AND	14000.0000 6000.0000 9000.0000	01/18/06 01/18/06 01/18/06 Security Subtotal	04/24/09 07/16/09 08/04/09	160,300,00 94,200,00 167,850,00 422,350,00	62,256.60 26,681.40 40,022.10 128,960.10	98,043.40 67.518.60 127,827.90 293,389.90
SINGAPORE EXCHANGE LTD	20000,0000	05/31/06	02/20/09	153,350.00	131,000.00	22,350.00
		Long Term Capital	m Capital Gains Subtotal	1,381,100.16	1,008,022,72	373,077.44
LONG TERM CAPITAL LOSSES						
ALLEGHENY ENERGY INC COM	3800,0000	01/10/06	04/21/09	98,302.82	131,137.11	(32,834.29)
AOL INC	1028.0000	08/26/08	12/23/09	24,089.84	26,661,60	(2,571.76)
CMS ENERGY CORP	16974.0000 6186.0000 7000.0000	01/24/06 01/24/06 08/30/06 Security Subtotal	04/30/09 05/05/09 05/05/09	203,788.00 75,489.52 85,423.01 364,700.53	258,186.42 94,093.40 101,677.80 453,957.62	(54,398,42) (18,603.88) (16,254,79) (89,257,09)
CENTER FINL CORP CALIF	9100.0000	04/27/06	11/04/09	37,578.39	210,359.24	(172.780.85)
CATHAY GENERAL BANCORP	\$500.0000	04/27/06	11/03/09	45,967.27	216,450.30	(170,483.03)
DYNEGY INC DEL CLA	10000.0000 10000.0000 12000.0000 68000.0000	01/13/06 08/30/06 09/20/06 09/20/06 Security Subtotal	07/20/09 07/20/09 07/20/09 11/10/09	19,899,48 19,899,49 23,879,39 136,962,08 200,640,44	55,200.00 62,300.00 72,573.60 411,250.40 601,324.00	(35,300.52) (42,400.51) (48,634.21) (274,288.32) (400,883.56)
EAST WEST BANCORP INC	5300.0000	04/27/06	11/10/09	68,393,15	212,636.00	(144,242.85)
HUANENG PWR INTL SP ADR	5343.0000	90/50/00	02/19/09	148,296.27	148,866.13	(569.86)



Taxpayer No. 54-1879266

Page 10 of 23

AIMEE AND FRANK BATTEN JR.

2009 ANNUAL STATEMENT SUMMARY

2009 CAPITAL GAIN AND LOSS TRANSACTIONS

O-12 Acquired Pate Lieuteated Amortization/Accretion

		ra y kudnied	Same L'ethenco Amortization/Accretion	C 'NS Price	ي ، اداد	Sain or United
HANMI FINL CORP COM	12400.0000	04/27/06	11/11/09	15,535,56	241.907.88	(226,372.32)
MBIA INC COM	24421.0000 32436.0000 36073.0000	08/08/08 08/08/08 08/08/08 Security Subtotal	08/18/09 10/19/09 10/27/09	126,424.27 178,886,43 168,701.87 474,012.57	215,329,72 286,001.18 318,020,08 819,406,98	(88.905.45) (107,114.75) (149.368.21) (345,388,41)
NYSE EURONEXT	9600.0000 2325.0000	12/05/05 12/29/05 Security Subtotal	02/19/09 02/19/09	179,485.39 43,469,12 222,854.51	581,104.33 116,677,33 697,781.66	(401,618.94) (73,208,21) (474,827.15)
NV ENERGY INC	12280.0000 20000.0000 9171.0000 10829.0000 12000.0000	01/10/06 01/11/06 01/12/06 01/12/06 01/20/06 07/12/06 Security Subtotal	02/19/09 02/19/09 02/19/09 06/05/09 06/05/09	114,090.38 185,814.95 85,205.46 108,998.66 120,785.29 40,261.77 655,156.51	164,398.50 271,264.00 123,725.96 146,094.04 160,686.00 54,928.00 921,096.50	(50.308.12) (85,449.05) (38,520.50) (37,095.38) (39,900.71) (14,656.23) (265,938.99)
PFIZER (NC DEL PV\$0.05	13300.0000	08/13/08	09/11/09	217,981.40	262,409,00	(44,427.60)
RRI ENERGY INC	13300.0000	07/12/06	07/16/09	65,851.93	160,702.57	(94,850.64)
SEARS HOLDINGS CORP	600,0000 2313,0000	08/30/06 09/20/06 Security Subtotal	02/19/09 02/19/09	22,821.10 87,975,39 110,796,49	86,423.94 376,116,23 462,540.17	(63,602.84) (288,140.84) (351,743.68)
TIME WARNER CABLE INC	2838.0000	08/26/08	12/08/09	122,430.44	133,897.23	(11,466.79)
UCBH HLDGS INC NEW	11200.0000	04/27/06	07/21/09	9,846.78	216,944.00	(22.190,102)



Taxpayer No. 54-1879266

11 of 23

AIMEE AND FRANK BATTEN JR.

2009 ANNUAL STATEMENT SUMMARY

2009 CAPITAL GAIN AND LOSS TRANSACTIONS

		83 330,050.13	73 6,248,122.12
חיים יורנים האים ויקון יויה אים Amortization/Accretion	13.0	195,093.83	3,077,628.73
بمامايا بالمادن	!	02/20/08	Long Term Capital Losses Subtotal
שייי ייני וונניק		01/30/06	Long Term Capi
	!	2950.0000	

(3,170,493.39) (134,956.30)

(2,797,415.95)

NET LONG TERM CAPITAL GAIN (LOSS)

GROUPE BRUXELLES LAMBERT

OTHER TRANSACTIONS						•
AOL INC	0000	12/29/09	12/29/09	2,15	N/A	A/A
RMR ASIA PAC REAL ESTATE	0000	60/80/20	01/08/09	5.86	Α/Ν	, W
TIME WARNER CABLE INC	0000	04/27/09	04/27/09	18.39	N/A	Y.A.
		Other Transactions Subtotal	ons Subtotal	26.40		
TOTAL CAPITAL GAINS AND LOSSES TOTAL REPORTABLE GROSS PROCEEDS DIFFERENCE				4,911,677.32	8,148,419.46	8,148,419.46 (3,236,768.54)

0.00

Note: Capital gains and losses in this statement are not reported to the IRS.

• Difference reflects items that are included in the reportable gross proceeds section of your statement but are not included in the gain/loss section (e.g., liquidation of fractional shares and the proceeds from certain tender offers). It also reflects items that are included in the gain/loss section of your statement but not in the reportable gross proceeds section (e.g., option premium received).

Gross proceeds section (e.g., option premium received).

NA - Results which cannot be calculated because of insufficient data in the Capital Gain or (Loss) Column and are not included in the realized capital gain and loss

summary.

REALIZED CAPITAL GAIN AND LOSS SUMMARY

	LONG TERM GAINS LONG TERM LOSSES	(3,170,493.39)
	LONG TERM GAINS	373,077.44
	SHORT TERM LOSSES	(439,352.59)
L	SHORT TERM GAINS	0.00
		IOIAL

Sales of Business Property
(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))

OMB No 1545-0184

Department of the Treasury Internal Revenue Service ► Attach to your tax return. ► See separate instructions. Name(s) shown on return

Attachment Sequence No 27 identifying number

ΑI	MEE & FRANK BATTEN, JR	. FOUNDATIO	ON				54-	1879266	
1	Enter the gross proceeds from sales or exchanges reported to you for 2009 on Form(s) 1099-B or 1099-S								
	substitute statement) that you are in						1		
Pa	rt I Sales or Exchanges of Than Casualty or Thefi	Property Use	ed in a Trade	or Business an	nd Involuntary (Conversion		rom Other	
2	(a) Description of property	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or basis, p improvement expense or	us ts and	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)	
	ATTACHMENT 14				<u> </u>	<u> </u>		48.	
	IIIIOMIBNI II								
3	Gain, if any, from Form 4684, line 43			l <u> </u>	<u> </u>	<u></u>	_		
4	Section 1231 gain from installment s				• • • • • • • • •		3		
_			4						
-	5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 6 Gain if any from line 32 from other than casualty or theft								
-	Gain, if any, from line 32, from other than casualty or theft								
7									
	Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9 Skip lines 8, 9, 11, and 12 below								
	Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9 If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below								
8	in a market with the wind the second								
9	Subtract line 8 from line 7 If zero of	rless enter -0- II	fline 9 is zero e	enter the gain from I	ine 7 on line 12 bel	low If Iron	_		
•	9 is more than zero, enter the amo capital gain on the Schedule D filed	ount from line 8	on line 12 belo	w and enter the gar	in from line 9 as a	long-term	9		
Pa	rt II Ordinary Gains and Lo								
10				property held 1 year	or less)				
			<u> </u>		<u> </u>				
_								<u></u>	
	· · · · · · · · · · · · · · · · · · ·		·						
11	Loss, if any, from line 7	1		L	<u> </u>		11	1	
	Gain, if any, from line 7 or amount from	om line 8 if applica					12	1	
				• • • • • • • • • •			13		
14				• • • • • • • • • •					
15							14		
	Ordinary gain or (loss) from like-kind exchanges from Form 8824								
17							17	·	
18	For all except individual returns, en- and b below. For individual returns,			ne appropriate line o	of your return and s	kip lines a	Į	-	
	If the loss on line 11 includes a loss	•		n (h)(u) enter that n	art of the lose here	Enter the		•	
٥								/	
part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23 Identify as from "Form 4797, line 18a						line 18a "	<u> </u>		
See instructions							18a		
t	Redetermine the gain or (loss) on	line 17 excluding	g the loss, if a	ny, on line 18a En	ter here and on Fo	orm 1040,			
	line 14			<u> </u>	<u> </u>		18b		
For	Paperwork Reduction Act Notice, se-	e separate instruc	ctions.					Form 4797 (2009)	

Form 4797 (2009)		•	•	54-	1879266	Page 2
Part III Gain From Disposition of Propert (see instructions)	y Und	der Sections 1245,	1250, 1252,	125	4, and 1255	
19 (a) Description of section 1245, 1250, 1252, 1254, or 1	255 pr	operty			(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)
A ICAHN SEC 1250 UNREC		· · · · · · · · · · · · · · · · · · ·			VAR	VAR
В						
C						
D						
	T	Dunant, A	D		D	
These columns relate to the properties on lines 19A through 19	D ▶	Property A	Property B		Property C	Property D
20 Gross sales price Note: See line 1 before completing	20	5.				
21 Cost or other basis plus expense of sale	21					
22 Depreciation (or depletion) allowed or allowable	22					
23 Adjusted basis Subtract line 22 from line 21	23				•	
24 Total gain Subtract line 23 from line 20	24	5.				
25 If section 1245 property:						
a Depreciation allowed or allowable from line 22	25a					
b Enter the smaller of line 24 or 25a	25b					
26 If section 1250 property. If straight line deprecation was used, enter -0- on line 26g, except for a corporation subject to section 291						
a Additional depreciation after 1975 (see instructions)	26a					
b Applicable percentage multiplied by the smaller of						
line 24 or line 26a (see instructions)	26b		<u></u>			·
c Subtract line 26a from line 24 If residential rental property						
or line 24 is not more than line 26a, skip lines 26d and 26e	26c					
d Additional depreciation after 1969 and before 1976	26d					
e Enter the smaller of line 26c or 26d	26e					
f Section 291 amount (corporations only)	26f					
g Add lines 26b, 26e, and 26f	26g					ļ
27 If section 1252 property. Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership)						
a Soil, water, and land clearing expenses	27a					
b Line 27a multiplied by applicable percentage (see instructions)	27Ь					
c Enter the smaller of line 24 or 27b	27c					
28 If section 1254 property: a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion (see instructions)	28a					
b Enter the smaller of line 24 or 28a	28b					
29 If section 1255 property:						
a Applicable percentage of payments excluded from						
income under section 126 (see instructions)	29a					
b Enter the smaller of line 24 or 29a (see instructions)	29b					
Summary of Part III Gains. Complete property	/ colu	mns A through D ti	nrough line 2	9b b	efore going to line	e 30.
30 Total gains for all properties Add property columns A t	hrouah	D. line 24			30	
31 Add property columns A through D, lines 25b, 26g, 27d	-		on line 13		31	
32 Subtract line 31 from line 30 Enter the portion from ca				portic	· · · · · · · · ·	·
		<u></u>		-	l l	
Part IV Recapture Amounts Under Section (see instructions)	ns 17	9 and 280F(b)(2) \	When Busine	ess	Jse Drops to 50%	or Less
					(a) Section	(b) Section
					179	280F(b)(2)
33 Section 179 expense deduction or depreciation allowal	ble in p	nor years		33	·	<u> </u>
	•			34		
35 Recapture amount. Subtract line 34 from line 33 See t	he insti	uctions for where to rep	ort	35		
						Form 4797 (2009)

54-1879266 ATTACHMENT 14

AIMEE & FRANK BATTEN, JR. FOUNDATION Supplement to Form 4797 Part I Detail

	Date	Date	Gross Sales	Depreciation Allowed	Cost or Other	Gain or (Loss)
Description	Acquired	Sold	Price	or Allowable	Basis	for entire year
	VAR	VAR	48.			48.
				٠		
					=	
						•
						•
						•
Totals ,						48

Form 8868

(Rèv April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Form 8868 (Rev 4-2009)

Internal Revenue S	ervice	File a separate application for each return.				
		Automatic 3-Month Extension, complete only Part I and check this box				▶ X
		Additional (Not Automatic) 3-Month Extension, complete only Part II (on page nless you have already been granted an automatic 3-month extension on a previous			8868	_
Part I Auto	matic 3-	Month Extension of Time. Only submit original (no copies needed).				
		of file Form 990-T and requesting an automatic 6-month extension - check this box	x and comp	lete		
Part I only						.▶ ∐
All other corporations to file inco		ncluding 1120-C filers), partnerships, REMICs, and trusts must use Form 700 turns.	4 to reque	est	an exte	ension oi
one of the ref electronically returns, or a co	turns note if (1) you omposite	Generally, you can electronically file Form 8868 if you want a 3-month autoned below (6 months for a corporation required to file Form 990-T). However want the additional (not automatic) 3-month extension or (2) you file Forms 9 or consolidated From 990-T. Instead, you must submit the fully completed and so in the electronic filing of this form, visit www irs gov/efile and click on e-file for Cha	, you cann 90-BL, 606 signed page	ot 39, e 2	file For or 887 (Part II)	rm 8868 '0, group
Type or	Name of	Exempt Organization	Employer id	entil	ication	number
print	AIM	EE & FRANK BATTEN, JR. FOUNDATION	54-187	792	66	
File by the	Number,	street, and room or suite no. If a P.O. box, see instructions				
due date for	150	GRANBY STREET				
filing your return See	City, towi	or post office, state, and ZIP code. For a foreign address, see instructions				
instructions	NOF	FOLK, VA 23510				
Form 990 Form 990 X Form 990))-BL)-EZ					
Telephone If the organ If this is for for the whole g	No ▶	· · · · · · · · · · · · · · · · · · ·	attach a li	st w	If this	
		embers the extension will cover				
U11111	rganızatior calendar	tomatic 3-month (6 months for a corporation required to file Form $08/15$, 2010 , to file the exempt organization return for the organization return for the organization return for year 2009 or peginning, and ending	990-1) e	ve -	nsion The ext	of time
			Change in	acc	ounting	period
•	•	s for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, leads See instructions	' 1	3a	\$	8,031.
		s for Form 990-PF or 990-T, enter any refundable credits and estimated tax pay				
		prior year overpayment allowed as a credit		3ь	\$ 1	6,254.
c Balance	Due. Subt	ract line 3b from line 3a Include your payment with this form, or, if required, o	Jeposit	\neg		
with FT	D coupon	or, if required, by using EFTPS (Electronic Federal Tax Payment System) See [
instructio				3с		0.
Caution. If you for payment in		to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO	and Form 8	879	-EO	

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

Note. Only complete Part II of you have already been granted an automatic 3-month extension on a previously filed Form 8868 by you are filing for an Automatic 3-Month Extension, complete only Part II on page 1) PartII Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed). PartII Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed). PartII Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed). PartII Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed). PartII Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed). PartII Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed). PartII Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed). PartII Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed). PartII Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed). PartII Additional (Not Automatic) 3-Month Extension of Time. Only file for the season of Time original (no copies needed). PartII Additional (Not Automatic) 3-Month Extension or Surfice or Poles of the season or the season or the season or the season on a previously filed Form 8508. PartII Additional (Not Automatic) 3-Month Extension on a previously filed Form 8508. PartII Additional (Not Automatic) 3-Month Extension or a previously filed Form 8508. PartII Additional (Not Automatic) 3-Month extension or a previously filed Form 8508. PartII Additional filed file and filed	Fam 8868 (Rev 4-2009)	Page 2					
Many out are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)	If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only						
Additional (Not Automatic) 3-Month Extension of Time, Only file the original (no copies needed).	Note. Only complete Part II if you have already been granted an automatic 3-month extension	sion on a previously filed Form 8868					
Name of Exempt Organization A IMEE & FRANK BATTEN, JR. FOUNDATION A IMEE & FRANK BATTEN, JR. FOUNDATION Number, street, and room or suite no if a P O box, see instructions Number, street, and room or suite no if a P O box, see instructions 150 GRANBY STREET City, town or post office, state, and ZIP code For a foreign address, see instructions NoRFOLK, VA 23510 The Cktype of return to be filled (File a separate application for each return). Form 990-BL Form 990-BL Form 990-Form 990-T ((rust other than above) Form 990-EZ Form 990-T ((rust other than above) Form 990-T (rust other than above) Form 990-To 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 the is six with the names and Ellis of all members the extension is for I request an additional 3-month extension of time until I request an additional 3-month extension of time until For calendar year 2009, or other tax year beginning If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the group, check this box I request an additional 3-month extension of time until State in detail why you need the extension INFORMATION NECESSARY TO PREPARE A COMPLETE AND ACCURATE RETURN IS NOT YET AVAILABLE. 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment with this form, or, if required, deposit with Form 8868. C Balance Due, Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit with FTO Required, deposit with FTO Required, by using EFTPS(Electronic Federal Tax Payment System). See instructions Signature and Verification Indeer penalties of penyry, I declare that I have examined the form, including accompanying schedules and statements, and to the best of my knowledge and belief, is rue, correct, a	• If you are filing for an Automatic 3-Month Extension, complete only Part I (on page	1)					
AIMEE & FRANK BATTEN, JR. FOUNDATION 54-1879266	Part II Additional (Not Automatic) 3-Month Extension of Time. Only	file the original (no copies needed).					
ATMEE & FRANK BATTEN, JR. FOUNDATION Some of the control of th	Type or Name of Exempt Organization						
title date for limit the case of the case of the complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868. The books are in the care of ► FRANK BATTEN, JR. Telephone No ► 757 351-8800 If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is of all members the extension is for the group, check this box If this a group is the digit of the group is the department of the group, check this box If this and the digit of the group is the department of the group is the group	print AIMEE & FRANK BATTEN, JR. FOUNDATION	54-1879266					
tile date for limits the eleum See Single Structure of the structure of	File by the Number, street, and room or suite no. If a P.O. box, see instructions	1					
Theck type of return to be filed (File a separate application for each return). Form 990	due date for 130 GRANDI SIREEI						
Form 990	return See 1	人类 美国 医电子 医二甲基甲甲					
Form 990-BL Form 990-PF Form 990-F Form 990-T (sec 401(a) or 408(a) tr ust) Form 4720 Form 8870 Form 990-EZ Form 990-T (trust other than above) Form 590-EZ Form 990-T (trust other than above) Form 590-EZ Form 990-T (trust other than above) Form 5227 \$TOPI Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868. The books are in the care of FRANK BATTEN, JR. Telephone No 757 351-8800 FAX No 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 or the whole group, check this box If it is for part of the group, check this box Image and attach a sist with the names and ElNs of all members the extension is for Integrated an automatic 3-month extension of time until Integrated Integ	instructions NORFOLK, VA 23510	The state of the s					
Telephone No	Form 990-B L Form 990-T (sec 401(a) or 408(a) tr ust) Form 990-E Z Form 990-T (trust other than above)	Form 4720 Form 8870 Form 5227					
Telephone No 757 351-8800 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 or the whole group, check this box If it is for part of the group, and ending Initial return Initial r		nth extension on a previously filed Form 8868.					
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 a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If this is for part of the group, check this box If this is or the whole group, check this box If this is or the whole group, check this box If this is and attach a sist with the names and ElNs of all members the extension is for I request an additional 3-month extension of time until I 1/15/2010 For calendar year 2009, or other tax year beginning If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period ACCURATE RETURN IS NOT YET AVAILABLE. Ba 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 Ba \$\$ \$,769\$. If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. Balance Due, Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS(Electronic Federal Tax Payment System). See instructions Signature and Verification Index penalties of penury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, its true, correct, and complete, and that I am authorized to prepare this form							
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) 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 box	Telephone No ► 757 351-8800 FAX No ►						
or the whole group, check this box	 If the organization does not have an office or place of business in the United States, che 	ck this box					
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