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Form 990-PF

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052

2009 Treated as a Private Foundation Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements. FEB 2009 and ending 2010 For calendar year 2009, or tax year beginning JAN Initial return of a former public charity Final return G Check all that apply: Initial return Address change Amended return Name change Name of foundation A Employer identification number Use the IRS label. 54-1838819 KVA FOUNDATION Otherwise. Number and street (or P O box number if mail is not delivered to street address) Room/suite print B Telephone number or type. (434)384 - 73511202 PEBBLETON LANE See Specific City or town, state, and ZIP code C if exemption application is pending, check here Instructions LYNCHBURG, VA 24503 1. Foreign organizations, check here Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation Check type of organization: Section 4947(a)(1) nonexempt charitable trust _____ Other taxable private foundation E If private foundation status was terminated I Fair market value of all assets at end of year | J | Accounting method: X Cash Accrual under section 507(b)(1)(A), check here Other (specify) (from Part II, col. (c), line 16) If the foundation is in a 60-month termination (Part I, column (d) must be on cash basis.) 532,882. ▶\$ under section 507(b)(1)(B), check here **Analysis of Revenue and Expenses** Part I (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) for charitable purposes (cash basis only) expenses per books income income Contributions, gifts, grants, etc., received N/A 2 Check X If the foundation is not required to attach Sch B Interest on savings and temporary cash investments 25,632. 25,632 STATEMENT 4 Dividends and interest from securities 5a Gross rents h Net rental income or floss) <40,200. 68 Net gain or (loss) from sale of assets not on line 10 29,463. QA 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less retu and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 568. 25,632 12 Total. Add lines 1 through 11 0. 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits Expenses 16a Legal fees 0. STMT 2 421 0. **b** Accounting fees c Other professional fees and Administrative 17 Interest 1.093 0. 0. 18 STMT 3 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative 1,514 0. expenses. Add lines 13 through 23 46,191. 46,191 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 46,191. Add lines 24 and 25 47,705 0 27 Subtract line 26 from line 12: <62,273.b & Excess of revenue over expenses and disbursements 25,632. b Net investment income (if negative, enter -0-)

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

c Adjusted net income (if negative, enter -0-)

Form 990-PF (2009)

N/A

Page 2

Part II Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only	Beginning of year	End of	<u> </u>
Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing			
2 Savings and temporary cash investments	68,318.	52,274.	52,274.
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 25, 100.			
Less: allowance for doubtful accounts	25,100.	25,100.	25,100.
		,	
9 Prepaid expenses and deferred charges	•		
10a Investments - U.S. and state government obligations			
b Investments - corporate stock STMT 4	702,197.	501,150.	330,566.
c Investments - corporate bonds STMT 5	0.	65,976.	60,653.
· · · · · · · · · · · · · · · · · · ·	0.	03,370.	00,033.
11 Investments - land, buildings, and equipment basis	-	-	
Less accumulated depreciation			
12 Investments - mortgage loans		00 040	C4 200
13 Investments - other STMT 6	0.	88,842.	64,289.
14 Land, buildings, and equipment basis	-	-	
Less accumulated depreciation			
15 Other assets (describe ►)			
16 Total assets (to be completed by all filers)	795,615.	733,342.	<u>532,882.</u>
17 Accounts payable and accrued expenses			
18 Grants payable			
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 liabilities (describe >)			
23 Total liabilities (add lines 17 through 22)	0.	0.	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.			
24 Unrestricted			
25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.			
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 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances	795,615.	795,615.	
28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
29 Retained earnings, accumulated income, endowment, or other funds	0.	<62,273.>	
29 Tetal net easety as fixed belongs	795,615.	733,342.	
2 30 Total net assets or fund balances	133,013.	133,344.	
74 Tatal liabilities and not assets found belongs	795,615.	733,342.	
31 Total liabilities and net assets/fund balances		133,344.	
Part III Analysis of Changes in Net Assets or Fund Ba	alances		
Total net assets or fund balances at beginning of year - Part II, column (a), line 3	30	ТТ	······
• •	JU.	.	795,615.
(must agree with end-of-year figure reported on prior year's return)		1	
Enter amount from Part I, line 27a		2	<u><62,273.</u>
Other increases not included in line 2 (itemize)		3	722 242
Add lines 1, 2, and 3		4	733,342.
Decreases not included in line 2 (itemize)		5	722 242
Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	iumn (b), line 30	6	733,342. Form 990-PF (2009)

		d(s) of property sold (e.g. or common stock, 200 shs			I, b	How acc - Purch - Dona	nase	(c) Date (mo., d	acquired lay, yr.)	(d) Date sold (mo., day, yr.)
a					ļ.,					
b SEE ATTACHEI	STAT	EMENT.			-					
<u>c </u>										
e					+					·
(e) Gross sales price	(f) D	epreciation allowed (or allowable)		st or other basis expense of sale					aın or (loss) s (f) mınus (
<u> </u>										_ .
C										
1										
29,463.				69,66	3.					<40,200
Complete only for assets show		·							Col. (h) gain i not less than	
(i) F.M.V. as of 12/31/69) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any				Losses	(from col. (I	1))
<u>a</u>	-									
<u> </u>	-									
<u>c</u> d										
<u>u</u> e										<40,200
<u> </u>		C If now place and a	David Lives	7	7	т Т				\ 4 0,200
Capital gain net income or (net o	. ,	If gain, also enter If (loss), enter -0-	ın Part I, line	7	}	2				<40,200
Net short-term capital gain or (lo			d (6):		٦					
If gain, also enter in Part I, line 8 If (loss), enter -0- in Part I, line 8) .			•	ا ۽			N/A	
		ection 4940(e) for	Reduced	Tax on Net	Inv	estm	ent Inc	ome	И/Д	
section 4940(d)(2) applies, leave as the foundation liable for the security the foundation does not que	ction 4942 t	ax on the distributable amo ection 4940(e). Do not cor	mplete this pa	ırt.				•		Yes X No
Enter the appropriate amount in	each colum		ctions before	making any entri						(d)
Base period years Calendar year (or tax year beginn	ning in)	(b) Adjusted qualifying disti	ributions	Net value of no	(c) ncha		ise assets		Dıstrıbı (col. (b) dıvı	(d) ution ratio ded by col. (c))
2008		5!	5,677.			413	3,397	•		.13468
2007			3,219.				1,931			.97715
2006			2,859.				1,143			.15179
2005			8,330.	_			2,790			.07097
2004		97	2,857.	-		949	9,427	•		.09780
Total of line 1, column (d)								2		1.43240
Average distribution ratio for the the foundation has been in existe	•	•	n line 2 by 5,	or by the number	of ye	ars		3		.28648
Enter the net value of noncharita	ble-use asse	ets for 2009 from Part X, II	ne 5					4		466,043
Multiply line 4 by line 3								_5		133,512
Enter 1% of net investment inco	me (1% of F	art I, line 27b)						6		256
Add lines 5 and 6								7		133,768
Enter qualifying distributions from	m Part XII, I	ne 4						8		46,191
If line 8 is equal to or greater tha	n line 7, che	ck the box in Part VI, line	1b, and comp	lete that part usin	g a 19	% tax ra	ite.			

	1 390-PF (2009) KVA FOUNDATION	54-	<u> 1838</u>	819		Page 4
_	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see i	nstr	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)		ļ			
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔛 and enter 1%	_1_			5	<u>13.</u>
	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-)	2				<u>0.</u>
3	Add lines 1 and 2	3			5	<u>13.</u>
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-	5			5	13.
6	Credits/Payments:					
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a					
b	Exempt foreign organizations - tax withheld at source 6b	ı				
C	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d	7	<u> </u>			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				15.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			5	28.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ Refunded ▶	11				
Pa	art VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interver	ie in			Yes	No
	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)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ed or				
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?			10		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$	•				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	_				
	managers. ▶ \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		х
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	~	Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the sta	te 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		X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca	lendar				
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		ļ	9		X
10	Did any parcent become culpatential contributors during the tay year?		l	40		v

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

Sumple type and the boundson per cincular any amount to:	Form 990-PF (2009) · KVA FOUNDATION			<u>54-18388</u>	19	Page 6
(1) Carry on proagands, or otherwise alternative influence legislation (section 4945(s))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly, any voter registration drave? (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 a charable, etc., organization described in section \$50(s)(1), (2), or (3), or section 4940(s)(2)? (5) Provide for any purpose other than enlipsius, charable, scentrific, literary, or educational purposes, or for the prevention of crubity to children or animals? (6) If any answers "Yes' to \$41(-\$6), did any or the transactions fail to qualify under the exceptions described in Repulsions section \$3.4945 or in a current notice regarding diseaster assistance (see instructions)? Organizations refung on a current notice regarding diseaster assistance (see instructions)? Organizations refung on a current notice regarding diseaster assistance (see instructions)? Organizations refung on a current notice regarding diseaster assistance (see instructions)? Organizations refung on a current notice regarding diseaster assistance (see instructions)? Organizations refung on a current notice regarding diseaster assistance (see instructions)? If yes, altach the statement required by Regulations section 53.4945-5(d). By other formation, curring the year, pay premiums, or a personal benefit contract? If yes, and the formation, curring the year, pay premiums, directly, or pay premiums on a parsonal benefit contract? If yes, and the foundation, curring the year, pay premiums, directly, or pay premiums on a parsonal benefit contract? If yes, and the foundation reviews, received any time directly, or pay premiums on a parsonal benefit contract? If yes, and the foundation reviews, received any time and included to the transaction? If yes and the foundation reviews, received any time and included	Part VII-B Statements Regarding Activities for Which F	Form 4720 May Be I	Required (contin	ued)		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section \$509(3)11, (2), or (3), or section 940(d)(2)? \$1 Provide for any purpose of the than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals? If any answer is "Yes" to \$1(1), old, any of the transactions fall to qualify under the exceptions described in Regulations section 53,4945 or in a current notice regarding desaster assistance (see instructions)? Organizations relying on a current notice regarding desaster assistance check here e if the answer is "Yes" to question \$4(1), old ship of the transaction settle than the statement required by Regulations section 53, 4945-5(d). 8 bill the londation, during the year, recover any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to \$6, life Form 887. If "Yes "So, life form 887. If "Yes "So, life form 887. If "Yes" to \$6, life Form 887. If "Yes "So, life form 887. If "Yes	 (1) Carry on propaganda, or otherwise attempt to influence legislation (section (2) Influence the outcome of any specific public election (see section 4955); of any voter registration drive? 	r to carry on, directly or indir	ectly,	s X No		
Soleal(1), (2), or (3), or section 494(0)(12)?	• •			is Lal NO	1	
the prevention of cruelty to children or animals? b If any answer is "Yes" to \$(1), (5), aid 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)? Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to exclosify (or the grain? If "Yes," attach the statement required by Regulations section 53,4945-5(d). So 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 53,4945-5(d). So 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 53,4945-5(d). So Did the foundation, during the year, receive any funds, directly or indirectly, on a personal benefit contract? If "Yes," attach the statement required by Regulations section 53,4945-5(d). So Did the foundation, during the year, receive any funds, directly or indirectly, on a personal benefit contract? If "Yes," attach the statement required by Regulations appropriate of the statement required by Regulations appropriate of the statement required by Regulations and Press (Regulations) and Regulations and Regulations of the transactions? It is all officers, directors, trustees, foundation managers and their compensation (Regulations) (Regulations) and Regulations (Regulations) and R	509(a)(1), (2), or (3), or section 4940(d)(2)?			s X No		
section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here e If the answer is Yes' to quosition 53.4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If Yes, ** take the statement required by Regulations section 53.4945-5(d). 86 Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If Yes' to 8b, file Form 8870. 74 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If Yes' to 8b, file Form 8870. 74 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 1 List all officers, directors, trustees, foundation managers and their compensation. 1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address Destination Compensation C	the prevention of cruelty to children or animals?		☐ Ye	s X No		
Crganizations relying on a current notice regarding dissaster assistance check here c if the answers Yes' to question 54(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, releve any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, releve any funds, directly or indirectly, on a personal benefit contract? b H Yes S No b H yes S No b Hyes, did the foundation of the find a party to a prohibited tax shelter transaction? Tak 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 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly T List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average hours per week devoted by position (fill not paid, enter -0). (c) Compensation (fill not paid, enter -0). TRUSTEE 2. Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NOR." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted of the position of the highest-paid employees (other than those included on line 1). If none, enter "NOR." (b) Title, and average hours per week devoted on the paid of the part			in Regulations	/-		
e if the answer is "Yes" to question Sa(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). 5a Did the foundation, during the year, peay premiums, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 8 Did the foundation, during the year, was the foundation a party to a prohibited tax shelter transaction? 9 Yes X No 10 X 11 A tary time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 11 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 12 List all officers, directors, trustees, foundation managers and their compensation. 13 Compensation (a) Name and address (b) Title, and average hours provided (f) Compensation				N/A	5b	
expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d). 8 Did the loundation, during the year, peave any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes "X No Bb X X If "Yes "To 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes "X No If "X No If "Yes "X No If "X	•					
8s Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? # "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? **Bit Yes** to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? **Bit Yes** to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? **Bit Yes** to 6b, file Form 8870. 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 **List all officers, directors, trustees, foundation managers and their compensation Paid Employees, and Contractors **List all officers, directors, trustees, foundation managers and their compensation (a) Name and address **List all officers, directors, trustees, foundation managers and their compensation (b) Titls, and average hours per week devoted to position **TRUSTEE** **LYNCHBURG** VA 24503** **Description** **TRUSTEE** **LYNCHBURG** VA 24503** **Description** **LYNCHBURG** VA 24503** **Description** **ATHERINE** F. VAN ALLEN** **TRUSTEE** **LYNCHBURG** VA 24503** **Description** **ATHERINE** F. VAN ALLEN** **TRUSTEE** **LYNCHBURG** VA 24503** **Description** **ATHERINE** F. VAN ALLEN** **TRUSTEE** **LYNCHBURG** VA 24503** **Description** **ATHERINE** F. VAN ALLEN** **TRUSTEE** **LYNCHBURG** VA 24503** **Description** **ATHERINE** F. VAN ALLEN** **TRUSTEE** **LYNCHBURG** VA 24503** **Description** **ATHERINE** F. VAN ALLEN** **TRUSTEE** **LYNCHBURG** VA 24503** **Description** **ATHERINE** F. VAN ALLEN** **TRUSTEE** **LYNCHBURG** VA 24503** **Description** **ATHERINE** F. VAN ALLEN** **ATHERINE** F. VAN ALLEN** **ATHERINE** F. VAN ALLEN** **ATHERINE** F. VAN ALLE	expenditure responsibility for the grant?	Ŋ		s No		
a personal benefit contract? b Dd the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? lif 'Yes' to 6b, file 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 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (a) Name and address (b) Titls, and average hours per week devoted to position TRUSTEE LYNCHBURG, VA 24503 0.00 0.0. 7b Ves X No X N/A 7b Compensation (c) Compensation (fill not paid, enter -0-) compensation (fill not paid, enter -0-) compensation (g) Expense TRUSTEE TRUSTEE 1202 PEBBLETON LANE LYNCHBURG, VA 24503 0.00 0.0. TRUSTEE 1202 PEBBLETON LANE LYNCHBURG, VA 24503 0.00 0.0. Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Titls, and average hours per week devoted to position 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Compensation (d) Compensation (d) Compensation (d) Compensation (e) Compensation (fill not paid, enter -0-) compensation (d) Compensation (e) Compensation (fill not paid, enter -0-) compensation (e) Compensation (fill not paid, enter -0-) compensation (e) Compensation (fill not paid, enter -0-) compensatio						}
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870. 7 At Alany time during the lax year, was the foundation a party to a prohibited tax shetter transaction? If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? List all officers, directors, trustees, foundation managers and their compensation Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (a) Name and address (b) Titls, and average hours, per week devoted for position (file to paid, enter -0-) (c) Compensation (d) Compensation (file to paid, enter -0-) (d) Compensation (enter -0-) (enter -0-) (enter -0-) (enter -0-) (enter -0-) (enter -0-) (file to paid, enter -0-) (enter -0-) (enter -0-) (enter -0-) (file to paid, enter -0-) (enter -0-) (file to paid, enter -0-) (enter -0-) (file to paid, enter -0-) (enter -0-) (enter -0-) (file to paid, enter -0-) (e) Compensation (file to paid, enter -0-) (enter -0-) (fole to paid, enter -0-)		pay premiums on		. [V] No		
If "Yes" to 6b, file Form 8870. 7a A any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If yes X No 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 1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) If the, and average hour sper week devoted to position (c) Compensation (file paid, the state of the trusters of the t	·	oroonal hanafit aantroot?	L TE		SP	v
Part VIII	If "Yes" to 6b, file Form 8870.				-	- A
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors			Ye		71	
1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (a) Name and address (b) Title, and average hours per west devoted to position (if not paid, onter 10-). (c) Compensation (if not paid, onter 10-). (d) Combinitions (if not paid, onter 10-). (d) Combinitions (if not paid, onter 10-). (e) Expense account, other allowances. (ENT VAN ALLEN, JR. TRUSTEE LYNCHBURG, VA 24503 0.00 0.0. (ATHERINE F. VAN ALLEN) TRUSTEE LYNCHBURG, VA 24503 0.00 0.0. (D) Title, and average hours per west west. (E) 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 west. (c) Compensation (c) Compensation (d) Combinitions (d) Combinitions (d) Compensation (d) Compensation (d) Compensation (e) Expense (devoted to position (d) Compensation (e) Expense (e) Expense (d) Compensation (e) Compensation (e) Expense			nogom Highly		/0	
(a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (d) Combutants and account, other allowances (c) Compensation (d) Combutants (d) Compensation (d)	Paid Employees, and Contractors		magers, migni			
(a) Name and address 10 position 10 posi	1 List all officers, directors, trustees, foundation managers and their		(a) Compensation	(d) Contributions to		Evnanca
1202 PEBBLETON LANE		hours per week devoted to position	(If not paid,	ano deterred	acco	ount, other owances
LYNCHBURG, VA 24503 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 devoted to position (c) Compensation (d) Contributions to employee the entit plans account, other allowances (e) Compensation (f) Compensation (h) C		TRUSTEE				
TRUSTEE 1202 PEBBLETON LANE LYNCHBURG, VA 24503 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 NONE (c) Compensation (d) Contributions to employee benefit plans as deterred compensation of the property of the pr				_		_
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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 NONE (c) Compensation of five highest-paid employee paid more than \$50,000 (d) Compensation of five highest-paid employee paid more than \$50,000 (e) Expense account, other allowances		TRUSTEE				
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(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 paid more than \$60,000 account, other allowances	LYNCHBURG, VA 24503	0.00	J	0.	 	<u> </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 paid more than \$60,000 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 paid more than \$60,000 account, other allowances	2. Componentian of five highest-paid employees (other than those inc	Juded on line 1). If none	enter "NONE "			
(a) Name and address of each employee paid more than \$50,000 NONE (c) Compensation employee centering as account, other allowances	2 Compensation of the highest-paid employees journer than those inc		CITCI ITOITE.	(d) Contributions to	(e)	Expense
		` 'hours per week "	(c) Compensation	employee benefit plans and deferred	acco	ount, other
Total number of other employees paid over \$50,000	NONE					
Total number of other employees paid over \$50,000					ļ	
Total number of other employees paid over \$50,000						
Total number of other employees paid over \$50,000 ▶ 0					-	
Total number of other employees paid over \$50,000 ▶ 0						
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Total number of other employees paid over \$50,000 ▶ 0						
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Total number of other employees paid over \$50,000						
	Total number of other employees paid over \$50,000	<u></u>				0

Form 990-PF (2009) KVA FOUNDATION	54-1	838819 Page 7
Part VIII Information About Officers, Directors, Trustees, Foun Paid Employees, and Contractors (continued)	dation Managers, Highly	-
3 Five highest-paid independent contractors for professional services. If none, er	nter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant st	ratictical information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers i	produced, etc.	Expenses
1 N/A		
		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dations, s	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	_1a	412,844. 60,296.
b	Average of monthly cash balances	1b	<u>60,296.</u>
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	47 <u>3</u> ,140.
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	473,140.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	7,097.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	466,043.
6	Minimum investment return. Enter 5% of line 5	6	23,302.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	23,302.
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	513.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	22,789.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	22,789.
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	22,789.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		46 404
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	46,191.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	45.404
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	46,191.
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	46,191.
	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.	jualifies for	the section

Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

1 Distributable amount for 2009 from Part XI, Illin 7 2 Linderbünder income, if any, as of the end of 2009 a Enter amount for 2008 only b Total for prior years: □ Excess distributions carryover, if any, to 2009; a From 2004 47, 620, b From 2005 20, 992, c From 2006 98, 750, d From 2007 70, 540, e From 2008 1 Total of lines 3a through e 4 Qualitying distributions for 2009 from Part XII, line 4 ► \$ 46, 191, a Applied to 2009, but not more instructions) c Treated as distributions out of corpus (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) c Treated as distributions amount applied to 2009 (if an amount appears in column (a), the same amount must be shown column (b), th		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
2 Undertubused mozems, of they are of the earl of 2000 b. Enters amount of 2000 c. and from 2000 b. b Total for prior years: 3 Excess distributions carryover, if any, to 2009; a From 2004	1 Distributable amount for 2009 from Part XI,	·	·		
2 Undertubused mozems, of they are of the earl of 2000 b. Enters amount of 2000 c. and from 2000 b. b Total for prior years: 3 Excess distributions carryover, if any, to 2009; a From 2004	· · · · · · · · · · · · · · · · · · ·				22,789.
3 Excess distributions carryover, if any, to 2008 a From 2004 47, 620 b From 2005 20, 992 c From 2006 38, 750 c From 2006 98, 750 c From 2006 25, 366 c From 2006 25, 366 c From 2006 25, 366 c From 2008 25,	2 Undistributed income, if any, as of the end of 2009				
S Excess distributions carryover, flany, to 2008: a From 2004	a Enter amount for 2008 only			0.	
3 Excess distributions carryover, I airry, to 2009. a From 2004	b Total for prior years:		0		
a From 2004	3 Excess distributions carryover, if any, to 2009:				
b From 2005					
e From 2006					
4 From 2007	c From 2006 98 , 750 .				
### 1761 of 1 Inter 3 at through ### 25,366 . 1 Total of Inter 3 at through ### 263,268 . 4 Qualifying distributions for 2009 from Part XII, Inter 4: P\$	d From 2007 70,540.				
4 Qualitying distributions for 2009 from Part XII, Ind 4 № 5 46, 191. a Applied to 2008, but not more than line 2a b Applied to indistributed income of pror years (Election required - see instructions) d Applied to 2009 distributions out of corpus (Election required - see instructions) d Applied to 2009 distributions are mount research and the search and the s	e From 2008 25,366.				
4 Qualifying distributions for 2009 from Part XII, line 4: PS		263,268.			
Part XII, line 4: P\$ 46, 191. a Appiled to 2008, but not more than line 2a b Appiled to undistributed income of pror years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Appiled to 2009 distributable amount e Remaning amount distributed out of corpus 5 Excess forth-busines carry-very applied to 2009 0 and an amount page are acclaime (fail to seame amount must be aboven in column (a) 5 Excess forth-busines carry-very applied to 2009 0 and a morning appears in column (a) 6 Enter the net total of each Column as indicated below: 286,670. 9 Prior years' undistributed uncome. Subtract line 4b from line 2b 6 Enter the amount of prior years' undistributed income for which a notice of deticency list abe en is seed, or on which the section 494(2) lax has been previously assessed 9 Subtract line 6 from line 6b. Taxable amount - see instructions 0 Undistributed income for 2008. Subtract line 4a from line 2. Taxable amount - see instr. 1 Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010 7 Amounts teated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(f) or 4942(b)(3) 8 Excess from 2006 9 Excess from 2006 20, 992. b Excess from 2006 20, 993. b Excess from 2006 21, 366. e Excess from 2007 23, 402. 9 Control of the control of prior years' and the control of prior years' and the control of prior years' and the first and the control of years' and the first and the first and years' and the first a			·	""	
a Appled to 2008, but not more than line 2a b Appled to indistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus 5 Excess destributions carryover applied to 2009 (if an amount appears in oction (ii)) 6 Excess destributions carryover applied to 2009 (if an amount appears in oction (iv)) 7 Expert the net total of each column as indicated below: 8 Corpus Adal lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 494(a) tax has been previously assessed 8 Undistributed income for which a notice of deficiency has been issued, or on which the section 494(a) tax has been previously assessed 9 Undistributed income for which a notice of deficiency has been issued, or on which the section 494(a) tax has been previously assessed 9 Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see instructions 9 Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see instructions 9 Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see instructions 9 Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see instructions 9 Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see instructions 10 Undistributed income for 2009. Subtract line 4a from line 2a. Taxable amount - see instructions 10 Undistributed income for 2009. Subtract line 4a from line 6a. 239 , 050 . 10 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(f) or 4942(p)(3) 10 Excess from 2005					
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be distributed in 2010 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2004 not applied on line 5 or line 7 9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008 c Excess from 2008 e Excess from 2009 23,402.	f Undistributed income for 2009. Subtract				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2004 not applied on line 5 or line 7 9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008 e Excess from 2008 2 23, 402.	lines 4d and 5 from line 1. This amount must				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2004 not applied on line 5 or line 7 9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008 e Excess from 2008 2 23, 402.	be distributed in 2010	İ			0.
section 170(b)(1)(F) or 4942(g)(3) 8	7 Amounts treated as distributions out of			=	
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008 e Excess from 2009 23,402.	corpus to satisfy requirements imposed by				
not applied on line 5 or line 7 9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008 e Excess from 2009 23,402.	section 170(b)(1)(F) or 4942(g)(3)	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008 e Excess from 2009 23,402.	8 Excess distributions carryover from 2004				
Subtract lines 7 and 8 from line 6a 239,050. 10 Analysis of line 9: a Excess from 2005 20,992. b Excess from 2006 98,750. c Excess from 2007 70,540. d Excess from 2008 25,366. e Excess from 2009 23,402.	not applied on line 5 or line 7	47,620.			
a Excess from 2005	9 Excess distributions carryover to 2010.				
a Excess from 2005 20,992. b Excess from 2006 98,750. c Excess from 2007 70,540. d Excess from 2008 25,366. e Excess from 2009 23,402.	Subtract lines 7 and 8 from line 6a	239,050.			
b Excess from 2006 98,750. c Excess from 2007 70,540. d Excess from 2008 25,366. e Excess from 2009 23,402.	•				
c Excess from 2007 70,540. d Excess from 2008 25,366. e Excess from 2009 23,402.	a Excess from 2005 20,992.				
d Excess from 2008 25,366. e Excess from 2009 23,402.					
e Excess from 2009 23, 402.					
	e Excess from 2009 23, 402.			-	r 000 PF (0000)

Part XIV Private Operating F		Annahana and Dank VIII	A	54-18	38819 Page 1
			-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo		-	. ▶ ∟	110.00(1)01	
b Check box to indicate whether the found		ig foundation described i		4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	Prior 3 years (c) 2007	(d) 2006	(e) Total
income from Part I or the minimum	(8) 2009	(8) 2000	(6) 2007	(u) 2000	(e) Total
investment return from Part X for					
each year listed				 	
b 85% of line 2a				-	
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities			<u> </u>	 	
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the	-				
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets		-			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	n had \$5,000 or mo	ore in assets
at any time during t	he year-see the i	nstructions.)			
1 Information Regarding Foundation	•				
a List any managers of the foundation wh			ributions received by the	foundation before the clos	se of any tax
year (but only if they have contributed in	iore than \$5,000). (See s	ection 507(d)(2).)			
KENT VAN ALLEN, JR.			·		
b List any managers of the foundation who			or an equally large porti	on of the ownership of a pa	artnership or
other entity) of which the foundation has	s a 10% or greater interes	iL			
NONE					
2 Information Regarding Contributi			-		
	•	•	-	not accept unsolicited requi	
the foundation makes gifts, grants, etc.	'			omplete items 2a, b, c, and	d.
a The name, address, and telephone num			addressed:		
KENT VAN ALLEN, JR.,					
1202 PEBBLETON LANE,					
b The form in which applications should b NO STIPULATIONS	e submitted and informat	ion and materials they sh	nould include:		
c Any submission deadlines:					
NONE		<u> </u>			
d Any restrictions or limitations on awards	, such as by geographica	il areas, charitable fields,	kinds of institutions, or	other factors:	
NONE					

3 Grants and Contributions Paid During the Ye	ear or Approved for Future	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)	or substantial contributor	recipient	Contribution	
a Paid during the year	or substantial contributor	recipient		
SEE STATEMENT 7				46.101
Total b Approved for future payment			<u>▶ 3a</u>	46,191.
NONE				
Total		····	▶ 3h	0.

923621 02-02-10

Excluded by section 512, 513, or 514

Form **990-PF** (2009)

Analysis of Income-Producing Activities Part XVI-A

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ded 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				•	
b					
C					
d	1			-	
e	1 1				
f					
g Fees and contracts from government agencies				•	
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			01		
4 Dividends and interest from securities			01	25,632.	
5 Net rental income or (loss) from real estate:				•	
a Debt-financed property					
b Not debt-financed property			1		
6 Net rental income or (loss) from personal			1		
property					
7 Other investment income		 -			
8 Gain or (loss) from sales of assets other		 	1 -		
than inventory			01	<40,200.	
9 Net income or (loss) from special events			1 -	(10)2000	
10 Gross profit or (loss) from sales of inventory			1		
11 Other revenue:					<u>.</u>
	1 1				
	- 1				
			+		<u> </u>
	·		+		
e	-	0.	+	<14,568.	> 0.
			• [
13 Total. Add line 12, columns (b), (d), and (e)				13	<14,500.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Acco	mplishment of E	xemp	t Purposes	
Line No. Explain below how each activity for which inc	ome is reported in	column (a) of Dort V(I)	A contrib	uutad impartantly to the secon	anliahment of
the foundation's exempt purposes (other than			A COMUND	ruteu importantiy to the accom	iipiisiiiieiit oi
	Toy providing lan	uo 101 00011 purpo000).			
					
					
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		· · · · · · · · · · · · · · · · · · ·		······································	
					
					
					
		 			
		· · · · · · · · · · · · · · · · · · ·			
		<u> </u>			
					
	 				
	- ·				
1					
	_ ·				

Unrelated business income

Form 990-PF (2009) 54-1838819 KVA FOUNDATION Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: 1a(1) (1) Cash X 1a(2) (2) Other assets **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) 1b(3) (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (b) Amount involved (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (b) Type of organization (c) Description of relationship (a) Name of organization N/Aexamined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct,

Date

05/12/10 employed ▶

Phone no.

J. allen

CHERRY / BEKAERT & HOLLAND,

O. BOX 1119

(434) 847-6643 Form **990-PF** (2009)

Preparer's identifying number

Sign Here

Signature of officer or trustee

Preparer's

signature

rf self-employed).

Firm's name (or yours

KVA FOUNDATION			18388	19 .	PAGE	L OF	<u> </u>
	osses for Tax on Investment Income			Ta > 14	715		
(a) List an 2-story b	d describe the kind(s) of property so crick warehouse; or common stock, 2	ld, e.g., real estate, 200 shs. MLC Co.		P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	d (d) Date sold (mo., day, yr.	
1a 994 PRECISION			<u>-</u>	P	05/13/09	 	
b 6 PRECISION DE			-	P		906/08/0	
	OTAL DYNAMIC DIV	VIDEND FUND		P		706/11/0	
	OTAL DYNAMIC DIV			P		706/11/0	
	TAL DYNAMIC DIVIL			P		706/11/0	
f 400 HARVEST EN		DEND FOND		P	11/30/06		
g WELLS FARGO CO				P	02/02/00		
h VARIOUS UNREPO				P	VARIOUS		_
	ORIED GAINS				VARCEOOD	VARCIOUD	<u>'</u>
<u> </u>							_
<u> </u>					 	 	—
<u></u>							_
						 	—
n						 -	_
0						-	_
·	(f) Depreciation allowed	(g) Cost or other basis		(1	h) Gain or (loss)	ı	_
(e) Gross sales price	(or allowable)	plus expense of sale			plus (f) minus (g)		
2	,	 	-		. (,	0	<u>.</u>
a b 3.							3.
c 12,077.		31,86	in.			<19,783	
d 9,162.		24,14				<14,978	
e 1,515.		4,00				<2,485	
f 3,792.		9,63				<5,838	
g 6.			3.			<27	_
h 2,908.		<u> </u>	,,,,,			2,908	
	,				** * **		•
<u>'</u>							—
<u>, </u>							_
1						•	_
m							_
n							_
0					·		_
	ing gain in column (h) and owned by	the foundation on 12/31/69		(I) Lo	esses (from col. (h)))	_
(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		Gains (excess	of col. (h) gain ov not less than "-0-")	er col. (k),	
2		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				0).
<u>a</u> b						3	3.
C					<u> </u>	<19,783	
<u>d</u>			-			<14,978	
e		<u> </u>				<2,485	
f						<5,838	
						<27	
g h					-	2,908	
1					·	2,500	-
<u> </u>							—
k							_
1							_
<u> </u>							_
n		<u> </u>					_
0							_
	· ··· · · · · · · · · · · · · · · · ·			I			_
2 Capital gain net income or (net c		r in Part I, line 7 0-" in Part I, line 7	2			<40,200	<u>) .</u> >
3 Net short-term capital gain or (lo if gain, also enter in Part I, line 8 if (loss), enter "-0-" in Part I, line		nd (6):	,		N/A		
m (1000), enter -0- III rait i, iiile	<u> </u>		3	<u> </u>	M/M		

FORM 990-PF DIVIDENT	S AND	INTER	EST	FROM	SECUE	RITIES	STATEMENT	1
SOURCE		GROSS	AMO	UNT		ITAL GAINS IVIDENDS	COLUMN (A	A)
UBS FINANCIAL SERVICES	•		25,	632.		0.	25,	632.
TOTAL TO FM 990-PF, PART I, I	n 4		25,	632.		0.	25,	632.
FORM 990-PF	AC	COUNTI	NG F	EES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS			EST- COME			
CHERRY, BEKAERT & HOLLAND		421.			0.			0.
								0.
TO FORM 990-PF, PG 1, LN 16B		421.			0.			
		421. TAX	ES				STATEMENT	3
FORM 990-PF	EXPE	TAX	NET	(B) INVI T INC	SST-	(C) ADJUSTEI NET INCOM	(D) CHARITA	3 ABLE
FORM 990-PF DESCRIPTION	PER	TAX A) NSES	NET	INV	SST-	ADJUSTEI	(D) CHARITA	3 ABLE
TO FORM 990-PF, PG 1, LN 16B FORM 990-PF DESCRIPTION INCOME TAXES TO FORM 990-PF, PG 1, LN 18	PER	TAX A) NSES BOOKS	NET	INV	EST-	ADJUSTEI	(D) CHARITA	3 ABLE SES
FORM 990-PF DESCRIPTION INCOME TAXES TO FORM 990-PF, PG 1, LN 18	EXPE PER	TAX A) NSES BOOKS 1,093.	NET MEN	INVI	EST- COME	ADJUSTEI	(D) CHARITA	3 ABLE SES 0.
FORM 990-PF DESCRIPTION INCOME TAXES	EXPE PER	TAX A) NSES BOOKS 1,093.	NET MEN	INVI	0. 0.	ADJUSTEI	(D) CHARITA ME PURPOS	ABLE SES 0.
FORM 990-PF DESCRIPTION INCOME TAXES TO FORM 990-PF, PG 1, LN 18 FORM 990-PF	EXPE PER	TAX A) NSES BOOKS 1,093.	NET MEN	INVI	0. 0.	ADJUSTEI NET INCOM	(D) CHARITA ME PURPOS STATEMENT FAIR MARKS	ABLE SES 0. 4

FORM 990-PF	CORPORA	TE BONDS		STATEMENT	5
DESCRIPTION			BOOK VALUE	FAIR MARKE	r
CORPORATE BONDS		•	65,976.	60,6	53.
TOTAL TO FORM 990-PF, PART II,	LINE 10C	!	65,976.	60,6	53.
FORM 990-PF	OTHER IN	VESTMENTS		STATEMENT	6
FORM 990-PF DESCRIPTION	V	VESTMENTS ALUATION METHOD	BOOK VALUE	STATEMENT FAIR MARKET	
	V	ALUATION	BOOK VALUE	FAIR MARKE	r

FORM 990-PF GRANTS AND CONTRIBUTIONS STATEMENT PAID DURING THE YEAR			
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
ACADEMY OF FINE ARTS 600 MAIN STREET LYNCHBURG, VA 24504	NONE CULTURAL		250.
AMAZEMENT SQUARE BOX 508 LYNCHBURG, VA 24505	NONE EDUCATIONAL		3,000.
AMAZEMENT SQUARE BOX 508 LYNCHBURG, VA 24505	NONE EDUCATIONAL		10,000.
AMAZEMENT SQUARE BOX 508 LYNCHBURG, VA 24505	NONE EDUCATIONAL		735.
AMERICAN HORTICULTURAL SOCIETY PO BOX 1487 MERRIFIELD, VA 221169631			50.
ASHEVILLE SCHOOL 360 SCHOOL ROAD ASHVILLE, NC 288069902	NONE EDUCATIONAL		500.
BOONSBORO FIRE DEPARTMENT PO BOX 3052 LYNCHBURG, VA 24503	NONE HUMANITARIAN RESCUE		100.
BOONSBORO FIRE DEPARTMENT PO BOX 3052 LYNCHBURG, VA 24503	NONE HUMANATERIAN RESCUE		500.

KVA FOUNDATION		54-1838819
CENTRA-HEALTH FOUNDATION 1920 ATHERHOLT RD LYNCHBURG, VA 24501	NONE MEDICAL	1,000.
CHARLOTTE COUNTY DAY SCHOOL 1440 CARMEL RD CHARLOTTE, NC 282265096	NONE EDUCATIONAL	250.
CHEBOYGAN MEMORIAL HOSPITAL 7480 SOUTH MAIN STREET CHEBOYGAN, MI 49721	NONE MEDICAL	250.
CITY CEMETERY 401 TAYLOR STREET LYNCHBURG, VA 24501	NONE HISTORICAL	250.
CONVERSE COLLEGE MAIN STREET SPARTANBURG, SC 21901	NONE EDUCATIONAL	1,889.
DANCE THEATHER OF LYNCHBURG 722 COMMERCE ST LYNCHBURG, VA 24504	NONE CULTURAL	2,000.
ELIZABETH'S EARLY LEARNING CENTER 2320 BEDFORD AVE LYNCHBURG, VA 24503	NONE EDUCATIONAL	1,000.
FRIENDS OF GUNSTON HALL (NSCDA) 10709 GUNSTON RD MASON NECK, VA 22079		100.
GARDEN CLUB OF VIRGINIA 12EAST FRANKLIN ST RICHMOND, VA 23219	NONE ENVIRONMENTAL	200.
GARDEN CONSERVANCY BOX 219 COLD SPRING, NY	NONE ENVIRONMENTAL	125.

KVA FOUNDATION .		54-1838819
GREATER LYNCHBURG COMMUNITY TRUST PPBR BOX 714 LYNCHBURG, VA 24505	NONE EDUCATIONAL	100.
HOLLINS UNIVERSITY	NONE EDUCATIONAL	2,092.
INTERFAITH OUTREACH ASSOC 605 CLAY STREET LYNCHBURG, VA 24504	NONE CHARITABLE	500.
JONES MEMORIAL LIBRARY 2311 MEMORIAL AVE LYNCHBURG, VA 24501	NONE EDUCATIONAL	100.
JUBILEE FAMILY DEVELOPMENT CENTER LYNCHBURG, VA	NONE CHARITABLE	100.
JUBILEE-STEEPLE CHASE	NONE CHARITABLE	500.
LADY BIRD JOHNSON WILDFLOWER CENTER AUSTIN, TX	NONE HORTICULTURAL	65.
LITTLE TRAVERSE CONSERVACY MI	NONE ENVIRONMENTAL	100.
LYNCHBURG AREA FOOD BANK P.O. BOX 2272 LYNCHBURG, VA 245010272	NONE CHARITABLE	1,000.
LYNCHBURG DAILY BREAD 721 CLAY STREET LYNCHBURG, VA 24504	NONE CHARITABLE	1,000.

KVA FOUNDATION .		54-1838819
LYNCHBURG MUSEUM FOUNDATION BOX 218 LYNCHBURG, VA 24505		100.
MILLER HOME FOR GIRLS 2134 WESTERLY DR LYNCHBURG, VA 24501	NONE CHARITABLE	100.
MIRIAM'S HOUSE 409 MAGNOLIA STREET LYNCHBURG, VA	NONE CHARITABLE	500.
MULLETT LAKE PRESERVTION SOCIETY P O BOX 18 MULLETT LAKE, MI 49761		100.
NATURE CONSERVANCY P.O. BOX 17056 BALTIMORE, MD 212989704	NONE HORTICULTURAL	100.
NEW LAND SAMARITAN INNS GATEWAY BOX 1255 LYNCHBURG, VA 24505		100.
PLANNED PARENTHOOD HEALTH SERVICES 1120 MCCONVILLE ROAD LYNCHBURG, VA 24502	NONE EDUCATIONAL	3,250.
POPLAR FOREST P O BOX 419 FOREST, VA 245510419	NONE PRESERVATION	250.
RED HILL/PATRICK HENRY ROUTE 2 BROOKNEAL, VA 24528	NONE PRESERVATION	100.
SALVATION ARMY LYNCHBURG, VA	NONE HUMANATARIAN	5,100.

KVA FOUNDATION		54-1838819
SOUTHERN HISTORY GARDEN SOCIETY DRAWER R SALEM STATION WINSTONSALEM, NC 271080346	NONE ENVIRONMENTAL	150.
ST JAMES EPISCOPAL PARISH, CHEBOYGAN PO BOX 253 CHEBOYGAN, MI 497210253	NONE RELIGIOUS	100.
ST JOHN'S	NONE CHARITABLE	485.
ST JOHN'S EPISCOPAL CHURCH BOSTON AVE LYNCHBURG, VA 24503		5,000.
STEP WITH LINKS 2700 LANGHORNE RD LYNCHBURG, VA 24503	NONE EDUCATIONAL	100.
THE 500 YEAR FOREST FDN 1133 OLD ALBERT RD LYNCHBURG, VA 24503	NONE ENVIRONMENTAL	500.
TIP OF THE MITT WATERSHED COUNCIL 426 BAY ST PETOSKEY, MI 49770	NONE ENVIRONMENTAL	100.
UNITED WAY 1010 MILLER PARK SQUARE LYNCHBURG, VA	NONE HUMANATARIAN	1,250.
VIRGINIA CENTER FOR CREATIVE ARTS MT SAN ANGELO SWEET BRIAR, VA 24595	NONE CULTURAL	250.
WORLD WILDLIFE FDN BOX 963 FREDERICK, MD 217059759	NONE ENVIRONMENTAL	50.

KVA FOUNDATION .		54-1838819
	NONE CULTURAL	100.
XERCES SOCIETY 4828 SE HAWTHORN BLVD PORTLAND, OR 97215	NONE CHARITABLE	100.
YMCA 1315 CHURCH STREET LYNCHBURG, VA 24504	NONE EDUCATIONAL	250.
	NONE EDUCATIONAL	100.
TOP OF MICHIGAN TRAILS COUNCIL, INC 444 E. MITCHELL ST PETOSKEY, MI 46770	NONE ENVIRONMENTAL	100.
VA CTR. FOR INCL. COMM. 5511 STAPLES MILL RD RICHMOND, VA 23228		100.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A	46,191.