

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



DLN: 93491012006041

OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service

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

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

For	cale	ndar year 2009, or tax y	year beginning 04-	01-2009 , and	dend	ling 03-31-	2010	
G	Che	ck all that apply	_	eturn of a former publi			al return	
	the I label. herwis	Name of foundation OBICI HEALTHCARE FOUNDAT				A Employer id 51-0249728	entification number	
o	print r type	Number and street (or P O box 106 W Finney Avenue	x number if mail is not delivere	ed to street address) Roc suit		(757) 539-8810	mber (see page 10 o	or the instructions)
	Speci tructio		de	I		•	application is pendin ganizations, check h	· .
_		pe of organization Section 4947(a)(1) nonexempt charita			n		ganizations meeting e and attach comput	
ofy	ear (f	et value of all assets at end rom Part II, col. (c), \$ 97,594,614	JAccounting method Other (specify) (Part I, column (d) must	_	ual	under section F If the founda	indation status was t n 507(b)(1)(A), chec ition is in a 60-mont n 507(b)(1)(B), chec	k here F
Pa	rt I	Analysis of Revenue a total of amounts in columns (b), (necessarily equal the amounts in the instructions))	c), and (d) may not	(a) Revenue and expenses per books	(d)	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , rece	eived (attach schedule)					
	2	Check ► 🔽 if the foundation is not	required to attach Sch B					
	3	Interest on savings and tempo	orary cash investments					
	4	Dividends and interest from se	ecurities	1,465,483		1,465,483		
	5a	Gross rents						
	ь	Net rental income or (loss)						
Revenue	6a	Net gain or (loss) from sale of		-371,055				
	Ь	Gross sales price for all assets on line						
Ď	7	Capital gain net income (from	•			0		
	_	Net short-term capital gain .						
	9							
	10a	Gross sales less returns and allowand Less Cost of goods sold						
	_	Gross profit or (loss) (attach s						_
	11	Other income (attach schedul				233,194		
		Total. Add lines 1 through 11	•	1,327,622		1,698,677		
	12 13	Compensation of officers, dire		327,163		1,030,077		327,163
	14	Other employee salaries and v	,	142,365		0		142,365
φ	15	Pension plans, employee bene	_	,		0		77,726
SH.		Legal fees (attach schedule).				0		16,039
Expenses		Accounting fees (attach sched		_		0		39,175
		Other professional fees (attac	•					
Ĭ		Interest		6,233		0		0
and Administrative		Taxes (attach schedule) (see page 1	4 of the instructions)	78,732		0		38,374
	19	Depreciation (attach schedule) and depletion	% 24,793		0		
틯	20	Occupancy		49,112		0		49,112
Δ 4	21	Travel, conferences, and meet	ings	29,260		0		29,260
	22	Printing and publications						
Į.	23	Other expenses (attach sched	lule)	1,440,556		1,342,864		97,125
Operating	24	Total operating and administra	ative expenses.					
<u>ā</u>		Add lines 13 through 23		2,231,154		1,342,864		816,339
0	25	Contributions, gifts, grants pa	ıd	4,552,605				2,757,882
	26	Total expenses and disbursemen	ts. Add lines 24 and 25	6,783,759		1,342,864		3,574,221
	27	Subtract line 26 from line 12						
	а	Excess of revenue over expens	ses and disbursements	-5,456,137				
	b	Net investment income (If neg	atıve, enter -0-)			355,813		
	С	Adjusted net income (If negati	ve, enter -0 -)					

oa o	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	(h) D		of year	
	1	Cash—non-interest-bearing	(a) Book Value 851	(b) Boo	3,60		Fair Market Value 3,608
	2	Savings and temporary cash investments	15,192,757		12,339,38		12,339,383
	3	Accounts receivable	13,132,737		12,337,30	+	
	3	Less allowance for doubtful accounts -					
	4	Pledges receivable					
	4	Less allowance for doubtful accounts					
	5	<u> </u>				-	
	6	Grants receivable				+	
	0	disqualified persons (attach schedule) (see page 15 of the					
		instructions)					
	7	Other notes and loans receivable (attach schedule)					
	•						
۱		Less allowance for doubtful accounts 🟲					
1001	8	Inventories for sale or use					
î	9	Prepaid expenses and deferred charges	39,633		45,59	2	45,592
	10a	Investments—U S and state government obligations (attach schedule)					
	b	Investments—corporate stock (attach schedule)	9,790,782	%	20,417,30	19	20,417,309
	C	Investments—corporate bonds (attach schedule)	4,741,968	2	5,152,39	6	5,152,396
	11	Investments—land, buildings, and equipment basis 🟲					
		Less accumulated depreciation (attach schedule) 🟲					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)	43,393,325	2	56,704,90	19	56,704,909
	14	Land, buildings, and equipment basis 🕨2,284,196					
		Less accumulated depreciation (attach schedule) 🟲 52,490	37,739	%	2,231,70		2,231,706
	15	Other assets (describe 🟲)	95 847,416	%	699,71	1 %	699,711
	16	Total assets (to be completed by all filers—see the					
		ınstructions Also, see page 1, item I)	74,044,471		97,594,61	4	97,594,614
	17	Accounts payable and accrued expenses	32,251		132,39	2	
	18	Grants payable	3,406,794		1,790,52	.8	
ũ	19	Deferred revenue					
5 5 5	20	Loans from officers, directors, trustees, and other disqualified persons					
5	21	Mortgages and other notes payable (attach schedule)			1,850,00	0	
┛┃	22	Other liabilities (describe 🟲)				4	
	22	Tabel Habiliains (add lines 47 Abrasiah 22)	3,439,045		3,772,92		
	23	Total liabilities (add lines 17 through 22)	3,433,043		3,112,32		
		and complete lines 24 through 26 and lines 30 and 31.					
S.	24	Unrestricted	70,605,426		93,821,69	4	
Ĕ		Temporarily restricted	70,003,120		33,021,03	4	
Fund Balances	25 26	Permanently restricted				\dashv	
2	20	Foundations that do not follow SFAS 117, check here				-	
Ĭ		and complete lines 27 through 31.					
_	27	Capital stock, trust principal, or current funds					
5	28	Paid-in or capital surplus, or land, bldg, and equipment fund					
ASSELS	29	Retained earnings, accumulated income, endowment, or other funds				-	
2	30	Total net assets or fund balances (see page 17 of the				-	
Ě	30	Instructions)	70,605,426		93,821,69	4	
2	31	Total liabilities and net assets/fund balances (see page 17 of	7 0,003,120		33,021,03	Ⅎ	
	31	the instructions)	74,044,471		97,594,61	4	
			71,011,171		37,331,01	'	
	rt II						
L		Total net assets or fund balances at beginning of year—Part II, column		-			
		with end-of-year figure reported on prior year's return)			1		70,605,426
2		Enter amount from Part I, line 27a			2		-5,456,137
3		Other increases not included in line 2 (itemize)			3		28,685,515
4		Add lines 1, 2, and 3			4		93,834,804
5		Decreases not included in line 2 (itemize)			5		13,110
5		Total net assets or fund balances at end of year (line 4 minus line 5)—F	Part II, column (b), lı	ne 30	6		93,821,694

		kind(s) of property sold (e g , re e, or common stock, 200 shs M		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	short term sales					
b	long term sales					
c	capital losses from partn	erships				
d	sale of foreign investmen	t and capital gains				
e						
(e	e) Gross sales price	(f) Depreciation allower (or allowable)	, , , ,	t or other basis pense of sale		or (loss)) mınus (g)
а	8,509,9	49		7,477,23	3	1,032,716
b	2,390,7	99		1,441,27	2	949,527
С				1,853,02	8	-1,853,028
d	2,778,0	45		3,278,31	5	-500,270
e		/	d b bb 6 d-b	12/21/60	W 2 (2)	(1.)
	FM V as of 12/31/69	(j) A djusted basis as of 12/31/69	(k) Exc	n on 12/31/69 cess of col (1) col (j), if any	col (k), but not	(h) gaın mınus less than -0-) or om col (h))
а						1,032,716
b						949,527
С						-1,853,028
d						-500,270
e						
2	· -	in or (loss) as defined in section I, line 8, column (c) (see pages	13 and 17 of the i	in Part I, line 7	2	-371,055
Was the		ction 4942 tax on the distributa			erıod?	┌ Yes ┌ No
	·	alıfy under section 4940(e) Do n each column for each year, se			makına anv entries	
	(a)				(d)	
	narrad years Calendar	(b) Adjusted qualifying distributions	(c) Net value of noncha		Distributio (col (b) divided	n ratio
	2008	5,862,506		88,420,528		0 066303
	2007	4,585,183		115,770,846		0 039606
	2006	717,008		105,190,685		0 006816
	2004					
				T		
2	Total of line 1, column (d)			2	0 112725
3		o for the 5-year base period—div oundation has been in existence			3	0 037575
4		ncharitable-use assets for 2009			4	87,471,067
5	Multiply line 4 by line 3.				5	3,286,725
6	Enter 1% of net investme	ent income (1% of Part I, line 2	7b)		6	3,558
7	Add lines 5 and 6				7	3,290,283
8	Enter qualifying distributi	ons from Part XII, line 4			8	5,572,134
	If line 8 is equal to or gre the Part VI instructions o	ater than line 7, check the box in page 18	n Part VI, line 1b,	and complete that	part using a 1% tax	rate See

	990-PF (2009)			age 4		
Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the ins	t ruct io	ns)			
1a	Exempt operating foundations described in section 4940(d)(2), check here T and enter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary-see					
Ь	instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check			3,558		
_	here Fand enter 1% 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	Towards a street fit (domestic action 4047(-)/4) towards and towards foundations with Other action O					
3	Add lines 1 and 2			3,558		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0		
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			3,558		
6	Credits/Payments					
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 36,527					
ь	Exempt foreign organizations—tax withheld at source 6b					
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		3	6,527		
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10		3.	2,969		
11	Enter the amount of line 10 to be Credited to 2010 estimated tax 32,969 Ref unded 11			0		
Par	t VIII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No		
	ıt participate or intervene in any political campaign?	. 1a		No		
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of					
	the instructions for definition)?	. 1b		No		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials					
	published or distributed by the foundation in connection with the activities.					
c	Did the foundation file Form 1120-POL for this year?	1c		No		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation \$\bigs\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
e	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		No		
_	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	,		Na		
45	of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Yes	No		
4a		4a 4b	Yes			
ь 5	If "Yes," has it filed a tax return on Form 990-T for this year?	5	163	No		
3	If "Yes." attach the statement required by General Instruction T.	<u> </u>		140		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
Ū	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	Yes			
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	Yes			
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the					
	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	Yes			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)					
	or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on					
	page 27)? If "Yes," complete Part XIV	. 9		No		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No		

Form	990-PF (2009)		Р	age 5
Pai	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶http://www.obicihcforg/			
14	The books are in care of ►Michael Hammond Telephone no ►(757) 539-	8810	
	Located at ►106 W Finney Avenue Suffolk VA ZIP+4 ►23434	,		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			
	and enter the amount of tax-exempt interest received or accrued during the year			
Ра	*t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	l	Yes	N-
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		res	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) A gree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days) Yes V No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	4.		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
_	that were not corrected before the first day of the tax year beginning in 2009?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2009?			
	If "Yes," list the years > 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	.		
	to all years listed, answer "No" and attach statement—see page 20 of the instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2009.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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?	4b		No

Pa	rt VII-B	Statements Rega	rdina Act	ivities for	Wh	ich Form 4720	Mav	Be Required (conti	nued)			age e
5a		e year did the foundation	_									
		on propaganda, or other				ıslatıon (section 49	45(e))?	No			
	(2) Influe	ence the outcome of any	specific pub	lıc election (sees	section 4955), or to	carı	.y				
		rectly or indirectly, any v							No			
		de a grant to an individua						┌ Yes रि				
	• •	de a grant to an organiza	·	• •		, ,	scrib	ed				
		ction 509(a)(1), (2), or (3							No			
		de for any purpose other						, , , , , , , , , , , , , , , , , , , ,				
		ational purposes, or for th						Yes F	No			
b		swerıs "Yes" to 5a(1)-(5										
		ns section 53 4945 or ii							ns)?	5b		
		tions relying on a current										
c		wer is "Yes" to question						,				
Ī		use it maintained expend				•		Г Y es Г	- No			
		attach the statement requi					•	, .es ,	110			
6a		oundation, during the yea										
ou		s on a personal benefit co						□ ves 5	- No			
ь		oundation, during the yea								6b		No
		o 6b, file Form 8870.	i, pay pieili	iums, unecci,	, 01 1	nunectly, on a perso	Jiiai i	Jeneni contract.	•	0.5		110
7a		ne during the tax year, w	as the found	dation a narti	, to =	prohibited tay chal	torti	ansaction? Tyes F	- No			
	·	the foundation receive				•		,		7b		
	ir yes, uit							n Managers, Highly			lovo	
Pa	rt VIII	and Contractors	Officers	, Directors	, 11	ustees, Found	11101	i managers, inging	raiu	шр	loye	cs,
1	List all off	icers, directors, trustees	, foundatio	n managers a	nd t	heir compensation (see p	page 22 of the instruction	ns).			
			(b) Title, a	nd average	(4	C) Compensation		(d) Contributions to	(a) E	vnonc	e acco	aunt
	(a) Na	me and address		er week	(1	f not paid, enter	1	mployee benefit plans			owance	,
<u></u>	A	Data Tabla	aevotea i	o position		-0-)	and	deferred compensation				
See	Additional	Data Table										
							-					
2		tion of five highest-paid nter "NONE."	employees	(other than t	t hose	e included on line 1-	-see	page 23 of the instructio	ons).			
	. N	Laddona a C	(b) Ti	tle, and aver	age			(d) Contributions to	, , , -			
(a)		l address of each employ nore than \$50,000	ee i ho	urs per week	•	(c) Compensation	n	employee benefit plans and deferred			e acco	
	para	11010 111411 \$30,000	devo	ted to positi	on			compensation		iici uii	o manie	
NON	IE											
-												
			$\overline{}$									
									-			
	.1	fother employees hald o	<u> </u>	^				<u> </u>	-			-
I Ota	u numnar a	TOTAL AMBIOVAGE POID A	var « Sin nn									^

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
C W Brinkley Inc	construction contract	1,568,032
3005 Corporate Lane Suite 100 Suffolk, VA 23434		
CORNERSTONE PARTNERS LLC	INVESTMENT/MANAGEMENT	331,192
675 Peter Jefferson Parkway CHARLOTTESVILLE, VA 22911		
Covington Hendrix Anderson Architec	architect services	87,928
360 Southport Circle Suite 104 Virginia Beach, VA 23452		
Peter B Cannell & Co Inc	INVESTMENT/MANAGEMENT	67,026
645 Madison Avenue New York, NY 10022		
Total number of others receiving over \$50,000 for professional ser	vices	. 0
Part IX-A Summary of Direct Charitable Activities	5	
List the foundation's four largest direct charitable activities during the tax year. Incorganizations and other beneficiaries served, conferences convened, research papers		Expenses
criteria of preventing illness and disease or improve access to uninsured residents in Western Tidewater, Virginia and Gates (funded include clinic services, health screenings, case manage enrollment assistance, mental health counseling, Diabetes pre and chronic disease management services	County, North Carolina Programs and services ement, Medicare, Medicaid & FAMIS insurance	
3		
4		
Part IX-B Summary of Program-Related Investme		
Describe the two largest program-related investments made by the foundation	during the tax year on lines 1 and 2	A mount
1		
2		
All other program-related investments See page 24 of the instr	uctions	
3		
Total. Add lines 1 through 3		0

	(/		
Part X	Minimum Investment Return (All don	estic foundations must complete this part. Foreign foundations,	
	see page 24 of the instructions.)		

	see page 24 of the instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	78,408,063
b	A verage of monthly cash balances	1b	10,395,051
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	88,803,114
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	88,803,114
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	1,332,047
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V , line 4	5	87,471,067
6	Minimum investment return. Enter 5% of line 5	6	4,373,553
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(
	foundations and certain foreign organizations check here 🕨 📗 and do not complete t		
1	Minimum investment return from Part X, line 6	1	4,373,553
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) 2b		
c	Add lines 2a and 2b	2c	3,558
3	Distributable amount before adjustments Subtract line 2c from line 1	3	4,369,995
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	4,369,995
6	Deduction from distributable amount (see page 25 of the instructions)	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	4,369,995
Par	t XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		2 574 224
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	3,574,221
Ь	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	1,997,913
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
Ь	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	5,572,134
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 (see page 26 of the instructions)	5	3,558
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	5,568,576
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the section 4940(e) reduction of tax in those years	her the	foundation qualifies for

For	m 990-PF (2009)				Page 9
Р	art XIII Undistributed Income (see page	26 of the instruct	ons)		
		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1	Distributable amount for 2009 from Part XI, line 7				4,369,995
2	Undistributed income, if any, as of the end of 2008				
а	Enter amount for 2008 only			4,020,756	
b	Total for prior years 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2009				
а	From 2004				
b	From 2005				
c	From 2006				
d	From 2007				
е	From 2008				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2009 from Part				
	XII, line 4 🕨 \$			4 020 756	
	Applied to 2008, but not more than line 2a			4,020,756	
Ь	Applied to undistributed income of prior years		0		
_	(Election required—see page 26 of the instructions)				_
С	Treated as distributions out of corpus (Election required—see page 26 of the instructions)	0			
d	Applied to 2009 distributable amount				1,551,378
	Remaining amount distributed out of corpus	0			, ,
	Excess distributions carryover applied to 2009	0			0
•	(If an amount appears in column (d), the				
	same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
-	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
	Prior years' undistributed income Subtract				
D	line 4b from line 2b		0		
c	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)		0		
_	tax has been previously assessed		0		
d	Subtract line 6c from line 6b Taxable		0		
_	amount—see page 27 of the instructions Undistributed income for 2008 Subtract line				
e	4a from line 2a Taxable amount—see page 27				
	of the instructions			0	
f	Undistributed income for 2009 Subtract				
	lines 4d and 5 from line 1 This amount must				2,818,617
_	be distributed in 2010				2,010,017
7	A mounts treated as distributions out of corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see page 27				
	of the instructions)	0			
8	Excess distributions carryover from 2004 not				
	applied on line 5 or line 7 (see page 27 of the	0			
_	instructions)				
9	Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9				
	Excess from 2005				
a b					
_	Excess from 2007				
	Excess from 2008				
	Excess from 2009				

	m 990-PF (2009)		27 611			Page 10
	If the foundation has received a ruling or d foundation, and the ruling is effective for 2	letermination letter	that it is a private	operating	t VII-A, question	9)
b	Check box to indicate whether the organiz	ation is a private oj	perating foundation	described in sectio	n Г 4942(j)(3) d	or Г 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum investment return from Part X for each	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	year listed					
Ь	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(1)(3)(B)(i)					
ь	"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					
Da	(4) Gross investment income rt XV Supplementary Information	n (Complete ti	 his part only if	the organization	on had \$5,000 (or more in
	assets at any time during					
	Information Regarding Foundation Manag- List any managers of the foundation who had		ro than 20% of the t	otal contributions r	acaived by the four	dation
-	before the close of any tax year (but only i					dation
b	List any managers of the foundation who o		•		ly large portion of t	he
	ownership of a partnership or other entity)	of which the founda	ation has a 10% or	greater interest		
:	Information Regarding Contribution, Gran					
	Check here I if the foundation only ma unsolicited requests for funds. If the found					
	under other conditions, complete items 2a		grants, etc (see pa	age 20 of the mistruc	ctions) to individual	is of organizations
а	The name, address, and telephone numbe	r of the person to w	hom applications s	hould be addressed		
	Cathy Huband 106 W Finney Avenue					
	SUFFOLK, VA 23434					
	(757) 539-8810					
b	The form in which applications should be s			•		
	Grant seekers must submit the Request for written document certifying tax exempt st budget					
С	Any submission deadlines					
	Renewals- August 6 of each year Grants-	August 6 of each y	ear			
d	Any restrictions or limitations on awards, factors	such as by geogra	phical areas, charit	able fields, kinds of	institutions, or oth	er
	RESTRICTIONS - LOBBYING OR POLITHEY ARE ESSENTIAL TO A LARGER PIALREADY FUNDED THROUGH EXISTING	ROJECT - DIRECT	FUNDING FOR D	IRECT MEDICAL O		

a Paid during the year See Additional Data Table	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
Total		or substantial contributor	recipient		
b Approved for future payment		any foundation manager or substantial contributor	recipient	contribution	
b Approved for future payment					
b Approved for future payment					
	Total				2,757,882

	-PF (2009) I-A Analysis of Income-Produc	rina Activitie	<u> </u>			Page 1 2
	s amounts unless otherwise indicated		ısıness income	Excluded by section	512, 513, or 514	(e)
1 Progra	m service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exemp function income (See page 28 of
a b c d e f g Fees 2 Member 3 Interest 4 DIVIDE 5 Net re a Debt b Not c 6 Net ren 7 Other 8 Gain or 9 Net ince 10 Gross	and contracts from government agencies ership dues and assessments ton savings and temporary cash investments ands and interest from securities ntal income or (loss) from real estate affinanced property	531390	Alliount	14 14 18	1,465,483 233,194 -371,055	
d e 12 Subtot 13 Total. (See)	tal Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions on page 2 I-B Relationship of Activities to Explain below how each activity for wh the accomplishment of the organizatio page 28 of the instructions)	28 to verify calc the Accom ich income is re	ulations) plishment of E ported in column(Exempt Purpose (e) of Part XVI-A co	es entributed importa	1,327,622

Form 99	0-PF (2	:009)									Рa	ge 1 3
Part	XVII	Information Re Noncharitable				ransa	ctions an	d Relati	onships With			
1 Did t	he organiz	ration directly or indirectly				er organiz	zation describe	ed in section			Yes	No
501(c) of the (Code (other than section	501(c)(3) orga	nızatıoı	ns) or in section 527, re	elating to	political organ	ızatıons?				
a Trar	nsfers fr	om the reporting four	ndation to a i	nonch	arıtable exempt orç	ganızatı	on of					
(1)	Cash.									1a(1)		No
(2)	Othera	ssets								1a(2)		No
b 0 th	er trans	actions										
(1)	Sales o	fassets to a noncha	arıtable exem	npt org	janization					. 1b(1)		No
(2)	Purcha	ses of assets from a	noncharitab	le exe	mpt organization.					. 1b(2)		No
(3)	Rental	of facilities, equipme	ent, or other a	assets	5					. 1b(3)		No
(4)	Reımbu	rsement arrangemer	nts							. 1b(4)		No
		or loan guarantees.								<u> </u>		No
		ance of services or n										No
	-	icilities, equipment,			, ,						<u> </u>	No
of th	ne goods	r to any of the above , other assets, or se action or sharing arr	rvices given	by th	e reporting foundat	ıon Iftl	he foundatio	on receive	d less than fair ma	rket value		
(a) Line	No	(b) Amount involved	(c) Name of	noncha	ırıtable exempt organız	ation	(d) Descrip	tion of transf	ers, transactions, and	sharing arra	angemei	nts
	_											
des	cribed in 'es," cor	ation directly or indiction of the section 501(c) of the section section is the section of the s	he Code (oth schedule		•)) or in	section 52				es F	▼ _N o
	the be based	penalties of perjury, st of my knowledge a on all information of ****	and belief, it	ıs true	e, correct, and com		_	of preparer	-			
	Sig	nature of officer or t	rustee				Date		Title			
Sign Here	i er's nly	Preparer's Signature					Date		Check if self- employed ▶ ✓	Preparer' Identifyin number (s Signat ure 30 of the i	g see ∍on pa	_
	Paid Preparer's Use Only	Firm's name (or your if self-employed),	urs W	ITT M	ARES PLC				EIN ►			
	<u> </u>	address, and ZIP c	ode 70	01 TO	WN CENTER DRIV	ESUIT	E 900		DI	070 475		
			NI F	EMP O	RT NEWS, VA 23	606429	2.7		Phone no (757)	ช/ <i>3</i> -158	/	
		I	IN E		IN INL WYS, VA 23	J J J 4 Z 8	, ,					

Additional Data

Software ID: 09000028

Software Version: 2009.05000

EIN: 51-0249728

Name: OBICI HEALTHCARE FOUNDATION INC

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
GEORGE Y BIRDSONG	CHAIRMAN	0	0	0
1514 HOLLAND ROAD SUITE 104 SUFFOLK, VA 23434	1 00			
J SAMUEL GLASSCOCK	VICE CHAIRMAN	0	0	0
1514 HOLLAND ROAD SUITE 104 SUFFOLK, VA 23434	1 00			
Robert M Hayes	SECRETARY /	0	0	0
1514 HOLLAND ROAD SUITE 104 SUFFOLK, VA 23434	TREASURER 1 00			
Gına Pıtrone	EXECUTIVE	145,000	7,250	10,732
1514 HOLLAND ROAD SUITE 104 SUFFOLK, VA 23434	DIRECTOR 40 00			
Michael Hammond	CFO	102,563	5,128	20,435
1514 HOLLAND ROAD SUITE 104 SUFFOLK, VA 23434	40 00			
Rick Spencer	Senior program officer	79,600	3,980	16,616
1514 HOLLAND ROAD SUITE 104 SUFFOLK, VA 23434	40 00			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year	or substantial contributor			
A merican Cancer Society4116 Expressway Drive Virginia Beach, VA 23452		501c3	support svcs and improve access to care for cancer patients	52,224
American Lung Association of Virginia 9221 Forest Hill Avenue Richmond, VA 23235		501c3	Support for asthma education programs for kids and adults	15,694
A merican Red Cross157 north Main St Suite C Suffolk, VA 23434		501c3	Support for community DEFIBRILLATORS assessment	13,614
CANDII Inc222 West 21st Street Suite F308 Norfolk, VA 23517		501c3	HIV/STD prevention program	56,571
Chesapeake Service Systems1100 Executive Boulevard Chesapeake, VA 23320		501c3	Nutrition education and exercise program for disabled adults	35,144
City of Franklin207 West Second Ave Franklin, VA 23851			Planning grant to improve early childhood services in Franklin	38,938
Eastern Virginia Medical School855 W Brambleton Avenue Norfolk, VA 23510		501c3	video intervention to increase safety of children in vehicles	25,188
Edmarc Inc516 London Street Portsmouth, VA 23704		501c3	Funds to expand pediatric hospice and palliative care	25,000
For Kids IncP O Bx 6044 Norfolk, VA 23508		501c3	Funds for children and adult case management	136,018
Hampton Roads Educational Communications Association5200 Hampton Boulevard Norfolk,VA 23508		501c3	staff to present obesity educational guides to educators	43,674
Horizon Health Services-Waverly Medical CenterPO Box 29 Waverly, VA 23890		501c3	Matching capital funds for a new dental center	319,200
Isle of Wight Christian Outreach 12210 Waterview Trail Carrolton, VA 23314		501c3	Funds to support rental space	6,750
Let's Talk818 Gammon Road Virginia Beach, VA 23464		501c3	Support for education, nutrition and exercise teen program	36,497
Norfolk State University700 Park Avenue Norfolk,VA 23504		501c3	Support for health promotion program at local church	23,004
Paul D Camp Community CollegePO Box 737 Franklin, VA 23851		501c3	Funds for nurse education and nursing skills lab	17,175
Total				2,757,882

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year				
Peninsula Institute for Community Health-Dental12284 Warwick Boulevard Suite 2G Newport News, VA 23504		501c3	Start up support for a dental clinic	102,105
Peninsula Metropolitan Young Men's Christian Association259 James Street Smithfield, VA 23430		501c3	Expand after school program and membership	248,515
Roanoke Chowan Community Health Center113 B Herford County High Road Ahoskie, NC 27910		501c3	Planning grant to better serve the NC medically indigent	50,510
Roanoke Chowan Community Heath Center113 B Hertford County High Road Ahoskie, NC 27910		501c3	Expansion of telehealth network to Gates County, NC	31,325
Sentara Obici Hospital2800 Godwin Blvd Suffolk, VA 23434		501c3	Case management to low income uninsured residents	276,613
Southeastern Virginia Areawide Model Program5 Interstate Corporate Center Suite 101 Norfolk, VA 23502		501c3	Funds for staff to help low income older & disabled enroll in insurance	28,640
Suffolk Meals on Wheels2800 Godwin Blvd Suffolk,VA 23434		501c3	Support for hot/cold meal delivery expansion and for delivery van	21,446
Suffolk Partnership for a Healthy CommunityPO Box 6082 Suffolk,VA 23433		501C3	Funds to identify and organize the community's assets	40,306
The Children's Center700 Campbell Avenue Franklin, VA 23851		501c3	Physical/Occupational Therapist funding for infant therapy services	57,522
THE GENIEVE SHELTER1548 Holland Road Suffolk, VA 23434		501c3	Support for domestic violence victims health issues	134,281
The Up Center109 Clay Street Suffolk, VA 23434		501c3	In-home counseling for at-risk youth	53,593
The Up Center109 Clay Street Suffolk, VA 23434		501c3	Outpatient counseling for atrisk individuals & families	57,483
Theatre IV 114 West Broad Street Richmond, VA 23220		501c3	performances of child abuse prevention/intervention	32,936
VIRGINIA LEGAL AID SOCIETyPO Box 6200 Lynchburg,VA 23505		501c3	Medical legal plan to ensure needs of low income families	32,500
Western Tidewater Community Services Board5268 Godwin Blvd Suffolk, VA 23434		501c3	Support for family therapy for youth with substance abuse	49,476
Total				2,757,882

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
Western Tidewater Free Clinic2019 Meade Parkway Suffolk, VA 23434		501c3	O perational support for clinic	345,150
Western Tidewater Health District 1217 N Main St suffolk, VA 23434		501c3	Expansion of maternal & child health & family planning services	249,314
Young Men's Christian Association of South Hampton Roads250 West Brambleton Avenue Suite 100 Norfolk, VA 23510		501c3	Funds for after school program for Suffolk youth at risk for obesity	100,000
The Genieve Shelter1548 Holland Road Suffolk, VA 23434		501c3	Support for Homeless Assistance Day	1,476
			Assistance Day	2,757,882

Form 990PF Part XV Line 3b - Grants and Contributions Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (nome or business)	or substantial contributor	·		
Approved for future payment				
AMERICAN CANCER SOCIETY4116 Expressway Drive Virginia Beach,VA 23452		501c3	support svcs and improve access to care for cancer patients	6,469
CANDII Inc222 West 21st Street Suite F308 Norfolk,VA 23517		501c3	HIV/STD prevention program	27,562
Chesapeake Service Systems1100 Executive Boulevard Chesapeake,VA 23320		501c3	Support for nutrition education & exercise programs	20,790
City of Franklin207 West Second Ave Franklin, VA 23851			Planning grant to improve early childhood services i	22,813
Eastern Virginia Medical School855 W Brambleton Avenue Norfolk,VA 23510		501c3	Loan forgiveness program minority medical students	120,000
For Kids IncP O Bx 6044 Norfolk,VA 23508		501c3	Funds for children and adult case management	71,858
Hampton Roads Educational Communications Association5200 Hampton Blvd Norfolk,VA 23508		501c3	for staff to present obesity educational guide to daycare providers	8,245
Horizon Health Services-Waverly Medical CenterPO Box 29 Waverly, VA 23890		501c3	Matching capital funds for a new dental center	162,900
sle of Wight Christian Outreach12210 Waterview Trail Carrolton, VA 23314		501c3	Funds to support rental space	6,750
et's Talk818 Gammon Road / ırgınıa Beach, VA 23464		501c3	Support for education, nutrition and exercise teen program	17,000
Peninsula Institute for community nealth-dental12284 Warwick Boulevard Suite 2G Newport News, VA 23504		501c3	Start up support for a dental clinic	78,420
Peninsula Metropolitan Young Men's Christian Association259 James Street Smithfield, VA 23430		501c3	fund for after school program and improve facilities	112,052
Roanoke Chowan Community Health Center113 B Herford County High Road Ahoskie,NC 27910		501c3	Planning grant to better serve the NC medically indigent	48,936
Roanoke Chowan Community Health Center113 B Herford County High Road Ahoskie,NC 27910		501c3	Expansion of telehealth network to Gates County, NC	3,355
Sentara Obici Hospital2800 Godwin Blvd Suffolk, VA 23434		501c3	Case management to low income uninsured residents	129,379
Total				1,794,723

Form 990PF Part XV Line 3b - Grants and Contributions Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
Approved for future payment				
Southeastern Virginia Areawide Model Program5 Interstate Corporate Center Guite .01 Jorfolk, VA 23502		501c3	Funds to help low income older & disabled obtain ins	11,463
uffolk Meals on Wheels2800 Godwin dvd uffolk,VA 23434		501c3	Support for hot/cold meal delivery expansion and for delivery van	5,363
uffolk Partnership for a Healthy communityPO Box 6082 uffolk,VA 23433		501C3	Funds to identify the community's assets and organiz	24,400
he Children's Center700 Campbell venue ranklin,VA 23851		501c3	Physical/Occupational Therapist funding for infant therapy services	6,228
he Genieve Shelter1548 Holland oad uffolk, VA 23434		501c3	Support for domestic violence victims health issues	62,000
he Up Center109 Clay Street suffolk, VA 23434		501c3	In-home counseling for at- risk youth	23,592
he Up Center109 Clay Street Suffolk, VA 23434		501c3	Outpatient counseling for at- risk individuals & families	27,482
/irginia Commonwealth University520 N 12 Street Richmond,VA 23298		501c3	increase representation for minorities working as dentist	213,589
rirginia Legal Aid SocietyPO Box 200 ynchburg,VA 23505		501c3	Medical legal plan to ensure needs of low income families	25,000
Vestern Tidewater Community Services Board5268 Godwin Blvd Suffolk, VA 23434		501c3	Support for family therapy for youth with substance abuse	5,496
Vestern Tidewater Free Clinic 2019 Meade Parkway Suffolk, VA 23434		501c3	O perational support for clinic	337,981
Vestern Tidewater Health District 217 N Main St Juffolk, VA 23434		501c3	Expansion of maternal & child health & family planning services	190,600
oung Men's Christian Association of outh Hampton Roads250 West rambleton Avenue Suite 00 orfolk, VA 23510		501c3	after school program for Suffolk youth at risk for obesity	25,000
Total				1,794,723

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

DLN: 93491012006041

OMB No 1545-0172

Department of the Treasury Internal Revenue Service	•	See separate instruction	s. 🕨 Attach	to your tax retu	ırn.			Attachment Sequence No. 67	
Name(s) shown on return OBICI HEALTHCARE FO			activity to which	this form relate	s	Ident if	fying	g number	
O DICI HEAEITICARE I C	, on DATION INC	Form 990-PF	Page 1			51-02	497	28	
	•	Certain Property Un							
		sted property, comple			lete Part	<u>! I. </u>			
		for a higher limit for cert				·	1	250,000	
2 Total cost of section	179 property plac	ed in service (see instru	ictions) .			· _	2		
3 Threshold cost of sec	tion 179 property	before reduction in limit	atıon (see ınstr	uctions) .			3	800,000	
4 Reduction in limitatio	n Subtract line 3	from line 2 If zero or les	s, enter -0-			· L	4		
5 Dollar limitation for ta	ax year Subtract	line 4 from line 1 If zero	or less, enter -0) - If married fili	ıng				
separately, see instru	uctions					-	5		
6 (a)	Description of pr	operty		(business use only)	(c) Ele	cted co	st		
6				.,					
								1	
7 Listed property Ente	r the amount from	line 29		. 7				_	
8 Total elected cost of	section 179 prop	erty Add amounts in col	umn (c), lınes 6	and 7			8		
9 Tentative deduction	Enter the smaller	of line 5 or line 8 .					9		
10 Carryover of disallow	ed deduction from	line 13 of your 2008 Fo	rm 4562 .			Ի	10		
11 Business income limitation		·		ee instructions)		. \vdash	11		
12 Section 179 expense						-	12		
13 Carryover of disallow		,		. ► 13			_		
Note: Do not use Pari		<u>'</u>							
		Illowance and Othe			nclude lis	ted pro	perty	(See instructions)	
14 Special depreciation tax year (see instruct	allowance for qual					g the	14		
15 Property subject to s	ection 168(f)(1) e	election					15		
16 Other depreciation (ii	ncluding ACRS)					. 🗀	16	24,793	
		Oo not include listed j	property.) (Se	e instructions	;.)			·	
	•		ection A		•				
17 MACRS deductions fo	or assets placed i	n service in tax years be	gınnıng before 2	009			17		
18 If you are electing	to group any a	ssets placed in servic	e during the t	ax year into o	ne or m	ore 🗌			
general asset acco	unts, check her	e			▶	·			
Section B—Ass	sets Placed in	Service During 200	08 Tax Year	Using the G	eneral	Depre	cia	tion System	
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	n (f) N	M ethod		(g)Depreciation deduction	
19a 3-year property	1	z, sea motivactions)					\dashv		
b 5-year property	1								
c 7 - year property									
d 10-year property									
e 15-year property									
f 20-year property									
g 25-year property			25 yrs			/L	\perp		
h Residential rental			27 5 yrs	MM		/L	\dashv		
property	1		27 5 yrs	MM	_	/L	_		
i Nonresidential real			39 yrs	MM		/L	_		
property	ion C—Accete Disc	ed in Service During 2009	 	MM The Alternativ		istion S			
20a Class life	- ASSETS Plac	ed in Service During 2009	o lax tear USING	ine Aiternativ		S/L	yste		
b 12-year	┥		12 yrs			5/L	+		
c 40-year	1		40 yrs	ММ		5/L	\dashv		
,	1	I		•	'	- / -	ı		
Non-Res Prop Type 1 cou Part IV Summa	unt 0 Non-Res Pr I ry (see Instruc		Res Prop Totals	s count 0					21 Listed p
22 Total. Add amounts fi	rom line 12, lines	•			21 Enter		22	24,793	·
23 For assets shown aborton of the basis a	·	_		23					

Part V

Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, programment, and property used for entertainment, programment, and property used for entertainment, and property used for entertainment.

property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense.

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciat	tion and	d Other Ir	ıforma	tion (C		: See	the i	nstruct	ions fo	r limi	ts foi	r pas	ssenge	er au	tomot	oiles.)
24a Do you have evidence to	support th	ne business/inv	estment u	ise claimed	d? ┌Yes	_Б П _{No}		24	lb If "Ye	s," is th	e evid	ence	written?	Гүе	sГN	D
Type of property (list Date	(b) placed in ervice	(c) Business/ investment use percentage	(d Cost or bas	rother	(busines	(e) r deprecia ss/investr se only)		(f) Recovery period	(g Meth Conve	od/		(h) eprecia deduct	ation/		(i) Electe section : cost	179
25Special depreciation allowance 50% in a qualified business u	· •		rty placed	ın service (during the	tax year	and u	sed more	than	25						
26 Property used more that	n 50% ın	n a qualified b	ousiness	use												
		%														
		%														
 27 Property used 50% or lo	ess in a d		INASS IIS	Δ												
27 1 Toperty used 50 % of the		%	111633 43						S/L -					$\overline{}$		
		%							S/L -							
		%							S/L -							
28 Add amounts in column	n (h), lıne	s 25 through	h 27 En	ter here a	and on li	ne 21, _l	page	1 .		28						
29 Add amounts in column	n (ı), lıne	26 Enter he	ere and o	n line 7,	page 1	•							29			
		Sec	tion B	—Infor	matior	ı on U	se o	f Veh	icles							
Complete this section for v																
If you provided vehicles to your	employees	, first answer th	ne questioi		_	Т		n excepti		npleting 		ection		_		£ \
30 Total business/investr	nent mile	s driven dur	ıng the	_	a) cle 1	Vehi	b) cle 2	V ₽	(c) hicle 3	v	(d) ehicle	ا 4	(e Vehic	-		f) icle 6
year (do not include co	mmuting	ı mıles) .	•	1 0111		1	<u> </u>	+ • •		- `		-	* 011110		1 0111	
31 Total commuting miles	driven d	uring the vea	ar.			1										
32 Total other personal(no						1										
·																
_			• •													
34 Was the vehicle availa	ble for pe	ersonal use		Yes	No	Yes	No	Yes	No	Ye	s I	No	Yes	No	Yes	No
during off-duty hours?																
35 Was the vehicle used powner or related person		by a more th	an 5%													
36 Is another vehicle avai	ılable for	personal use	e? .													
Section C	-Oues	tions for	Employ	vers W	ho Pro	vide \	/ehi	cles fo	or Use	bv T	heir	r En	volar	ees		1
Answer these questions to 5% owners or related perso	determir	ne ıf you mee	et an exc	•						-					not mo	re thai
37 Do you maintain a writt employees?				nibits all	persona	l use of	vehic	cles, inc	luding	commi	ıtıng,	bу у	our •	Y	es	No
38 Do you maintain a writt employees? See the in:				•												
39 Do you treat all use of	vehicles	by employee	s as per	sonal us	e? .											
40 Do you provide more the vehicles, and retain the				oyees, ol	btaın ınfo	ormatio •	n fror	n your e	mploye	es abo	ut th	e us	e of the	!		
41 Do you meet the requir				automobi	le demo	nstratio	n us	e? (See	ınstruc	tions)						
Note: If your answer to	37, 38,	39, 40, or 4	1 is "Yes	s," do not	t comple	te Sect	ion B	for the	covere	d vehi	les					
Part VI Amortizati	on															
		(b)						(4)		(e)				/ £\		
(a)		Date		(c A morti				(d) Code	A mo	ortizati	on		A mor	(f) tizatio	n for	
Description of costs		amortization	ו	amo				ection	1 '	eriod o				ns yea		
		begins			,				per	centa	je					
42 A mortization of costs t	nat begir	ns during you	ur ∠009	tax year	(see ins	truction	ıs)				- 1					
			\perp						\perp		\perp					
43 A mortization of costs t	hat bega	n before you	r 2009 t	ax year			•			4	3					567
44 Total. Add amounts in	column (f) See the in	structio	ns for wh	ere to re	port				4	4					567

TY 2009 Accounting Fees Schedule

Name: OBICI HEALTHCARE FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	39,175	0		39,175

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2009 Amortization Schedule

Name: OBICI HEALTHCARE FOUNDATION INC

Description of Amortized Expenses	Date Acquired, Completed, or Expended	Amount Amortized	Deduction for Prior Years	Amortization Method	Current Year Amortization	Net Investment Income	Adjusted Net Income	Total Amount of Amortization
SOFTWARE	2007-01-02	730	547	36 000000000000	183	0		730
SOFTWARE	2006-12-18	452	351	36 000000000000	101	0		452
SOFTWARE	2007-03-31	849	566	36 000000000000	283	0		849

Note: To capture the full content of this document, please select landscape mode (11" \times 8.5") when printing.

TY 2009 Depreciation Schedule

Name: OBICI HEALTHCARE FOUNDATION INC

		EIN: 5.	1-0249728						
Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
COMPUTER	2006-12-18	1,447	650	SL	5 00000000000	289	0		
COPIER	2006-12-18	6,100	2,745	SL	5 00000000000	1,220	0		
2 COMPUTER MONITORS	2006-12-18	3,423	1,541	SL	5 000000000000	685	0		
BROTHER LASER PRINTER	2006-12-18	707	317	SL	5 000000000000	141	0		
COMPUTER EQUIPMENT	2006-12-18	980	441	SL	5 000000000000	196	0		
3 COMPUTER/MONITOR	2007-01-02	5,308	2,389	SL	5 00000000000	1,062	0		
COMPUTER EQUIPMENT	2007-01-02	912	410	SL	5 00000000000	182	0		
PHONE SYSTEM	2007-01-19	2,939	910	SL	7 000000000000	420	0		
PHONES	2007-01-24	591	182	SL	7 000000000000	84	0		
PHONE VOICEMAIL	2007-02-14	2,601	805	SL	7 00000000000	372	0		
PRINTER	2007-02-15	657	285	SL	5 000000000000	131	0		
FURNITURE	2006-12-07	5,255	1,752	SL	7 000000000000	751	0		
Conference table & 8 chairs	2007-07-27	5,623	937	SL	7 000000000000	803	0		
Laptop computer	2007-04-23	1,344	515	SL	5 000000000000	269	0		
Projector	2007-04-23	1,302	500	SL	5 000000000000	260	0		
Gıft management software	2007-06-01	14,960	9,143	SL	3 0000000000000	4,987	0		
3 power point software	2007-06-01	595	363	SL	3 000000000000	198	0		
Avaya phone	2007-07-13	435	104	SL	5 00000000000	62	0		
adobe dreamweaver software	2007-08-20	1,065	592	SL	3 0000000000000	355	0		
Adobe creative suite design software	2007-09-21	837	419	SL	3 0000000000000	279	0		
Desktop computer	2008-08-06	2,066	310	SL	5 00000000000	413	0		
Microsoft office	2008-09-22	897	149	SL	3 000000000000	299	0		
File room system	2008-10-03	1,300	65	SL	2 000000000000	1,235	0		
2 leather mesh chairs	2008-08-04	713	68	SL	7 000000000000	102	0		
desk and file cabinet	2008-08-01	781	74	SL	7 000000000000	74	0		
land	2010-03-01	102,507		L		0	0		
land improvements	2010-03-01	349,632		SL	5 000000000000	1,513	0		
building	2010-03-01	1,594,184		SL	39 000000000000	4,829	0		
document manager software	2009-06-02	3,156		SL	3 0000000000000	877	0		
essential gifts software	2010-01-01	13,720		SL	36 000000000000	1,143	0		
building project summary	2010-03-01	52,195		SL	7 000000000000	527	0		
conference table	2010-03-01	1,750		SL	7 00000000000	21	0		
desk, file cabinet and bookcase	2009-12-14	3,386		SL	7 000000000000	63	0		
office chair	2010-01-01	362		SL	7 00000000000	13	0		
building project costs	2010-03-01	98,435		SL	10 0000000000000	938	0		

TY 2009 Investments Corporate Bonds Schedule

Name: OBICI HEALTHCARE FOUNDATION INC

Name of Bond	End of Year Book Value	End of Year Fair Market Value
Rıdgeworth FD Total Return BD	4,213,098	4,213,098
Pimco Global Bond Fund	939,298	939,298

TY 2009 Investments Corporate Stock Schedule

Name: OBICI HEALTHCARE FOUNDATION INC

Name of Stock	End of Year Book Value	End of Year Fair Market Value
Allegheny Technologies	278,049	278,049
Analog Devices Inc.	262,262	262,262
Apple Inc.	327,825	327,825
Avnet Inc.	316,500	316,500
Berkley W R Corp	306,558	306,558
Celgene Corp	305,153	305,153
Commscope Inc.	268,992	268,992
continental Resources Inc.	311,679	311,679
Crown Holdings Inc.	256,120	256,120
Dollar Thrifty Automotive Group	281,137	281,137
Elan PLC	286,524	286,524
EQT Corp	262,400	262,400
International Business Machs	256,500	256,500
Medtronic Inc	271,306	271,306
Ralcorp Holdings Inc.	277,898	277,898
Regal Entertainment Group	290,784	290,784
Republic Svcs	272,788	272,788
Southwestern Energy co	291,148	291,148
Teradata Corp Del	288,900	288,900
Teva Pharaceuticals Inds Ltd	266,513	266,513
Urban Outfitters, Inc	318,836	318,836
Vertex Pharmaceuticals, Inc.	290,177	290,177
Accuray, Inc.	142,645	142,645
BJ's Wholesale club Inc.	314,415	314,415
Brinker Intl Inc	264,136	264,136
Cabot Microelectronics Corp	245,895	245,895
Cal Dive Intl Inc	109,965	109,965
Calıfornıa Pızza Kıtchen, Inc.	75,555	75,555
Checkpoint Systems Inc	286,454	286,454
Constellation Brands	312,360	312,360

Name of Stock	End of Year Book Value	End of Year Fair Market Value
Cooper Cos Inc	194,400	194,400
Corn Products Intl Inc	190,630	190,630
Hanesbrands Inc.	180,830	180,830
Haynes Intl Inc.	326,485	326,485
International Flavors & Fragrances Inc	309,855	309,855
John Bean Technologies	175,400	175,400
Kansas City Southern	126,595	126,595
Kar Auction Svcs Inc	158,130	158,130
Live Nation Inc	304,500	304,500
Nalco Holding Co	243,300	243,300
NV Energy Inc	281,124	281,124
OGE Energy Corp	155,760	155,760
Petsmart Inc.	303,620	303,620
Tidewater Inc	274,166	274,166
Zebra Technologies Copr	266,400	266,400
FMI Large Cap	6,488,369	6,488,369
Pimco Commodity RealReturn Strategy	2,398,271	2,398,271

Т

TY 2009 Investments - Other Schedule

Name: OBICI HEALTHCARE FOUNDATION INC

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
Lighthouse Diversified Fund	FMV	0	0
The Torry International Offshore Fund	FMV	29,282	29,282
The Torry Development Offshore Fund	FMV	125,063	125,063
Cardınal Mıd-Cap Value Equity LP	FMV	5,563,574	5,563,574
Artio Inst. International Equity Fund	FMV	0	0
Highclere Internation Small Co Fund	FMV	5,365,585	5,365,585
Cedar Rock Capital Partners LLC	FMV	7,279,678	7,279,678
1607 Capital Partners	FMV	5,272,072	5,272,072
Bluestem Partners LP	FMV	6,771,459	6,771,459
Federal Street Partners	FMV	442,862	442,862
SR Global Fd Inc Emerging Mkt-1	FMV	3,967,081	3,967,081
Winston Hedged Equity	FMV	4,440,750	4,440,750
SR Phoenicia	FMV	2,762,999	2,762,999
Acacıa Inst. Partners	FMV	5,507,525	5,507,525
Alliance Bernstein	FMV	0	0
Redwood Offshore Fund LTD	FMV	3,950,728	3,950,728
Sanderson International Value Fund	FMV	5,226,251	5,226,251

TY 2009 Land, Etc. Schedule

Name: OBICI HEALTHCARE FOUNDATION INC

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
COMPUTER	1,447	939	508	0
COPIER	6,100	3,965	2,135	0
2 COMPUTER MONITORS	3,423	2,226	1,197	0
BROTHER LASER PRINTER	707	458	249	0
COMPUTER EQUIPMENT	980	637	343	0
3 COMPUTER/MONITOR	5,308	3,451	1,857	0
COMPUTER EQUIPMENT	912	592	320	0
PHONE SYSTEM	2,939	1,330	1,609	0
PHONES	591	266	325	0
PHONE VOICEMAIL	2,601	1,177	1,424	0
PRINTER	657	416	241	0
FURNITURE	5,255	2,503	2,752	0
SOFTWARE	730	730		0
SOFTWARE	452	452		0
SOFTWARE	849	849		0
Conference table & 8 chairs	5,623	1,740	3,883	0
Laptop computer	1,344	784	560	0
Projector	1,302	760	542	0
Gift management software	14,960	14,130	830	0
3 power point software	595	561	34	0
Avaya phone	435	166	269	0
adobe dreamweaver software	1,065	947	118	0
Adobe creative suite design software	837	698	139	0
Desktop computer	2,066	723	1,343	0
Microsoft office	897	448	449	0
File room system	1,300	1,300		0
2 leather mesh chairs	713	170	543	0
desk and file cabinet	781	148	633	0
land	102,507	0	102,507	0
land improvements	349,632	1,513	348,119	0
building	1,594,184	4,829	1,589,355	0
document manager software	3,156	877	2,279	0
essential gifts software	13,720	1,143	12,577	0
building project summary	52,195	527	51,668	0
conference table	1,750	21	1,729	0
desk, file cabinet and bookcase	3,386	63	3,323	0
office chair	362	13	349	0
building project costs	98,435	938	97,497	0

TY 2009 Legal Fees Schedule

Name: OBICI HEALTHCARE FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	16,039	0		16,039

DLN: 93491012006041

TY 2009 Other Assets Schedule

Name: OBICI HEALTHCARE FOUNDATION INC

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
ART COLLECTION	653,240	653,240	653,240
development costs	172,772	0	0
Accrued interest on investments	21,404	18,971	18,971
Deposits		27,500	27,500

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491012006041

TY 2009 Other Decreases Schedule

Name: OBICI HEALTHCARE FOUNDATION INC

Description	Amount
less adjustment for excise tax accrual	13,110

TY 2009 Other Expenses Schedule

Name: OBICI HEALTHCARE FOUNDATION INC

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES (SUNTRUST)	520,566	520,566		0
INVESTMENT FEES (PARTNERSHIPS)	339,472	339,472		0
INVESTMENT FEES (FOREIGN INVESTMENTS)	482,826	482,826		0
ADVERTISING	17,406	0		17,406
Maintenance agreements	4,991	0		4,991
CONSULTANT SERVICE	30,341	0		30,341
DUES AND SUBSCRIPTIONS	15,611	0		15,611
INSURANCE	10,809	0		10,809
OFFICE EXPENSES	10,461	0		10,461
TELEPHONE	5,488	0		5,488
Postage and shipping	2,018	0		2,018
A mortization	567	0		0

TY 2009 Other Income Schedule

Name: OBICI HEALTHCARE FOUNDATION INC

DLN: 93491012006041

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
Highclere International Investors	45,621	45,621	45,621
Bluestem Partners, LP	53,487	53,487	53,487
Bluestem Partners, LP	-341	-341	-341
A cacıa Inst	46,747	46,747	46,747
A cacıa Inst	341	341	341
1607 Capital International	102,036	102,036	102,036
Sanderson International	8,940	8,940	8,940
Julius Baer/Artio	-23,637	-23,637	-23,637

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491012006041

TY 2009 Other Increases Schedule

Name: OBICI HEALTHCARE FOUNDATION INC

Description	Amount
unrealized gain on investments	4,795,489
unrealized gain on partnership and foreign investments	20,473,415
Reversal of prior year accrual of contributions approved for future payment	3,406,794
nondeductible expenses from partnerships	7,963
accrual adjustment	1,854

TY 2009 Taxes Schedule

Name: OBICI HEALTHCARE FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	37,648	0		37,648
FEDERAL EXCISE TAX	1,986	0		0
other fees and taxes	726	0		726
foreign tax	38,372	0		0