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Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-1150

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2009 calendar year, or tax year beginning

, 2009, and ending

June 30, 2010

B Check if applicable:

- ☐ Address change
☐ Name change
☒ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite

12328 EX. STA. RD.

City or town, state or county, and ZIP +4

CLifton VA 20124

D Employer identification number

521394891

E Telephone number

703-830-1433

F Group Exemption Number

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting Method: ☐ Cash ☒ Accrual
Other (specify) ▶

I Website: ▶

J Tax-exempt status (check only one) -- ☒ 501(c) (3) (insert no.) ☐ 4947(a)(1) or ☐ 527H Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).K Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

1	Contributions, gifts, grants, and similar amounts received . . . See Schedule A	1	16,568
2	Program service revenue including government fees and contracts . . .	2	0
3	Membership dues and assessments . . .	3	21,624
4	Investment income . . . Div. Dec. & Investment . . . See Schedule C	4	3756
5a	Gross amount from sale of assets other than inventory . . .	5a	83,000
b	Less: cost or other basis and sales expenses . . . See Schedule D	5b	83,000
c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . .	5c	0
6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
a	Gross revenue (not including \$ of contributions reported on line 1) . . .	6a	46,062
b	Less: direct expenses other than fundraising expenses . . .	6b	19,738
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . . .	6c	26,324
7a	Gross sales of inventory, less returns and allowances . . .	7a	—
b	Less: cost of goods sold . . .	7b	—
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . .	7c	0
8	Other revenue (describe) ▶	8	0
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 . . .	9	68,272
10	Grants and similar amounts paid (attach schedule) . . .	10	30,000
11	Benefits paid to or for members . . .	11	0
12	Salaries, other compensation, and employee benefits . . .	12	0
13	Professional fees and other payments to independent contractors . . .	13	0
14	Occupancy, rent, utilities, and maintenance . . .	14	0
15	Printing, publications, postage, and shipping . . .	15	4,228
16	Other expenses (describe) ▶ LAB Inc, Website Corp Fee	16	2,729
17	Total expenses. Add lines 10 through 16 . . .	17	36,957
18	Excess or (deficit) for the year (Subtract line 17 from line 9) . . .	18	31,315
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . .	19	367,162
20	Other changes in net assets or fund balances (attach explanation) . . .	20	0
21	Net assets or fund balances at end of year. Combine lines 18 through 20 . . .	21	398,477

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments . . .	367,162	22 398,477
23 Land and buildings . . .	0	23 0
24 Other assets (describe) ▶	0	24 0
25 Total assets . . .	367,162	25 398,477
26 Total liabilities (describe) ▶	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21) . . .	367,162	27 398,477

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

Cat. No. 106421

Form **990-EZ** (2009)

SCANNED NOV 16 2010

99 12

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

What is the organization's primary exempt purpose? Provide Scholarship for Student Athletes
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)

28 1-17: Fifteen Scholarships were awarded to Students to Attend Colleges and Universities.

(Grants \$) If this amount includes foreign grants, check here ☐

28a 50,000

29

(Grants \$) If this amount includes foreign grants, check here ☐

29a

30

(Grants \$) If this amount includes foreign grants, check here ☐

30a

31 Other program services (attach schedule)

(Grants \$) If this amount includes foreign grants, check here ☐

31a

32 Total program service expenses (add lines 28a through 31a) ▶

32	30 000
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Part IV	List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)
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[illegible]

Part V Other Information (Note the statement requirements in the instructions for Part V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	X
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	X
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a		
b Did the organization file Form 1120-POL for this year?	37b	X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	X
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a	
b Gross receipts, included on line 9, for public use of club facilities	39b	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	X
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.	40e	X
41 List the states with which a copy of this return is filed. ▶ <u>NONE</u>		
42a The organization's books are in care of ▶ <u>BILL JACKSON</u> Telephone no. ▶ <u>703-830-1433</u> Located at ▶ <u>12326 FAIRVIEW STATION RD. CRESTVIEW, VA.</u> ZIP + 4 ▶ <u>2024-1630</u>		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	X
If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	X
If "Yes," enter the name of the foreign country: ▶		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 <u>NONE</u> ▶ <input type="checkbox"/>		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	X

Part VI

Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	<input checked="" type="checkbox"/>
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	<input checked="" type="checkbox"/>
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	<input checked="" type="checkbox"/>
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	<input checked="" type="checkbox"/>
b If "Yes," was the related organization a section 527 organization?	49b	<input checked="" type="checkbox"/>

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				

f Total number of other employees paid over \$100,000 None

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000 None

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: William E. Jackson Date: 10/21/2010

Type or print name and title: WILLIAM E. JACKSON TREASURER

Paid Preparer's Use Only

Preparer's signature: [Signature] Date: Check if self-employed: ☐

Firm's name (or yours if self-employed), address, and ZIP + 4: Preparer's identifying number (See instructions):

EIN: Phone no.:

May the IRS discuss this return with the preparer shown above? See instructions ☐ Yes ☐ No

Name of the organization

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public
Inspection

Employer identification number

52 139 489

Part I	Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
 - 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
 - 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
 - 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
 - 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
 - 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
 - 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
 - 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
 - 9 ☒ An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
 - 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
 - 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a ☐ Type I
 - b ☐ Type II
 - c ☐ Type III—Functionally integrated
 - d ☐ Type III—Other
 - e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).**
 - f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
 - g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

	Yes	No
11g(i)		<input checked="" type="checkbox"/>
11g(ii)		<input checked="" type="checkbox"/>
11g(iii)		<input checked="" type="checkbox"/>
 - (ii) A family member of a person described in (i) above?

11g(ii)		<input checked="" type="checkbox"/>
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 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

11g(iii)		<input checked="" type="checkbox"/>
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 - h Provide the following information about the supported organization(s).

[illegible]

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)
Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge			N/A			
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on			N/A			
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	18518	26975	28544	13248	15568	102853
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	44793	49815	47819	45424	46062	233913
3 Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
6 Total. Add lines 1 through 5	63311	76790	76363	58672	61630	
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0	0	0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0	0	0	0	0	0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support. (Subtract line 7c from line 6.)	63311	76790	76363	58672	61630	336766

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	63311	76790	76363	58672	61630	336766
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	0	0	0	0	0	0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
c Add lines 10a and 10b	0	0	0	0	0	0
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	0	0	0
13 Total support. (Add lines 9, 10c, 11, and 12.)	63311	76790	76363	58672	61630	336766
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	100	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	86	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17		%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	21	%

- 19a 33 1/3 % support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ► ☒
- b 33 1/3 % support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ► ☐

Schedule B

**NORTHERN VIRGINIA ATHLETIC DIRECTORS, ADMINISTRATORS
AND COACHES ASSOCIATION, INC.**

**SUPPORTING SCHEDULE FOR IRS FORM 990 EZ SCHEDULE A
Part IV-A, Line 27**

**Officers, Directors, and Chairman of the Scholarship
Endowment Fund for FY Ending 6/30/20098**

<u>Name</u>	<u>Dues</u>	<u>Gifts</u>	<u>Total</u>
Jim Wykoff	10		
George Keim	10		
Bill Jackson	10		
Fran Kibler	10		
Herb Holt	10		
Mike Engley	10		
Frank Ruth	10		
Jeff Wilson	10		
Doug McGuire	10		
Maryann Schwab	10		
Roy Brooks, Jr.	10		
Jim Ross	10		
Jerry Staska	10		
TOTALS	<u>\$130</u>	<u>\$737</u>	<u>\$867</u>

Account Trade Research Plan Tools Services Fund Messages My Consultant Enter Key Search
 Summary Balances Positions History Portfolio Analysis Transfers & Payments Message Center

History Schedule C-IRS Form 990EZ - Part 1 Line 4 FY 2010

Charity Non-Profit 2150-2000

Quick Links

Funds Available

Transactions Statements & Reports Realized Gain / Loss

Show Dividends & Interest Symbol (Optional) Select Date Range From To
 Custom Date Range 07/01/2009 06/30/2010

Dividends & Interest Transactions From 07/01/2009 To 06/30/2010 Up to 24 Months (period 24 months)

To Trade \$2,711.87
 To Withdraw \$2,711.87
 Cash On Hold \$0.00
 Settled Funds \$2,711.87

Date	Action	Qty	Symbol	Description	Price	Amount	Fees & Comm
06/29/2010			6337402	GEORGIA B & T NA 1.5% 10CD FDIC INS DUE 10/29/10		\$85.36	
06/22/2010			5333479	BANK OF AMERICA 1.7% 10CD FDIC INS DUE 10/22/10		\$142.94	
06/01/2010 as of 05/29/2010			6337402	GEORGIA B & T NA 1.5% 10CD FDIC INS DUE 10/29/10		\$82.60	
05/24/2010 as of 05/22/2010			5333479	BANK OF AMERICA 1.7% 10CD FDIC INS DUE 10/22/10		\$138.33	
04/29/2010			6337402	GEORGIA B & T NA 1.5% 10CD FDIC INS DUE 10/29/10		\$85.36	
04/22/2010			5333479	BANK OF AMERICA 1.7% 10CD FDIC INS DUE 10/22/10		\$142.94	
03/29/2010			6337402	GEORGIA B & T NA 1.5% 10CD FDIC INS DUE 10/29/10		\$79.85	
03/22/2010			5333479	BANK OF AMERICA 1.7% 10CD FDIC INS DUE 10/22/10		\$129.11	
03/01/2010 as of 02/28/2010			6337402	GEORGIA B & T NA 1.5% 10CD FDIC INS DUE 10/29/10		\$82.60	
02/22/2010			5333479	BANK OF AMERICA 1.7% 10CD FDIC INS DUE 10/22/10		\$142.94	
02/17/2010 as of 02/16/2010		0.0500	SWMXX	Schwab Money Market Fund type: ORD DIV			
01/29/2010			6337402	GEORGIA B & T NA 1.5% 10CD FDIC INS DUE 10/29/10		\$85.36	
01/22/2010			5333479	BANK OF AMERICA 1.7% 10CD FDIC INS DUE 10/22/10		\$142.94	
01/19/2010 as of 01/15/2010		0.2300	SWMXX	Schwab Money Market Fund type: ORD DIV			
12/31/2009		0.9000	SWMXX	Schwab Money Market Fund type: ORD DIV			
12/30/2009			YACKX	YACKTMAN FUND type: ST CAP GAIN REINV		\$246.78	
12/30/2009			YACKX	YACKTMAN FUND type: CASH DIVIDEND		\$262.26	
12/30/2009 Buy		15.0770	YACKX	YACKTMAN FUND type: REINVEST DIVIDEND	\$15.35000	-\$246.76	
12/30/2009 Buy		17.0850	YACKX	YACKTMAN FUND type: REINVEST DIVIDEND	\$15.35000	-\$262.26	

Schwab Brokerage Rates

CDs (FDIC-insured Banks)
 10-18 month CDs
 Rates up to 0.45% APY

Value Advantage Money Fund®
 (SWVXX)
 0.01% 7-Day Effective Yield
 0.01% 7-Day Yield

Dividend Reinvestment
 Dividend Reinvestment

Continued on Page 2

Time (ET)

3:42:39 PM

Schedule C Cont'd

12/29/2009	6337402	GEORGIA B & T NA 1.5% 10CD FDIC INS DUE 10/29/10	\$82.60
12/22/2009	5333479	BANK OF AMERICA 1.7% 10CD FDIC INS DUE 10/22/10	\$138.33
11/30/2009 as of 11/29/2009	6337402	GEORGIA B & T NA 1.5% 10CD FDIC INS DUE 10/29/10	\$85.36
11/23/2009 as of 11/22/2009	5333479	BANK OF AMERICA 1.7% 10CD FDIC INS DUE 10/22/10	\$142.94
11/17/2009 as of 11/16/2009	0 0800 SWMXX	SCHWAB MONEY MARKET FUND type ORD DIV	
11/13/2009 as of 11/06/2009	9746420	UNITED COMMERCE 1.6% 10CD FDIC INS RECEIVERSHIP	\$83.68
10/29/2009	6337402	GEORGIA B & T NA 1.5% 10CD FDIC INS DUE 10/29/10	\$82.60
10/22/2009	5333479	BANK OF AMERICA 1.7% 10CD FDIC INS DUE 10/22/10	\$138.33
10/19/2009 as of 10/17/2009	9746420	UNITED COMMERCE 1.6% 10CD FDIC INS DUE 10/15/10	\$109.15
09/29/2009	6337402	GEORGIA B & T NA 1.5% 10CD FDIC INS DUE 10/29/10	\$85.36
09/22/2009	5333479	BANK OF AMERICA 1.7% 10CD FDIC INS DUE 10/22/10	\$142.94
09/17/2009	9746420	UNITED COMMERCE 1.6% 10CD FDIC INS DUE 10/15/10	\$112.79
08/31/2009 as of 08/29/2009	6337402	GEORGIA B & T NA 1.5% 10CD FDIC INS DUE 10/29/10	\$85.36
08/24/2009 as of 08/22/2009	5333479	BANK OF AMERICA 1.7% 10CD FDIC INS DUE 10/22/10	\$142.94
08/17/2009	9746420	UNITED COMMERCE 1.6% 10CD FDIC INS DUE 10/15/10	\$112.79
07/29/2009	6337402	GEORGIA B & T NA 1.5% 10CD FDIC INS DUE 10/29/10	\$82.60
07/22/2009	5333479	BANK OF AMERICA 1.7% 10CD FDIC INS DUE 10/22/10	\$138.33
07/17/2009	9746420	UNITED COMMERCE 1.6% 10CD FDIC INS DUE 10/15/10	\$109.15

Subtotal \$3,216
Add AFCA Int. 540
Grand Total \$3,756

10007-7604

Brokerage Products. Not FDIC Insured • No Bank Guarantee • May Lose Value

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Bank sweep accounts are currently held at Charles Schwab Bank. Funds deposited at Schwab Bank are insured by the Federal Deposit Insurance Corporation (FDIC) for all insurable accounts except IRAs and certain other self-directed IRAs.

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11/15/10 11:54:53 NASDAQ 2,480.52 S&P 500 1,185.17 Russell 2000 709.16 Time (ET) 3:42:39 PM

Schedule D - IRS Form 990 E2 - Part 1 Line 5

FY 2010

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Select Date Range From To
 Custom Date Range 07/01/2009 06/30/2010 Search
 Reporting Period: 01 Jul, 2009 to 30 Jun, 2010

Symbol	Description	Cost Basis	Market Value	Unrealized Gain/Loss
Total		\$83,000.00	\$83,000.00	

Symbol	Description	Acquired	Cost Basis	Market Value	Unrealized Gain/Loss
UNITED COMMERCE 1 6% 10CD FDIC INS DUE 10/15/10 SAN FRANCISCO CA		11/06/2009	83,000	\$83,000.00	

ⓘ Total includes missing cost basis values for one or more lots. You can update missing cost basis values by using the Edit functionality—clicking on the Missing hyperlinks until reaching the Edit page.
 Data for this holding has been edited.

ⓘ The total Realized Gain/Loss for this account includes values for Short Positions held in the account. For more information on summary totals when there are Short Positions, please see the Help Section.
 N/A Not Available

Brokerage Products: Not FDIC Insured • No Bank Guarantee • May Lose Value

Time (ET)
 3:42:33 PM

NVADACA SCHOLARSHIP BREAKFAST

American Legion Hall, Vienna Virginia

June 1, 2010

Welcome - Doug McGuire, President

Pledge of Allegiance

Breakfast

Speaker: Randy Blanchetti - 1985 Scholarship Winner; Introduced by Jeff Wilson

Remarks: Mike Chuey

Presentation of Winners - Maryann Schwab

[illegible]