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Department of the Treasury

Internal Revenue Service

SCANNED MOV 9 & 7011

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.

2010

OMB No 1545-0052

For ca	ilen	dar year 2010, or tax yea	r beginning		- 	, and e	nding			-
G Ch	eck	all that apply:	Initial return		Initial return of a fo	rmer public (charity		Final re	eturn
			Amended return	1	X Address chang	ge		Name change		
Nam	e of	foundation						A Employer id	entifica	ation number
		GUILFORD E	TOUNDATI	ON				54-14	<u> 238</u>	73
Numt	oer a	nd street (or P O box number i	f mail is not deliver	ed to street	address)		Room/suite	B Telephone n		
		9030 STONY	POINT	PARK	WAY		460	804-3	<u> 23-</u>	9800
City	or to	own, state, and ZIP code						C If exemption ap	plication	n is pending, check here
L		RICHMOND,	VA 232	35						itions, check here
H Ct	ieck	type of organization;	X Section 50	1(c)(3) ex	kempt private foundation			2. Foreign orgi	anızatıor and atta	ns meeting the 85% test, ach computation
	Se	ction 4947(a)(1) nonexem	npt charitable tru	st 🔲	Other taxable private founda	ation		E If private fou	ndatioi	n status was terminated
I Fai	r ma	irket value of all assets at 6	end of year J	Account	ing method: X Cash	Acci	ual	under sectio	n 507(b)(1)(A), check here
(fro	m I	Part II, col. (c), line 16)		o	ther (specify)		·—·	F If the founda	tion is	in a 60-month termination
	_			rt I, colu	ımn (d) must be on cash l	basis.)		under sectio	n 507(b)(1)(B), check here
Pa	<u>rt I</u>	(The total of amounts in colunecessarily equal the amount	mns (b), (c), and (d)	may not	(a) Revenue and expenses per books		ivestment ome	(c) Adjust		(d) Disbursements for charitable purposes (cash basis only)
\Box	1	Contributions, gifts, gran						N/A		
	2	Check X If the foundation	, ,	h Sch B			· · · · · · · · · · · · · · · · · · ·			
	3	Interest on savings and temporals investments								
- !	4	Dividends and interest fro			276,138.	27	6,138.			STATEMENT 1
İ	5a	Gross rents								
	Ь	Net rental income or (loss)								
	6a	Net gain or (loss) from sale of	assets not on line 1	10	113,114.				<u> </u>	RECEIVED
Revenue	ь	Gross sales price for all assets on line 6a	1,527,9		•					1
<u>š</u>	7	Capital gain net income (from				11	3,114.		101	0.1.004
œ	8	Net short-term capital gai	ın						8	NOV 2 1 2011 S
	9	Income modifications								
	10a	Gross sales less returns and allowances							\top	OGDEN, UT
	b	Less Cost of goods sold								
İ	C	Gross profit or (loss)								
İ	11	Other income			111.		111.			STATEMENT 2
	12	Total. Add lines 1 throug	jh 11		389,363.	38	9,363.			
	13	Compensation of officers, dire	ectors, trustees, etc		0.		0			0.
	14	Other employee salaries a	and wages					<u> </u>		
_	15	Pension plans, employee	benefits							
enses	16a	Legal fees	STMI	: 3	200.		200	,		0.
bell	b	Accounting fees	STMI	_	75.		<u>75 </u>			0.
Ä	C	Other professional fees	STMI	: 5	525.		<u>525</u> .			0.
<u>×</u>	17	Interest			131.	<u> </u>	131			
	18	Taxes	STMI	3 6	4,665.		1,630	1		0.
nis	19	Depreciation and depletion	on							
Ę	20	Occupancy						 		
Ă	21	Travel, conferences, and								
au	22	Printing and publications		_	•	_		ļ		
ing	23	Other expenses	STMT	: 7	94,245.	9	4,245			0.
Operating	24	Total operating and adm				_				
ğ		expenses. Add lines 13 t			99,841.	9	6,806.			0.
		Contributions, gifts, gran			578,000.			ļ		578,000.
	26	Total expenses and disb	ursements.			_				FR0 000
\dashv		Add lines 24 and 25			677,841.	9	6,806	·		578,000.
	27	Subtract line 26 from line	2:		000 175					
ļ		Excess of revenue over exper			<288,478.		<u> </u>	<u> </u>		
		Net investment income (-)		29	2,557			
02350		Adjusted net income (if n				<u> </u>		N/A	<u> </u>	Form 990-PF (2010)
40.07	10	LHA For Paperwork R	teduction Act No	tice see	the instructions					Form 990-PF (2010)



Attached sched		Release Shoots Attached schedules and amounts in the description	Beginning of year		nd of year
[P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing	, ,		
	2	Savings and temporary cash investments	492,319.	809,44	3. 809,443.
	3	Accounts receivable ▶			
		Less; allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶	İ		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ĕ	10a	Investments - U.S. and state government obligations STMT 8	375,727.	150,75	0. 151,701.
	b	Investments - corporate stock STMT 9	6,018,284.	5,694,01	6. 7,435,874.
	c	Investments - corporate bonds STMT 10	2,259,401.	2,084,40	1. 2,214,839.
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 11	1,795,454.	1,916,24	2. 2,061,500.
	14	Land, buildings, and equipment basis ▶			
	1	Less accumulated depreciation			
	15	Other assets (describe			
	l				
_		Total assets (to be completed by all filers)	10,941,185.	<u>10,654,85</u>	2. <u>12,673,357.</u>
	17	Accounts payable and accrued expenses	<u></u>		_
	18	Grants payable			
es	19	Deferred revenue			
Ħ	1	Loans from officers, directors, trustees, and other disqualified persons			—
Liabilities	1	Mortgages and other notes payable			
	22	Other liabilities (describe)			
	22	Total liabilities (add lines 17 through 22)	0.		0.
_	23	Foundations that follow SFAS 117, check here	<u>U•</u>		••
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
Fund Balance	25	Temporarily restricted			
Bala	1	Permanently restricted			
힏	-	Foundations that do not follow SFAS 117, check here			
Ī		and complete lines 27 through 31.]
ō	27	Capital stock, trust principal, or current funds	10,941,185.	10,654,85	2.
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.		0.
As	29	Retained earnings, accumulated income, endowment, or other funds	0.		0.
ě	30	Total net assets or fund balances	10,941,185.	10,654,85	2.
_				<u> </u>	
_	31	Total liabilities and net assets/fund balances	10,941,185.	10,654,85	2.
P	art	Analysis of Changes in Net Assets or Fund Ba			
=					
1		net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
(must agree with end-of-year figure reported on prior year's return)					1 10,941,185.
		amount from Part I, line 27a			2 <288,478.>
		r increases not included in line 2 (itemize) BOOK/TAX ADd	JUSTMENT ON IN	IVESTMENTS	3 2,145.
		lines 1, 2, and 3			4 10,654,852.
		eases not included in line 2 (itemize)			5 0.
<u>6</u>	I otal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30		6 10,654,852.
					Form 990-PF (2010)

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

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Add lines 5 and 6

See the Part VI instructions.

Enter qualifying distributions from Part XII, line 4

570,4<u>63.</u>

<u>578,000.</u>

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Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	see ins	stru	ctio	ns)
`1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	1_			<u>2,9</u>	<u> 26.</u>
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			2,9	26.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			2,9	26.
6	Credits/Payments:					
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 4,760.					
b	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	7			4,7	<u>60.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				3.
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			1,8	31.
11	Enter the amount of line 10 to be: Credited to 2011 estimated tax	11				0.
Pa	art VII-A Statements Regarding Activities	•				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın			Yes	No
	any political campaign?		L	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		L	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or				
	distributed by the foundation in connection with the activities.					,
c	Did the foundation file Form 1120-POL for this year?		L	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0.					1
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ▶ \$ 0 .		İ			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		L	2		X
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o	Г				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A _	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		L	5		X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law				
	remain in the governing instrument?		Ļ	6_	_X_	
7	Did the foundation have at least \$5,000 in assets at any time during the year?		L	7_	_X_	
	If "Yes," complete Part II, col (c), and Part XV					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					1
	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)			ļ		
	of each state as required by General Instruction G? If "No," attach explanation		L	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar	[
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV		[_	9		_X_
10	Did any persons become substantial contributors during the tax year? If "Yes " attach a schedule listing their pages and addresses			10		x

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had not been removed from jeopardy before the first day of the tax year beginning in 2010?

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				,
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire			
any voter registration drive?		Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	•	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		☐ Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or		
the prevention of cruelty to children or animals?		☐ Ye	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b
Organizations relying on a current notice regarding disaster assistance check hi				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined		
expenditure responsibility for the grant?		[/A □ Ye	s No	
If "Yes," attach the statement required by Regulations section 53.4945				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	• •			
a personal benefit contract?	ay promiums on	☐ Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?	٠, رــــ		6b X
If "Yes" to 6b, file Form 8870.	orsonal bonont contract:		<u> </u>	1 22
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	□ v _e	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Information About Officers Directors Trust		nagers Highly		70 1
Part VIII Paid Employees, and Contractors	oo, i odiladiloli ivid	inagers, mgm	•	
List all officers, directors, trustees, foundation managers and their	compensation.	 		
, , , , , , , , , , , , , , , , , , ,	.	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
	to position	enter -o-y	compensation	unovanoco
SEE STATEMENT 12		0.	0.	
DEL STATEMENT 12		•		<u> </u>
Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	ontor "NONE "		
Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	(a) Expense
(a) Name and address of each employee paid more than \$50,000	` 'hours per week "	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	devoted to position		compensation	allowances
NONE				
			_	
Total number of other employees paid over \$50,000				0
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		<u> </u>
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All other program-related investments. See instructions.

Total. Add lines 1 through 3

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P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	10,808,244.
b	Average of monthly cash balances	1b	1,133,058.
C	Fair market value of all other assets	1c	<u> </u>
đ	Total (add lines 1a, b, and c)	1d	11,941,302.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	11,941,302.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	179,120.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	11,762,182.
6	Minimum investment return. Enter 5% of line 5	6	588,109.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	588,109.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	2,926.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	585,183.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	585,183.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	585,183.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		===
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	578,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	578,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	2,926.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	575,074.
	Note The amount on line 6 will be used in Part V. column (b) in subsequent years when calculating whether the foundation (malifies fo	r the section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,			·- ·- ·-	
line 7				585,183.
2 Undistributed income, if any, as of the end of 2010				000,2001
a Enter amount for 2009 only			0.	
b Total for prior years:	-			
		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006				
c From 2007 1,883.				
d From 2008				
e From 2009				
f Total of lines 3a through e	1,883.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$ 578,000.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				578,000.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2010	1,883.			1,883.
(If an amount appears in column (d), the same amount must be shown in column (a))	1,003.			1,005.
6 Enter the net total of each column as indicated below:	_			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line		<u> </u>		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract	1,1,1,0			
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				5,300.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.			-· ·	
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010	İ			
				Form 990-PF (2010)

	D FOUNDATIO		A ====================================		423873 Page 10
Part XIV Private Operating Fo	•		-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for		=	. ▶ └┌-	7	
b Check box to indicate whether the found	•	ng toundation described i		4942(j)(3) or	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(b) 2000	Prior 3 years	(d) 2007	- (a) Total
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(0) 2007	(e) Total
investment return from Part X for					
each year listed		_			
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed			<u> </u>		
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:					
a "Assets" alternative test - enter:					
(1) Value of all assets	_				
(2) Value of assets qualifying		1			
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed		<u></u>			
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public		·			
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					-
an exempt organization					
(4) Gross investment income		·			
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundatio	n had \$5,000 or n	nore in assets
at any time during t				. ,	
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh	-	than 2% of the total cont	ributions received by th	ne foundation before the c	lose of any tax
year (but only if they have contributed n	nore than \$5,000). (See s	section 507(d)(2).)	•		
SEE STATEMENT 13					
b List any managers of the foundation wh			or an equally large por	tion of the ownership of a	partnership or
other entity) of which the foundation has	s a 10% or greater intere	st.			
NONE					
2 Information Regarding Contributi					
Check here 🕨 🗶 if the foundation o					
the foundation makes gifts, grants, etc.	(see instructions) to indi	viduals or organizations u	nder other conditions,	complete items 2a, b, c, a	nd d.
a The name, address, and telephone num	ber of the person to who	m applications should be	addressed:		
b The form in which applications should b	e submitted and informa	tion and materials they sl	rould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields,	kinds of institutions, or	r other factors:	
					Form 000 - DE (2010)
000004 40 07 40					LOSSON SALLEY I. LUIL (CONTACT)

N Country and Contain the Parish Design the				T
3 Grants and Contributions Paid During the Recipient	If recipient is an individual		· -	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		-
a Paid during the year				
GDD GD3 DD3 CD3 D 1 4				
SEE STATEMENT 14			L	F70 000
Total b Approved for future payment	.		<u>▶ 3a</u>	578,000.
b Approved for fature payment				
NONE				-
				ĺ
Total			▶ 3b	0.
023611 12-07-10			F	orm 990-PF (2010)

nter gross amounts unless otherwise indicated.	Unrelated t	ousiness income		y section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
Program service revenue: a	code	741104111	code	Amount	Tunction income
b	_				
d		<u>.</u>			.
f					
g Fees and contracts from government agencies					
Membership dues and assessments Interest on savings and temporary cash					
investments					
Dividends and interest from securities			14	276,138.	
Net rental income or (loss) from real estate:					
a Debt-financed propertyb Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income			14	111.	
Gain or (loss) from sales of assets other than inventory			18	113,114.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a					
b		<u> </u>			
c	_				
d	_				
e					
2 Subtotal. Add columns (b), (d), and (e)			0.	389,363.	
3 Total. Add line 12, columns (b), (d), and (e)				13	389,36

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

-	
000001	

							l			
	+-			· · · · — · · ·			 			
									 	
							L			
2a Is th	ne fou	ndation directly or indirect	tly affiliated with, or	related to, one	or more tax-exem	pt organiza	tions described			
ın s	ection	501(c) of the Code (other	r than section 501(c)(3)) or in sect	ion 527?				Yes	X No
		omplete the following sch	•	,, <i>,,</i>						
	00, 0	(a) Name of org			(b) Type of organ	nization		(c) Description of	of relationship	
		N/A	/		(-) -)			(0)	· · · · · · · · · · · · · · · · · · ·	
		N/W								
									_	
		er penalties of perjury, I declare							edge and belief, it is true	, correct,
Sign	and	complete, Declaration of prepa	arer (other than taxpayer	or fiduciary) is ba	ased on all information	of which pre	eparer has any knov	wledge		
Here	L		$M \wedge M$		1) (115/2	oil . P	XEUNIZ (MATTER	
11010		Constant of officer or true	votes		111	1010				
		Signature of officer or tru				ate	<u> </u>	Title	, la=	
		Print/Type preparer's na	ame	Preparer's si	gnature		Date		If PTIN	
				77	7	_	1 1	self- employed		
Paid		THOMAS M)	DENSONTH		/Densi	AL .	11/14/11		1 P004	43600
Prepa	arer	Firm's name ► KEI		IFNC HII	REAVES	D Firm's FIN		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Use C			IBK, OIBII	11110,110	NOI, OMNI	u 511	KERVED,	1111113211		
036 (Zi ii y		0 502 20	20.00				-		
		Firm's address ▶ P.								
		<u> </u>	CHMOND, V	<u>7A 2329</u>	<u>4-2066</u>			Phone no.	<u>(804)747-</u>	<u>-0000</u>

023622 04-26-1

Part IV Capital Gains and Losses for Tax on Investment Income										
	i describe the kind(s) of property sol rick warehouse; or common stock, 2	(b) How acquired P - Purchase D - Donation	(c) Date acquired (d) Date sold (mo., day, yr.)							
1a AXIOM ASIA PRI		VARIOUS VARIOUS								
b AXIOM ASIA PRI	VATE CAPITAL FUN	DII	_	VARIOUS VARIOUS						
c 800 SHARES CAT	ERPILLAR			10/15/0902/12/10						
d 300 SHARES COL	GATE-PALMOLIVE			03/26/0902/04/10						
	HARES DOW JONES	SELECT		03/13/0902/04/10						
	HARES MSCI EMERG			05/18/0902/05/10						
g 150 SHARES QIM				06/01/0905/01/10						
h 175,000 SHARES				06/09/0906/03/10						
	CTON DICKINSON			VARIOUS 02/04/10						
2000 SHARES CA				02/12/0702/12/10						
	-	EERS REALTY		10/01/0802/04/10						
1 700 SHARES PEP				05/13/0402/04/10						
	XAIR INCORPORATE	D		05/13/0911/09/10						
n 146.624 SHARES		-		02/27/0904/01/10						
o 3.376 SHARES O				02/27/0905/01/10						
	(f) Depreciation allowed	(g) Cost or other basis		Gain or (loss)						
(e) Gross sales price	(or allowable)	plus expense of sale		plus (f) minus (g)						
a 1,535.		_		1,535.						
b 2,527.				2,527.						
c 44,157.		43,327.		830.						
d 24,007.		17,925.		6,082.						
e 131,875.		91,344.		40,531.						
f 297,453.		250,800.		46,653.						
g 141,163.		150,000.	<8,837.>							
h 194,648.		175,000.		19,648.						
90,286.		43,316.		46,970.						
110,392.		129,800.		<u> </u>						
k 83,510.		127,149.		<43,639.>						
1 42,041.		37,139.	4,902.							
m 65,090.		49,016.		16,074.						
n 145,000.		146,624.		<1,62 4. >						
<u>o 3,177.</u>		3,376.		<u> </u>						
Complete only for assets shown	ng gain in column (h) and owned by	the foundation on 12/31/69		sses (from col. (h))						
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		of col. (h) gain over col. (k), not less than "-0-")						
a			···· -	1,535.						
b				2,527.						
<u>c</u>				830.						
d				6,082.						
e				40,531.						
f				46,653.						
g				<8,837.>						
h				19,648.						
1			•	46,970.						
1				<19,408.>						
k			_	<43,639.>						
T		-		4,902.						
m				16,074.						
n				<1,624.>						
0				<199.>						
<u> </u>	<u> </u>		1	<u> </u>						
2 Capital gain net income or (net ca	apıtal loss) { if gain, also enter if (loss), enter "-C	r in Part I, line 7)-" in Part I, line 7	.							
	ss) as defined in sections 1222(5) an	nd (6):								
If gain, also enter in Part I, line 8,		}								
If (loss), enter "-0-" in Part I, line	8		<u> </u>							

Part (V Capital Gains and Lo	sses for Tax on Investment Income				
	(a) List and 2-story bi	describe the kind(s) of property solorick warehouse; or common stock, 20	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 75	,000 SHARES	D - Donation	09/22/09	09/28/10		
	,000 SHARES			09/29/10		
	PITAL GAINS		·		,	
d						
е						
f						
_g						
_h			·			
_1						
						_
<u>k</u>						
	-					
<u>m</u>	-					
<u>n</u>						<u> </u>
0 ((e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) Dlus (f) minus (g)	<u> </u>
	75 000	(Or allowable)		(6)	nos (i) inilius (g)	
<u>a</u> b	75,000. 75,000.		75,000. 75,000.			<u> </u>
	1,069.		75,000.			1,069.
d d	1,009.					1,009.
					-	
k						
1						.
<u>m</u>						
n						
O Com	nlete only for accets chown	 ng gain in column (h) and owned by t	the foundation on 12/31/60		and (fram and (h))	
	F.M.V. as of 12/31/69	(j) Adjusted basis	(k) Excess of col. (ı)	Gains (excess	sses (from col. (h)) of col. (h) gaın ove ıot less than "-0-")	r col. (k),
(1)	F.IVI.V. 45 UI 12/3 I/09	as of 12/31/69	over col. (j), if any			
<u>a</u>				·		0.
<u>b</u>						0.
<u>c</u>						1,069.
d e						
f						.
9						
h						
ī						
J						
k						
1						
m	<u> </u>					
<u>n</u>						
0						
2 Capita	al gain net income or (net ca	apital loss) { If gain, also enter If (loss), enter "-0	in Part I, line 7 -" in Part I, line 7	2		113,114.
	nort-term capital gain or (lo n, also enter in Part I, line 8,	ss) as defined in sections 1222(5) an				
If (los	s), enter "-0-" in Part I, line	8	J	3	N/A	

FORM 990-PF DIVIDENI	OS AND	INTER	EST FR	OM SEC	URITIES	STATEMENT	1
SOURCE		GROSS	AMOUN		PITAL GAINS DIVIDENDS	COLUMN (A	.)
NORTHERN TRUST	•		277,20	7.	1,069.	276,1	38.
TOTAL TO FM 990-PF, PART I, I	LN 4		277,20	7.	1,069.	276,1	38.
FORM 990-PF	0	THER I	NCOME			STATEMENT	2
DESCRIPTION			(A) REVEN PER BO	UE	(B) NET INVEST- MENT INCOME	(C) ADJUSTE NET INCO	
AXIOM ASIA PRIVATE CAP FUND I	K-1			111.	111.	•	
TOTAL TO FORM 990-PF, PART I	, LINE	11		111.	111	•	
FORM 990-PF		LEGAL	FEES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM		
LEGAL FEES		200.		200	•		0.
TO FM 990-PF, PG 1, LN 16A		200.		200	•		0.
FORM 990-PF	AC	COUNTI	NG FEE	S		STATEMENT	4
DESCRIPTION	EXPE	A) NSES BOOKS	NET I	B) NVEST- INCOME		(D) CHARITA E PURPOS	
ACCOUNTING FEES		75.		75	•	_	0.
TO FORM 990-PF, PG 1, LN 16B		75.		75	_		0.

FORM 990-PF (OTHER PROFES	SIONAL FEES	S'	TATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABI PURPOSES	
PROFESSIONAL FEES	525.	525.		(0.
TO FORM 990-PF, PG 1, LN 16C	525.	525.			0. —
FORM 990-PF	TAX	ES	S	TATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABI PURPOSES	
AXIOM ASIA PRIVATE CAP FUND - FOREIGN TAXES PAID NORTHERN TRUST - FOREIGN	2.	2.		(0.
TAXES PAID EXCISE TAXES PAID	1,628. 3,035.	1,628. 0.			0.
TO FORM 990-PF, PG 1, LN 18	4,665.	1,630.			0.
FORM 990-PF	OTHER EXPENSES		S	TATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABI PURPOSES	
ANNUAL REGISTRATION FEE TO VIRGINIA SUNTRUST BANK - CUSTODY FEES GUILFORD COMPANY MANAGEMENT	25. 3,933.				D.
FEES NORTHERN TRUST CUSTODY FEES ASSOCIATION DUES INSURANCE	71,386. 10,893. 495. 725.	10,893. 495.		(0.
AXIOM ASIA PRIVATE CAP FUND K-1 - PORTFOLIO EXPENSES MEALS & ENTERTAINMENT OTHER EXPENSES	6,564. 209. 15.	209.		(0.
TO FORM 990-PF, PG 1, LN 23	94,245.	94,245.		(0.

FORM 990-PF U.S. AND STATE/C	ITY GOVERNMENT	OBLIGATIONS	STATEMENT 8
DESCRIPTION	U.S. OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
US GOVERNMENT OBLIGATIONS	<u>x</u>	150,750.	151,701.
TOTAL U.S. GOVERNMENT OBLIGATIONS	•	150,750.	151,701.
TOTAL STATE AND MUNICIPAL GOVERNMENT	r OBLIGATIONS		
TOTAL TO FORM 990-PF, PART II, LINE	10A	150,750.	151,701.
FORM 990-PF COR	PORATE STOCK		STATEMENT 9
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCKS		5,694,016.	7,435,874.
TOTAL TO FORM 990-PF, PART II, LINE	10B	5,694,016.	7,435,874.
FORM 990-PF COR	PORATE BONDS		STATEMENT 10
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE OBLIGATIONS	•	2,084,401.	2,214,839.
TOTAL TO FORM 990-PF, PART II, LINE	10C	2,084,401.	2,214,839.
FORM 990-PF OTHER	R INVESTMENTS		STATEMENT 11
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
HEDGE FUND	COST	1,865,319.	1,992,940.
INVESTMENT IN AXIOM ASIA PRIVATE CAPITAL FUND II LP	COST	50,923.	68,560.
TOTAL TO FORM 990-PF, PART II, LINE	13	1,916,242.	2,061,500.

		OF OFFICERS, D		STATI	EMENT 12
NAME AND ADDRESS		TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
ANNETTE S. KIRBY P. O. BOX 13439 RICHMOND, VA 23225		VICE PRESIDENT 2.00	/DIRECTOR 0.	0.	0.
WADE H. O. KIRBY P. O. BOX 13439 RICHMOND, VA 23225		DIRECTOR 2.00	0.	0.	0.
JAMES P. FLORE P. O. BOX 13439 RICHMOND, VA 23225		DIRECTOR 2.00	0.	0.	0.
LINDA T. KIRBY P. O. BOX 13439 RICHMOND, VA 23225		DIRECTOR 2.00	0.	0.	0.
ALEXANDRA LOUISE KIRBY P. O. BOX 13439 RICHMOND, VA 23225		DIRECTOR 2.00	0.	0.	0.
JAMES R. LANDRIGAN P. O. BOX 13439 RICHMOND, VA 23225		SECRETARY/DIRE 2.00	CTOR 0.	0.	0.
ROGER H. W. KIRBY P. O. BOX 13439 RICHMOND, VA 23225		PRESIDENT/DIRE 2.00	CTOR 0.	0.	0.
FRANK C. PAGE P. O. BOX 13439 RICHMOND, VA 23225		EXECUTIVE DIRE 10.00	CTOR 0.	0.	0.
L.JAMES BORGES P. O. BOX 13439 RICHMOND, VA 23225		DIRECTOR 2.00	0.	0.	0.
TOTALS INCLUDED ON 990	PF, PAGE 6	, PART VIII	0.	0.	0.

	Y XV - LINE 1A COUNDATION MANAGERS	STATI	EMENT 13
NAME OF MANAGER			
ANNETTE S. KIRBY WADE H. O. KIRBY ROGER H. W. KIRBY			
	AND CONTRIBUTIONS DURING THE YEAR	STATI	EMENT 14
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
CENTERSTAGE FOUNDATION 111 VIRGINIA STREET, SUITE 402 RICHMOND, VA 23219	NONE ENDOWMENT	501(C)(3)	75,000.
IDA CASON CALLAWAY FOUNDATION P.O. BOX 2000 PINE MOUNTAIN, GA 31822	NONE ENDOWMENT	501(C)(3)	50,000.
JAMES RIVER ASSOCIATION P.O. BOX 909 MECHANICSVILLE, VA 23111	NONE EDUCATION	501(C)(3)	50,000.
JUVENILE DIABETES RESEARCH FOUNDATION, INTL 26 BROADWAY, 14TH FLOOR NEW YORK, NY 10004	NONE ARTIFICIAL PANCREAS PROJECT	501(C)(3)	31,000.
KIRBY EPISCOPAL HOUSE 381 SUNSET ROAD, GLEN SUMMIT MOUNTAIN TOP, PA 18707	NONE BUILDING MAINTENANCE	501(C)(3)	30,000.
MEDIA RESEARCH CENTER 325 SOUTH PATRICK STREET	NONE GENERAL SUPPORT	501(C)(3)	20,000.

ALEXANDRIA, VA 22314

20

GUILFORD FOUNDATION	•	•	54-1423873
MORRIS MUSEUM 6 NORMANDY HEIGHTS ROAD MORRISTOWN, NJ 07960	NONE OUTREACH TRANSPORTATION	501(C)(3)	5,650.
MORRIS MUSEUM 6 NORMANDY HEIGHTS ROAD MORRISTOWN, NJ 07960	NONE ENDOWMENT	501(C)(3)	59,350.
PROJECT HEALING WATER FLYFISHING P.O. BOX 695 LA PLATA, MD 20646	NONE RECREATIONAL THERAPY/VETERANS	501(C)(3)	15,000.
RITCHIE MEMORIAL EPISCOPAL CHURCH P.O. BOX 27 CLAREMONT, VA 23899	NONE BUILDING MAINTENANCE	501(C)(3)	7,000.
RUSSIAN IMPERIAL UNION ORDER 611-D WILLOW LANE WHITING, NJ 08759	NONE GENERAL SUPPORT	501(C)(3)	5,000.
THE CONFEDERATE HOME 62 BROAD STREET CHARLESTON, SC 29401	NONE BUILDING MAINTENANCE	501(C)(3)	15,000.
THE DOE FUND 232 EAST 84TH STREET NEW YORK, NY 10028	NONE DRIVER TRAINING PROGRAM	501(C)(3)	15,000.
CENTER IN THE SQUARE ONE MARKET SQUARE, 5TH FLOOR ROANOKE, VA 24011	NONE CAPITAL CAMPAIGN	501(C)(3)	15,000.
DEIDRE'S HOUSE 8 COURT STREET MORRISTOWN, NJ 07960	NONE CLINICAL THERAPY	501(C)(3)	30,000.
THE MONTPELIER FOUNDATION PO BOX 911 ORANGE, VA 22960	NONE EDUCATOR SCHOLARSHIPS	501(C)(3)	25,000.

GUILFORD FOUNDATION	•	•	54-1423873
NATIONAL KIDNEY FOUNDATION 1742 E. PARHAM ROAD RICHMOND, VA 23228		501(C)(3)	20,000.
SONS OF CONFEDERATE VETERANS 2720 RETTIG ROAD RICHMOND, VA 23225	NONE CEMETERY REPAIR	501(C)(3)	10,000.
THE RICE MUSEUM PO BOX 902 GEORGETOWN, SC 29442	NONE GENERAL SUPPORT	501(C)(3)	5,000.
BOYS AND GIRLS CLUBS OF METRO RICHMOND 5511 STAPLES MILL ROAD, #301 RICHMOND, VA 23228	NONE GENERAL SUPPORT	501(C)(3)	10,000.
MILL MOUNTAIN ZOO PO BOX 13484 ROANOKE, VA 23034	NONE HIBERNATION FUND	501(C)(3)	5,000.
PROJECT ACORN PO BOX 86 MORRIS PLAINS, NJ 07950	NONE GENERAL SUPPORT	501(C)(3)	15,000.
TIDEWATER ACADEMY PO BOX 536 WAKEFIELD, VA 23888	NONE ANNUAL FUND	501(C)(3)	5,000.
TOWN OF CLAREMONT PO BOX 310 CLAREMONT, VA 23899	NONE ROOF REPAIR	501(C)(3)	25,000.
VIRGINIA INSTITUTE OF PUBLIC POLICY 282 BALD ROCK ROAD VERONA, VA 24482	NONE GENERAL SUPPORT	501(C)(3)	10,000.
INSTITUTE FOR HERALDIC AND GENEALOGICAL STUDIES NORTHGATE, CANTERBURY, KENT CT 1 1BA ENGLAND	NONE GENERAL SUPPORT	501(C)(3)	15,000.

GUILFORD FOUNDATION

54-1423873

ALL SAINTS' CHURCH

ENGLAND

WARHAM HOUSE, NORFOLK NR 23 1 NG BUILDING & GROUNDS

NONE MAINTENANCE 501(C)(3)

10,000.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

578,000.

Form 8868 (Rev. 1-2011)		_			Page	
If you are filing for an Additional (Not Automatic) 3-Month E	Extension, o	complete only Part II and check this I	oox .	•	▶ X	
Note. Only complete Part II if you have already been granted an	automatic	3-month extension on a previously file	d Form	8868.		
 If you are filing for an Automatic 3-Month Extension, compl 						
Part II Additional (Not Automatic) 3-Month	Extensio	n of Time. Only file the original (no	copies r	reeded).		
Type or Name of exempt organization	ype or Name of exempt organization Employer identification n					
GUILFORD FOUNDATION 54-1423873						
File by the extended Number, street, and room or suite no. If a P.O. box,	see instruc	tions.				
due date for 9030 STONY POINT PARKWAY. N						
return See City, town or post office, state, and ZIP code. For a						
INSTRUCTIONS RICHMOND, VA 23235	Ū					
		•				
Enter the Return code for the return that this application is for (f	file a separa	te application for each return)			0 4	
Application	Return	Application			Return	
ls For	Code	Is For			Code	
Form 990	01					
Form 990-BL	02	Form 1041-A			08	
Form 990-EZ	03	Form 4720			09	
Form 990-PF	04	Form 5227			10	
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990-T (trust other than above)	06	Form 8870			12	
STOP! Do not complete Part II if you were not already grante	ed an autor	natic 3-month extension on a previo	usly file	d Form 88	68.	
FRANK PAGE						
 The books are in the care of	<u> 39 - R</u>	ICHMOND, VA 23225				
Telephone No ► 804-323-9800		FAX No. 🕨				
 If the organization does not have an office or place of busine 		-			▶ □	
 If this is for a Group Return, enter the organization's four digit 	t Group Exe	emption Number (GEN) If t	this is fo	r the whole	group, check this	
box 🕨 💹 . If it is for part of the group, check this box 🕨 🗀			ıll memb	ers the ext	ension is for	
4 I request an additional 3-month extension of time until	NOVEM	BER 15, 2011.				
5 For calendar year 2010 , or other tax year beginning		, and ending				
6 If the tax year entered in line 5 is for less than 12 months,	check reas	on: Initial return	_ Fınal ı	eturn		
Change in accounting period						
7 State in detail why you need the extension						
ADDITIONAL TIME IS REQUIRED T		HER THE NECESSARY I	<u>NFOR</u>	MATIO	N TO FILE	
A COMPLETE AND ACCURATE RETUR	RN.					
		· · · · · - · -				
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720), or 6069, e	inter the tentative tax, less any			•	
nonrefundable credits See instructions			8a	\$	0	
b If this application is for Form 990-PF, 990-T, 4720, or 6069	=					
tax payments made. Include any prior year overpayment	allowed as a	a credit and any amount paid			1 705	
previously with Form 8868.			8b	_\$	1,725	
c Balance due. Subtract line 8b from line 8a. Include your p	· -	th this form, if required, by using			0	
EFTPS (Electronic Federal Tax Payment System) See ins		ad Varification	8c	\$	0	
		nd Verification			dd_ (/	
Under penalties of perjury, I declare that I have examined this form, incluit is true, correct, and complete, and that I am authorized to prepare this	uding accomp form.	panying scredules and statements, and to t	ine dest c	r my knowle	age and belief,	
			n			
Signature ► Title ►	•		Date		0000 (Dr. + 001)	
				Form	8868 (Rev. 1-2011	

023842 01-24-11

Form 8868

(Rev. January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 1-2011)

• If you	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			X
• If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of this	form).	•	
Do not	complete Part II unless you have already been granted a	an automa	atic 3-month extension on a previously fi	led Fo	rm 8868.	
Electro	nic filing (e-file). You can electronically file Form 8868 if	you need a	a 3-month automatic extension of time t	o file (6 months for a corp	oration
required	l to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically file F	orm 8	868 to request an ex	xtension
of time t	to file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for Tran	sfers .	Associated With Ce	rtain
Persona	al Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details on t	he ele	ctronic filing of this f	orm,
visit ww	w.irs gov/efile and click on e-file for Charities & Nonprofits	i.			•	
Part	Automatic 3-Month Extension of Time	Only su	ibmit original (no copies needed).			
A corpo	ration required to file Form 990-T and requesting an autor			nplete		
Part I or	nty					
All other	corporations (including 1120-C filers), partnerships, REM			exter	sion of time	
to file in	come tax returns.					
Type or	Name of exempt organization			Emp	loyer identification	number
print				1	•	
	GUILFORD FOUNDATION			5	4-1423873	
File by the due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.			
filing your return. See	P. O. BOX 13439					
instruction		oreign add	Iress, see instructions.			
	RICHMOND, VA 23225-8439	J	•			
Enter th	e Return code for the return that this application is for (file	a separa	te application for each return)	· • • •		0 4
Applica	tion	Return	Application			Return
Is For		Code	Is For			Code
Form 99	0	01	Form 990-T (corporation)			07
Form 99		02	Form 1041-A		• • • • • • • • • • • • • • • • • • • •	08
Form 99		03	Form 4720			09
Form 99		04	Form 5227			10
	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	0-T (trust other than above)	06	Form 8870			12
. 0 00	FRANK PAGE	. 00	1011110070			1
• The h	ooks are in the care of P. O. BOX 13439	9 - R	TCHMOND, VA 23225			
	hone No. ► 804-323-9800		FAX No. ►			
-	organization does not have an office or place of business	in tha Lir				
	is for a Group Return, enter the organization's four digit					hook this
box 🕨	. If it is for part of the group, check this box	aroup Exe	ch a list with the names and FIMs of all	s is iu	om the extension is	for
	equest an automatic 3-month (6 months for a corporation				ers trie exterision is	101.
• • • • • • • • • • • • • • • • • • • •	AUGUST 15, 2011 , to file the exemp				The extension	
ie	for the organization's return for:	t Organiza	don return for the organization named a	DOVE.	THE EXTENSION	
	X calendar year 2010 or					
	tax year beginning		d anding			
	tax year beginning	, an	d ending		- '	
0 164	he tax year entered in line 1 is for less than 12 months, c		ani Dinatal saks		_	
2 If t	······································	neck reas	on: L Initial return L Fina	l retur	n	
L	Change in accounting period					
0- "	his and attended to the Company of t	0000				
	his application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any			Λ
_	nrefundable credits. See instructions.			3a	\$	0.
	his application is for Form 990-PF, 990-T, 4720, or 6069,	-				725
	timated tax payments made. Include any prior year overp			3b	\$ <u>1</u>	,725.
	lance due. Subtract line 3b from line 3a. Include your pa	-	-			^
	using EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.
Caution.	. If you are going to make an electronic fund withdrawal v	vith this Fo	orm 8868, see Form 8453-FO and Form	8879.	FO for navment inst.	aictions

For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2011)							
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box							
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.							
If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).							
Partill Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).							
Туре	/pe or Name of exempt organization				Employer identification number		
print	GUILFORD FOUNDATION			5	4-1423873		
extende							
due dat							
return,	return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. RICHMOND, VA 23225-8439						
	price price						
Enter the Return code for the return that this application is for (file a separate application for each return)							
Application		Return	Application	Ret			
is For	· · · · · · · · · · · · · · · · · · ·	Code	Is For			Code	
Form 990		01					
Form 990-BL		02_	Form 1041-A			08	
Form 990-EZ		03_	Form 4720			09	
Form 990-PF		04	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)		05 06	Form 6069			11	
Form 990-T (trust other than above)			Form 8870			12	
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.							
FRANK PAGE							
• The books are in the care of ▶ <u>P. O. BOX 13439 - RICHMOND, VA 23225</u> Telephone No. ▶ <u>804-323-9800</u> FAX No. ▶							
Telephone No. ► 804-323-9800 FAX No. ► • If the organization does not have an office or place of business in the United States, check this box ►							
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this							
box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.							
4 I request an additional 3-month extension of time until NOVEMBER 15, 2011.							
5 For calendar year 2010, or other tax year beginning , and ending .							
	Change in accounting period						
7	•						
	ADDITIONAL TIME IS REQUIRED TO GATHER THE NECESSARY INFORMATION TO FILE						
A COMPLETE AND ACCURATE RETURN.							
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, α	or 6069, e	nter the tentative tax, less any				
	nonrefundable credits. See instructions.			8a	\$	0.	
	If this application is for Form 990-PF, 990-T, 4720, or 6069,						
,	ax payments made. Include any prior year overpayment allowed as a credit and any amount paid						
	previously with Form 8868.			8b	<u>\$ 1</u>	<u>,725.</u>	
	Balance due. Subtract line 8b from line 8a. Include your pa		h this form, if required, by using			_	
	EFTPS (Electronic Federal Tax Payment System). See instructions. 8c \$ 0.						
Signature and Verification							
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that Lam authorized to prepare this form.							
$\mathcal{L}_{\mathcal{L}}}}}}}}}}$							
ognatt	ire & flynul h ~ [life Title >			Date		4 0014	
	6				FORT 8868 (Re	v. 1-2011)	