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Form 990-PF

Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see instructions.

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

Treated as a Private Foundation

2011

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

OMB No 1545-0052

For calendar year 2011 or tax year beginning , 2011, and ending 20 Name of foundation A Employer identification number ROBERT STEPHEN WEIMANN ENDEAVOR FUND 22-6654318 Number and street (or PO box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 509 TRENTS FERRY ROAD (434) 386-3132 City or town, state, and ZIP code C If exemption application is pending, check here Lynchburg, VA 24503 G Check all that apply Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization X Section 501(c)(3) exempt private foundation E If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at J Accounting method X Accrual If the foundation is in a 60-month termination end of year (from Part II, col (c). Other (specify) under section 507(b)(1)(B), check here line 16) ▶ \$ 207,481 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and amounts in columns (b), (c), and (d) may not necessarily equal (b) Net investment (c) Adjusted net expenses per purposes income the amounts in column (a) (see instructions)) books ıncome (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 6,000 2 Check ▶ | if the foundation is not required to attach Sch B . . . 3 Interest on savings and temporary cash investments 4 4,502 4,502 5a b Net rental income or (loss) R Net gain or (loss) from sale of assets not on line 10. 6a (2,827)b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 7 Net short-term capital gain 32 9 10a Gross sales less returns and allowances Less Cost of goods sold..... C 11 2.912 12 10,587 4,502 Compensation of officers, directors, trustees, etc 13 14 15 Legal fees (attach schedule) STM108 16a 575 Other professional fees (attach schedule) C 17 Taxes (attach schedule) (see instructions) 18 ig. 19 Depreciation (attach schedule) and depletion 20 21 22 Printing and publications..... 23 24 Total operating and administrative expenses. 678 25 12,500 12,500 26 Total expenses and disbursements, Add lines 24 and 25. 13,178 12,500 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements . а (2,591)Net investment income (if negative, enter -0-) 4,502 Adjusted net income (if negative, enter -0-)

Form 990-PF (2011)

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P	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	EndEnd	of year		
느	7-	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	4,706	2,695	2,695		
	2	Savings and temporary cash investments					
	3	Accounts receivable					
		Less: allowance for doubtful accounts					
	4	Pledges receivable					
		Less allowance for doubtful accounts					
	5	Grants receivable		•			
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule)					
Α		Less allowance for doubtful accounts					
s s	8	Inventories for sale or use,	-				
e	9	Prepaid expenses and deferred charges		•			
t	10a	Investments - U S and state government obligations (attach schedule)	-				
S	b	Investments - corporate stock (attach schedule) STM1.37	173,675	173,095	204,786		
	C	Investments - corporate bonds (attach schedule)					
	11	Investments - land, buildings, and equipment basis					
		Less accumulated depreciation (attach schedule)					
	12	Investments - mortgage loans					
	13	Investments - other (attach schedule)					
	14	Land, buildings, and equipment basis					
		Less accumulated depreciation (attach schedule)					
	15	Other assets (describe ▶			 		
	16	Total assets (to be completed by all filers - see the					
	1	instructions Also, see page 1, item I)	178,381	175,790	207,481		
L	17	Accounts payable and accrued expenses			·		
	18	Grants payable			†		
a b	19	Deferred revenue			┪		
1	20	Loans from officers, directors, trustees, and other disqualified persons			†		
į t	21	Mortgages and other notes payable (attach schedule)			7		
ĺ	22	Other liabilities (describe ▶			†		
e s	23	Total liabilities (add lines 17 through 22)	0	0	-		
N _F		Foundations that follow SFAS 117, check here b and complete lines 24 through 26 and lines 30 and 31.					
e u	24	Unrestricted					
t n	1	Temporarily restricted	·		=		
. d	26	Permanently restricted			4		
A s -	1	Foundations that do not follow SFAS 117, check here • X			-		
s s a	1	and complete lines 27 through 31.					
е .	1	Capital stock, trust principal, or current funds					
t a s n		Paid-in or capital surplus, or land, bldg , and equipment fund			┥		
C		Retained earnings, accumulated income, endowment, or other funds	178,381	175,790	-		
_ e		Total net assets or fund balances (see instructions)	178,381	175,790	┥ :		
rs	31	Total liabilities and net assets/fund balances (see	170,301	173,730	-		
	`	instructions)	178,381	175,790			
Pá	art III	Analysis of Changes in Net Assets or Fund Balance		173,790	<u> </u>		
		net assets or fund balances at beginning of year - Part II, column (a), line		-	T		
		f-year figure reported on prior year's return)		1	178,381		
2	Enter	amount from Part I, line 27a.			(2,591)		
		increases not included in line 2 (itemize) STM115	• • • • • • • • • • • • • • • •	3			
		ines 1, 2, and 3			175,790		
		eases not included in line 2 (itemize)		5	1,5,,90		
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	column (b) line 30		175,790		
		The transfer of the transfer o					

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		e the kınd(s) of property sold (e.g., real estate, ouse, or common stock, 200 shs MLC Co.)		(b) How acquired P-Purchase D-Donation	(c) Date acqu		(d) Date sold (yr, mo, day)
1:	a Motorola Solution	ns		P	2011-01-	-07	2011-01-07
	b Citigroup Inc			P	2005-05-		2011-04-15
	c Exxon Mobil			P	1997-02-		2011-04-15
_	d Motorola Mobilit	v		P	1997-12-		2011-01-04
	e UBS AG Jersey			P	2010-01-		2011-07-29
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other plus expense		(or (loss) minus (g)
_	a 32				•		32
_	b 1,263			7,757			(6, 494)
_	c 4,199			1,276		*	2,923
_	d 16			29			(13)
_	e 5,725			5,000			725
	Complete only for assets sho	owing gain in column (h) and owned	by the foundation or	n 12/31/69	m (Counc (Col	(h) goin minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of over col (j),		col (k),	but not le	(h) gain minus ss than -0-) or m col (h))
	a						32
$\overline{\underline{}}$	b						(6,494)
	<u>c</u>						2,923
	d						(13)
	e						725
2	Capital gain net income or (n	rei cabital iossi	lso enter in Part I, lir enter -0- in Part I, lin	, , , , , , , , , , , , , , , , , , ,	2		(2,827)
3	Net short-term capital gain of	r (loss) as defined in sections 1222(5) and (6)				
	If gain, also enter in Part I, Iii	ne 8, column (c) (see instructions) If	f (loss), enter -0- ın				
	Part I, line 8			3	3		32
P,	art:V. Qualification U	nder Section 4940(e) for Re	duced Tax on I	Net Investme	nt Income		
Wa If "	Yes," the foundation does not	section 4942 tax on the distributable qualify under section 4940(e) Do no	t complete this part				Yes X No
1	(a)	t in each column for each year, see	the instructions befo	ore making any er	ntries		(d)
	Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value of nor	(c) ncharitable-use assets			bution ratio ivided by col (c))
	2010	10,5		200,2			0.052431
	2009	14,(202,5			0.069127
	2008	13,8		244,6			0.056727
	2007	11,8		280,1			0.042444
	2006	12,2	250	263,9	004		0.046418
		· · · · · · · · · · · · · · · · · · ·			. 2		0.267146
3		the 5-year base period - divide the to on has been in existence if less than			. 3		0.053429
4	Enter the net value of noncha	aritable-use assets for 2011 from Pa	rt X, line 5		. 4	-	212,361
		• • • • • • • • • • • • • • • • • • • •					11,346
		ncome (1% of Part I, line 27b)。。。.					45_
		• • • • • • • • • • • • • • • • • • • •					11,391
8	If line 8 is equal to or greater	from Part XII, line 4 than line 7, check the box in Part VI				e See	12,500 the
	Part VI instructions						

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructi	ions)			
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	1			45
	here ► X and 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	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			45
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) .	4			0
5		5			45
6	Credits/Payments				
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a	Ì			
b	Exempt foreign organizations - tax withheld at source 6b	-			
С	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld 6d				
7		7			
8		8			
9	,	9			45
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11		11			
	rt 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			Yes	No
_	participate or intervene in any political campaign?		1a		<u>X</u>
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			ļ	
	of the instructions for definition)?		1b		<u> X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				į
	published or distributed by the foundation in connection with the activities				!
C	Did the foundation file Form 1120-POL for this year?		1c		<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			l	
_	(1) On the foundation \$ (2) On foundation managers				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
_	on foundation managers \$				1
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		<u>X</u>
2	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				نـــــا
4a	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		<u>X</u>
b	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year?		4a		<u>X</u>
5	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?		4b		
•	If "Yes," attach the statement required by General Instruction T	• • •	5		X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				ļ
	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		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	• •		-^ -	 i
	VA DE				ļ
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	—— I			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	Х	J
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	•••		^	 i
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"				
	complete Part XIV		9	J	Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	• • • •	-	_	
	names and addresses		10		Х
			- 1		

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 instructions)	11		_X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	1		
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address N/A			
14	The books are in care of ► CAROL WEIMANN Telephone no ► 4	34-38	6-31	.32
	Located at ► 509 TRENTS FERRY RD Lynchburg, VA ZiP+4 ► 245	03		
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			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of			
	the foreign country	<u> </u>]	<u> </u>
Pai	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)	1		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	j		
	the benefit or use of a disqualified person)? Yes X No			
	(6) Agree 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)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
_	Organizations relying on a current notice regarding disaster assistance check here			l
С	were not corrected before the first day of the tax year beginning in 2011?	1c		v
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			X
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and		~	
	6e, Part XIII) for tax year(s) beginning before 2011?			
	If "Yes," list the years			
ь	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 instructions)	2b		Х
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year? Yes X No			
b	If "Yes," did it have excess business holdings in 2011 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		1	
	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 2011)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
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 2011?	4b		Х

	rt VII-B Statements Regarding Activ			1 4720	May Be F	Requir	ea (cont	inued)			
5a	During the year did the foundation pay or incur a	ny amount t	to								
	(1) Carry on propaganda, or otherwise attempt t	o influence	legislation (sec	tion 494	5(e))?		Yes	X No	i i		
	(2) Influence the outcome of any specific public	election (se	e section 4955), or to o	carry on,		_	_			
	directly or indirectly, any voter registration dr						Yes	X No	1 .		
	(3) Provide a grant to an individual for travel, stu						Yes	X No	1 1	İ	
	(4) Provide a grant to an organization other than	-						(4.3)			
	section 509(a)(1), (2), or (3), or section 4940						Yes	X No		- 1	
	(5) Provide for any purpose other than religious,		•				□ .03	<u>M</u>			
	• • • • • • • • • • • • • • • • • • • •			•			Yes	X No			
_	purposes, or for the prevention of cruelty to							X NO			
D	If any answer is "Yes" to 5a(1)-(5), did any of the						ibea in				
	Regulations section 53 4945 or in a current notice						• • • • •	\sim	5b		
	Organizations relying on a current notice regards	-									
С	If the answer is "Yes" to question 5a(4), does the		=				—	—		- 1	
	because it maintained expenditure responsibility	-			• • • • • •	• • •	∐ Yes	No			
	If "Yes," attach the statement required by Regula	ations section	on 53 4945-5(d))							
6a	Did the foundation, during the year, receive any		•								
	on a personal benefit contract?						Yes	X No			
b	Did the foundation, during the year, pay premium	ns, directly o	or indirectly, on	a perso	nal benefit c	ontract?			6b		<u>X</u>
	If "Yes" to 6b, file Form 8870						_				
7a	, , , , , , , , , , , , , , , , , , , ,						_	X No			
b	If yes, did the foundation receive any proceeds of	or have any	net income atti	ributable	to the trans	action?		<u> .</u>	7b		
Pai	rt VIII Information About Officers, I	Directors,	Trustees,	Found	ation Mar	nagers	, Highl	y Paid I	Emplo	yees,	
	and Contractors										
1 L	ist all officers, directors, trustees, foundation	managers	and their com	pensati	on (see inst	ruction	s).				
	(a) Name and address		le, and average irs per week		ompensation paid, enter		Contribution		(e) Expe		
See	990_OFOV		devoted to position		-O-)		erred comper		other a	llowances	5
CAROL WEIMANN		TRUST	EE								
	OL WEIMANN TRENTS FERRY RD, VA 24503	TRUST	PEE 2		0			0			0
509		TRUST	2		0			0			0
509 ROBI	TRENTS FERRY RD, VA 24503		2		0			0			0
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FOBI	TRENTS FERRY RD, VA 24503 ERT WEIMANN TRENTS FERRY ROAD, VA 24503 ODORE WEIMANN	TRUST	2 PEE 0								
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509 THE 509 SHAI 509	TRENTS FERRY RD, VA 24503 ERT WEIMANN TRENTS FERRY ROAD, VA 24503 ODORE WEIMANN TRENTS FERRY ROAD, VA 24503 RICE WEIMANN TRENTS FERRY ROAD, VA 24503 Compensation of five highest-paid employees (NONE."	TRUST TRUST TRUST	2 TEE 0 TEE 0 Those include (b) Title, and a hours per we	verage eek	0 0 0 e 1 - see in:		(d) Contrit employee plans and	0 0 ne, enter	(e) Expe		0 0
509 THE 509 SHAI 509	TRENTS FERRY RD, VA 24503 ERT WEIMANN TRENTS FERRY ROAD, VA 24503 ODORE WEIMANN TRENTS FERRY ROAD, VA 24503 RICE WEIMANN TRENTS FERRY ROAD, VA 24503 Compensation of five highest-paid employees (NONE."	TRUST TRUST TRUST	2 TEE 0 TEE 0 Those include (b) Title, and a hours per we	verage eek	0 0 0 e 1 - see in:		(d) Contrit employee plans and	0 0 ne, enter	(e) Expe		0 0
509 THE 509 SHAI 509	TRENTS FERRY RD, VA 24503 ERT WEIMANN TRENTS FERRY ROAD, VA 24503 ODORE WEIMANN TRENTS FERRY ROAD, VA 24503 RICE WEIMANN TRENTS FERRY ROAD, VA 24503 Compensation of five highest-paid employees (NONE."	TRUST TRUST TRUST	2 TEE 0 TEE 0 Those include (b) Title, and a hours per we	verage eek	0 0 0 e 1 - see in:		(d) Contrit employee plans and	0 0 ne, enter	(e) Expe		0 0
509 THE 509 SHAI 509	TRENTS FERRY RD, VA 24503 ERT WEIMANN TRENTS FERRY ROAD, VA 24503 ODORE WEIMANN TRENTS FERRY ROAD, VA 24503 RICE WEIMANN TRENTS FERRY ROAD, VA 24503 Compensation of five highest-paid employees (NONE."	TRUST TRUST TRUST	2 TEE 0 TEE 0 Those include (b) Title, and a hours per we	verage eek	0 0 0 e 1 - see in:		(d) Contrit employee plans and	0 0 ne, enter	(e) Expe		0 0
509 THE 509 SHAI 509	TRENTS FERRY RD, VA 24503 ERT WEIMANN TRENTS FERRY ROAD, VA 24503 ODORE WEIMANN TRENTS FERRY ROAD, VA 24503 RICE WEIMANN TRENTS FERRY ROAD, VA 24503 Compensation of five highest-paid employees (NONE."	TRUST TRUST TRUST	2 TEE 0 TEE 0 Those include (b) Title, and a hours per we	verage eek	0 0 0 e 1 - see in:		(d) Contrit employee plans and	0 0 ne, enter	(e) Expe		0 0
509 THE 509 SHAI 509	TRENTS FERRY RD, VA 24503 ERT WEIMANN TRENTS FERRY ROAD, VA 24503 ODORE WEIMANN TRENTS FERRY ROAD, VA 24503 RICE WEIMANN TRENTS FERRY ROAD, VA 24503 Compensation of five highest-paid employees (NONE."	TRUST TRUST TRUST	2 TEE 0 TEE 0 Those include (b) Title, and a hours per we	verage eek	0 0 0 e 1 - see in:		(d) Contrit employee plans and	0 0 ne, enter	(e) Expe		0 0
509 THE 509 SHAI 509	TRENTS FERRY RD, VA 24503 ERT WEIMANN TRENTS FERRY ROAD, VA 24503 ODORE WEIMANN TRENTS FERRY ROAD, VA 24503 RICE WEIMANN TRENTS FERRY ROAD, VA 24503 Compensation of five highest-paid employees (NONE."	TRUST TRUST TRUST	2 TEE 0 TEE 0 Those include (b) Title, and a hours per we	verage eek	0 0 0 e 1 - see in:		(d) Contrit employee plans and	0 0 ne, enter	(e) Expe		0 0
509 THE 509 SHAI 509 2 C	TRENTS FERRY RD, VA 24503 ERT WEIMANN TRENTS FERRY ROAD, VA 24503 ODORE WEIMANN TRENTS FERRY ROAD, VA 24503 RICE WEIMANN TRENTS FERRY ROAD, VA 24503 Compensation of five highest-paid employees (NONE."	TRUST TRUST (other than	2 TEE 0 TEE 0 Those include (b) Title, and a hours per we devoted to pos	verage eek	0 0 0 e 1 - see in:		(d) Contrit employee plans and	0 0 ne, enter	(e) Expe		0 0

ROBERT STEPHEN WEIMANN ENDEAVOR FUND

Form 990-PF (2011)

22-6654318

Page 6

Form 990-PF (2011) ROBERT STEPHEN WEIMANN ENDEAVOR FUND		22-6654318 Page 7
Part VIII Information About Officers, Directors, Trustees, Founda and Contractors (continued)	tion Managers, Highl	y Paid Employees,
3 Five highest-paid independent contractors for professional services (see instruc	tions). If none, enter "NON	E."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		>
Part IX-A: Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information	such as the number of	Expenses
organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 N/A	···	
1 1/21		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions	3)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	<u> </u>	Amount
1		
2		
•		

, v v,

All other program-related investments. See instructions

٨,

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign for	oundations,	
	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	209,779
b	Average of monthly cash balances	1b	2,582
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	212,361
е	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	212,361
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	212,361
6	Minimum investment return. Enter 5% of line 5	6	10,618
Pa	rt XI. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	10,618
2a		5	
þ	Income tax for 2011 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	45
3	Distributable amount before adjustments Subtract line 2c from line 1	3	10,573
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	10,573
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	10,573
Рā	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	12,500
b	Program-related investments - total from Part IX-B	1b	,
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	12,500
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 instructions)	5	45
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	12,455
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether		<u> </u>
	qualifies for the section 4940(e) reduction of tax in those years		-

1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
	line 7				10,573
2	Undistributed income, if any, as of the end of 2011				
а	Enter amount for 2010 only				
b	Total for prior years,,				
3	Excess distributions carryover, if any, to 2011				
а	From 2006				
þ	From 2007				
С	From 2008				
d	From 2009 3,910				
е	From 2010				
f	Total of lines 3a through e	4,476			
4	Qualifying distributions for 2011 from Part XII,				
	line 4 > \$ 12,500			_	
a	Applied to 2010, but not more than line 2a				
þ	Applied to undistributed income of prior years			1	•
	(Election required - see instructions)				
C	Treated as distributions out of corpus (Election				
_	required - see instructions)				
	Applied to 2011 distributable amount		·		10,573
e	Remaining amount distributed out of corpus	1,927	***		
5	Excess distributions carryover applied to 2011 .				
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a))				!
0	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5.	é 103			
b	Prior years' undistributed income Subtract	6,403			
	line 4b from line 2b				
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			[
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions				†
е	Undistributed income for 2010 Subtract line		18 1	1	
	4a from line 2a Taxable amount - see				,
	instructions				
f	Undistributed income for 2011 Subtract lines		· · · · · · · · · · · · · · · · · · ·		
	4d and 5 from line 1. This amount must be				
	distributed in 2012				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				!
	170(b)(1)(F) or 4942(g)(3) (see instructions)				;
8	Excess distributions carryover from 2006 not				
	applied on line 5 or line 7 (see instructions)				i
9	Excess distributions carryover to 2012.				
	Subtract lines 7 and 8 from line 6a	6,403			
10	Analysis of line 9				E E
	Excess from 2007	ŀ			
	Excess from 2008				i.
	Excess from 2009 3,910	-			1
	Excess from 2010				
е	Excess from 2011 1,927				

 $\sigma_{\mathcal{X}}(\mathbf{d}) = \mathbf{x}_{\mathcal{X}}$

		EPHEN WEIMANN E			22-6654318	Page 10
Part	XIV: Private Operating Four	idations (see instr	uctions and Part VII-	A, question 9)		
1a	If the foundation has received a ruling	or determination letter	r that it is a private op	erating		
	foundation, and the ruling is effective for	or 2011, enter the date	e of the ruling		>	
ь	Check box to indicate whether the four		_		4942(j)(3) or 49	42(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	T T T T T T T T T T T T T T T T T T T	Prior 3 years	1 140420/(0) 01 1 10	120/0/
	income from Part I or the minimum					(e) Total
	investment return from Part X for	(a) 2011	(b) 2010	(c) 2009	(d) 2008	
	each year listed					
b	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					
_	Oughtung distributions and distribution					
е	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					
	(0)) ()			-		
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				1	
ь	"Endowment" alternative test - enter 2/3			+	 	
U	of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"Support" alternative test - enter					
•	🗀				1	
	(1) Total support other than gross investment income (interest,				1	
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public		†			
	and 5 or more exempt				1	
	organizations as provided in				i	
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from				-	
	an exempt organization					
	(4) Gross investment income					
Part		tion (Complete t	hio nost only if th	ho foundation had	1 ¢£ 000 or more in	
1 vaic				ne foundation had	ı əə,uuu or more m	assets at
	any time during the year		ns.)			
1	Information Regarding Foundation M					
а	List any managers of the foundation wh	no have contributed m	ore than 2% of the to	otal contributions receiv	ed by the foundation	
	before the close of any tax year (but or	ily if they have contrib	uted more than \$5,00	00) (See section 507(d)(2))	
	NO. 77					
	NONE,		 			
b	List any managers of the foundation wh	no own 10% or more o	of the stock of a corpo	oration (or an equally la	rge portion of the	
	ownership of a partnership or other ent	ity) of which the found	lation has a 10% or g	reater interest		
	NONE,					
				·	-	
2	Information Regarding Contribution,		•	_		
	Check here \blacktriangleright $\boxed{\underline{X}}$ if the foundation only	v makes contributions	s to preselected char	table organizations and	I does not accept	
	unsolicited requests for funds. If the fou	indation makes diffs	grants etc (see insti	ructions) to individuals	or organizations under	
	other conditions, complete items 2a, b,	c and d	grants, etc (see mot	dolloris) to marriduals t	or organizations under	
						
a	The name, address, and telephone nur	nder of the person to	wnom applications sr	nould be addressed		
b	The form in which applications should to	e submitted and info	mation and materials	they should include		•
	.,			tiney enterior interior		
					- · · · · 	
С	Any submission deadlines					
d	Any restrictions or limitations on awards	s, such as by geograp	hical areas, charitabl	le fields, kinds of institu	tions, or other	
	factors	, , ,	.,	,	•	

Panta Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

o Oranio and Contributions Faid During the				i loi ruluie ra	iyiiieiit	,
Recipien			If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (hor	me or	business)	or substantial contributor			
a Paid during the year						
BEREA COLLEGE					SCHOLARSHIP	
BEREA COLLEGE						
Berea	KY	40404				5,000
						· ·
KENTUCKY COMMUNITY AND	TECH				SCHOLARSHIP	
300 NORTH MAIN STREET					50022.0	
Versailles	TF TF	40383				2 500
versailles	KY	40383				2,500
WEST VA WESLYAN COLLEG	E				SCHOLARSHIP	
59 COLLEGE AVENUE						
Buckhannon	WV	26201				2,500
WIDENER UNIVERSITY					SCHOLARSHIP	1
ONE UNIVERSITY PLACE						
Chester	PA	19013				2,500
	•••	13013				2,500
						Ì
			1			
Total		 -				12,500
b Approved for future payment	<u></u>	·····				12,300
b Approved for future payment						ĺ
		:	<u> </u>			
				}		
				İ		
Total					> 26	

w . S

Part XVI	-A Analysis of Income-Producing A	Activities				
	nter gross amounts unless otherwise indicated.		d business income	Excluded by s	ection 512, 513, or 514	(e)
		(a)	(b)	(c)	(d)	Related or exempt function income (See instructions)
1 Program	m service revenue	Business code	Amount	Exclusion code	Amount	(400
a						
ь	<u> </u>					
c						
d					_	
e		<u> </u>				<u> </u>
f						
	s and contracts from government agencies					ļ <u>.</u>
	rship dues and assessments			<u> </u>		
	on savings and temporary cash investments . ds and interest from securities			ļ		4.50
	tal income or (loss) from real estate					4,50
	t-financed property			1		
	debt-financed property			 		-
	tal income or (loss) from personal property			 		<u> </u>
	estment income			 		
	(loss) from sales of assets other than inventory			 		
	ome or (loss) from special events	 		 		
	profit or (loss) from sales of inventory			 		
	evenue a	-		<u> </u>		
b						
с —				1		
d						
е						
12 Subtota	Add columns (b), (d), and (e)					4,50
	Add line 12, columns (b), (d), and (e)				13	4,50
(See works)	heet in line 13 instructions to verify calculations)					·
Part XVI	-B Relationship of Activities to the	Accompl	ishment of Exe	mpt Purpos	ses	-
Line No.	Explain below how each activity for which inc					to the
▼	accomplishment of the foundation's exempt	purposes (o	ther than by providin	g funds for suc	ch purposes) (See ins	structions)
4	THE FOUNDATION WAS ORGANIZED IN					
8	SCHOLARSHIP AWARDS. DURING 201					
	TECH, WEST VA WESLEYAN, AND WIL					
	SCHOLARSHIP MONIES IN THE AMOUN	TS OF \$5	5000, \$2500, \$	2500		
	AND \$2500, RESPECTIVELY.					
					·	
						··
					 	
					· · · · · · · · · · · · · · · · · · ·	
		· . <u>-</u>				
					-	
				<u>.</u>		
			- ·			
						
				-		
			••			
	<u></u>					

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Form 990-PF (2011) ROBERT STEPHEN WEIMANN ENDEAVOR FUND 22-6654318 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

1	Did the or	ganization dire	ctly or indirectly eng	age in an	y of the follows	ng with a	ny other o	rganization (1escriber	1		- 1	Yes	NO
	in section	501(c) of the C	Code (other than sec	tion 501(c)(3) organizati	ions) or ii	n section 5	527, relating	to politic	al		ļ		
	organizati		•	`	,, ,	,			•					
	•				. 1. 1							ŀ		
а		-	ting foundation to a		•	•						<u> </u>		ــــا
	(1) Cash											1a(1)		X
	(2) Other	assets										1a(2)		_X
b	Other tran	sactions												
_	•		noncharitable exem	nt organi	ration							1b(1)		X
												<u> </u>		
			from a noncharitable									1b(2)		X
	(3) Renta	il of facilities, e	quipment, or other a	issets						. 		1b(3)		<u>X</u>
	(4) Reimi	bursement arra	ingements									1b(4)		_X_
			ntees									1b(5)		X
			ices or membership									1b(6)		X
_	•				-							<u> </u>		
			pment, mailing lists,									1c		X
d	If the ansi	wer to any of th	ne above is "Yes," co	omplete ti	he following sc	hedule C	column (b)	should alwa	ays show	the fa	air mark	et		
	value of ti	ne goods, other	r assets, or services	given by	the reporting for	oundatioi	n If the fo	undation rec	eived les	s thar	ı fair ma	arket		
	value in a	ny transaction	or sharing arrangem	nent, show	v in column (d)	the value	e of the go	ods, other a	ssets, o	r servi	ces rec	eived		
a) Lu		mount involved			empt organization		<u>_</u>	cription of transf					ents	
			(5) (12				(4) 550	a paor or a drie				,		
														
					_			_						
				-				_						
												-		
								_						
					_			_						
														
														
	In the form			ــــــــــــــــــــــــــــــــــــــ			<u> </u>							
2a		•	or indirectly affiliate		-			. •						٦
	described	in section 501	(c) of the Code (other	er than se	ection 501(c)(3))) or in se	ction 527	?				Ye	s X	No
þ	If "Yes," c	omplete the fol	llowing schedule											
	(a) Name of organiz	ation		(b) Type of orga	nızatıon			(c) Des	scription	of relation	nship		
		···												
														
		 		_										
		·- <u></u>		<u> </u>										
	Under pe	enalties of perjury, I	declare that I have examine	ed this return	n, including accomp	anying sche	dules & state	ments, & to the	oest of my l	nowled	ge & belle	,		
2ia	n is true,	correct, a complete	Declaration of preparer (other than ta	xpayer) is based on	all intormat	ion of which	oreparer nas any	r knowleage	,				
Sig			- NI 656	M	X	_		_				RS discuss		
lei	▼ '	BERT WEIMA	1/00/00/00/01/10	<u> emaci</u>	1 0-11-	<u> </u>	OFFICE	₹			with the p	reparer sh		ow □ No
	Signi	ature of officer or tru	istee	_	Date		Title			ı	(SOE ITISE	, IX	Yes	1.40
		Print/Type prepare	er's name	Prepa	arer's signature	//		Date		Check	ıf	PTIN		
Pai	d	Bryan Johr	nson		hen 1			06-11- 20	12		Ш"	P0081	9252	
					The state of the s		_	00 11-20		self-em	pioyed	12001		
	parer	Firm's name	Mather John			Les ———			Firm's EIN					
Jse	Only	Firm's address	▶ 1922B Grave						Phone no					
	- ,		Lynchburg V	/A 2450	12						434-	316-52	214	
_														

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

Employer identification number

2011

ROBERT STEPHEN WEIMA	ANN ENDEAVOR FUND	22-6654318
Organization type (check one	e)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	o n
	527 political organization	
Form 990-PF	∑ 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	covered by the General Rule or a Special Rule.), (8), or (10) organization can check boxes for both the General Rule and a Spe	cial Rule See
	ing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more e contributor. Complete Parts I and II	(in money or
Special Rules		
under sections 509(a)	3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the (1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a (100 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ II	a contribution of
during the year, total of	7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use exclusively for religious, charitable, screes, or the prevention of cruelty to children or animals. Complete Parts I, II, and I	entific, literary,
during the year, contri not total to more than year for an exclusively	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one butions for use exclusively for religious, charitable, etc., purposes, but these con \$1,000. If this box is checked, enter here the total contributions that were received religious, charitable, etc., purpose. Do not complete any of the parts unless the ation because it received nonexclusively religious, charitable, etc., contributions	tributions did ed during the General Rule of \$5,000 or
_	is not covered by the General Rule and/or the Special Rules does not file Scheost answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of it	·

Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF),

Name of organization Employer identification number ROBERT STEPHEN WEIMANN ENDEAVOR FUND 22-6654318

Part I	Contributors (see instructions) Use duplicate copies of Pai	t I if additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Robert and Carol Weimann 509 Trents Ferry Rd Lynchburg, VA 24503	\$	Person X
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Current Officers, Directors, Trustees, and Key Employees

1 List all officers, directors, trustees, and key em	ployees for the	oyees	vere not compens	tod	
List all officers, directors, trustees, and key em	proyees for ti	(b) Title, and average	(c) Compensation	(d) Contributions to	I
(a) Name and address		hours per week	(if not paid, enter	employee benefit plans	(e) Expense account, other allowances
LAUREN WEIMANN	TRUST	devoted to position	-0-)	deferred compensation	
509 TRENTS FERRY ROAD, VA 24503	TRUST	(0	0
JANE CAIN		0	0	ļ <u> </u>	
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FREDERICK MEETRE		0	0	0	0
	TRUST				
509 TRENTS FERRY ROAD, VA 24503		0	0	0	0
JEFF MEETRE	TRUST			1	
509 TRENTS FERRY ROAD, VA 24503		0	0	0	0
JANET MEETRE	TRUST	1			
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Federal Supporting Statements

ROBERT STEPHEN WEIMANN ENDEAVOR FUND

FORM 990PF, Part III, Line 3
Other Increases Schedule

Total

Form 990PF, Part II, Line 10(b)
Investments: Corporate Stock Schedule

PG 01 Statement #137

Category	BOY	Book Value	EOY FMV
Investments: Corporate stock	173,675	173,095	204,786
Totals	173,675	173,095	204,786

		Federal Su	Federal Supporting Statements	ents	2011 BC 01	
Name(s) as snown on return					Your Social Security Number	<u> </u>
ROBERT STEPHEN WEIMANN ENDEAVOR FUND	R FUND				22-6654318	-
	Form 990PF, Part	Part I, Line 23	- Other Expenses Schedule	chedule	Statement #103	. –
Description	Revenue and expenses	Net investment	Adjusted net income	Charıtable purpose		
Nondividend Distributions Totals	13	0	0	0		
	Form 990PF	?, Part I, Line 1	Form 990PF, Part I, Line 11 - Other Income Schedule	hedule	PG 01 Statement #106	
Description Other Expenses	Revenue and expenses 2,912	Net investment	Adjusted net income			
Totals	2,912	0	0			
	Form 990PF, Part I,		Line 16(b) - Accounting Fees Schedule	Schedule	PG 01 Statement #108	
Description Accounting Fees Totals	Revenue and expenses 575	Net investment 0	Adjusted net income 0	Charitable purpose 0		
						\neg

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		Federal Su	Federal Supporting Statements	nents	2011 PG 01	01
Name(s) as snown on return ROBERT STEPHEN WEIMANN ENDEAVOR FUND	FUND				Your Social Security 22-6654318	ruumber
		Form 990PF, Part I, Lin	Part I, Line 18 - Taxes Schedule	ule	Statement #110	, , , , , , , , , , , , , , , , , , , ,
Description	Revenue and expenses	Net investment	Adjusted net income	Charıtable purpose		
Income Tax Foreign Tax	11	0 0	0 0	0 0		
Totals	06	0	0	0		

Form **8868** (Rev January 2012)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-170

Department of the Internal Revenue		▶ File a	senarate an	plication for each return.				
		Automatic 3-Month Extension, co						▶ [x̄
-	-	Additional (Not Automatic) 3-Mon						
		unless you have already been gran		•			868	
Electronic fi a corporation 8868 to requi Return for Tra	ling (e-file) required to est an exter ansfers Ass	You can electronically file Form 886 file Form 990-T), or an additional (n ision of time to file any of the forms lociated With Certain Personal Benefictals on the electronic filing of this to	68 if you nee ot automatic listed in Part fit Contracts,	ed a 3-month automatic exter) 3-month extension of time I or Part II with the exception which must be sent to the IF	nsion of time to file of You can electronican of Form 8870, Info RS in paper format	(6 mo ally fi orma (see	onths for le Form tion	
Part I	Automa	tic 3-Month Extension of Ti	me. Only	submit original (no cop	ies needed).			
A corporation	required to	file Form 990-T and requesting an a	automatic 6-	month extension - check this	box and complete			
		. .						▶ 🔲
All other corp	orations (in	cluding 1120-C filers), partnerships,	REMICs, an	d trusts must use Form 7004	to request an exte	nsior	of time	
to file income	tax returns							
				Enter	filer's identifying	nun	ber, se	e instructions
Type or	Name o	f exempt organization or other filer, s	ee instructio	ns	Employer iden	tıfica	tion nun	nber (EIN) or
print	ROBER'	STEPHEN WEIMANN ENDEAVO	OR FUND		X 22-6654	318		
File by the	Number	street, and room or suite no. If a PC	D box, see i	nstructions	ructions Social security number (SSN)			
due date for filing your	509 TRENTS FERRI ROAD							
return See	1	n or post office, state, and ZIP code	For a foreig	n address, see instructions				
instructions	Lynch	ourg, VA 24503						
Enter the Ret	turn code fo	r the return that this application is fo	r (file a sepa	rate application for each retu	ırn)			<u>d 4</u>
Applicatio	n		Return	Application				Return
Is For			Code	Is For				Code
Form 990			01	Form 990-T (corporation)				07
Form 990-8	BL		02	Form 1041-A				08
Form 990-E	EZ		01	Form 4720				09
Form 990-F	PF		04	Form 5227				10
Form 990-1	T (sec 401)	a) or 408(a) trust)	05	Form 6069				11
Form 990-1	T (trust othe	r than above)	06	Form 8870				12
Telephone If the orga If this is fo for the whole a list with the I reque until	e No Inization do or a Group F group, che names and st an autom	care of CAROL WEIMANN 50 434-386-3132 es not have an office or place of busice teturn, enter the organization's four ock this box	FA iness in the l digit Group E it is for part is for ation require	United States, check this box exemption Number (GEN) of the group, check this box	if this and at	s is tach	on is	▶□
	-	ar 20 11 or	, 20	, and ending	,	20		
Cha	nge in acco	red in line 1 is for less than 12 mont	hs, check re	ason 🔲 Initial return 📗	Final return			
		s for Form 990-BL, 990-PF, 990-T, 47	r∠u, or 6069	, enter the tentative tax, less	any	.		^
_		dits See instructions	060 051	ov rofundable and the and		3a	\$	0
		s for Form 990-PF, 990-T, 4720, or 6 nents made Include any prior year		•		3b	e	0
		tract line 3b from line 3a Include you	<u> </u>		using	JU	\$	
		Federal Tax Payment System) See				3с	\$	0