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# Form **990-PF**

# 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.

| OMB No | 1545-0052 |
|--------|-----------|
| 20     | 144       |

Department of the Treasury Internal Revenue Service

ZU I I

| Ford                      | calendar year 2011 or tax year beginning APR  | 14, 2011   | , and ending         | DEC 31, 201   | 1  |
|---------------------------|---|--|----------------------|---|--|
| Nan                       | me of foundation  |  |                      | A Employer identification                           | on number  |
| P                         | ETTERS FAMILY FOUNDATION  |  |                      | 45-232364   | 2  |
|                           | nber and street (or P O box number if mail is not delivered to street                                   | address)   | Room/suite           | B Telephone number                                  |  |
|                           | 06 HILTON TERRACE   |  |                      | 757-624-3   |  |
| -                         | y or town, state, and ZIP code  |  |                      | C If exemption application is                       | pending, check here                              |
|                           | EWPORT NEWS, VA 23601   |  |                      | <u> </u>  |  |
| G C                       | Check all that apply:   |  | ormer public charity | D 1. Foreign organizatio                            | ns, check here                                   |
|                           | Final return  | Amended return                                   |                      | Foreign organizations r<br>2. check here and attach | neeting the 85% test,                            |
|                           | Address change  | Name change                                      |                      | 2. check here and attach                            | computation                                      |
| H C                       | Check type of organization: X Section 501(c)(3) ex  | • •  |                      | E If private foundation s                           |  |
|                           |   | Other taxable private foundating method:  X Cash | Accrual              | under section 507(b)(                               |  |
|                           | · 1 —   | her (specify)                                    | Accidal              | F If the foundation is in under section 507(b)(     |  |
|                           | om Part II, col. (c), line 16) -\$ 984,484. (Part I, colui  | mn (d) must be on cash i                         | basis.)              | under Section 307(b)(                               | T)(b), check here                                |
|                           | art   Analysis of Revenue and Expenses  | (a) Revenue and                                  | (b) Net investment   | (c) Adjusted net                                    | (d) Disbursements                                |
|                           | (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | expenses per books                               | income               | income  | for charitable purposes<br>(cash basis only)     |
|                           | 1 Contributions, gifts, grants, etc., received  | 1,033,346.                                       |                      | N/A   |  |
|                           | 2 Check I if the foundation is not required to attach Sch B   | _,,,   |                      |   |  |
| 7                         | Interest on savings and temporary cash investments  |  |                      |   |  |
| 7107                      | 4 Dividends and interest from securities  | 3.   | 3.                   |   | STATEMENT 2                                      |
| <b>-</b>                  | 5a Gross rents  |  |                      |   |  |
| 3                         | b Net rental income or (loss)   | <u>-</u>   |                      |   |  |
| <b>~</b> •                | 6a Net gain or (loss) from sale of assets not on line 10  | 161.   |                      |   | STATEMENT 1                                      |
| venue                     | b Gross sales price for all assets on line 6a 33,507.   |  |                      |   |  |
|                           | 7 Capital gain net income (from Part IV, line 2)  |  | 33,507.              |   | <u> </u>   |
| <u> </u>                  | 8 Net Short-term capital gain   |  |                      |   |  |
| 2                         | 9 Income modifications Gross sales less returns   |  |                      |   |  |
| =                         | 10a and allowances  |  |                      |   |  |
| ロリット<br>る。                | b Less Cost of goods sold c Gross profit or (loss)  |  |                      |   |  |
| h                         | 11 Other income   |  |                      |   |  |
|                           | 12 Total. Add lines 1 through 11  | 1,033,510.                                       | 33,510.              |   |  |
| _                         |   | 0.   | 0.                   |   | 0.   |
|                           | 13 Compensation of officers, questions trustees etc. 14 Other employee salaties and wages.              |  |                      |   |  |
|                           | [0]   |  |                      |   |  |
| ses                       | 15 Pension Plans employee benefits 16a Legal fees 2 MAY 1 7 2012  |  |                      |   |  |
| Jen<br>Jen                | b Accounting fees   |  |                      |   |  |
| ᄍ                         | c Other professional tees OGDEN, UT   |  |                      |   | _  |
| Ę                         | 17 Interest UGULINI   |  |                      |   |  |
| фa                        | 18 Taxes  |  |                      |   |  |
| inis                      | 19 Depreciation and depletion   |  |                      | <del> </del>  |  |
| Ê                         | 20 Occupancy  |  |                      | <del>                                       </del>  | +  |
| and Administrative Expens | 21 Travel, conferences, and meetings  |  |                      | <del> </del>  | <del></del>                                      |
| an<br>1 an                | 22 Printing and publications 23 Other expenses STMT 3   | 26.  | 26.                  | <del> </del>  | 0.   |
| ting                      | 23 Other expenses STMT 3 24 Total operating and administrative  | 20.  | 40.                  | <del>                                     </del>    | <del>                                     </del> |
| Operating                 | expenses. Add lines 13 through 23   | 26.  | 26.                  |   | 0.   |
| o                         | 25 Contributions, gifts, grants paid  | 50,000.  |                      |   | 50,000.  |
|                           | 26 Total expenses and disbursements.  |  |                      |   | 1  |
|                           | Add lines 24 and 25   | 50,026.  | 26.                  | <u></u>   | 50,000.  |
| _                         | 27 Subtract line 26 from line 12:   |  |                      |   |  |
|                           | Excess of revenue over expenses and disbursements   | 983,484.   |                      |   |  |
|                           | b Net investment income (if negative, enter -0-)  |  | 33,484               |   |  |
|                           | c Adjusted net income (if negative, enter -0-)  |  |                      | N/A   |  |

123501 12-02-11 LHA For Paperwork Reduction Act Notice, see instructions.

<u>45-2323642</u> Form 990-PF (2011) PETTERS FAMILY FOUNDATION Page 2 Beginning of year End of year Attached schedules and amounts in the description **Balance Sheets** column should be for end-of-year amounts only (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 983,484. 984,484. 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts I 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments - land buildings, and equipment basis Less accumulated depreciation Investments - mortgage loans Investments - other Land, buildings, and equipment: basis Less accumulated depreciation Other assets (describe 0 16 Total assets (to be completed by all filers) 983,484 984,484. 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable 22 Other liabilities (describe 0 0 Total liabilities (add lines 17 through 22) ightharpoonsFoundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Net Assets or Fund Balances 983,484 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances 0. 983,484 0 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3

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6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Form 990-PF (2011)

98<u>3,484.</u>

5 Decreases not included in line 2 (itemize)

| (i) F.M.V. as of 12/31/69             | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of co<br>over col. (j), if               |     | col (k), but not less<br>Losses (from c |        |
|---------------------------------------|--------------------------------------|---|-----|---|--------|
| a                                     |                                      |   |     |   | 33,507 |
| b                                     |                                      |   |     |   |        |
| C                                     |                                      |   |     |   |        |
| d                                     |                                      |   |     |   |        |
| e                                     |                                      |   |     |   |        |
| 2 Capital gain net income or (net cap |                                      | enter in Part I, line 7<br>er -0- in Part I, line 7 | } 2 |   | 33,507 |

Part V | Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

N/A

(I) Gains (Col. (h) gain minus

N/A

If section 4940(d)(2) applies, leave this part blank.

If gain, also enter in Part I, line 8, column (c).

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

Yes No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1. Enter the appropriate amount in each column for each year; see instructions before making any entries.

| (a) Base period years Calendar year (or tax year beginning in) | (b)<br>Adjusted qualifying distributions | (c)<br>Net value of noncharitable-use assets | (d) Distribution ratio (col. (b) divided by col. (c)) |
|--|--|--|---|
| 2010   |  |  |   |
| 2009   |  |  | ·   |
| 2008   |  |  |   |
| 2007   |  |  |   |
| 2006   |  |  |   |

2 Total of line 1, column (d)

đ

- Average distribution ratio for the 5-year base period divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years
- 4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

- 5 Multiply line 4 by line 3
- 6 Enter 1% of net investment income (1% of Part I, line 27b)
- 7 Add lines 5 and 6
- 8 Enter qualifying distributions from Part XII, line 4

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. See the Part VI instructions.

| 6 |  |
|---|--|
| 7 |  |
| 8 |  |
|   |  |

<del>------</del>

3

|    | 990-PF (2011) PETTERS FAMILY FOUNDATION It VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4            |       | 2323<br>- <b>see</b> ii |             |     | Page 4<br>1 <b>5)</b> |
|----|---|-------|-------------------------|-------------|-----|-----------------------|
| 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)   |       |                         |             |     |                       |
| ь  | Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%  | 1     |                         |             | 6   | 70.                   |
|    | of Part I, line 27b   | _     |                         |             |     |                       |
|    | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).                  |       |                         |             |     |                       |
|    | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                 | 2     |                         |             |     | 0.                    |
|    | Add lines 1 and 2   | 3     |                         |             | 6   | 70.                   |
| 4  | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                               | 4     |                         |             |     | 0.                    |
|    | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-   | 5     |                         |             | 6   | 70.                   |
|    | Credits/Payments:   |       |                         |             |     |                       |
|    | 2011 estimated tax payments and 2010 overpayment credited to 2011 6a 6a   |       |                         |             |     |                       |
|    | Exempt foreign organizations - tax withheld at source   |       |                         |             |     |                       |
| С  | Tax paid with application for extension of time to file (Form 8868)   | <br>: |                         |             |     |                       |
|    | Backup withholding erroneously withheld 6d  |       |                         |             |     |                       |
|    | Total credits and payments. Add lines 6a through 6d   | 7     | _                       |             |     | 0.                    |
|    | Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached  | 8     |                         |             |     |                       |
|    | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed   | 9     |                         |             | 6   | 70.                   |
|    | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid   | 10    |                         |             |     |                       |
|    | Enter the amount of line 10 to be: Credited to 2012 estimated tax   | 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 participate or intervene | ın    |                         |             | Yes | No                    |
|    | any political campaign?   |       |                         | 1a_         |     | X                     |
| b  | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?    |       |                         | 1b_         |     | X                     |
|    | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published                 | d or  |                         |             |     |                       |
|    | distributed by the foundation in connection with the activities   |       |                         |             |     |                       |
| C  | Did the foundation file Form 1120-POL for this year?  |       |                         | 1¢          |     | X                     |
| đ  | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  |       |                         |             |     |                       |
|    | (1) On the foundation. ▶ \$ O . (2) On foundation managers. ▶ \$  |       | 1                       |             |     |                       |
| е  | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation               |       |                         |             |     |                       |
|    | managers. > \$  |       |                         |             |     |                       |
| 2  | Has the foundation engaged in any activities that have not previously been reported to the IRS?   |       |                         | 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, of       | r     |                         |             |     |                       |
|    | 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?  |       |                         | 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?   |       |                         | _6_         |     | X                     |
| 7  | Did the foundation have at least \$5,000 in assets at any time during the year?   |       |                         | 7           | X   | <u> </u>              |
|    | If "Yes," complete Part II, col. (c), and Part XV   |       |                         |             |     |                       |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions)   VA                                   |       |                         |             |     |                       |
| h  | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)               |       | <del></del>             |             |     |                       |
| J  | of each state as required by General Instruction G? If "No," attach explanation   |       |                         | 8b          | x   |                       |
| 9  | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale       | ndar  |                         | <del></del> |     |                       |
| 3  | year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV                              |       |                         | 9           |     | х                     |
| 10 |   | тмт   | 4                       | 10          | Х   |                       |
|    | and particular designation and particular designation and particular designation and additional and additional                            |       |                         |             | -DF | 2011                  |

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| orm | 990-PF (2011) PETTERS FAMILY FOUNDATION  | 45-23236           | 42_        | Page 5          |
|-----|--|--------------------|------------|-----------------|
|     | art 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   |                    | 1          |                 |
|     | section 512(b)(13)? If "Yes," attach schedule (see instructions)   | L                  | 11         | <u> </u>        |
| 12  | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified 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?  | L                  | 13 X       |                 |
|     | Website address ► N/A  |                    | 24.5       |                 |
| 14  |  | . <b>►</b> 757-624 |            | 5               |
|     | Located at ► 206 HILTON TERRACE, NEWPORT NEWS, VA  | ZIP+4 <b>►23</b> 6 | OI         |                 |
| 15  | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here  | 1 1                | 37/3       | ▶□              |
|     | and enter the amount of tax-exempt interest received or accrued during the year  | 15                 | N/A<br>Ye  |                 |
| 16  | At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,   | 1                  |            |                 |
|     | securities, or other financial account in a foreign country?   | -                  | 16         | <u> </u>        |
|     | See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign   |                    |            |                 |
| Pź  | country  art 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.  |                    | Ye         | s No            |
| 14  | During the year did the foundation (either directly or indirectly):  | F                  | <u>-</u> _ | 1               |
|     |  | Yes X No           |            |                 |
|     | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)  |                    |            |                 |
|     |  | Yes X No           |            |                 |
|     |  | 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 the benefit or use of a disqualified person)?  | Yes 🗶 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   |                    |            |                 |
|     | , , , , , , , , , , , , , , , , , , ,  | Yes X No           |            |                 |
| 1   | b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations   |                    | - 1        |                 |
|     | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  | N/A                | 1b         |                 |
|     | Organizations relying on a current notice regarding disaster assistance check here   |                    |            |                 |
| (   | c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected  |                    |            |                 |
| _   | before the first day of the tax year beginning in 2011?  |                    | 1c         | <u> </u>        |
| 2   | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation   | 1                  |            |                 |
|     | defined in section 4942(j)(3) or 4942(j)(5)):  At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginn | ına                | ļ          |                 |
| •   |  | Yes X No           | 1          |                 |
|     | If "Yes," list the years   ,,,,,,  | 168 22 110         |            | i               |
| 1   | b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorre                                     | ect                |            |                 |
|     | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attai  |                    |            |                 |
|     | statement - see instructions.)   | N/A                | 2b         |                 |
|     | c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.   |                    |            |                 |
|     | <b>&gt;</b>  |                    |            |                 |
| 3   | a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time  |                    |            |                 |
|     |  | Yes 🗶 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   | <b>I</b>           |            | -               |
|     | May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to   |                    |            | 1               |
|     | of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule  |                    |            | 1               |
|     | Form 4720, to determine if the foundation had excess business holdings in 2011.)   | N/A                | 3b         | <del></del>     |
|     | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  | <b> </b>           | 4a         | X               |
|     | b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpo  | se that            |            | ,,              |
|     | had not been removed from jeopardy before the first day of the tax year beginning in 2011?   |                    | 4b D       | <u>X</u>        |
|     |  | Form               | 330-1      | <b>F</b> (2011) |

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| orm 990-PF (2011) PETTERS FAMILY FOUNDATIO   | N   |                                   | 45-23236   | 42 Page 6                     |
|--|---|-----------------------------------|--|-------------------------------|
| Part VII-B   Statements Regarding Activities for Which I                                   | Form 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            | n 4945(e))?                                   | Y6                                | es 🗶 No  |                               |
| (2) Influence the outcome of any specific public election (see section 4955); of           | r to carry on, directly or indire             |                                   |  |                               |
| any voter registration drive?  |   |                                   | es 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., organizatio          | n 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                                | es 🗶 No  |                               |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit    | der the exceptions described i                | n Regulations                     |  |                               |
| section 53.4945 or in a current notice regarding disaster assistance (see instru           | ctions)?                                      |                                   | N/A  | 5b                            |
| Organizations relying on a current notice regarding disaster assistance check h            | ere   |                                   |  |                               |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for        | rom the tax because it maintai                | ined                              |  |                               |
| expenditure responsibility for the grant?  | N   | // 🔲 Ye                           | es No  |                               |
| If "Yes," attach the statement required by Regulations section 53.494                      | 5-5(d).                                       |                                   |  |                               |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to      | pay premiums on                               |                                   |  |                               |
| a personal benefit contract?   |   | Ye                                | s X No   |                               |
| <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract?                     |                                   | (  | Sb X                          |
| If "Yes" to 6b, file Form 8870   |   |                                   | _  |                               |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s       | helter transaction?                           | Y6                                | s X No   |                               |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu         |   |                                   | N/A  | 7b                            |
| Information About Officers Directors Trust   |   | nagers, Highly                    |  |                               |
| Part VIII Paid Employees, and Contractors  | •   |                                   |  |                               |
| List all officers, directors, trustees, foundation managers and their                      | compensation.                                 |                                   |  |                               |
| A Name and address   | (b) Title, and average hours per week devoted | (c) Compensation<br>(If not paid, | (d) Contributions to<br>employee benefit plans<br>and deterred | (e) Expense<br>account, other |
| (a) Name and address   | to position                                   | enter -0-)                        | and deterred<br>compensation                                   | allowances                    |
| . MICHAEL PETTERS  | SECRETARY/TRE                                 | ASURER                            |  |                               |
| 206 HILTON TERRACE   |   |                                   |  |                               |
| NEWPORT NEWS, VA 23601   | 2.00  | 0.                                | 0.   | 0.                            |
| NANCY B. PETTERS   | PRESIDENT                                     |                                   |  |                               |
| 206 HILTON TERRACE   |   |                                   |  |                               |
| NEWPORT NEWS, VA 23601   | 2.00  | 0.                                | 0.   | 0.                            |
| SARAH W. PETTERS   | VICE PRESIDEN                                 | T                                 |  |                               |
| 206 HILTON TERRACE   |   |                                   |  |                               |
| NEWPORT NEWS, VA 23601   | 2.00  | 0.                                | 0.   | 0.                            |
| CAROLINE G. PETTERS  | VICE PRESIDEN                                 | T                                 |  |                               |
| 206 HILTON TERRACE   |   |                                   |  |                               |
| NEWPORT NEWS, VA 23601   | 2.00  | 0.                                | 0.   | 0.                            |
| Compensation of five highest-paid employees (other than those inc                          | luded on line 1). If none,                    | enter "NONE."                     |  |                               |
| (a) Name and address of each employee paid more than \$50,000                              | (b) Title, and average hours per week         | (c) Compensation                  | (d) Contributions to<br>employee benefit plans<br>and deterred | (e) Expense account, other    |
| (a) Name and address of each employee paid more than \$50,000                              | devoted to position                           | (C) Compensation                  | and deterred<br>compensation                                   | allowances                    |
| NONE   |   |                                   |  |                               |
|  |   |                                   |  |                               |
|  |   |                                   |  |                               |
|  |   |                                   |  |                               |
|  |   |                                   |  | <del></del>                   |
|  |   |                                   |  |                               |
|  |   |                                   |  |                               |
|  |   |                                   |  |                               |
|  |   |                                   |  |                               |
|  |   |                                   |  |                               |
| Total number of other employees paid over \$50,000   |   |                                   | <b>•</b>   | 0                             |
|  |   |                                   | Form \$  | 990-PF (2011)                 |

123551 12-02-11

| P       | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations   | ndations, s   | ee instructions.) |
|---------|--|---------------|-------------------|
| 1       | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:  |               |                   |
| a       | Average monthly fair market value of securities  | _1a           | 0.                |
| b       | Average of monthly cash balances   | 1b            | 31,142.           |
| C       | Fair market value of all other assets  | _1c           |                   |
| d       | Total (add lines 1a, b, and c)   | 1d            | 31,142.           |
| 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             | 31,142.           |
| 4       | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)  | 4             | 467.              |
| 5       | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4   | 5             | 30,675.           |
| 6       | Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD  | 6             | 1,101.            |
| P       | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.) | d certain     |                   |
| 1       | Minimum investment return from Part X, line 6  | 1             | 1,101.            |
| '<br>2а | Tax on investment income for 2011 from Part VI, line 5   | <del>'</del>  |                   |
| b       | Income tax for 2011. (This does not include the tax from Part VI.)   |               |                   |
| C       | Add lines 2a and 2b  | 2c            | 670.              |
| 3       | Distributable amount before adjustments. Subtract line 2c from line 1  | 3             | 431.              |
| 4       | Recoveries of amounts treated as qualifying distributions  | 4             | 0.                |
| 5       | Add lines 3 and 4  | 5             | 431.              |
| 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             | 431.              |
| _       | art XII Qualifying Distributions (see instructions)  | <u> </u>      |                   |
| 1       | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:   | <del></del> _ |                   |
| a       |  | 1a            | 50,000.           |
| 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:   |               |                   |
| a       | Suitability test (prior IRS approval required)   | 3a            |                   |
| Ь       | Cash distribution test (attach the required schedule)  | 3b            |                   |
| 4       | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4   | 4             | 50,000.           |
| 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             | 0.                |
| 6       | Adjusted qualifying distributions. Subtract line 5 from line 4   | 6             | 50,000.           |
|         | Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.               | qualifies for | the section       |

## Part XIII Undistributed Income (see instructions)

|  | (a)<br>Corpus | (b)<br>Years prior to 2010 | (c)<br>2010 | (d)<br>2011               |
|--|---------------|----------------------------|-------------|---------------------------|
| 1 Distributable amount for 2011 from Part XI,  |               |                            |             |                           |
| line 7   |               |                            |             | 431.                      |
| 2 Undistributed income, if any, as of the end of 2011  |               |                            |             |                           |
| a Enter amount for 2010 only   |               |                            | 0.          |                           |
| <b>b</b> Total for prior years:  |               |                            |             |                           |
| ,,   |               | 0.                         |             |                           |
| 3 Excess distributions carryover, if any, to 2011:   |               |                            |             |                           |
| a From 2006  |               |                            |             |                           |
| <b>b</b> From 2007   |               |                            | •           |                           |
| c From 2008  |               |                            |             |                           |
| d From 2009  |               |                            |             |                           |
| e From 2010  |               |                            |             |                           |
| f Total of lines 3a through e  | 0.            |                            |             |                           |
| 4 Qualifying distributions for 2011 from   |               |                            |             |                           |
| Part XII, line 4: ► \$50,000.  |               |                            | _           |                           |
| a Applied to 2010, but not more than line 2a   |               |                            | 0.          |                           |
| <b>b</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 2011 distributable amount   | <del></del>   |                            |             | 431.                      |
| e Remaining amount distributed out of corpus   | 49,569.       |                            |             |                           |
| 5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a)) | 0.            |                            |             | 0.                        |
| 6 Enter the net total of each column as indicated below:   |               |                            |             |                           |
| 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5  | 49,569.       |                            |             |                           |
| 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 2010. Subtract line   |               |                            |             |                           |
| 4a from line 2a. Taxable amount - see instr.   |               |                            | 0.          |                           |
| f Undistributed income for 2011. Subtract  |               |                            |             |                           |
| lines 4d and 5 from line 1. This amount must   |               |                            |             |                           |
| be distributed in 2012   |               | <del></del>                |             | 0.                        |
| 7 Amounts treated as distributions out of  |               |                            |             |                           |
| corpus to satisfy requirements imposed by  | 0.            |                            |             |                           |
| section 170(b)(1)(F) or 4942(g)(3)   | <u> </u>      |                            |             |                           |
| 8 Excess distributions carryover from 2006   | 0.            |                            |             |                           |
| not applied on line 5 or line 7  | <u> </u>      |                            |             |                           |
| 9 Excess distributions carryover to 2012 Subtract lines 7 and 8 from line 6a   | 49,569.       |                            |             |                           |
| Subtract lines 7 and 8 from line 6a  10 Analysis of line 9:  | 49,303        |                            |             | <del> </del>              |
| a Excess from 2007   |               |                            |             |                           |
| b Excess from 2008   |               |                            |             |                           |
| c Excess from 2009   |               |                            |             |                           |
| d Excess from 2010   |               |                            |             |                           |
| e Excess from 2011 49,569.   |               |                            |             |                           |
| <u> </u>   |               | <u> </u>                   |             | Form <b>990-PF</b> (2011) |

|   | FAMILY FOU                 |                              |                            | <u>45-23</u>                           | <u>23642 Page 10</u>                  |
|---|----------------------------|------------------------------|----------------------------|--|---------------------------------------|
| Part XIV Private Operating F  | oundations (see in         | structions and Part V        | II-A, question 9)          | N/A                                    |                                       |
| 1 a If the foundation has received a ruling of                                      | r determination letter tha | at it is a private operating |                            |  |                                       |
| foundation, and the ruling is effective for   | 2011, enter the date of    | the ruling                   | ▶                          |  |                                       |
| <b>b</b> Check box to indicate whether the found                                    | ation is a private operat  | ing foundation described     | in section                 | 4942(j)(3) or49                        | 42(j)(5)                              |
| 2 a Enter the lesser of the adjusted net  | Tax year                   |                              | Prior 3 years              |  |                                       |
| income from Part I or the minimum   | (a) 2011                   | <b>(b)</b> 2010              | (c) 2009                   | (d) 2008                               | (e) Total                             |
| investment return from Part X for   |                            |                              |                            |  |                                       |
| each year listed  |                            |                              |                            |  |                                       |
| b 85% of line 2a  | •                          |                              |                            |  |                                       |
| c Qualifying distributions from Part XII,   |                            |                              |                            |  |                                       |
| line 4 for each year listed   |                            |                              |                            |  |                                       |
| d Amounts included in line 2c not   |                            |                              |                            |  |                                       |
| used directly for active conduct of   |                            |                              |                            |  |                                       |
| exempt activities   |                            |                              |                            |  |                                       |
| e Qualifying distributions made directly  |                            |                              |                            |  | · <del></del>                         |
| for active conduct of exempt activities.  |                            |                              |                            |  |                                       |
| ·   |                            | <b>;</b>                     |                            |  |                                       |
| Subtract line 2d from line 2c<br>3 Complete 3a, b, or c for the                     |                            | <del> </del>                 | -                          |  |                                       |
| alternative test relied upon:   |                            |                              |                            |  |                                       |
| a "Assets" alternative test - enter:  |                            |                              |                            |  |                                       |
| (1) Value of all assets   |                            | <del> </del>                 | -                          | -                                      | -                                     |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i)                       |                            |                              |                            |  |                                       |
| <b>b</b> "Endowment" alternative test - enter                                       |                            |                              |                            |  |                                       |
| 2/3 of minimum investment return<br>shown in Part X, line 6 for each year<br>listed |                            |                              |                            |  |                                       |
| c "Support" alternative test - enter:   |                            |                              |                            |  |                                       |
| (1) Total support other than gross  |                            |                              |                            |  |                                       |
| investment income (interest,  |                            |                              |                            |  |                                       |
| dividends, rents, payments on   |                            |                              |                            |  |                                       |
| securities loans (section<br>512(a)(5)), or royalties)                              |                            |                              |                            |  |                                       |
| (2) Support from general public   |                            |                              | -                          |  |                                       |
| and 5 or more exempt  |                            |                              |                            |  |                                       |
| organizations as provided in<br>section 4942(j)(3)(B)(iii)                          |                            |                              |                            |  |                                       |
| (3) Largest amount of support from  |                            |                              |                            |  | · · · · · · · · · · · · · · · · · · · |
| an exempt organization  |                            |                              |                            |  |                                       |
| , ,   |                            |                              | -                          |  |                                       |
| (4) Gross investment income Part XV Supplementary Info                              | rmation (Compl             | ete this part only           | if the foundation          | n had \$5,000 or mo                    | ore in assets                         |
| at any time during t  |                            |                              |                            | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                                       |
| 1 Information Regarding Foundation  | <del>-</del>               | <u> </u>                     | · <del></del> ·            |  |                                       |
| a List any managers of the foundation wh  | -                          | e than 2% of the total cor   | ntributions received by th | e foundation before the clo            | se of any tax                         |
| year (but only if they have contributed in  |                            |                              |                            |  |                                       |
| NANCY B. PETTERS  |                            |                              |                            |  |                                       |
| b List any managers of the foundation wh  | o own 10% or more of t     | the stock of a corporation   | (or an equally large port  | ion of the ownership of a p            | artnership or                         |
| other entity) of which the foundation ha  |                            |                              |                            |  | •                                     |
| NONE  |                            |                              |                            |  |                                       |
| 2 Information Regarding Contribut   | ion, Grant, Gift, Loar     | n, Scholarship, etc., F      | Programs:                  |  |                                       |
| Check here ► X If the foundation of   |                            |                              |                            | not accept unsolicited requ            | ests for funds. If                    |
| the foundation makes gifts, grants, etc.  |                            |                              |                            |  |                                       |
| a The name, address, and telephone num  | ber of the person to who   | om applications should b     | e addressed;               |  | - <u> </u>                            |
| <b>2</b> ,,   |                            |                              |                            |  |                                       |
|   |                            |                              |                            |  |                                       |
| <b>b</b> The form in which applications should t                                    | pe submitted and inform    | ation and materials they     | should include:            |  |                                       |
| c Any submission deadlines:   |                            |                              |                            | -                                      |                                       |
| A Any restrictions or limitations on success  | e cuph as hy assessed      | nal argae, charitable field  | kinde of inetitutions or   | other factors:                         |                                       |
| d Any restrictions or limitations on award  | s, such as by geographi    | vai aikas, charnadik nelo:   | ว, กแบอ บา เมอนเนนบบเร, 0f | טנווטו ומטנטוס.                        |                                       |
|   |                            |                              |                            |  |                                       |
|   |                            |                              |                            |  |                                       |

| 3 Grants and Contributions Paid During the                            |  | Payment              |                                  |          |
|---|--|----------------------|----------------------------------|----------|
| Recipient   | If recipient is an individual,<br>show any relationship to<br>any foundation manager | Foundation status of | Purpose of grant or contribution | Amount   |
| Name and address (home or business)                                   | or substantial contributor   | recipient            |                                  |          |
| a Paid during the year  |  |                      |                                  |          |
| US NAVAL ACADEMY FOUNDATION   | NONE   | PUBLIC CHARITY       | CURRICULUM                       |          |
| 291 WOOD ROAD, BEACH HALL   |  |                      |                                  |          |
| ANNAPOLIS, MD 21402   |  |                      |                                  | 25,000   |
| UNITED WAY FOR JACKSON AND GEORGE<br>COUNTIES<br>3510 MAGNOLIA STREET | NONE   | PUBLIC CHARITY       | ANNUAL CAMPAIGN                  |          |
| PASCAGOULA MS 39567-3113  |  |                      |                                  | 10,000   |
|   |  |                      |                                  |          |
| UNITED WAY OF THE VIRGINIA PENINSULA                                  | NONE   | PUBLIC CHARITY       | ANNAUL CAMPAIGN                  |          |
| 739 THIMBLE SHOALS BOULEVARD<br>NEWPORT NEWS, VA 23606                |  |                      |                                  | 10,000   |
|   |  |                      |                                  |          |
| UNITED WAY OF SOUTHEAST LOUISIANA<br>2515 CANAL STREET                | NONE   | PUBLIC CHARITY       | ANNUAL CAMPAIGN                  |          |
| NEW ORLEANS, LA 70119   |  |                      |                                  | 5,000    |
|   |  |                      |                                  |          |
|   |  |                      |                                  |          |
|   |  |                      |                                  |          |
| Total   |  |                      | <b>▶</b> 3a                      | 50,000   |
| <b>b</b> Approved for future payment                                  |  |                      |                                  | <b>~</b> |
| NONE  |  |                      |                                  |          |
|   |  |                      |                                  |          |
|   |  |                      |                                  | ····     |
|   |  |                      |                                  |          |
|   |  |                      |                                  |          |
|   |  |                      |                                  |          |
|   |  |                      |                                  |          |
|   |  |                      |                                  |          |
| Total   |  |                      | <b>&gt;</b> 3b                   |          |

| nter gross amounts unless otherwise indicated.   |                         | business income         |                               | led by section 512, 513, or 514 | (e)                               |
|--|-------------------------|-------------------------|-------------------------------|---------------------------------|-----------------------------------|
| 1 Program service revenue:   | (a)<br>Business<br>code | (b)<br>Amount           | (C)<br>Exclu-<br>sion<br>code | (d)<br>Amount                   | Related or exempt function income |
| a  | _                       |                         |                               |                                 |                                   |
| b  | _                       |                         | +                             |                                 |                                   |
| c  | -                       |                         | <del>  </del>                 |                                 |                                   |
| d  | _                       |                         | +-                            |                                 |                                   |
| e  |                         |                         | +-+                           |                                 |                                   |
|  | _                       |                         | +                             | -                               |                                   |
| g Fees and contracts from government agencies  |                         |                         | +                             |                                 |                                   |
| 2 Membership dues and assessments  |                         |                         | +                             |                                 |                                   |
| 3 Interest on savings and temporary cash   | 1                       |                         |                               |                                 |                                   |
| Investments  |                         |                         | 14                            | 3.                              |                                   |
| Dividends and interest from securities   |                         |                         | 1.4                           |                                 |                                   |
| 5 Net rental income or (loss) from real estate:  |                         |                         |                               |                                 |                                   |
| a Debt-financed property   |                         | <del> </del>            | + +                           |                                 |                                   |
| b Not debt-financed property   |                         |                         |                               |                                 |                                   |
| Net rental income or (loss) from personal  |                         |                         |                               |                                 |                                   |
| property 7 Other investment income   |                         |                         |                               |                                 |                                   |
| 3 Gain or (loss) from sales of assets other  |                         |                         | + +                           | -                               | <del></del>                       |
| than inventory   | -   -                   |                         | 18                            | 161.                            |                                   |
| 9 Net income or (loss) from special events   |                         | <del></del>             | 1 -                           |                                 | ••                                |
| O Gross profit or (loss) from sales of inventory   | •                       |                         |                               |                                 |                                   |
| 1 Other revenue:   |                         |                         | 1                             |                                 |                                   |
| a  |                         |                         |                               |                                 |                                   |
| b  | 1 1                     |                         |                               |                                 |                                   |
| c  | I .                     |                         |                               |                                 |                                   |
| d  | 1 1                     |                         |                               |                                 |                                   |
| e  | _                       |                         |                               |                                 | <del></del>                       |
| 2 Subtotal. Add columns (b), (d), and (e)  | -                       | 0                       |                               | 164.                            | 0                                 |
| 3 Total. Add line 12, columns (b), (d), and (e)  |                         |                         |                               | 13                              | 164                               |
| See worksheet in line 13 instructions to verify calculations.)                               |                         |                         |                               |                                 |                                   |
| Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which in | come is reported in     | column (e) of Part XVI- |                               |                                 | nplishment of                     |
| the foundation's exempt purposes (other than the foundation).                                | an by providing fun     | ds for such purposes).  |                               |                                 |                                   |
|  |                         |                         |                               | ·                               |                                   |
|  |                         |                         |                               |                                 |                                   |
|  |                         |                         |                               |                                 |                                   |
|  |                         |                         |                               |                                 |                                   |
|  |                         |                         |                               |                                 |                                   |
|  |                         |                         |                               |                                 |                                   |
|  |                         |                         |                               |                                 |                                   |
|  |                         |                         |                               |                                 |                                   |
|  |                         |                         |                               |                                 |                                   |

| in section 501(c) of the Code (other than section 501(c)(3) | )) or in section 52/7    | Ll Yes                          | LX No |
|---|--------------------------|---------------------------------|-------|
| <b>b</b> If "Yes," complete the following schedule.         |                          |                                 |       |
| (a) Name of organization                                    | (b) Type of organization | (c) Description of relationship |       |
| N/A   |                          |                                 |       |
|   |                          |                                 |       |
|   |                          |                                 |       |
|   |                          |                                 |       |
|   |                          |                                 |       |
|   |                          |                                 |       |

Sign Here

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

|     | May the IRS disci  |         |
|-----|--------------------|---------|
| П   | return with the pr | eparer  |
| וי  | shown below (see   | instr)? |
|     | ▼ v                |         |
| - 1 | LX∟ Yes            | No      |
|     |                    |         |

|                |                                     | butto A              |     |        |                           |              |
|----------------|-------------------------------------|----------------------|-----|--------|---------------------------|--------------|
|                | Print/Type preparer's name          | Preparer's signature | Λ   | Date/  | Check X If self- employed | PTIN         |
| Paid           | MICHAEL S. HAIGH                    | Men 214              |     | 519112 |                           | P00057578    |
| Prepa<br>Use O |                                     | PLC /                | 1 ( | •      | Firm's EIN ► 5            | 4-1184709    |
|                | Firm's address ► 701 TOWN NEWPORT N | CENTER DRIVE,        |     | 900    | Phone no. 7               | 57- 873-1587 |

# 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

|  | PETTERS FAMILY FOUNDATION   | 45-2323642   |
|--|---|--|
| Organization type (checl                                 | k one)  |  |
| Filers of:   | Section:  |  |
| Form 990 or 990-EZ                                       | 501(c)( ) (enter number) organization   |  |
|  | 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation  | on   |
|  | 527 political organization  |  |
| Form 990-PF  | X 501(c)(3) exempt private foundation   |  |
|  | 4947(a)(1) nonexempt charitable trust treated as a private foundation   |  |
|  | 501(c)(3) taxable private foundation  |  |
|  |   |  |
|  | on is covered by the <b>General Rule</b> or a <b>Special Rule.</b> (c)(7), (8), or (10) organization can check boxes for both the General Rule and a S  | pecial Rule See instructions   |
| General Rule   |   |  |
|  | tion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or m<br>mplete Parts I and II.  | ore (in money or property) from any one                                    |
| Special Rules  |   |  |
| 509(a)(1) and 17   | D1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of 70(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II   | on of the greater of (1) \$5,000 or (2) 2%                                 |
| total contribution                                       | 01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any organs of more than \$1,000 for use exclusively for religious, charitable, scientific, literatof cruelty to children or animals. Complete Parts I, II, and III   |  |
| contributions fo<br>If this box is che<br>purpose. Do no | O1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any or use exclusively for religious, charitable, etc., purposes, but these contributions decked, enter here the total contributions that were received during the year for an at complete any of the parts unless the <b>General Rule</b> applies to this organization bable, etc., contributions of \$5,000 or more during the year. | did not total to more than \$1,000 exclusively religious, charitable, etc, |
| but it must answer "No"                                  | on that is not covered by the General Rule and/or the Special Rules does not file So<br>on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ o<br>neet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)  |  |

Name of organization

Employer identification number

| PETTE      | RS FAMILY FOUNDATION  | 45                        | 5-2323642  |
|------------|---|---------------------------|--|
| Part I     | Contributors (see instructions) Use duplicate copies of Part I if ad        | ditional space is needed. |  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c) Total contributions   | (d) Type of contribution   |
| 1          | NANCY B PETTERS REVOCABLE TRUST  206 HILTON TERRACE  NEWPORT NEWS, VA 23601 | \$33,346.                 | Person Payroll Noncash X (Complete Part II if there is a noncash contribution) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c) Total contributions   | (d) Type of contribution   |
| 2          | NANCY B PETTERS REVOCABLE TRUST  206 HILTON TERRACE  NEWPORT NEWS, VA 23601 | \$ <u>1,000,000.</u>      | Person X Payroll   |
| (a)<br>No. | (b) Name, address, and ZIP + 4  | (c) Total contributions   | (d) Type of contribution   |
|            |   | <b>\$</b>                 | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c) Total contributions   | (d) Type of contribution   |
|            |   | <b>\$</b>                 | Person Payroll Oncash Complete Part II if there is a noncash contribution )    |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c) Total contributions   | (d) Type of contribution   |
|            |   | <b>\$</b>                 | Person Payroll Noncash (Complete Part II if there is a noncash contribution)   |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c) Total contributions   | (d) Type of contribution   |
|            |   | <b>\$</b>                 | Person Payroll Noncash (Complete Part II of there Is a noncash contribution)   |

Employer identification number

| rt II                        | Noncash Property (see instructions). Use duplicate copies of Part    | II if additional space is needed         | -                    |
|------------------------------|--|--|----------------------|
|                              | Notices in Froberty (see instructions). Ose duplicate copies of Part | II ii additional space is fleeded.       | <u> </u>             |
| (a)<br>No.<br>rom<br>Part I  | (b)  Description of noncash property given                           | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
| 1                            | 584 NORTHROP GRUMMAN COMMON STOCK                                    |  |                      |
|                              |  |  | 12/21/11             |
| (a)<br>No.<br>rom<br>Part I  | (b)  Description of noncash property given                           | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                              |  |  |                      |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                           | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                              |  |  |                      |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                           | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                              |  | <br>                                     |                      |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                           | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                              |  |  |                      |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                           | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                              |  |  |                      |

| Name of or                | ganization                                     |  | Employer identification number   |
|---------------------------|--|--|--|
| PETTE                     | RS FAMILY FOUNDATION                           |  | 45-2323642   |
| Part III                  | Exclusively religious, charitable, etc., indiv | c., contributions of \$1,000 or less for | (7), (8), or (10) organizations that total more than \$1,000 for the ns completing Part III, enter the year. (Enter this information once) |
| (a) No.<br>from<br>Part I | (b) Purpose of gift                            | (c) Use of gift                          | (d) Description of how gift is held  |
|                           |  |  |  |
|                           |  | (e) Transfer of gif                      | 1  |
|                           | Transferee's name, address, a                  | nd ZIP + 4                               | Relationship of transferor to transferee   |
|                           |  |  |  |
| (a) No.<br>from<br>Part I | (b) Purpose of gift                            | (c) Use of gift                          | (d) Description of how gift is held  |
|                           |  |  |  |
|                           |  | (e) Transfer of gif                      | 1  |
|                           | Transferee's name, address, a                  |  | Relationship of transferor to transferee   |
| (a) No.                   |  |  |  |
| from Part I               | (b) Purpose of gift                            | (c) Use of gift                          | (d) Description of how gift is held  |
|                           |  |  |  |
|                           |  | (e) Transfer of gif                      |  |
|                           | Transferee's name, address, a                  | nd ZIP + 4                               | Relationship of transferor to transferee   |
|                           |  |  |  |
| (a) No.<br>from<br>Part I | (b) Purpose of gift                            | (c) Use of gift                          | (d) Description of how gift is held  |
|                           |  |  |  |
|                           |  | (e) Transfer of gif                      | <u> </u>   |
|                           | Transferee's name, address, a                  | nd ZIP + 4                               | Relationship of transferor to transferee   |
|                           |  |  |  |

| FORM 990-PF GAIN OF                                       | R (LOSS) FR                      | OM SALE OF   | ASSETS            |                                    | STATE  | EMENT                             | 1        |
|---|----------------------------------|--|-------------------|------------------------------------|--------|-----------------------------------|----------|
| (A)<br>DESCRIPTION OF PROPERTY                            |                                  |  | MANNER<br>ACQUIRE |                                    |        | DATE SO                           | )LD      |
| 584 SHARES NORTHRUP GRUMMAN (                             | CORP                             | _  |                   | 11/22                              | 2/11   | 12/22/                            | 11       |
| GROSS VAI   | (C)<br>LUE AT<br>OF ACQ.         | (D)<br>EXPENSE OF<br>SALE                          | י                 | E)<br>REC.                         | GAIN ( | •                                 | 5        |
| 33,507.   | 33,346.                          | 0  | ).                | 0.                                 |        | 16                                | 51.      |
| CAPITAL GAINS DIVIDENDS FROM                              | PART IV                          | . <u>.</u>   |                   |                                    |        |                                   | 0.       |
| TOTAL TO FORM 990-PF, PART I                              | , LINE 6A                        |  |                   | _                                  |        | 16                                | 51.      |
|   |                                  |  |                   |                                    |        |                                   |          |
|   |                                  |  |                   |                                    |        |                                   |          |
| FORM 990-PF DIVIDENT                                      | DS AND INTE                      | REST FROM  | SECURIT           | IES                                | STATE  | EMENT                             | 2        |
|   |                                  | REST FROM  | CAPITA            | IES<br>L GAINS<br>DENDS            | COLU   | EMENT  JMN (A)  MOUNT             |          |
| FORM 990-PF DIVIDENT SOURCE CHARLES SCHWAB                |                                  |  | CAPITA            | L GAINS                            | COLU   | JMN (A)                           |          |
| SOURCE  | GROS                             | S AMOUNT   | CAPITA            | L GAINS<br>DENDS                   | COLU   | JMN (A)                           |          |
| SOURCE  CHARLES SCHWAB  TOTAL TO FM 990-PF, PART I, I     | GROS<br>LN 4                     | S AMOUNT  3.  3.                                   | CAPITA            | L GAINS<br>DENDS                   | COLU   | JMN (A)                           | 3.       |
| SOURCE<br>CHARLES SCHWAB<br>TOTAL TO FM 990-PF, PART I, I | GROS<br>LN 4                     | S AMOUNT   | CAPITA            | L GAINS<br>DENDS                   | COLU   | JMN (A)                           | 3.       |
| SOURCE<br>CHARLES SCHWAB                                  | GROS<br>LN 4                     | S AMOUNT  3.  3.  EXPENSES  (B)  NET INVE          | CAPITA<br>DIVI    | L GAINS<br>DENDS                   | STATE  | JMN (A)                           | 3.<br>3. |
| SOURCE  CHARLES SCHWAB  TOTAL TO FM 990-PF, PART I, I     | GROS  LN 4  OTHER  (A)  EXPENSES | S AMOUNT  3.  3.  EXPENSES  (B)  NET INVE MENT INC | CAPITA<br>DIVI    | L GAINS OENDS  0.  0.  C) ADJUSTEI | STATE  | JMN (A) MOUNT  EMENT  (D) HARITAE | 3.<br>3. |

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT

NAME OF CONTRIBUTOR

NANCY B. PETTERS

ADDRESS

206 HILTON TERRACE

NEWPORT NEWS, VA 23601