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Return of Organization Exempt From Income Tax

OMB No 1545-0047

2012

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) ► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

Α	For th	ne 2012 calend	lar year, or tax year	beginning Jul	1	, 2012, and e	nding	Jun 30		2013	
В	Check	f applicable	C Name of organization	Project Di	scovery of	Virginia	, Inc	D Emp	loyer identi	fication Number	
	Ac	ldress change	Doing Business As	-	_	_		I	-13693	308	
	Na	ame change	Number and street (or	PO box if mail is not o	delivered to street add	ír) F	Room/suite	E Tele	phone numb	er	
		itial return	1200 Electri	c Road				(5	40) 38	39-9900	
	H_{Te}	erminated	City, town or country	<u> </u>		State ZIP cod	de + 4		10, 0	3 3300	
	 - 	mended return	Salem		•	VA 241		1 0 G Gros	raceints S	1,035,808	
	H	optication pending	F Name and address of	principal officer	 	VA 241		Is this a group re			X No
	L^-	phication pending		•		177					No
_	Tav	exempt status	Ronald Jones 12 X 501(c)(3) 501			VA 24153 47(a)(1) or 52	1-141P	Are all affiliates i If 'No,' attach a li	ist (see inst	ructions)	L
<u>; </u>		bsite: ► N/		(6) () (1	11561 (110.) 143	47(4)(1) 01 32		Group exemption	numbar ►		
K			1-1		Other ►	1 Van -45				and demonstra TTD	
		of organization		st Association	Other	L Year of F	ormation	1985	I State of le	gal domicile VA	<u>_</u>
12	art I	Summar	<u>/</u> oe the organization's	mission or most s	ianificant activiti	os = :					
	' '	=	=		-			<u>access</u>	to an	<u>d prepare</u>	
Se			ry_through_h		stagents I	or succes	s_1n_				
Activities & Governance		post-sec	ondary_educa	C10II.							
Ver	2	Check this bo	y F Tuf the organ	nization discontinue		or disposed of	more tha		net asset		
င္ဟ	3		ting members of the			or disposed or		111 23 70 O1 113	3	.5.	16
∘ಶ	4		lependent voting me			VI, line 1b)			4		16
ijes	5		of individuals emplo						5		4
Ξ	6		of volunteers (estim						6		12
Ac	7a	Total unrelate	d business revenue business taxable inc	from Part VIII, colι	ımn (C), line 12	CEIVED			7a	20,	996.
	b	Net unrelated	business taxable inc	come from Form 99	00-T line 34		<u> </u>		7b	10,	121.
							လ	Prior Yea	ır	Current Ye	ar
Φ.	. 8	Contributions	and grants (Part VIII	l, line 1h)	MAR S	0 5 2014	0	1,413,	495.	984,	908.
Ž	9 (10 ₂ 11		ce revenue (Part VII		0	• • • • • • • • • • • • • • • • • • • •	(C)	•			
eve.	3 10	Investment in	come (Part VIII, colu	mn (A), lines 3, 4,	and 7d)				572.		278.
			e (Part VIII, column (810.		108.
	₁12		- add lines 8 through			1 (A), line 12)		1,462,		1,014,	
	<u></u> =13		milar amounts paid (•				1,005,	069.	824,	<u>468.</u>
3.4	4 =	•	to or for members (F		•						
_	1 15	Salaries, other	r compensation, em	ployee benefits (Pa	art IX, column (A	(), lines 5-10)	· _	281,	978.	275,	797.
Expenses)	16 a	Professional 1	undraising fees (Par	t IX, column (A), lı	ne 11e)						
Ę.	b	Total fundrais	ing expenses (Part I	X, column (D), line	25) ►	2,17	8.				
		Other expens	es (Part IX, column ((A). lines 11a-11d.	11f-24e)		_ -	180.	959.	173,	885.
S.	18		s Add lines 13-17 (i			e 25)		1,468,		1,274,	
Ψ.		•	expenses. Subtract	•		,			129.	-259,	
88					-		Re	ginning of Curr		End of Yea	
alan	20	Total assets (Part X, line 16)					1,001,		705,	
AB	21	*	(Part X, line 26)						498.		367.
Net Assets Fund Baland	22		fund balances Subt	ract line 21 from lu	ne 20				891.	375,	
	rt II	Signatur		Tact line 21 homin				034,	091.1	313,	033.
				the seture uncluding acc	companyes schodulo	s and statements as	d to the hea	et of my knowled	as and halia	f it is touch convent	
com	er penar plete De	cles of perjury, I de eclaration of prepa	clare that I have examined er (other than officer) is ba	ased on all information of	which preparer has	s and statements, ar any knowledge	ia to trie be:	st or my knowledg	ge and belle	i, it is true, correct, .	ano
			Gold Line					2/2	6/14	,	
Siç	n	Signatu	e of officer					Date	//		
He	re	Pon	ald Jones				ጥャ	ceasurer			
	. •		print name and title		·····		- 11	casarer	_		
		Print/Type p	reparer's name	Preparer's sign	nature .	Date,	1	Check	ıf F	TIÑ	
D-	اء:	,	W. Kelly		o W. Kel	h 2/2	21/14	self-emplo	_	00045759	
Pa	ıa epare		Robinson		Associates		<u> </u>	3011-011pi	-,-u E	00043139	
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NA -	. 14 **	DC di	Verona	naray ahaum ahaum	VA	24482-25	υo	Phone no	(540	` , 	
ivia	y the II	หอ aiscuss thi	s return with the pre	parer snown abovê	 (see instruction) 	HS)				X Yes	No

ВАА	TEEA0102 08/08/12	Form	1 990 (2012)
4 e Total program service expens			
(Expenses \$	including grants of \$) (Revenue	· \$)
4 d Other program services (Desc	ribe in Schedule O)	.	
			- -
 -			
			-
4c (Code) (Expense:	s \$ including grants of \$) (Revenue \$)
		·	
		·	
		·	
(Code) (Expense:	including grants of \$	- > (L/cheung A	<i>`</i>
4b (Code) (Expense:	s \$ including grants of \$) (Revenue \$	
		·	
			
	o help plan children's futures		
	education and provide parents		-
	ess to minority and low income		
4a (Code.) (Expense	s \$ 1,274,150. including grants of \$ 824,468.	.) (Revenue \$	0.
others, the total expenses, and	revenue, if any, for each program service reported		
Section 501(c)(3) and 501(c)(4	ogram service accomplishments for each of its three largest program so organizations and section 4947(a)(1) trusts are required to report the	e amount of grants and allo	penses. cations to
If 'Yes,' describe these change		convene on management by a	nonces
-	ducting, or make significant changes in how it conducts, any program	services? Yes	X No
If 'Yes,' describe these new se] [
Form 990 or 990-EZ?		Yes	X No
2 Did the organization undertake	any significant program services during the year which were not listed	d on the prior	
post-secondary_edu	cation.		
	high school students for success in		
To increase access			
 Briefly describe the organization 	n's mission.	_	
3.	ntains a response to any question in this Part III		
Rantill Statement of Prog	ram Service Accomplishments		
Form 99 (2012) Project Di	scovery of Virginia, Inc.	54-1369308	Page 2

Form 994 (2012) Project Discovery of Virginia, Inc.
Part IV Checklist of Required Schedules

	TOTAL CONTROL OF TROUBLES		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II</i>	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9	-	X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	,	* * * * * ·	3.
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII</i>	11 ь		Х
	c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		X
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		<u>X</u>
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		<u> </u>
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>x</u>
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If 'Yes,' complete Schedule F, Parts I and IV</i>	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		<u>X</u> _
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Form 998 (2012) Project Discovery of Virginia, Inc.
Partily Checklist of Required Schedules (continued)

3.			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		x
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M .	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> 'Yes,' <i>complete Schedule R, Part I</i>	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
t	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	х	
BAA		Form	990 (2012)

	Check if Schedule O contains a response to any question in this Part V				Γ
				Yes	No
1:	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 1			
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	1		
	c Did the organization comply with backup withholding rules for reportable payments to vendors	<u> </u>			
	(gambling) winnings to prize winners?		1 c		
2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-				
	ments, filed for the calendar year ending with or within the year covered by this return	2 a 4			
١	b If at least one is reported on line 2a, did the organization file all required federal employment		2 b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see ins	· · · · · · · · · · · · · · · · · · ·			
	a Did the organization have unrelated business gross income of \$1,000 or more during the year	?	3 a	X	
l	b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		3 Ь	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature of financial account in a foreign country (such as a bank account, securities account, or other financial account.)	r other authority over, a ancial account)?	4 a		х
	b If 'Yes,' enter the name of the foreign country.				
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Fire				
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax	•	5 a		$\frac{\hat{x}}{x}$
	o Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter or If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	transaction	5 b 5 c		
		•	36		
	Does the organization have annual gross receipts that are normally greater than \$100,000, an solicit any contributions that were not tax deductible as charitable contributions?	-	6 a		Х
	olf 'Yes,' did the organization include with every solicitation an express statement that such connot tax deductible?	tributions or gifts were	6 b		
7	Organizations that may receive deductible contributions under section 170(c).				
ä	Did the organization receive a payment in excess of \$75 made partly as a contribution and pai services provided to the payor?	rtly for goods and	7 a		Х
ŀ	o If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b	٠	
•	Did the organization sell, exchange, or otherwise dispose of tangible personal property for white	ch it was required to file			х
	Form 82827	7 d	7с		
	If 'Yes,' indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal b		7 e		X
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benef Did the organization, during the year, pay premiums, directly or indirectly, on a personal benef		7 f		X
	If the organization received a contribution of qualified intellectual property, did the organization				
	as required?		7 g		
,	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the of Form 1098-C?	rganization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, have holdings at any time during the year?	organizations. Did the ve excess business	8		·-· -
9	Sponsoring organizations maintaining donor advised funds.		-		
	Did the organization make any taxable distributions under section 4966?		9 a		
	Did the organization make a distribution to a donor, donor advisor, or related person?		9 b	+	
	Section 501(c)(7) organizations. Enter.				
	Initiation fees and capital contributions included on Part VIII, line 12	10a	1		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		ĺ	
	Section 501(c)(12) organizations. Enter			ŀ	
	Gross income from members or shareholders	11 a	- 1	ĺ	
ŀ	Gross income from other sources (Do not net amounts due or paid to other sources		ĺ		
	against amounts due or received from them.)	11 b			
12 a	Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of		12 a		
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.				
ē	Is the organization licensed to issue qualified health plans in more than one state?	_	13a		
	Note. See the instructions for additional information the organization must report on Schedule	Ú.			
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
	Enter the amount of reserves on hand	13 c			
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
t	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Sci	nedule O	14b		

Form 990 (2012)

Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for Part VI a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management No Yes 1 a 1 a Enter the number of voting members of the governing body at the end of the tax year 16 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 1 b 16 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X 5 Х Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Х 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7 a Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b stockholders, or other persons other than the governing body? X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 a a The governing body? X 8 b Х b Each committee with authority to act on behalf of the governing body? Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates? 10 a Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b operations are consistent with the organization's exempt purposes? 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a i Х b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12 c Х Х Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 Х Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a 15 b X b Other officers of key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16 a Х taxable entity during the year? b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the 16 b organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ Virginia Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available. Check all that apply. Other (explain in Schedule O) Another's website Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization 1200 Electric Road Salem VA 24151-1410 (540) 389-9900

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BAA

Form 990 (2012)	Project	Discovery	٥f	Virginia.	Tnc
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54-1369308

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees, highest compensated employees; and former such persons.

Check this box if neither the organization	n nor any r	elated	lorg	janiz	atio	n com	pen	sated any current office	cer, director, or truste	e
		-		((;)					
(A) Name and Title	(B) Average hours per week (list any hours	one bo offic	x, uni er an	less p d a d	ersor	more the more the more than th	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other compensation
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Barry W. Simmons, Sr.	3.00									
President		X		X				0.	0.	0.
(2) David Anderson	3.00									
Vice-President		Х		X				0.	0.	0.
(3) Ronald J. Jones	3.00									
Treasurer		Х		Х				0.	0.	0.
(4) Russell N. Poindexter	3.00	х		х				0.	0.	0.
(5) Vivian Stith-Williams	3.00									
Ex-Officio		х		х				0.	0.	0.
(6) Robert Bloxom	3.00									
Board		Х						0.	0.	0.
(7) Kevin Holmes	3.00									
Board		X						0.	0.	0.
(8) Suzanne S. Kratzok Board	3.00	х						0.	0.	0.
(9) Carolyn B. Lewis	3.00	-								<u>.</u>
Board	- 3.00	х						0.	0.	0.
(10) Rick Watson	3.00									<u></u>
Board		x						0.	o.	0.
(11) Sherman M. Saunders	3.00							Ų I		<u></u> _
Board		х		- 1				0.	0.	0.
(12) Michael O'Grady	3.00									
Board		x				i		0.	0.	0.
(13) Vicki Lynn Alvord	3.00									
Board		Х						0.	0.	0.
(14) Robert D. Ayers, Jr.	3.00									
Board		Х						0.	0.	0.

Page 8

Part VII Section A. Officers, Directors, Trus	1	Key	En			es,	and	d Highest Com	pensated Emp	loyees (cont)_
(A) Name and title	Average hours per week	box,	unle	Pos heck	rson	than is both or/trus	n an stee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	(list any hours for related organiza - tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15) Eric Hairston Board	3.00	х						0.	0.	0
(16) Kevin D. Jones Board	3.00	х						0.	0.	0
(17) Jeffrey North Executive Director	40.00	х			х			87,257.	0.	0
(18)										
(19)	-						-			
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1 b Sub-total							•	87,257.	0.	0
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)					•		>	87,257.	0.	0.
2 Total number of individuals (including but not limite from the organization ►	a to thos	se IIS	tea	abov	/e) v 	vno i	rece	eived more than \$1	ou,uuu ot reportab	
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such it			ey e	mpl	oye	e, or	hıgl	nest compensated	employee	Yes No
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t such individual	portable han \$15	com 0,000	ipen 02 <i>li</i>	satı f 'Ye	on a s' co	nd o ompl	ther ete	compensation fro Schedule J for 	m	4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' or	ompens complete	ation Sch	froi edu	m ar le J	ny u for s	nrela such	ted <i>per</i> :	organization or in son	dıvıdual	5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensation from the organization. Report compensation of the organization of the org	ed indep	ende	ent o	onti	racto	ors th	nat r	eceived more that	n \$100,000 of	ax vear
compensation from the organization. Report compensation for the calendar year ending with or within the organization's to (A) (B) Name and business address Description of services									(C) Compensation	
2 Total number of independent contractors (including	but not	lımıte	ed to	tho	se l	sted	abo	ove) who received	more than	
\$100,000 in compensation from the organization	;								er .	

<u>. ui</u>	Check if Schedule O contains a response	onse to any questic	on in this Part VIII			
		3,423	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns 1 a b Membership dues 1 b	161,311.				0.2, 0.0, 0. 011
AR A	c Fundraising events 1 c d Related organizations 1 d		-			
NS, C	e Government grants (contributions) 1 e	786,269.				
RIBUTIO OTHER (f All other contributions, gifts, grants, and similar amounts not included above	37,328.	-			
AND DA	g Noncash contributions included in lns 1a-1f \$	31,0201				
	h Total. Add lines 1a-1f	•	984,908.			
ENO	_	Business Code				
PROGRAM SERVICE REVENUE	2a					
길	b	.				
	d					
₩	e					
8	f All other program service revenue					
2	g Total. Add lines 2a-2f	•				
	Investment income (including dividends other similar amounts)	•	278.	0.	0.	278.
	4 Income from investment of tax-exempt					
	5 Royalties . (1) Real	(II) Personal				
	6 a Gross rents 42,510	 				
	b Less rental expenses 21,514		•			
	c Rental income or (loss) 20,996					
	d Net rental income or (loss)	>	20,996.	0.	20,996.	0.
	7 a Gross amount from sales of (i) Securities	(ii) Other				
	assets other than inventory					
	b Less cost or other basis and sales expenses					
	c Gain or (loss)			2		ļ <u>-</u>
	d Net gain or (loss)	<u> </u>				
OTHER REVENUE	8 a Gross income from fundraising events (not including \$					
2	0 5 10/1 10	a			!	
皇		b				
5	c Net income or (loss) from fundraising ev	vents . ►				
	9a Gross income from gaming activities See Part IV, line 19	a		-		
	b Less direct expenses	ь				
	c Net income or (loss) from gaming activi	ties ►				
	10a Gross sales of inventory, less returns and allowances	a				
	2 2000 0000 0, 90000 00,0	b				
	c Net income or (loss) from sales of inver					
}	Miscellaneous Revenue	Business Code	-			
	''a					
	d All other revenue		8,112.	8,112.	0.	0.
	e Total. Add lines 11a-11d	•	8,112.			
	12 Total revenue. See instructions	•	1,014,294.	8,112.	20,996.	278.

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX (C) (D) (A) Total expenses Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII Fundraising Program service Management and general expenses expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 824,468 824,468. Grants and other assistance to individuals in the United States, See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 4,799 436. 87,257 82,022 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 6,993 Other salaries and wages 127,141 119,512. 636. Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions) 21,440. 20,154. 1,179 107. 23,554 1,295 118. 22,141. Other employee benefits 10 Payroll taxes 902 82. 16,405 15,421. Fees for services (non-employees) a Management 212 12 1. **b** Legal 225. 40. c Accounting 8,098. 7,613. 445. **d** Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees g Other, (If line 11g amt exceeds 10% of line 25, col-31,340 29,459 1,724 157. umn (A) amt, list line 11g expenses on Sch O) Advertising and promotion 2,250 2,115 124 11. 13 Office expenses 532 48. 9,670 9,090 14 Information technology 12,259 717 <u>65.</u> 13,041 15 Royalties 16 Occupancy 74. 17 Travel 810 14,734 13,850 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 3,363 0 3,363 0. 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 3,666. 202 <u> 18.</u> 3,446 23 15. 3,052 2,869 168 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 2. 307 288 17 a Other_____ 407 37. b <u>Utilities_____</u> 7,398 6,954 342 31. c Property expenses 6,226. 5,853 0 0. d Scholarship expense 10,500 10,500 e All other expenses 60,015 56,414 3,301 300. 27,332 2,178. 25 Total functional expenses. Add lines 1 through 24e 1,274,150. 1,244,640 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► if following

SOP 98-2 (ASC 958-720)

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (B) End of year (A) Beginning of year 1 392,050 165,328. Cash - non-interest-bearing 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 4 Accounts receivable, net 323,487 262,598. Loans and other receivables from current and former officers, directors trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 8 Inventories for sale or use Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10 a 387,756 b Less accumulated depreciation 10b 10 c 110,280 285,852 277,476. Investments - publicly traded securities 11 11 Investments - other securities See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 0. 14 Other assets See Part IV, line 11 15 15 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,001,389 705,402. Accounts payable and accrued expenses 196,796 172,662. 17 17 Grants payable 18 18 Deferred revenue 19 2,000. 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 155,705. 169,702 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 366,498 26 330,367. Organizations that follow SFAS 117 (ASC 958), check here > 1/2 | and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 375,035. 634,891 Temporarily restricted net assets 28 28 29 29 Permanently restricted net assets Q R Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 32 Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances 634,891 33 375,035. 33 Total liabilities and net assets/fund balances 34 34 1,001,389 705,402.

BAA

Form 990 (2012)

Forn	1 990° (2012) Project Discovery of Virginia, Inc.	54-1369308		Pa	ige 12			
Pai	t XI Reconciliation of Net Assets							
	Check if Schedule O contains a response to any question in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,0	14,2	294.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,2	74,1	150.			
3	Revenue less expenses. Subtract line 2 from line 1	3	-2	59,8	356.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6	34,8	391.			
5	Net unrealized gains (losses) on investments .	. 5						
6	Donated services and use of facilities .	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9						
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3	75,0	35.			
Pa	t XII Financial Statements and Reporting							
	Check if Schedule O contains a response to any question in this Part XII							
				Yes	No			
1	Accounting method used to prepare the Form 990:				ĺ			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O								
2 :	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		Х			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both:	wed on a						
	Separate basis Consolidated basis Both consolidated and separate basis							
1	Were the organization's financial statements audited by an independent accountant?		2 b	Х				
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep	arate						
	basis, consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis							
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	of the audit,	2 c	х				
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O							
3 :	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?							
I	of 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the roor audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired audit	3 b					
BAA			Form	990 (2012)			

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

			of Virginia,							36930			
Part	I Re	eason for Publ	ic Charity Status	(All organizations	must	compl	ete this	s part.) See	nstruc	tions.		
The or	ganıza	tion is not a privat	te foundation because	it is (For lines 1 throu	ıgh 11, c	heck or	ly one b	ox)					
1	A c	hurch, convention	of churches or assoc	iation of churches desc	ribed in	section	170(b)(1)(A)(i).					
2	∏A s	chool described in	section 170(b)(1)(A)	(ii). (Attach Schedule E	.)								
3	HAR	ospital or a coope	erative hospital service	e organization describe	d in sec	tion 170	(bX1XA	Xiii).					
4	\blacksquare		·	in conjunction with a hi					(b)(1)(A)	(iii) Ent	er the hospital's		
		ne, city, and state		• • • • • • • • • • • • • • • • • •					(~)(.)(.,	(,			
5		•		a college or university	owned o	or opera	ted by a		mental i	nut desc	ribed in section		
•	片170)(b)(1)(A)(iv). (Coi	mplete Part II)			-	•	-	inontal t	ant dosc	noca in Section		
6	∐ A f	ederal, state, or lo	cal government or go	vernmental unit describ	oed in se	ection 17	70(b)(1)(A)(v).					
7	Hims	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(b)(1)(Complete Part II)											
8	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)												
9	rela ٰ ا	An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2).											
	(Cc	mplete Part III)	·	•	·	•	_						
10	L	5	•	clusively to test for pul		-			•				
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h												
	a Type I b Type II c Type III — Functionally integrated d Type III — Non-functionally integrated												
е													
f	If th		ceived a written deter	mination from the IRS t	that is a	Type I,	Type II o	r Type	III suppo	orting or	ganization,		
g)6 has the organization	on accepted any gift or	contribi	ition fro	m any of	f the fol	lowing n	ersons?			
9	0	cc / tagast //, 200	o, nas the organization	on accepted any gift of	CONTRIBE	20011 1101	in any o	THE IOI	lowing p	C130113	Yes No		
	(i)	A person who d	lirectly or indirectly co	ntrols, either alone or t	together	with per	sons de	scribed	ın (ıı) ar	nd (III)	1 1		
		below, the gove	erning body of the sup	ported organization?							11 g (i)		
	(ii)	A family memb	er of a person describ	ed in (i) above?							11 g (ii)		
	(iii)	A 35% controlle	ed entity of a person o	lescribed in (i) or (ii) at	oove?						11 g (iii)		
h	Pro	vide the following	information about the	supported organization	n(s).						1.19(/		
	(i) N	lame of supported	(iı) EIN	(iii) Type of organization	(iv) I	s the	(v) Did yo	u notify	(vn)	s the	(vii) Amount of monetary		
	•	organization		(iii) Type of organization (described on lines 1-9 above or IRC section	organization in column (i) listed in		the organi column (i) supp	zation in	organiz	ation in nn (i)	support		
				(see instructions))	your go docur	iverning ment?	supp	ort?	organize U	d in the			
					Yes	No	Yes	No	Yes	No			
-							1						
(A)							1		İ				
```									1				
(B)					1								
(-/			-	· · ·			 	-	 				
(C)													
(0)					 	 	1		 				
(D)						1							
(D)					-	 	 	 	1				
(E)													
<u>\-/</u>					 	 	-	ļ	 				
Total													
	or Par	nerwork Reduction	n Act Notice, see the	Instructions for Form 9	990 or 99	0-EZ	•	1	Schedul	e A (For	m 990 or 990-EZ) 2012		
~~~ .	J, 1 a	po. noin ilcuucilo							- J	(1 01			

54-1369308

### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support									
begiı	ndar year (or fiscal year nning in) ►	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	<b>(e)</b> 2012	2	(f) Total		
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	1,230,381.	1,302,482.	1,428,268.	1,413,495.	984,9	08.	6,359,534.		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf									
3	The value of services or facilities furnished by a governmental unit to the organization without charge									
4	Total. Add lines 1 through 3	1,230,381.	1,302,482.	1,428,268.	1,413,495.	984,9	08.	6,359,534.		
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)									
6	Public support. Subtract line 5 from line 4							6,359,534.		
<u>Sec</u>	tion B. Total Support									
	ndar year (or fiscal year nning in) ►	<b>(d)</b> 2011	<b>(e)</b> 2012	2	(f) Total					
7	Amounts from line 4	1,230,381.	1,302,482.	1,428,268.	1,413,495.	984,9	08.	6,359,534.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,273.	2,520.	1,306.	572.	278.		8,949.		
9	Net income from unrelated business activities, whether or not the business is regularly carried on		, ===				· · · · · ·	9,000		
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)									
11	Total support. Add lines 7 through 10							6,368,483.		
12	Gross receipts from related activ	ities, etc (see inst	ructions)				12			
13	First five years. If the Form 990 organization, check this box and	is for the organiza stop here	tion's first, second	d, third, fourth, or	fifth tax year as a	section 501(	(c)(3)	▶ □		
Sec	tion C. Computation of Pu	blic Support P	ercentage							
14	Public support percentage for 20	12 (line 6, column	(f) divided by line	11, column (f))			14	99.86%		
15	Public support percentage from 2	2011 Schedule A,	Part II, line 14			L	15	99.71%		
16 a	33-1/3% support test — 2012. If and stop here. The organization				the line 14 is 33-	1/3% or mor	e, che	eck this box		
b	33-1/3% support test — 2011. If t and stop here. The organization	the organization di qualifies as a pub	d not check a box licly supported org	on line 13 or 16a ganization	, and line 15 is 33	-1/3% or mo	re, ch	eck this box		
17 a	10%-facts-and-circumstances te or more, and if the organization in the organization meets the 'facts	meets the 'facts-ai	nd-circumstances'	test, check this b	ox and stop here.	Explain in P	art IV	0% how ►		
	b 10%-facts-and-circumstances test — 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization									
18 ——	Private foundation. If the organiz	zation did not ched	k a box on line 13	3, 16a, 16b, 17a, c	or 17b, check this l	box and see	ınstru	ictions		

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

Sect	tion A. Public Support						
Calend	dar year (or fiscal yr beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	<b>(e)</b> 2012	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4 5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. The value of services or						
J	facilities furnished by a governmental unit to the organization without charge .						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
<u>Sec</u>	tion B. Total Support				,		
Calen	dar year (or fiscal yr beginning in) 🕨	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	<b>(e)</b> 2012	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
,	: Add lines 10a and 10b						<del></del>
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add Ins 9, 10c, 11, and 12)						
14	First five years. If the Form 990 i organization, check this box and	s for the organiza stop here	ition's first, secon	d, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ [
	tion C. Computation of Pul						
15	Public support percentage for 20	12 (line 8, column	(f) divided by line	e 13, column (f))	•	15	8
	Public support percentage from 2					16	8
	tion D. Computation of Inv			e			_
17					nn (f))	17	8
18	Investment income percentage fr					18	8
19 a	33-1/3% support tests - 2012. If is not more than 33-1/3%, check	the organization this box and stop	did not check the here. The organi	box on line 14, ar zation qualifies as	nd line 15 is more s a publicly suppo	than 33-1/3%, and rted organization	line 17 ►
	33-1/3% support tests — 2011. If line 18 is not more than 33-1/3%	, check this box a	and <b>stop here.</b> The	organization qua	ilifies as a publicly	supported organization	/3%, and ation
20	Private foundation. If the organiz	zation did not che	ck a box on line 1	4, 19a, or 19b, ch	eck this box and	see instructions	<b>&gt;</b>

Part IV   Supplemental Information. Complete this part to provide the explanations required by Part III. Ine 12 or 17b; and Part IIII, line 12. Also complete this part for any additional information. (See instructions).	Schedule A	(Form 990 c	or 990-EZ)	2012 P	roject	Discov	zery of	t Virgi	nia, Ir	ic.	54-1369.	308	Page 4
	Part IV	Supplem Part II, III (See Inst	ental Info ne 17a or ructions).	rmation 17b; an	. Compl d Part II	ete this I, line 12	part to p 2. Also d	provide the complete	ne explar this part	nations re for any	equired by Pa additional inf	art II, line ormation.	10;
									. – – – –		<b></b>		
	<b>-</b>												
			<u>-</u> -	<b>-</b> -						<b></b>	. <b></b>		
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			- <b>-</b>					<b></b>					
			- <b></b>					<b>_</b>					
		- <b></b> -											

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

### **Supplemental Financial Statements**

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection
Employer identification number

Pro	oject Discovery of Virginia,			54-1369308					
Pai	t   Organizations Maintaining Dono	r Advised Funds or Other Similar Fu	nds or A	Accounts. Complete if					
	the organization answered 'Yes'	to Form 990, Part IV, line 6.							
		(a) Donor advised funds	(b	) Funds and other accounts					
1	Total number at end of year								
2	Aggregate contributions to (during year)								
3	Aggregate grants from (during year)								
4	Aggregate value at end of year .								
5	Did the organization inform all donors and donors are the organization's property, subject to the organization	or advisors in writing that the assets held in dor organization's exclusive legal control?	nor advised		No				
6	Did the organization inform all grantees, donors for charitable purposes and not for the benefit impermissible private benefit?			nferring	No				
Par	t II Conservation Easements. Comp	lete if the organization answered 'Yes	' to Forn	n 990, Part IV, line 7.					
1	Purpose(s) of conservation easements held by		-						
	Preservation of land for public use (e g , re	creation or education) Preservation	of an histoi	rically important land area					
	Protection of natural habitat  Preservation of a certified historic structure								
Preservation of open space									
2	Complete lines 2a through 2d if the organizatio last day of the tax year	n held a qualified conservation contribution in t	he form of	a conservation easement on the	he				
				Held at the End of the Tax Y	ear/				
	a Total number of conservation easements		2 a						
1	Total acreage restricted by conservation easem	nents .	2 b						
•	Number of conservation easements on a certification	ed historic structure included in (a)	. 2c						
(	d Number of conservation easements included in structure listed in the National Register	(c) acquired after 8/17/06, and not on a historic	c <b>2 d</b>						
3	Number of conservation easements modified, to tax year ►	ransferred, released, extinguished, or terminate	d by the or	rganization during the					
4	Number of states where property subject to cor	servation easement is located >							
5	Does the organization have a written policy reg and enforcement of the conservation easement		dling of vio		lo				
6	Staff and volunteer hours devoted to monitoring	g, inspecting, and enforcing conservation easen	nents durin	g the year					
7	Amount of expenses incurred in monitoring, ins	pecting, and enforcing conservation easements	during the	e year					
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements of sect	tion 170(h)		lo				
9	In Part XIII, describe how the organization repoinclude, if applicable, the text of the footnote to conservation easements.	rts conservation easements in its revenue and the organization's financial statements that de-	expense st scribes the	atement, and balance sheet, a organization's accounting for	and				
Par	t III Organizations Maintaining Collection Complete if the organization answer	ctions of Art, Historical Treasures, or vered 'Yes' to Form 990, Part IV, line	Other S	imilar Assets.					
1 a	a If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIII, the text of the footnote to its finance	held for public exhibition, education, or research	ue stateme th in furthe	nt and balance sheet works of rance of public service, provide	le,				
1	b If the organization elected, as permitted under historical treasures, or other similar assets held following amounts relating to these items:	SFAS 116 (ASC 958), to report in its revenue st I for public exhibition, education, or research in	tatement a furtheranc	nd balance sheet works of art, e of public service, provide the	e e				
	(i) Revenues included in Form 990, Part VIII, I	ine 1		<b>►</b> \$					
	(ii) Assets included in Form 990, Part X			<b>►</b> \$					
2	If the organization received or held works of art amounts required to be reported under SFAS 1	, historical treasures, or other similar assets for 16 (ASC 958) relating to these items:	r financial (	gain, provide the following					
ā	Revenues included in Form 990, Part VIII, line	1		. ▶\$					
ŀ	Assets included in Form 990, Part X			► \$					

Schedule D (Form 990) 2012 Proje	ct Disco	very of	Virginia	a, Inc.	54-13			Page 2			
Part III Organizations Maintai	ning Colle	ctions of	Art, Histori	cal Treasures,	or Other Similar As	sets (cc	ontinu	ıed)			
<ol> <li>Using the organization's acquisition items (check all that apply)</li> </ol>	on, accession	, and other r	records, check	any of the following	g that are a significant us	e of its co	ollectio	'n			
a Public exhibition			<b>d</b> Loan or	exchange programs	5						
<b>b</b> Scholarly research			e Other		<del></del>						
c Preservation for future genera	c Preservation for future generations  4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in										
Part XIII						; in					
5 During the year, did the organizat to be sold to raise funds rather that	ion solicit or r an to be main	receive dona itained as pa	ations of art, hi art of the orgar	storical treasures, c nization's collection	or other similar assets	Yes		No			
Part IV Escrow and Custodial A reported an amount or	rrangemer	<b>nts.</b> Compl	lete if the org	janization answe	ered 'Yes' to Form 990	), Part IV	/, line	9, or			
1 a Is the organization an agent, trust on Form 990, Part X?	ee, custodian	ı, or other ın	termediary for	contributions or oth	ner assets not included	Yes		No			
<b>b</b> If 'Yes,' explain the arrangement	n Part XIII an	nd complete	the following to	able:							
						Amount					
c Beginning balance .	•		•		1 c						
d Additions during the year  e Distributions during the year  1 d											
e Distributions during the year			<del></del>								
f Ending balance			1810								
2 a Did the organization include an amount on Form 990, Part X, line 21?  b If 'Yes,' explain the arrangement in Part XIII. Check here if the explantion has been provided in Part XIII											
on res, explain the arrangement	II Part Alli. C	HECK HEIE II	ше ехріанцоп	rnas been provided	III Fait Aiii		L				
Part V   Endowment Funds. C	omplete if	the organ	ization ansv	wered 'Yes' to F	orm 990. Part IV. li	ne 10.					
	(a) Current		(b) Prior year	(c) Two years	(d) Three years		our year	rs			
1 a Beginning of year balance											
<b>b</b> Contributions	•										
c Net investment earnings, gains, and losses											
d Grants or scholarships											
Other expenditures for facilities and programs											
f Administrative expenses											
<b>g</b> End of year balance				İ							
2 Provide the estimated percentage	of the curren	it year end b	palance (line 1	g, column (a)) held	as						
a Board designated or quasi-endow	ment 🕨		_ %								
<b>b</b> Permanent endowment ►	· · · · · · · · · · · · · · · · · · ·										
c Temporarily restricted endowmen	t ►	ક									
The percentages in lines 2a, 2b, a	and 2c should	equal 100%	ó								
3 a Are there endowment funds not in organization by.	the possessi	ion of the or	ganization that	are held and admi	nistered for the		Yes	No			
(i) unrelated organizations						3a(i)					
(ii) related organizations .						3a(ii)		<u></u> .			
<b>b</b> If 'Yes' to 3a(II), are the related or	-					3b					
4 Describe in Part XIII the intended		<del></del>									
Part VI Land, Buildings, and	Equipment				1			<del> </del>			
Description of property		(a) Cost or (inves	other basis tment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(a) B	ook va	iue			
1 a Land .			77,097.				77,	,097.			
<b>b</b> Buildings		2	93,972.		93,593.	ļ	200,	,379.			
c Leasehold improvements .					<u>                                     </u>						
<b>d</b> Equipment			16,687.		16,687.			0.			
e Other .	. (a)	 	0 Dant V ::-	ma (D) In a 10(2)	<u> </u>	<u> </u>		456			
Total. Add lines 1a through 1e (Column	ı (a) must eqi	uai Form 99	υ, _P aπ X, colu	mn (B), line 10(c) )		dula B C		476.			
BAA					Sche	dule <b>D</b> (Fo	7m 99	0) 2012			

TEEA3302 06/07/12

Schedule D (Form 990) 2012 Project Discovery	of Virginia, 1	nc.	54-1369308	Page
Part VII Investments - Other Securities. See F				
(a) Description of security or category (including name of security)	(b) Book value	(c) N	Method of valuation: Cost or end-of-year market value	
(1) Financial derivatives				
(2) Closely-held equity interests			<del></del>	
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(l)				
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)				
Part VIII Investments - Program Related. See F				
(a) Description of investment type	(b) Book value		Method of valuation: Cost or	
(1)			end-of-year market value	
(1)		<u>-</u>		
(2)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, column (B) line 13)			·	
Part IX Other Assets. See Form 990, Part X, III	ne 15	<del></del>	- <del></del>	
(a) Desc			(b) Book	value
(1)				
(2)				<del> </del>
(3)				
(4)				
(5)				
(6)				
(7)		a.		
(8)		<u> </u>		
(9)	·			
(10)				
Total. (Column (b) must equal Form 990, Part X, column (B),	<u> </u>	<u></u>	<u>►</u>	
Part X Other Liabilities. See Form 990, Part X				
(a) Description of liability	(b) Book value			
(1) Federal income taxes		_		
(2)				
(3)		_		
(4)				
(5)				
(6)		}		
(7)	<del> </del>			
(8)		—i		
(9)		<b></b> [		
(10)	-			
(11)		_		
Total: (Oblahin (D) mast equal rollin 350, rait X, column (D) mic 25 )	<u> </u>	1	<del></del>	<del></del>
2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to t	the organization's financial st ed in Part XIII	atements that reports the	organization's liability for uncertain tax	positions_

Schedule D (Form 990) 2012 Project Discovery of Virginia, I		-136930	8 Page 4
Part XI Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per Re	eturn	
1. Total revenue, gains, and other support per audited financial statements		1	1,035,808.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.		•	
a Net unrealized gains on investments .	2 a		
b Donated services and use of facilities	2 b		
c Recoveries of prior year grants	2 c	1	
d Other (Describe in Part XIII)	2d 21,514.		
e Add lines 2a through 2d .	<del></del>	2 e	21,514.
3 Subtract line 2e from line 1		3	1,014,294.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
<b>b</b> Other (Describe in Part XIII )	4 b	-	
c Add lines 4a and 4b		4 c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	1,014,294.
Part XII Reconciliation of Expenses per Audited Financial Statem		Return	1,011,2011
1 Total expenses and losses per audited financial statements .	icites with Expenses per	1	1,295,664.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	•		1,233,004.
a Donated services and use of facilities	2 a	' "	
b Prior year adjustments	2 b	1 1	
c Other losses	2 c		
		-	
d Other (Describe in Part XIII )	2d   21,514.	2 e	21 514
e Add lines 2a through 2d		3	21,514.
3 Subtract line 2e from line 1		3	1,274,150.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	4 a	]	
a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) .	4 b		
c Add lines 4a and 4b	40	4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	)	5	1,274,150.
Part XIII Supplemental Information	<u></u>	1 0 1	1,214,150.
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, P line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also con	lart III, lines 1a and 4, Part IV, li nplete this part to provide any a	nes 1b and additional info	2b, Part V, ormation.
Pt XI Line 2d Rental expenses netted against ren	ntal income on retu	rn	
Pt XII Line 2d Rental expenses netted against ren	ntal income on retu	rn	
	. <b></b>		
	. <b></b>		
		. <b></b>	
ВАА		Schedule D	(Form 990) 2012

Schedule D (Form 990) 2012 Project Discovery of Virginia, Inc.  Part XIII Supplemental Information (continued)	54-1369308	Page 5
Part XIII Supplemental Information (continued)		
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## SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

2012

OMB No 1545-0047

Open to Public, Inspection

ct Discovery of Virginia, Inc. General Information on Grants and Assistance Name of the organization Project **Part | G** 

Employer identification number 54-1369308 2

X Yes

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

				dss	מפרים בי מפתובים ויים מחובים בי ויים מחובים ויים ויים ויים ויים ויים ויים ויים	Second Seconds	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Alexandria Department of	54-6001103	m	25,829	0	e/ u . 0	r/ c	To provide und
(2) Arlington County Dept. of3033 Wilson Blyd. Suite 4 Arlington VA 22201			11.962	O	z/:-		To provide und
(3) C.A.P.U.P Richmond 1021-01iver Hill Way Richmond VA 23219	54-0788796	8	33,155.	0		1	To provide und
(4) C.A.P.U.P Powhatan	54-0886622	3	11,974.	0.	n/a	n/a	To provide und
(5) Clinch Valley Community A. 200 East_Riverside_Dr North Tazewell VA 24630 54-0790271	54-0790271	3	15,202.	0.	n/a	n/a	To provide und
(6) Eastern Shore Agrea Agenc 5432 Bayside Rd. Exmore VA 23350	54-0955528	3	11,984.	0.	n/a	n/a	To provide und
O Fairfax County Public Sch 3877_Fairfax Ridge_Rd Fairfax VA 22030	54-0805373	3	11,589.	0.	n/a	n/a	To provide und
(8) HOPE_Community_Services. 103_South_Main_St Farmville VA 23901	54-0882624		15,202.	0.0	n/a	n/a	To provide und
<ul> <li>Enter total number of section 501(c)(3) and government organizations listed in the line 1 table</li> <li>Enter total number of other organizations listed in the line 1 table</li> </ul>	3) and government o	rganizations listed in 1 table	the line 1 table				20

Schedule I (Form 990) (2012)

TEEA3901 11/30/12

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Continuation Sheet for Schedule I (Form 990)

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

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Continuation Page 1

Schedule I Cont (Form 990) 2012 , 7 To provide und To provide und To provide und To provide und To provide und To provide und To provide und To provide und To provide und (h) Purpose of grant or assistance Employer identification number Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule | (Form 990), Part II.) (g) Description of non-cash assistance 54-1369308 n/a n/a n/a n/a n/a (f) Method of valuation (book, FMV, appraisal, other) n/a n/a n/a n/a n/a n/a n/a n/a n/a n/a 0 Ö ď (e) Amount of non-cash assistance d c 23, 181. 18,111, 26,374. 13,023 11,589 13,023 11,984 (d) Amount of cash grant 11,589 36,054 15,202 TEEA4001 12/10/12 (c) IRC section if applicable 3 m m  $\alpha$ m  $\sim$ 23-7014485 54-0801556 54-0763686 54-0805640 54-0797340 54-0799964 54-0792030 54-1117976 54-0787715 54-6057095 (p) EIN Inc Project Discovery of Virginia, 348 North Main Street, P. Lynchburg Community_Actio People_Incorporated_of_SW <u>Support to Eliminate Pove</u> The Improvement Associati <u> Total Action Against Pove</u> Monticello-Area Community <u>Mountain Community Action</u> <u>Pittsylvania County Commu</u> (a) Name and address of organization or government Charlottesville VA 22901 Office_of_Human_Affairs The Stop Organization Newport News VA 23607 1750 E. Atlantic St. Rocky Mount VA 24151 <u>926 Commerce Street.</u> 2410 Wickham Ave. 1173 West Main St. Petersburg VA 24531 2551 Almeda Avenue. Lynchburg VA 24504 Abingdon VA 24210 P.Q. Drawer 1008 1025 Park Street 200 Dent Street_ Emporia VA 23847 Norfolk VA 23513 Roanoke VA 24001 Marion VA 24354 P.O. Box 2868 Name of the organization

# Continuation Sheet for Schedule I (Form 990)

2012

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Continuation Page 2

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

To provide und Schedule I Cont (Form 990) 2012 To provide und (h) Purpose of grant or assistance Employer identification number Project Discovery of Virginia, Inc.

Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (g) Description of non-cash assistance 54-1369308 n/a (f) Method of valuation (book, FMV, appraisal, other) n/a n/a (e) Amount of non-cash assistance 0 21,386. (d) Amount of cash grant 11,589. (c) IRC section if applicable က 23-7066134 54-1369308 (p) EIN Williamsburg James_City_C 312 Waller_Mill_Rd. Suit Project Discovery of Virg (a) Name and address of organization or government Williamsburg VA 23185 1200 Electric Road_ Salem VA 24153 Name of the organization 111

TEEA4001 12/10/12

Schedule I (Form 990) (2012) Project Discovery of Virginia, Inc.

[Partill Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

Method of valuation (book, (f) Description of non-cash assistance FMV, appraisal, other)								to provide the information required in Part I, line 2, Part III, column (b), and any other	A_team_of_Project_Discovery	_employees_visits_the_grantee_office_to_review_grant_fund_depositscoordinator	oractices and					 			
(e) Method of va FMV, apprar				:			_	irt I, line 2, F	ceam of P	<u>ıd_deposi</u> 1	<u>rational</u> ı	 	         		 	           	 	 	1 1 1 1 1 1 1
(d) Amount of non-cash assistance								ition required in Pa	1	eview grant fur	. Grantee operational practices	<u> </u>	             	: : : : : :	 	 	 	 	1111111111
(c) Amount of cash grant								provide the informa	reviewed_for_contract_compliance.	e office to re	<u>n expenditures</u>	student files are also reviewed at the time.	             			                     		 	
(b) Number of recipients									are_reviewed_f	<u>its the grante</u>	<u>other program</u>	<u>-are-also_revi</u>	             	:	                 	 	'                 	'                   	1 1 1 1 1 1 1 1 1 1
(a) Type of grant or assistance								Supplemental Information. Complete this part additional information.	All_grantees_are_	<u>siv. semployees vis</u>	paymentsand_other_program_expenditures	<u>student files</u>	1 1 1 1 1 1 1 1 1 1		 		 	 	
(a) Type o	-	2	m	4	v	9	7	Parkilly Supplem additiona	Pt_I_Line_2	Pt_I_Line_2	<u>Pt_I_Line_2</u>	Pt_L Line_2	             		 	1 1 1 1 1 1 1 1 1	 	 	

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Schedule I (Form 990) (2012)

### SCHEBULE O **KForm 990 or 990-EZ)**

## **Supplemental Information to Form 990 or 990-EZ**

OMB No 1545-0047

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ. Open to Public Inspection

Name of the organization	Employer identification number 54-1369308
Project Discovery of Virginia, Inc.	34-1309300
Pt_VI, Line 11b The Form 990 is reviewed by the financial comm	mittee who then makes
recommendations to the whole board for approve	al
Pt_VI,_Line_19Documents_are_available_upon_request_from_the	Organization
Pt_VI, Line 15a The Board of Directors conducts a performance	evaluation of the
executive director annually and periodic salar	ry scale reviews
are conducted by an outside agency with the mo	ost recent one
completed in 2008.	
Pt VI, Line 12c Compliance is monitored by the director of the	organization.