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Form

990-PF

Department of the Treasury  
Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

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Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

OMB No 1545-0052

2013

Open to Public Inspection

For calendar year 2013, or tax year beginning 04-01-2013 , and ending 03-31-2014

|                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Name of foundation<br>OBICI HEALTHCARE FOUNDATION INC                                                                                                                                                                                                                                              |  | A Employer identification number<br><br>51-0249728                                                                                                                                             |  |
| % MICHAEL BRINKLEY                                                                                                                                                                                                                                                                                 |  | B Telephone number (see instructions)<br><br>(757) 539-8810                                                                                                                                    |  |
| Number and street (or P O box number if mail is not delivered to street address) Room/suite<br>106 W FINNEY AVENUE<br>Suite                                                                                                                                                                        |  |                                                                                                                                                                                                |  |
| City or town, state or province, country, and ZIP or foreign postal code<br>SUFFOLK, VA 23434                                                                                                                                                                                                      |  | C If exemption application is pending, check here <input type="checkbox"/>                                                                                                                     |  |
| G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity<br><input type="checkbox"/> Final return <input type="checkbox"/> Amended return<br><input type="checkbox"/> Address change <input type="checkbox"/> Name change |  |                                                                                                                                                                                                |  |
| H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation                                                   |  |                                                                                                                                                                                                |  |
| I Fair market value of all assets at end of year (from Part II, col. (c), line 16) <input checked="" type="checkbox"/> \$ 117,388,046                                                                                                                                                              |  | J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) _____<br>(Part I, column (d) must be on cash basis.) |  |
|                                                                                                                                                                                                                                                                                                    |  | D 1. Foreign organizations, check here <input type="checkbox"/><br>2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>                   |  |
|                                                                                                                                                                                                                                                                                                    |  | E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>                                                                                  |  |
|                                                                                                                                                                                                                                                                                                    |  | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>                                                                               |  |

| Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</small> |                                                                                             | (a) Revenue and expenses per books                                                            | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| Revenue                                                                                                                                                                            | 1 Contributions, gifts, grants, etc , received (attach schedule)                            | 9,621                                                                                         |                           |                         |                                                             |
|                                                                                                                                                                                    | 2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B   |                                                                                               |                           |                         |                                                             |
|                                                                                                                                                                                    | 3 Interest on savings and temporary cash investments                                        |                                                                                               |                           |                         |                                                             |
|                                                                                                                                                                                    | 4 Dividends and interest from securities. . . . .                                           | 371,961                                                                                       | 371,961                   |                         |                                                             |
|                                                                                                                                                                                    | 5a Gross rents . . . . .                                                                    |                                                                                               |                           |                         |                                                             |
|                                                                                                                                                                                    | b Net rental income or (loss) _____                                                         |                                                                                               |                           |                         |                                                             |
|                                                                                                                                                                                    | 6a Net gain or (loss) from sale of assets not on line 10                                    | 5,189,769                                                                                     |                           |                         |                                                             |
|                                                                                                                                                                                    | b Gross sales price for all assets on line 6a<br>21,915,549                                 |                                                                                               |                           |                         |                                                             |
|                                                                                                                                                                                    | 7 Capital gain net income (from Part IV, line 2) . . . .                                    |                                                                                               | 5,788,789                 |                         |                                                             |
|                                                                                                                                                                                    | 8 Net short-term capital gain . . . . .                                                     |                                                                                               |                           |                         |                                                             |
|                                                                                                                                                                                    | 9 Income modifications . . . . .                                                            |                                                                                               |                           | 27,915                  |                                                             |
|                                                                                                                                                                                    | 10a Gross sales less returns and allowances                                                 |                                                                                               |                           |                         |                                                             |
|                                                                                                                                                                                    | b Less Cost of goods sold . . . . .                                                         |                                                                                               |                           |                         |                                                             |
| Operating and Administrative Expenses                                                                                                                                              | c Gross profit or (loss) (attach schedule) . . . . .                                        |                                                                                               |                           |                         |                                                             |
|                                                                                                                                                                                    | 11 Other income (attach schedule) . . . . .                                                 |  2,453,518 | 5,544,576                 |                         |                                                             |
|                                                                                                                                                                                    | 12 <b>Total.</b> Add lines 1 through 11 . . . . .                                           | 8,024,869                                                                                     | 11,705,326                | 27,915                  |                                                             |
|                                                                                                                                                                                    | 13 Compensation of officers, directors, trustees, etc                                       | 223,114                                                                                       |                           |                         | 223,114                                                     |
|                                                                                                                                                                                    | 14 Other employee salaries and wages . . . . .                                              | 295,098                                                                                       |                           |                         | 295,098                                                     |
|                                                                                                                                                                                    | 15 Pension plans, employee benefits . . . . .                                               | 143,445                                                                                       |                           |                         | 139,928                                                     |
|                                                                                                                                                                                    | 16a Legal fees (attach schedule). . . . .                                                   |  3,413     | 0                         | 0                       | 435                                                         |
|                                                                                                                                                                                    | b Accounting fees (attach schedule). . . . .                                                |  48,209    | 0                         | 0                       | 48,209                                                      |
|                                                                                                                                                                                    | c Other professional fees (attach schedule) . . . . .                                       |  976,018   | 944,002                   |                         | 29,220                                                      |
|                                                                                                                                                                                    | 17 Interest . . . . .                                                                       | 68,357                                                                                        | 1,650                     |                         |                                                             |
|                                                                                                                                                                                    | 18 Taxes (attach schedule) (see instructions)                                               |  396,422   |                           |                         | 409                                                         |
|                                                                                                                                                                                    | 19 Depreciation (attach schedule) and depletion . . . .                                     |  113,469   |                           |                         |                                                             |
|                                                                                                                                                                                    | 20 Occupancy . . . . .                                                                      | 28,003                                                                                        |                           |                         | 28,008                                                      |
|                                                                                                                                                                                    | 21 Travel, conferences, and meetings . . . . .                                              | 19,040                                                                                        |                           |                         | 18,281                                                      |
|                                                                                                                                                                                    | 22 Printing and publications . . . . .                                                      |                                                                                               |                           |                         |                                                             |
|                                                                                                                                                                                    | 23 Other expenses (attach schedule). . . . .                                                |  138,712   |                           |                         | 131,615                                                     |
|                                                                                                                                                                                    | 24 <b>Total operating and administrative expenses.</b><br>Add lines 13 through 23 . . . . . | 2,453,300                                                                                     | 945,652                   | 0                       | 914,317                                                     |
|                                                                                                                                                                                    | 25 Contributions, gifts, grants paid . . . . .                                              | 4,004,821                                                                                     |                           |                         | 3,599,033                                                   |
|                                                                                                                                                                                    | 26 <b>Total expenses and disbursements.</b> Add lines 24 and 25                             | 6,458,121                                                                                     | 945,652                   | 0                       | 4,513,350                                                   |
|                                                                                                                                                                                    | 27 Subtract line 26 from line 12                                                            |                                                                                               |                           |                         |                                                             |
|                                                                                                                                                                                    | a <b>Excess of revenue over expenses and disbursements</b>                                  | 1,566,748                                                                                     |                           |                         |                                                             |
|                                                                                                                                                                                    | b <b>Net investment income</b> (if negative, enter -0-)                                     |                                                                                               | 10,759,674                |                         |                                                             |
|                                                                                                                                                                                    | c <b>Adjusted net income</b> (if negative, enter -0-)                                       |                                                                                               |                           | 27,915                  |                                                             |

| Part II Balance Sheets      |                                                                                                                                          | Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )               | Beginning of year | End of year    |                       |
|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------|-----------------------|
|                             |                                                                                                                                          |                                                                                                                                   | (a) Book Value    | (b) Book Value | (c) Fair Market Value |
| Assets                      | 1                                                                                                                                        | Cash—non-interest-bearing . . . . .                                                                                               | 30,275            | 46,699         | 46,699                |
|                             | 2                                                                                                                                        | Savings and temporary cash investments . . . . .                                                                                  | 8,085,912         | 9,681,367      | 9,681,367             |
|                             | 3                                                                                                                                        | Accounts receivable ▶ _____<br>Less allowance for doubtful accounts ▶ _____                                                       |                   |                |                       |
|                             | 4                                                                                                                                        | Pledges receivable ▶ _____<br>Less allowance for doubtful accounts ▶ _____                                                        |                   |                |                       |
|                             | 5                                                                                                                                        | Grants receivable . . . . .                                                                                                       |                   |                |                       |
|                             | 6                                                                                                                                        | Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . . |                   |                |                       |
|                             | 7                                                                                                                                        | Other notes and loans receivable (attach schedule) ▶ _____<br>Less allowance for doubtful accounts ▶ _____                        |                   |                |                       |
|                             | 8                                                                                                                                        | Inventories for sale or use . . . . .                                                                                             |                   |                |                       |
|                             | 9                                                                                                                                        | Prepaid expenses and deferred charges . . . . .                                                                                   | 17,368            |                |                       |
|                             | 10a                                                                                                                                      | Investments—U S and state government obligations (attach schedule)                                                                |                   |                |                       |
|                             | b                                                                                                                                        | Investments—corporate stock (attach schedule) . . . . .                                                                           | 23,402,763        | 12,435,505     | 12,435,505            |
|                             | c                                                                                                                                        | Investments—corporate bonds (attach schedule). . . . .                                                                            | 3,245,423         | 1,127,827      | 1,127,827             |
|                             | 11                                                                                                                                       | Investments—land, buildings, and equipment basis ▶ _____<br>Less accumulated depreciation (attach schedule) ▶ _____               |                   |                |                       |
|                             | 12                                                                                                                                       | Investments—mortgage loans . . . . .                                                                                              |                   |                |                       |
|                             | 13                                                                                                                                       | Investments—other (attach schedule) . . . . .                                                                                     | 68,058,499        | 91,459,690     | 91,459,690            |
|                             | 14                                                                                                                                       | Land, buildings, and equipment basis ▶ _____ 2,435,335<br>Less accumulated depreciation (attach schedule) ▶ _____ 502,150         | 2,039,754         | 1,933,185      | 1,933,185             |
| 15                          | Other assets (describe ▶ _____)                                                                                                          | 705,275                                                                                                                           | 703,773           | 703,773        |                       |
| 16                          | Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)                                               | 105,585,269                                                                                                                       | 117,388,046       | 117,388,046    |                       |
| Liabilities                 | 17                                                                                                                                       | Accounts payable and accrued expenses . . . . .                                                                                   | 90,616            | 212,486        |                       |
|                             | 18                                                                                                                                       | Grants payable . . . . .                                                                                                          | 946,337           | 1,352,124      |                       |
|                             | 19                                                                                                                                       | Deferred revenue . . . . .                                                                                                        |                   |                |                       |
|                             | 20                                                                                                                                       | Loans from officers, directors, trustees, and other disqualified persons                                                          |                   |                |                       |
|                             | 21                                                                                                                                       | Mortgages and other notes payable (attach schedule) . . . . .                                                                     | 1,663,333         | 1,594,621      |                       |
|                             | 22                                                                                                                                       | Other liabilities (describe ▶ _____)                                                                                              | 423,256           | 648,839        |                       |
|                             | 23                                                                                                                                       | Total liabilities (add lines 17 through 22) . . . . .                                                                             | 3,123,542         | 3,808,070      |                       |
| Net Assets or Fund Balances | Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31. |                                                                                                                                   |                   |                |                       |
|                             | 24                                                                                                                                       | Unrestricted . . . . .                                                                                                            | 102,461,727       | 113,579,976    |                       |
|                             | 25                                                                                                                                       | Temporarily restricted . . . . .                                                                                                  |                   |                |                       |
|                             | 26                                                                                                                                       | Permanently restricted . . . . .                                                                                                  |                   |                |                       |
|                             | Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> 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 (see page 17 of the instructions) . . . . .                                                     | 102,461,727       | 113,579,976    |                       |
|                             | 31                                                                                                                                       | Total liabilities and net assets/fund balances (see page 17 of the instructions) . . . . .                                        | 105,585,269       | 117,388,046    |                       |

| 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) . . . . . | 1 | 102,461,727 |
| 2                                                           | Enter amount from Part I, line 27a . . . . .                                                                                                                       | 2 | 1,566,748   |
| 3                                                           | Other increases not included in line 2 (itemize) ▶ _____                                                                                                           | 3 | 11,426,513  |
| 4                                                           | Add lines 1, 2, and 3 . . . . .                                                                                                                                    | 4 | 115,454,988 |
| 5                                                           | Decreases not included in line 2 (itemize) ▶ _____                                                                                                                 | 5 | 1,875,012   |
| 6                                                           | Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .                                                      | 6 | 113,579,976 |

Part IV Capital Gains and Losses for Tax on Investment Income

|                                                                                                                                   |                           |                                              |                                      |                                  |
|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------|----------------------------------------------|--------------------------------------|----------------------------------|
| (a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co ) |                           | (b) How acquired<br>P—Purchase<br>D—Donation | (c) Date acquired<br>(mo , day, yr ) | (d) Date sold<br>(mo , day, yr ) |
| 1a                                                                                                                                | See Additional Data Table |                                              |                                      |                                  |
| b                                                                                                                                 |                           |                                              |                                      |                                  |
| c                                                                                                                                 |                           |                                              |                                      |                                  |
| d                                                                                                                                 |                           |                                              |                                      |                                  |
| e                                                                                                                                 |                           |                                              |                                      |                                  |

|                       |                                            |                                                 |                                              |
|-----------------------|--------------------------------------------|-------------------------------------------------|----------------------------------------------|
| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
| a                     | See Additional Data Table                  |                                                 |                                              |
| b                     |                                            |                                                 |                                              |
| c                     |                                            |                                                 |                                              |
| d                     |                                            |                                                 |                                              |
| e                     |                                            |                                                 |                                              |

|                                                                                             |                                      |                                               |                                                                                              |
|---------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------|----------------------------------------------------------------------------------------------|
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                      |                                               | (I) Gains (Col (h) gain minus<br>col (k), but not less than -0-) or<br>Losses (from col (h)) |
| (i) F M V as of 12/31/69                                                                    | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col (i)<br>over col (j), if any |                                                                                              |
| a                                                                                           | See Additional Data Table            |                                               |                                                                                              |
| b                                                                                           |                                      |                                               |                                                                                              |
| c                                                                                           |                                      |                                               |                                                                                              |
| d                                                                                           |                                      |                                               |                                                                                              |
| e                                                                                           |                                      |                                               |                                                                                              |

|   |                                                                                                                                                                                                              |                                                                                     |   |           |
|---|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---|-----------|
| 2 | Capital gain net income or (net capital loss)                                                                                                                                                                | { If gain, also enter in Part I, line 7<br>If (loss), enter -0- in Part I, line 7 } | 2 | 5,788,789 |
| 3 | Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)<br><br>If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0-<br>in Part I, line 8 . . . . . |                                                                                     | 3 | 0         |

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 )

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

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 page 18 of the instructions before making any entries

|                                                                      |                                          |                                              |                                                           |
|----------------------------------------------------------------------|------------------------------------------|----------------------------------------------|-----------------------------------------------------------|
| (a)<br>Base period years Calendar<br>year (or tax year beginning in) | (b)<br>Adjusted qualifying distributions | (c)<br>Net value of noncharitable-use assets | (d)<br>Distribution ratio<br>(col (b) divided by col (c)) |
| 2012                                                                 | 5,048,525                                | 97,275,806                                   | 0 051899                                                  |
| 2011                                                                 | 4,880,044                                | 98,061,055                                   | 0 049765                                                  |
| 2010                                                                 | 2,922,574                                | 95,843,857                                   | 0 030493                                                  |
| 2009                                                                 | 5,568,576                                | 87,471,067                                   | 0 063662                                                  |
| 2008                                                                 | 5,862,506                                | 88,420,528                                   | 0 066303                                                  |

|   |                                                                                                                                                                                                                              |   |             |
|---|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|-------------|
| 2 | Total of line 1, column (d). . . . .                                                                                                                                                                                         | 2 | 0 262122    |
| 3 | Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by<br>the number of years the foundation has been in existence if less than 5 years . . . .                                        | 3 | 0 052424    |
| 4 | Enter the net value of noncharitable-use assets for 2013 from Part X, line 5. . . . .                                                                                                                                        | 4 | 106,786,977 |
| 5 | Multiply line 4 by line 3. . . . .                                                                                                                                                                                           | 5 | 5,598,200   |
| 6 | Enter 1% of net investment income (1% of Part I, line 27b). . . . .                                                                                                                                                          | 6 | 107,597     |
| 7 | Add lines 5 and 6. . . . .                                                                                                                                                                                                   | 7 | 5,705,797   |
| 8 | Enter qualifying distributions from Part XII, line 4. . . . .<br>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<br>the Part VI instructions | 8 | 4,524,276   |

|                                                                                                                                                                    |           |         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------|
| <b>Part VI    Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)</b>                               |           |         |
| <b>1a</b> Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1                              |           |         |
| Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)                                                                 |           |         |
| <b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . . | <b>1</b>  | 215,193 |
| <b>c</b> All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)                                   |           |         |
| <b>2</b> Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                                 | <b>2</b>  |         |
| <b>3</b> Add lines 1 and 2. . . . .                                                                                                                                | <b>3</b>  | 215,193 |
| <b>4</b> Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                               | <b>4</b>  |         |
| <b>5</b> <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .                                                  | <b>5</b>  | 215,193 |
| <b>6</b> Credits/Payments                                                                                                                                          |           |         |
| <b>a</b> 2013 estimated tax payments and 2012 overpayment credited to 2013                                                                                         | <b>6a</b> | 54,000  |
| <b>b</b> Exempt foreign organizations—tax withheld at source . . . . .                                                                                             | <b>6b</b> |         |
| <b>c</b> Tax paid with application for extension of time to file (Form 8868)                                                                                       | <b>6c</b> | 165,000 |
| <b>d</b> Backup withholding erroneously withheld . . . . .                                                                                                         | <b>6d</b> |         |
| <b>7</b> Total credits and payments. Add lines 6a through 6d. . . . .                                                                                              | <b>7</b>  | 219,000 |
| <b>8</b> Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.                                 | <b>8</b>  |         |
| <b>9</b> <b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .                                                     | <b>9</b>  |         |
| <b>10</b> <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .                                        | <b>10</b> | 3,807   |
| <b>11</b> Enter the amount of line 10 to be <b>Credited to 2014 estimated tax</b> <input type="checkbox"/> 3,807 <b>Refunded</b> <input type="checkbox"/>          | <b>11</b> |         |

|                                                                                                                                                                                                                                                                                                                                                                                  |           |            |           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------|-----------|
| <b>Part VII-A    Statements Regarding Activities</b>                                                                                                                                                                                                                                                                                                                             |           |            |           |
| <b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .                                                                                                                                                                                         | <b>1a</b> | <b>Yes</b> | <b>No</b> |
| <b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? . . . . .<br><i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i> | <b>1b</b> |            | <b>No</b> |
| <b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .                                                                                                                                                                                                                                                                                                   | <b>1c</b> |            | <b>No</b> |
| <b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br><b>(1)</b> On the foundation <input type="checkbox"/> \$ _____ 0 <b>(2)</b> On foundation managers <input type="checkbox"/> \$ _____ 0                                                                                                                            |           |            |           |
| <b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____ 0                                                                                                                                                                                                |           |            |           |
| <b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . .<br><i>If "Yes," attach a detailed description of the activities.</i>                                                                                                                                                                                          | <b>2</b>  |            | <b>No</b> |
| <b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .                                                                                                                             | <b>3</b>  |            | <b>No</b> |
| <b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .                                                                                                                                                                                                                                                                  | <b>4a</b> | <b>Yes</b> |           |
| <b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .                                                                                                                                                                                                                                                                                       | <b>4b</b> | <b>Yes</b> |           |
| <b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . .<br><i>If "Yes," attach the statement required by General Instruction T.</i>                                                                                                                                                                                    | <b>5</b>  |            | <b>No</b> |
| <b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• 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? . . . . .                            | <b>6</b>  | <b>Yes</b> |           |
| <b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>                                                                                                                                                                                                                               | <b>7</b>  | <b>Yes</b> |           |
| <b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions):<br><input type="checkbox"/> VA _____                                                                                                                                                                                                                               |           |            |           |
| <b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i>                                                                                                                                                     | <b>8b</b> | <b>Yes</b> |           |
| <b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)?<br><i>If "Yes," complete Part XIV</i> . . . . .                                                                                                | <b>9</b>  |            | <b>No</b> |
| <b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>                                                                                                                                                                                                                             | <b>10</b> |            | <b>No</b> |

Part VII-A

Statements Regarding Activities *(continued)*

|    |                                                                                                                                                                                                                                                                                                                              |    |     |    |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).                                                                                                                                     | 11 |     | No |
| 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 |     | No |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?<br>Website address ▶ HTTP //WWW.OBICIHCF.ORG/                                                                                                                                                            | 13 | Yes |    |
| 14 | The books are in care of ▶ MICHAEL BRINKLEY Telephone no ▶ (757) 539-8810<br>Located at ▶ 106 W FINNEY AVENUE SUFFOLK VA ZIP +4 ▶ 23434                                                                                                                                                                                      |    |     |    |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ▶ <input type="checkbox"/><br>and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶                                                                                | 15 |     |    |
| 16 | At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?<br>See instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes", enter the name of the foreign country ▶ | 16 | Yes | No |

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

|                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |    |     |    |
|-----------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|
| File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |    | Yes | No |
| 1a                                                                                      | During the year did the foundation (either directly or indirectly)<br>(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?. . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>(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)?. . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ). . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |    |     |    |
| b                                                                                       | If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?. . . Organizations relying on a current notice regarding disaster assistance check here. . . . . ▶ <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 1b |     | No |
| 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 2013?. . . . .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 1c |     | No |
| 2                                                                                       | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |    |     |    |
| a                                                                                       | At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013?. . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If "Yes," list the years ▶ 20____, 20____, 20____, 20____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |     |    |
| 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 incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions ). . . . .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 2b |     |    |
| c                                                                                       | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |    |     |    |
| 3a                                                                                      | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?. . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |    |     |    |
| b                                                                                       | If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2013.</i> ). . . . .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 3b |     |    |
| 4a                                                                                      | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4a |     | No |
| b                                                                                       | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 4b |     | No |

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a

During the year did the foundation pay or incur any amount to

(1)

Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

Yes 

No

(2)

Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

Yes 

No

(3)

Provide a grant to an individual for travel, study, or other similar purposes?

Yes 

No

(4)

Provide a grant to an organization other than a charitable, etc , organization described in section 509(a)(1 ), (2 ), or (3 ), or section 4940(d)(2)? (see instructions).

Yes 

No

(5)

Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

Yes 

No

b

If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

No

Organizations relying on a current notice regarding disaster assistance check here.

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

Yes 

No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Yes 

No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

Yes 

No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation (see instructions).

| (a) Name and address      | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---------------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| See Additional Data Table |                                                           |                                           |                                                                       |                                       |
|                           |                                                           |                                           |                                                                       |                                       |
|                           |                                                           |                                           |                                                                       |                                       |
|                           |                                                           |                                           |                                                                       |                                       |
|                           |                                                           |                                           |                                                                       |                                       |
|                           |                                                           |                                           |                                                                       |                                       |
|                           |                                                           |                                           |                                                                       |                                       |
|                           |                                                           |                                           |                                                                       |                                       |

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---------------------------------------------------------------|-----------------------------------------------------------|------------------|-----------------------------------------------------------------------|---------------------------------------|
| RICHARD E SPENCER JR                                          | SR PROGRAM OFFICER                                        | 90,303           | 27,162                                                                | 0                                     |
| 1514 HOLLAND ROAD SUITE 104<br>SUFFOLK,VA 23434               | 40 0                                                      |                  |                                                                       |                                       |
| TAMMIE A MULLINS-RICE                                         | PROGRAM OFFICER                                           | 62,296           | 17,251                                                                | 0                                     |
| 1514 HOLLAND ROAD SUITE 104<br>SUFFOLK,VA 23434               | 40 0                                                      |                  |                                                                       |                                       |
| CATHY J HUBBARD                                               | GRANTS ASSOCIATE                                          | 51,563           | 4,853                                                                 | 0                                     |
| 1514 HOLLAND ROAD SUITE 104<br>SUFFOLK,VA 23434               | 40 0                                                      |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
| Total number of other employees paid over \$50,000.           |                                                           |                  |                                                                       | 0                                     |

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

| 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE". |                      |                  |
|------------------------------------------------------------------------------------------------------------------|----------------------|------------------|
| (a) Name and address of each person paid more than \$50,000                                                      | (b) Type of service  | (c) Compensation |
| CORNERSTONE PARTNERS LLC                                                                                         | INVESTMENT MGMT      | 673,316          |
| 675 PETER JEFFERSON PARKWAY<br>CHARLOTTESVILLE,VA 22911                                                          |                      |                  |
| SHAPIRO CAPITAL MANAGEMENT LLC                                                                                   | INVESTMENT MGMT      | 78,334           |
| 3060 PEACHTREE ROAD NW SUITE 1555<br>ATLANTA,GA 30305                                                            |                      |                  |
| Bares Capital Management Inc                                                                                     | INVESTMENT MGMT      | 86,261           |
| 12600 Hill Country Blvd Suite R-2<br>AUSTIN,TX 78738                                                             |                      |                  |
| SUNTRUST BANK INC HDQ 5307                                                                                       | INVESTMENT CUSTODIAN | 69,728           |
| 919 EAST MAIN STREET<br>RICHMOND,VA 23219                                                                        |                      |                  |
|                                                                                                                  |                      |                  |
|                                                                                                                  |                      |                  |
|                                                                                                                  |                      |                  |
| Total number of others receiving over \$50,000 for professional services. . . . .                                |                      | 0                |

Part IX-A

Summary of Direct Charitable Activities

| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 1                                                                                                                                                                                                                                                      |          |
| 2                                                                                                                                                                                                                                                      |          |
| 3                                                                                                                                                                                                                                                      |          |
| 4                                                                                                                                                                                                                                                      |          |

Part IX-B

Summary of Program-Related Investments (see instructions)

| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | Amount |
|------------------------------------------------------------------------------------------------------------------|--------|
| 1                                                                                                                |        |
|                                                                                                                  |        |
|                                                                                                                  |        |
| 2                                                                                                                |        |
|                                                                                                                  |        |
|                                                                                                                  |        |
| All other program-related investments. See page 24 of the instructions.                                          |        |
| 3                                                                                                                |        |
|                                                                                                                  |        |
| Total. Add lines 1 through 3.                                                                                    |        |



Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see 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 | 103,437,593 |
| b | Average of monthly cash balances. . . . .                                                                          | 1b | 4,293,342   |
| c | Fair market value of all other assets (see instructions). . . . .                                                  | 1c | 682,240     |
| d | Total (add lines 1a, b, and c). . . . .                                                                            | 1d | 108,413,175 |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . . | 1e |             |
| 2 | Acquisition indebtedness applicable to line 1 assets. . . . .                                                      | 2  | 0           |
| 3 | Subtract line 2 from line 1d. . . . .                                                                              | 3  | 108,413,175 |
| 4 | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .  | 4  | 1,626,198   |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4                | 5  | 106,786,977 |
| 6 | Minimum investment return. Enter 5% of line 5. . . . .                                                             | 6  | 5,339,349   |

Part XI

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

|    |                                                                                                           |    |           |
|----|-----------------------------------------------------------------------------------------------------------|----|-----------|
| 1  | Minimum investment return from Part X, line 6. . . . .                                                    | 1  | 5,339,349 |
| 2a | Tax on investment income for 2013 from Part VI, line 5. . . . .                                           | 2a | 215,193   |
| b  | Income tax for 2013 (This does not include the tax from Part VI ). . . . .                                | 2b |           |
| c  | Add lines 2a and 2b. . . . .                                                                              | 2c | 215,193   |
| 3  | Distributable amount before adjustments Subtract line 2c from line 1. . . . .                             | 3  | 5,124,156 |
| 4  | Recoveries of amounts treated as qualifying distributions. . . . .                                        | 4  | 27,915    |
| 5  | Add lines 3 and 4. . . . .                                                                                | 5  | 5,152,071 |
| 6  | Deduction from distributable amount (see instructions). . . . .                                           | 6  |           |
| 7  | Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . . | 7  | 5,152,071 |

Part XII

Qualifying Distributions (see instructions)

|                                                                                                                                                                                              |                                                                                                                                                              |    |           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----------|
| 1                                                                                                                                                                                            | Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes                                                                    |    |           |
| a                                                                                                                                                                                            | Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .                                                                         | 1a | 4,513,350 |
| 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  | 10,926    |
| 3                                                                                                                                                                                            | Amounts set aside for specific charitable projects that satisfy the                                                                                          |    |           |
| a                                                                                                                                                                                            | Suitability test (prior IRS approval required). . . . .                                                                                                      | 3a | 0         |
| b                                                                                                                                                                                            | Cash distribution test (attach the required schedule). . . . .                                                                                               | 3b | 0         |
| 4                                                                                                                                                                                            | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4                                                    | 4  | 4,524,276 |
| 5                                                                                                                                                                                            | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . . | 5  |           |
| 6                                                                                                                                                                                            | Adjusted qualifying distributions. Subtract line 5 from line 4. . . . .                                                                                      | 6  | 4,524,276 |
| Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years |                                                                                                                                                              |    |           |

Part XIII

Undistributed Income (see instructions)

|                                                                                                                                                                                     | (a)<br>Corpus | (b)<br>Years prior to 2012 | (c)<br>2012 | (d)<br>2013 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2013 from Part XI, line 7                                                                                                                                |               |                            |             | 5,152,071   |
| 2 Undistributed income, if any, as of the end of 2013                                                                                                                               |               |                            |             |             |
| a Enter amount for 2012 only. . . . .                                                                                                                                               |               |                            | 4,253,175   |             |
| b Total for prior years 2011 , 2010 , 2009                                                                                                                                          |               |                            |             |             |
| 3 Excess distributions carryover, if any, to 2013                                                                                                                                   |               |                            |             |             |
| a From 2008. . . . .                                                                                                                                                                |               |                            |             |             |
| b From 2009. . . . .                                                                                                                                                                |               |                            |             |             |
| c From 2010. . . . .                                                                                                                                                                |               |                            |             |             |
| d From 2011. . . . .                                                                                                                                                                |               |                            |             |             |
| e From 2012. . . . .                                                                                                                                                                |               |                            |             |             |
| f Total of lines 3a through e. . . . .                                                                                                                                              | 0             |                            |             |             |
| 4 Qualifying distributions for 2013 from Part XII, line 4 ▶ \$ 4,524,276                                                                                                            |               |                            |             |             |
| a Applied to 2012, but not more than line 2a                                                                                                                                        |               |                            | 4,253,175   |             |
| b Applied to undistributed income of prior years (Election required—see instructions). . . . .                                                                                      |               |                            |             |             |
| c Treated as distributions out of corpus (Election required—see instructions). . . . .                                                                                              |               |                            |             |             |
| d Applied to 2013 distributable amount. . . . .                                                                                                                                     |               |                            |             | 271,101     |
| e Remaining amount distributed out of corpus                                                                                                                                        | 0             |                            |             |             |
| 5 Excess distributions carryover applied to 2013<br>(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:                                                                                                                            |               |                            |             |             |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5                                                                                                                                   | 0             |                            |             |             |
| b Prior years' undistributed income Subtract line 4b from line 2b. . . . .                                                                                                          |               |                            |             |             |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . |               |                            |             |             |
| d Subtract line 6c from line 6b Taxable amount—see instructions . . . . .                                                                                                           |               |                            |             |             |
| e Undistributed income for 2012 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .                                                                             |               |                            |             |             |
| f Undistributed income for 2013 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2014 . . . . .                                                               |               |                            |             | 4,880,970   |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions). . . . .                                  |               |                            |             |             |
| 8 Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions). . .                                                                                  |               |                            |             |             |
| 9 Excess distributions carryover to 2014.<br>Subtract lines 7 and 8 from line 6a . . . . .                                                                                          | 0             |                            |             |             |
| 10 Analysis of line 9                                                                                                                                                               |               |                            |             |             |
| a Excess from 2009. . . .                                                                                                                                                           |               |                            |             |             |
| b Excess from 2010. . . .                                                                                                                                                           |               |                            |             |             |
| c Excess from 2011. . . .                                                                                                                                                           |               |                            |             |             |
| d Excess from 2012. . . .                                                                                                                                                           |               |                            |             |             |
| e Excess from 2013. . . .                                                                                                                                                           |               |                            |             |             |

Part XIVPrivate Operating Foundations (see instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2013, enter the date of the ruling. . . . .

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☐ 4942(j)(3) or ☐ 4942(j)(5)

2a

Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

| Tax year                                                                                                                                                    | Prior 3 years |          |          |  | (e) Total |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------|----------|--|-----------|
| (a) 2013                                                                                                                                                    | (b) 2012      | (c) 2011 | (d) 2010 |  |           |
|                                                                                                                                                             |               |          |          |  |           |
| 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 for active conduct of exempt activities Subtract line 2d from line 2c . . . . .                                    |               |          |          |  |           |
| 3 Complete 3a, b, or c for the alternative test relied upon                                                                                                 |               |          |          |  |           |
| a "Assets" alternative test—enter                                                                                                                           |               |          |          |  |           |
| (1) Value of all assets . . . . .                                                                                                                           |               |          |          |  |           |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i)                                                                                               |               |          |          |  |           |
| b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .                                    |               |          |          |  |           |
| c "Support" alternative test—enter                                                                                                                          |               |          |          |  |           |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . . |               |          |          |  |           |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .                                       |               |          |          |  |           |
| (3) Largest amount of support from an exempt organization                                                                                                   |               |          |          |  |           |
| (4) Gross investment income                                                                                                                                 |               |          |          |  |           |

Part XVSupplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1Information Regarding Foundation Managers:

aList any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

NONE

bList any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

2Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

aThe name, address, and telephone number or e-mail address of the person to whom applications should be addressed

CATHY HUBAND  
106 W FINNEY AVENUE  
SUFFOLK, VA 23434  
(757) 539-8810

bThe form in which applications should be submitted and information and materials they should include

GRANT SEEKERS MUST SUBMIT THE REQUEST FOR PROJECT SUPPORT AND CONDITIONS OF GRANT FORM IN ADDITION 1 IRS DETERMINATION LETTER OR A WRITTEN DOCUMENT CERTIFYING TAX EXEMPT STATUS 2 BIOGRAPHICAL PROFILE OF KEY STAFF 3 ANNUAL REPORT, IF AVAILABLE 4 DETAILED ANNUAL BUDGET

cAny submission deadlines

RENEWALS - JANUARY 15 & JULY 15 OF EACH YEAR GRANTS - JANUARY 15 & JULY 15 OF EACH YEAR

dAny restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

RESTRICTIONS - LOBBYING OR POLITICAL PROGRAMS OR EVENTS - ACTIVITIES THAT EXCLUSIVELY BENEFIT THE MEMBERS OF SECTARIAN OR RELIGIOUS ORGANIZATIONS - ORGANIZATIONS THAT DISCRIMINATE BY RACE, COLOR, CREED, GENDER OR NATIONAL ORIGIN - BIOMEDICAL, CLINICAL OR EDUCATIONAL RESEARCH - INDIVIDUAL SCHOLARSHIPS - DIRECT SUPPORT TO ENDOWMENTS - FUNDING THAT SUPPLANTS EXISTING SOURCES OF SUPPORT - INDIVIDUALS, INCLUDING PATIENT ASSISTANCE FUNDS - ANNUAL FUND DRIVES - PROJECTS OUTSIDE OF THE FOUNDATION'S SERVICE AREA - MEETINGS AND CONFERENCES, UNLESS THEY ARE ESSENTIAL TO A LARGER PROJECT - DIRECT FUNDING FOR MEDICAL OR SOCIAL SERVICES TAHT ARE ALREADY FUNDED THROUGH EXISTING THIRD-PARTY REIMBURSEMENT SOURCES

Part XV

Supplementary Information (continued)

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

| Recipient                                                  | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount    |
|------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------|-----------|
| Name and address (home or business)                        |                                                                                                                    |                                      |                                     |           |
| a Paid during the year<br>See Additional Data Table        |                                                                                                                    |                                      |                                     |           |
| Total . . . . .                                            |                                                                                                                    |                                      | 3a                                  | 3,599,033 |
| b Approved for future payment<br>See Additional Data Table |                                                                                                                    |                                      |                                     |           |
| Total . . . . .                                            |                                                                                                                    |                                      | 3b                                  | 1,352,125 |

## Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2013)

Part XVII

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1

Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a

Transfers from the reporting foundation to a noncharitable exempt organization of

1

Cash.

1a(1)

No

2

Other assets.

1a(2)

No

b

Other transactions

1

Sales of assets to a noncharitable exempt organization.

1b(1)

No

2

Purchases of assets from a noncharitable exempt organization.

1b(2)

No

3

Rental of facilities, equipment, or other assets.

1b(3)

No

4

Reimbursement arrangements.

1b(4)

No

5

Loans or loan guarantees.

1b(5)

No

6

Performance of services or membership or fundraising solicitations.

1b(6)

No

c

Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

1c

No

d

If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

| (a) Line No | (b) Amount involved | (c) Name of noncharitable exempt organization | (d) Description of transfers, transactions, and sharing arrangements |
|-------------|---------------------|-----------------------------------------------|----------------------------------------------------------------------|
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
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|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |
|             |                     |                                               |                                                                      |

2a

Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

☐

Yes

☒

No

b

If "Yes," complete the following schedule

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |

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 or fiduciary) is based on all information of which preparer has any knowledge.

\*\*\*\*\*

Signature of officer or trustee

2014-11-05

Date

\*\*\*\*\*

Title

May the IRS discuss this return with the preparer shown below (see instr.)?

☒

Yes

☐

No

Paid Preparer Use Only

Print/Type preparer's name

KPMG LLP - MARGARET A BRADSHAW

Preparer's Signature

Date

Check if self-employed

☐

PTIN

P00501222

Firm's name

KPMG LLP

Firm's EIN

Firm's address

1676 International Drive McLean, VA 22102

Phone no

(757) 539-8810

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

| (a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co ) | (b) How acquired<br>P—Purchase<br>D—Donation | (c) Date acquired<br>(mo , day, yr ) | (d) Date sold<br>(mo , day, yr ) |
|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|--------------------------------------|----------------------------------|
| KYLIN                                                                                                                             |                                              |                                      |                                  |
| MERCHANTS GATE                                                                                                                    |                                              |                                      |                                  |
| NANTAHALA                                                                                                                         |                                              |                                      |                                  |
| MUTUAL FUNDS EQUITIES 7042065                                                                                                     |                                              |                                      |                                  |
| MUTUAL FUNDS BONDS 7042066                                                                                                        |                                              |                                      |                                  |
| BARES MICRO-CAP 7916949                                                                                                           |                                              |                                      |                                  |
| BARES SMALL-CAP 7947946                                                                                                           |                                              |                                      |                                  |
| FIDUCIARY MANAGEMENT 7943096                                                                                                      |                                              |                                      |                                  |
| SHAPIRO                                                                                                                           |                                              |                                      |                                  |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|--------------------------------------------|-------------------------------------------------|----------------------------------------------|
| 330,447               |                                            | 330,447                                         |                                              |
| 3,696,522             |                                            | 3,000,000                                       | 696,522                                      |
| 1,000,000             |                                            | 1,097,502                                       | -97,502                                      |
| 3,287,892             |                                            | 2,818,442                                       | 469,450                                      |
| 2,059,725             |                                            | 2,038,711                                       | 21,014                                       |
| 447,678               |                                            |                                                 | 447,678                                      |
| 163,025               |                                            |                                                 | 163,025                                      |
| 5,540,964             |                                            | 3,774,090                                       | 1,766,874                                    |
| 6,000,000             |                                            | 3,678,272                                       | 2,321,728                                    |



Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                   |                                            | (l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) |
|---------------------------------------------------------------------------------------------|-----------------------------------|--------------------------------------------|----------------------------------------------------------------------------------------|
| (i) F M V as of 12/31/69                                                                    | (j) Adjusted basis as of 12/31/69 | (k) Excess of col (i) over col (j), if any |                                                                                        |
|                                                                                             |                                   |                                            |                                                                                        |
|                                                                                             |                                   |                                            | 696,522                                                                                |
|                                                                                             |                                   |                                            | -97,502                                                                                |
|                                                                                             |                                   |                                            | 469,450                                                                                |
|                                                                                             |                                   |                                            | 21,014                                                                                 |
|                                                                                             |                                   |                                            | 447,678                                                                                |
|                                                                                             |                                   |                                            | 163,025                                                                                |
|                                                                                             |                                   |                                            | 1,766,874                                                                              |
|                                                                                             |                                   |                                            | 2,321,728                                                                              |

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

| (a) Name and address                             | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|--------------------------------------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| GEORGE Y BIRDSONG                                | CHAIRMAN<br>1 0                                           | 0                                         | 0                                                                     | 441                                   |
| 1514 HOLLAND ROAD SUITE 104<br>Suffolk, VA 23434 |                                                           |                                           |                                                                       |                                       |
| J SAMUEL GLASSCOCK                               | VICE CHAIRMAN<br>1 0                                      | 0                                         | 0                                                                     | 441                                   |
| 1514 Holland Road Suite 104<br>Suffolk, VA 23434 |                                                           |                                           |                                                                       |                                       |
| GINA PITRONE                                     | EXECUTIVE<br>DIRECTOR<br>40 0                             | 162,712                                   | 28,233                                                                | 441                                   |
| 1514 Holland Road Suite 104<br>Suffolk, VA 23434 |                                                           |                                           |                                                                       |                                       |
| MICHAEL K BRINKLEY                               | DIRECTOR OF<br>FINANCE<br>20 4                            | 60,402                                    | 3,020                                                                 | 441                                   |
| 1514 Holland Road Suite 104<br>Suffolk, VA 23434 |                                                           |                                           |                                                                       |                                       |
| FRANK A SPADY III                                | TREASURER<br>1 0                                          | 0                                         | 0                                                                     | 441                                   |
| 1514 Holland Road Suite 104<br>Suffolk, VA 23434 |                                                           |                                           |                                                                       |                                       |
| RICHARD F BARRY III                              | BOARD OF<br>DIRECTORS<br>1 0                              | 0                                         | 0                                                                     | 441                                   |
| 106 W FINNEY AVENUE<br>SUFFOLK,VA 23434          |                                                           |                                           |                                                                       |                                       |
| ROBERT C CLAUD                                   | BOARD OF<br>DIRECTORS<br>1 0                              | 0                                         | 0                                                                     | 441                                   |
| 106 W FINNEY AVENUE<br>SUFFOLK,VA 23434          |                                                           |                                           |                                                                       |                                       |
| JEFFREY D FORMAN MD                              | BOARD OF<br>DIRECTORS<br>1 0                              | 0                                         | 0                                                                     | 441                                   |
| 106 W FINNEY AVENUE<br>SUFFOLK,VA 23434          |                                                           |                                           |                                                                       |                                       |
| WILLIAM G JACKSON MD                             | BOARD OF<br>DIRECTORS<br>1 0                              | 0                                         | 0                                                                     | 441                                   |
| 106 W FINNEY AVENUE<br>SUFFOLK,VA 23434          |                                                           |                                           |                                                                       |                                       |
| DR DOUGLAS C NAISMITH                            | BOARD OF<br>DIRECTORS<br>1 0                              | 0                                         | 0                                                                     | 441                                   |
| 106 W FINNEY AVENUE<br>SUFFOLK,VA 23434          |                                                           |                                           |                                                                       |                                       |
| B J WILLIE                                       | BOARD OF<br>DIRECTORS<br>1 0                              | 0                                         | 0                                                                     | 441                                   |
| 106 W FINNEY AVENUE<br>SUFFOLK,VA 23434          |                                                           |                                           |                                                                       |                                       |
| LULA B HOLLAND                                   | SECRETARY<br>1 0                                          | 0                                         | 0                                                                     | 441                                   |
| 106 W FINNEY AVENUE<br>SUFFOLK,VA 23434          |                                                           |                                           |                                                                       |                                       |
| HAROLD U BLYTHE                                  | BOARD OF<br>DIRECTORS<br>1 0                              | 0                                         | 0                                                                     | 441                                   |
| 106 W FINNEY AVENUE<br>SUFFOLK,VA 23434          |                                                           |                                           |                                                                       |                                       |
| Clarissa McAdoo                                  | Board of Directors<br>1 0                                 | 0                                         | 0                                                                     | 441                                   |
| 106 W FINNEY AVENUE<br>SUFFOLK,VA 23434          |                                                           |                                           |                                                                       |                                       |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient                                                                                                              | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution                                                                                                                                                                                                                                                    | Amount    |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| Name and address (home or business)                                                                                    |                                                                                                           |                                |                                                                                                                                                                                                                                                                                     |           |
| <b>a</b> <i>Paid during the year</i>                                                                                   |                                                                                                           |                                |                                                                                                                                                                                                                                                                                     |           |
| Access Partnership P O Box 41093<br>Norfolk,VA 23451                                                                   |                                                                                                           | PC                             | To fund Access Partnership's strategic planning review and update for years 2013 - 2016                                                                                                                                                                                             | 5,000     |
| Albemarle Regional Health Services<br>711 Roanoke Avenue P O Box 189<br>Elizabeth City,NC 27909                        |                                                                                                           | PC                             | To implement a comprehensive diabetes plan in Gates County, North Carolina                                                                                                                                                                                                          | 2,456     |
| Alzheimer's AssN - Southeastern Virginia ChAPTER 6350 Center Drive Suite 102<br>Norfolk,VA 23502                       |                                                                                                           | PC                             | The Walk to End Alzheimer's is fund raising event which raises awareness and funds for Alzheimer's care, support and research                                                                                                                                                       | 1,000     |
| American Cancer Society 4416 Expressway Dr<br>Virginia Beach,VA 23452                                                  |                                                                                                           | PC                             | To support the 2013 Suffolk Relay for Life fundraiser to benefit the American Cancer Society efforts to find a cure for cancer                                                                                                                                                      | 1,000     |
| American Diabetes Association 870 Greenbrier Circle Suite 404<br>Chesapeake,VA 23320                                   |                                                                                                           | PC                             | To train ambassadors in high health-risk congregations to raise awareness of diabetes and stress the importance of early detection, disease management and health risk factors                                                                                                      | 17,428    |
| American Diabetes Association 870 Greenbrier Circle Suite 404<br>Chesapeake,VA 23320                                   |                                                                                                           | PC                             | To support the 2014 Tour de Cure, a regional cycling event that raises funds and awareness about diabetes and its effects on health                                                                                                                                                 | 2,500     |
| Applewood Farms Home Owners Association 112 Benham Court<br>Suffolk,VA 23434                                           |                                                                                                           | NC                             | To sponsor the 2013 National Night Out event to promote and educate neighborhoods' involvement in crime prevention, police-community partnerships, neighborhood camaraderie and to include information on health and wellness and to offer healthful foods and dancing and exercise | 5,000     |
| Bon Secours Maryview Foundation 150 Kingsley Lane<br>Norfolk,VA 23505                                                  |                                                                                                           | SO I                           | To provide free, mobile medical services to medically underserved in Western Tidewater                                                                                                                                                                                              | 112,500   |
| Bon Secours Maryview Foundation 150 Kingsley Lane<br>Norfolk,VA 23505                                                  |                                                                                                           | SO I                           | To fund supplies for the free Community Diabetes Screening                                                                                                                                                                                                                          | 915       |
| Bon Secours Maryview Foundation 150 Kingsley Lane<br>Norfolk,VA 23505                                                  |                                                                                                           | SO I                           | To fund the Bon Secours Care-A-Van at the 2014 Mission of Mercy event to be used for the screening of uninsured, underinsured or unemployed individuals prior to their dental care                                                                                                  | 3,404     |
| Catholic Charities of Eastern Virginia 5361 Virginia Beach Blvd<br>Virginia Beach,VA 23462                             |                                                                                                           | PC                             | To provide Life Coaches in Sentara Obici Hospitals Emergency Room to help uninsured or underinsured patients secure primary care services or other resources                                                                                                                        | 17,855    |
| Catholic Charities of Eastern Virginia 5361 Virginia Beach Blvd<br>Virginia Beach,VA 23462                             |                                                                                                           | PC                             | Capacity building funding for the "Companion Care" program which will focus on senior citizen's ability to live independently at home                                                                                                                                               | 3,200     |
| Cerebral Palsy of Virginia 5825 Arrowhead Drive Suite 201<br>Virginia Beach,VA 23462                                   |                                                                                                           | PC                             | To give primary caregivers a respite (meals, entertainment, overnight stay and a respite provider) from daily stresses of caring for a family member with a disability                                                                                                              | 3,000     |
| City of Suffolk PO Box 1858<br>Suffolk,VA 23439                                                                        |                                                                                                           | PC                             | To provide adults and youth with increased physical activity and better nutrition using the Get Up and Get Out program                                                                                                                                                              | 3,179     |
| City of Suffolk PO Box 1858<br>Suffolk,VA 23439                                                                        |                                                                                                           | PC                             | To provide youth with opportunities to increase physical activity and improve healthy eating choices                                                                                                                                                                                | 11,922    |
| <b>Total . . . . .</b>  <b>3a</b> |                                                                                                           |                                |                                                                                                                                                                                                                                                                                     | 3,599,033 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient                                                                                                              | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution                                                                                                                                                  | Amount    |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| Name and address (home or business)                                                                                    |                                                                                                           |                                |                                                                                                                                                                                   |           |
| <b>a</b> <i>Paid during the year</i>                                                                                   |                                                                                                           |                                |                                                                                                                                                                                   |           |
| Colonial Virginia Council Boy Scouts of America 11721 Jefferson Avenue Newport News, VA 23606                          |                                                                                                           | PC                             | To support the annual fundraising dinner celebrating recent Eagle Scouts and Lifetime Achievement Awards and Community Pillars                                                    | 2,500     |
| Cover 3 Foundation P O Box 456 Franklin, VA 23851                                                                      |                                                                                                           | PC                             | To support an after-school and summer feeding program for at-risk and low-income children                                                                                         | 7,500     |
| Cover 3 Foundation P O Box 456 Franklin, VA 23851                                                                      |                                                                                                           | PC                             | To relocate the kitchen and administration to a larger facility enabling the feeding of more children                                                                             | 18,000    |
| Cover 3 Foundation P O Box 456 Franklin, VA 23851                                                                      |                                                                                                           | PC                             | To support Cover 3's New Year's Eve fundraiser where proceeds to go toward the purchase of fresh fruits and vegetables for the C3 Kid's Meals                                     | 1,000     |
| Eastern Virginia Medical School PO Box 1980 Norfolk, VA 235011980                                                      |                                                                                                           | PC                             | To increase the number of medical encounters at the Western Tidewater Free Clinic by scheduling family medicine residents, third-year medical students and an attending physician | 41        |
| Eastern Virginia Medical School PO Box 1980 Norfolk, VA 235011980                                                      |                                                                                                           | PC                             | To raise awareness and reduce the risk of diabetes by educating physicians, conducting screenings and implementing a telephonic care management plan                              | 17,741    |
| Eastern Virginia Medical School PO Box 1980 Norfolk, VA 235011980                                                      |                                                                                                           | PC                             | To engage medical residents and third-year medical students in giving care to patients at the Western Tidewater Free Clinic, thereby increasing medical care access               | 50,625    |
| Eastern Virginia Medical School PO Box 1980 Norfolk, VA 235011980                                                      |                                                                                                           | PC                             | To reduce the risk of diabetes by educating physicians, conducting screenings and implementing a telephonic care management plan for referred patients                            | 77,173    |
| Eastern Virginia Medical School PO Box 1980 Norfolk, VA 235011980                                                      |                                                                                                           | PC                             | To plan for the establishment of a Specialty Care Center that will improve access to specialty care and decrease complications associated with pre-diabetes and diabetes          | 12,500    |
| Education Fdtn for Isle of Wight Public Schools 820 West Main Street Smithfield, VA 23430                              |                                                                                                           | PC                             | To support the 7th Annual Students First Dinner and Auction to benefit the students in Isle of Wight County Public Schools                                                        | 1,000     |
| Eternawell 6546 Hampton Roads Parkway No 12 Suffolk, VA 23434                                                          |                                                                                                           | NC                             | To support a Healthy People Healthy Suffolk Walking Group in North Suffolk                                                                                                        | 250       |
| First Tee Hampton Roads 2400 Tournament Drive Virginia Beach, VA 23456                                                 |                                                                                                           | PC                             | To honor the service of Mr Robert Hayes, Board Emeritus, with support of First Tee of Hampton Roads                                                                               | 1,000     |
| Foodbank of Southeastern Virginia PO Box 1940 Norfolk, VA 23501                                                        |                                                                                                           | PC                             | To provide free food with high nutritional value from the Foodbank's Suffolk Mobile Pantry for diabetic clients                                                                   | 25,000    |
| Foodbank of Southeastern Virginia PO Box 1940 Norfolk, VA 23501                                                        |                                                                                                           | PC                             | To provide diabetic clients with high nutritional value foods from the Foodbank's Suffolk Mobile Pantry                                                                           | 18,750    |
| ForKids Inc PO Box 6044 Norfolk, VA 23508                                                                              |                                                                                                           | PC                             | To expand homeless prevention and permanent supportive housing programming in Western Tidewater and to provide medical case management services                                   | 12,500    |
| <b>Total . . . . .</b>  <b>3a</b> |                                                                                                           |                                |                                                                                                                                                                                   | 3,599,033 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient                                                                                                              | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution                                                                                                                                                                                        | Amount    |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| Name and address (home or business)                                                                                    |                                                                                                           |                                |                                                                                                                                                                                                                         |           |
| <b>a</b> <i>Paid during the year</i>                                                                                   |                                                                                                           |                                |                                                                                                                                                                                                                         |           |
| ForKids Inc PO Box 6044<br>Norfolk, VA 23508                                                                           |                                                                                                           | PC                             | To improve access to medical and mental health services for homeless families                                                                                                                                           | 56,250    |
| Franklin City Department of Social Services 306 N Main Street<br>Franklin, VA 23851                                    |                                                                                                           | PC                             | To support the third annual "No Excuse for Child Abuse" Poker Run                                                                                                                                                       | 300       |
| Gates Partners for Health 29 Medical Center Rd<br>Gates, NC 27937                                                      |                                                                                                           | PC                             | To support a heart healthy seminar, dinner and panel discussion directed at health centers and churches                                                                                                                 | 1,500     |
| Gateway Community Health Center P O Box 297<br>Gatesville, NC 27938                                                    |                                                                                                           | PC                             | To expand services that support Gates County residents who are diabetic, pre-diabetic or at high risk for developing diabetes                                                                                           | 67,849    |
| Girls on the Run South Hampton Roads 921 First Colonial Rd Suite 1707<br>Virginia Beach, VA 23454                      |                                                                                                           | PC                             | To fund the purchase of curriculum, water bottles and lesson materials for an after-school running and exercise program for 8-12 year old girls                                                                         | 5,000     |
| Hampton Roads Chamber of Commerce 500 East Main Street Suite 700<br>Norfolk, VA 23510                                  |                                                                                                           | NC                             | To sponsor the May 2013 Suffolk Mingle on Main event featuring the Peanut City Cloggers                                                                                                                                 | 500       |
| Horizon Health Services PO Box 29 Waverly, VA 23890                                                                    |                                                                                                           | PC                             | To provide dental care and smoking cessation services in Franklin, Southampton, Surry and Sussex service areas                                                                                                          | 37,500    |
| Isle of Wight Christian Outreach Program P O Box 253<br>Smithfield, VA 23431                                           |                                                                                                           | PC                             | To provide basic dental healthcare access to the uninsured elderly in the Isle of Wight area, most of whom are at or below the poverty level                                                                            | 1,550     |
| Isle of Wight Christian Outreach Program P O Box 253<br>Isle of Wight, VA 23431                                        |                                                                                                           | PC                             | To help remodel a facility where low-income persons can receive health and social services                                                                                                                              | 90,000    |
| Isle of Wight County Department of Social Services 17100 Monument Circle Suite A<br>Smithfield, VA 23397               |                                                                                                           | PC                             | For a proactive outreach program to increase the number of children and families enrolled in Medicaid and FAMIS in Isle of Wight County                                                                                 | 65,796    |
| Isle of Wight Educational Foundation Inc 17111 Courthouse Highway P O Box<br>Isle of Wight, VA 23397                   |                                                                                                           | PC                             | To purchase a commercial salad bar for the Isle of Wight Academy's lunch room                                                                                                                                           | 3,900     |
| Isle of Wight Educational Foundation Inc 17111 Courthouse Highway P O Box<br>Isle of Wight, VA 23397                   |                                                                                                           | PC                             | To fund early childhood specialized play equipment designed to aid in the prevention of early childhood obesity                                                                                                         | 5,000     |
| Johns Hopkins Scleroderma Center 5200 Eastern Avenue Mason F Lord<br>Baltimore, MD 212242735                           |                                                                                                           | PC                             | To support the Scleroderma Win the Fight Walk and Car Show awareness and fundraiser                                                                                                                                     | 500       |
| Nansemond-Suffolk Academy 3373 Pruden Blvd<br>Suffolk, VA 23434                                                        |                                                                                                           | PC                             | To develop a "kid-to-kid" social marketing obesity prevention awareness campaign                                                                                                                                        | 347       |
| National Kidney Foundation Serving Virginia 1742 East Parham<br>Richmond, VA 23228                                     |                                                                                                           | PC                             | The Hampton Roads Kidney Walk community fundraiser creates an opportunity to celebrate life, build lasting community advocacy and to call attention to the prevention of kidney disease and the need for organ donation | 2,000     |
| <b>Total . . . . .</b>  <b>3a</b> |                                                                                                           |                                |                                                                                                                                                                                                                         | 3,599,033 |

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| Name and address (home or business)                                                                                    |                                                                                                           |                                |                                                                                                                                                                                  |           |
| <b>a</b> <i>Paid during the year</i>                                                                                   |                                                                                                           |                                |                                                                                                                                                                                  |           |
| Paul D Camp Community College PO Box 737 Franklin, VA 23851                                                            |                                                                                                           | PC                             | To renovate the Suffolk Health Sciences Skills Laboratory into a modern, innovative space to meet the needs of today's nursing students                                          | 36,000    |
| Recovery for LifeRecovery for the City Intl 3419 B6 Virginia Beach Blvd Virginia Beach, VA 23452                       |                                                                                                           | PC                             | To fund the development of health ministries through the education and distribution of health materials to faith and lay leaders                                                 | 5,000     |
| Rushmere Community Development Corporation 4796 Old Stage Hwy Smithfield, VA 23430                                     |                                                                                                           | PC                             | Training Assistance for Volunteer Hampton Road's Board Boot Camp                                                                                                                 | 150       |
| RX Partnership 2924 Emerywood Pkwy Suite 300 Richmond, VA 23294                                                        |                                                                                                           | PC                             | TO PROVIDE FREE PRESCRIPTION MEDICATION AND LOW-COST SUPPLIES TO LOW-INCOME, UNINSURED RESIDENTS SERVED BY WESTERN TIDEWATER FREE CLINIC                                         | 7,500     |
| RX Partnership 2924 Emerywood Pkwy Suite 300 Richmond, VA 23294                                                        |                                                                                                           | PC                             | To sponsor the Rx Partnership Annual Affiliate Roundtable in July 2013                                                                                                           | 2,000     |
| RX Partnership 2924 Emerywood Pkwy Suite 300 Richmond, VA 23294                                                        |                                                                                                           | PC                             | To provide free prescription medication and low-cost supplies to low-income, uninsured residents served by the Western Tidewater Free Clinic                                     | 5,625     |
| Senior Services of Southeastern Virginia 6350 Center Dr Suite 101 Norfolk, VA 23502                                    |                                                                                                           | PC                             | To expand the MedCare Access program by training volunteer benefit counselors                                                                                                    | 7,501     |
| Senior Services of Southeastern Virginia 6350 Center Dr Suite 101 Norfolk, VA 23502                                    |                                                                                                           | PC                             | For training Benefit Counselor volunteers in an expansion of the MedCare Access program                                                                                          | 67,500    |
| Senior Services of Southeastern Virginia 6350 Center Dr Suite 101 Norfolk, VA 23502                                    |                                                                                                           | PC                             | To sponsor the Medicare Health Fair and Expo at the Silver Level which provided educational programs and Medicare counseling for senior citizens                                 | 2,500     |
| Senior Services of Southeastern Virginia 6350 Center Dr Suite 101 Norfolk, VA 23502                                    |                                                                                                           | PC                             | To rehabilitate the historical Hayden High school in Franklin, Virginia, and provide inter-generational health and wellness services to the community                            | 250,000   |
| Sentara Obici Hospital 2800 Godwin Blvd Suffolk, VA 23434                                                              |                                                                                                           | PC                             | To develop and implement a hospital-based, universal risk screening during pregnancy or at birth that connects new parents with appropriate community resources                  | 13,728    |
| Sentara Obici Hospital 2800 Godwin Blvd Suffolk, VA 23434                                                              |                                                                                                           | PC                             | To provide uninsured patients with case management services that improve self-care disease management skills from hospital to home                                               | 28,125    |
| Sentara Obici Hospital 2800 Godwin Blvd Suffolk, VA 23434                                                              |                                                                                                           | PC                             | For a hospital-based, universal risk screening during pregnancy or at birth that connects new parents with appropriate community resources                                       | 92,666    |
| Sentara Obici Hospital 2800 Godwin Blvd Suffolk, VA 23434                                                              |                                                                                                           | PC                             | To purchase necessary telemedicine equipment to improve access to behavioral health services in the emergency departments at Sentara Obici Hospital and BelleHarbour             | 11,282    |
| Sentara Obici Hospital 2800 Godwin Blvd Suffolk, VA 23434                                                              |                                                                                                           | PC                             | To support analysis by a cardiac nurse and a clinical dietician of local restaurant menus and further to indicate on the analyzed menus those heart and diabetic healthy options | 4,000     |
| <b>Total . . . . .</b>  <b>3a</b> |                                                                                                           |                                |                                                                                                                                                                                  | 3,599,033 |

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| Sentara Obici Hospital 2800 Godwin Blvd<br>Suffolk, VA 23434                                                           |                                                                                                           | PC                             | To provide uninsured patients with case management services that improve self-care disease management skills from hospital to home                                                 | 18,750    |
| Sentara Obici Hospital 2800 Godwin Blvd<br>Suffolk, VA 23434                                                           |                                                                                                           | PC                             | To provide Life Coaches in Sentara Obici Hospitals Emergency Room who will help uninsured and underinsured patients obtain primary care services or other resources                | 37,500    |
| Smart Beginnings Western Tidewater 601 North Mechanic StreetSuite 203<br>Franklin, VA 23851                            |                                                                                                           | PC                             | To increase the number of Western Tidewater children enrolled in FAMIS                                                                                                             | 16,000    |
| Smart Beginnings Western Tidewater 601 North Mechanic StreetSuite 203<br>Franklin, VA 23851                            |                                                                                                           | PC                             | To fund quarterly workshops for the professional development of preschool providers on the subjects of nutrition and health                                                        | 2,500     |
| Smithfield and IOW Convention and Visitor Bureau 319 Main Street PO Box 37<br>Smithfield, VA 23430                     |                                                                                                           | PC                             | To provide funding so that the Smithfield Farmers Market can advertise the local, fresh produce and educate the public on supporting local farms and the benefit of eating healthy | 2,500     |
| Southeastern Council of Foundations 50 Hurt Plaza Suite 350<br>Atlanta, GA 30303                                       |                                                                                                           | PC                             | To sponsor the Southeastern Council of Foundations Annual Meeting                                                                                                                  | 5,000     |
| Southeastern Virginia Health System 1033 28th St 2nd Floor<br>Newport News, VA 23607                                   |                                                                                                           | PC                             | To provide access to clinical intervention/ primary care services for the diagnosis and management of diabetes and oral health                                                     | 25,000    |
| Southeastern Virginia Health System 1033 28th St 2nd Floor<br>Newport News, VA 23607                                   |                                                                                                           | PC                             | To provide access to clinical intervention/ primary care services for the diagnosis and management of diabetes and oral health                                                     | 225,000   |
| Southeastern Virginia Health System 1033 28th St 2nd Floor<br>Newport News, VA 23607                                   |                                                                                                           | PC                             | To support a fundraiser to cover procedures such as colonoscopies, breast and prostate screenings for the uninsured/underinsured patient populations                               | 1,000     |
| Suffolk Department of Social Services 135 Hall Avenue<br>Suffolk, VA 23434                                             |                                                                                                           | PC                             | To increase the number of children and families enrolled in Medicaid and FAMIS                                                                                                     | 23,007    |
| Suffolk Family YMCA 2769 Godwin Blvd<br>Suffolk, VA 23434                                                              |                                                                                                           | PC                             | To increase cardiovascular fitness, physical strength and life skills for youth participating in an after-school jump rope program                                                 | 30,938    |
| Suffolk Literacy Council 157 North Main Street 2nd Floor<br>Suffolk, VA 23434                                          |                                                                                                           | PC                             | Support for two bi-annual Suffolk Literacy events, 2 Your Health, where reading of both prescription labels and food labels is taught by pharmacists and dieticians                | 2,000     |
| Suffolk Meals on Wheels 2800 Godwin Blvd<br>Suffolk, VA 23434                                                          |                                                                                                           | PC                             | For meal delivery to seniors and disabled recipients who are homebound and/or home alone in Suffolk and Isle of Wight County                                                       | 42,496    |
| Suffolk Meals on Wheels 2800 Godwin Blvd<br>Suffolk, VA 23434                                                          |                                                                                                           | PC                             | To provide funds for marketing to short-term and young disability individuals who may be in need of the nutritious meal delivery service                                           | 2,000     |
| Suffolk Partnership for a Healthy Community 1707 N Main Street<br>Suffolk, VA 23434                                    |                                                                                                           | PC                             | To develop a comprehensive plan encouraging active lifestyles for Suffolk citizens that includes community engagement, environmental change and measurable outcomes                | 9,848     |
| <b>Total . . . . .</b>  <b>3a</b> |                                                                                                           |                                |                                                                                                                                                                                    | 3,599,033 |

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| Suffolk Partnership for a Healthy Community 1707 N Main Street<br>Suffolk, VA 23434                                    |                                                                                                           | PC                             | For implementation of a 10-year community wellness plan that promotes active lifestyles, access to healthy foods and neighborhood engagement                                             | 149,575   |
| Suffolk Partnership for a Healthy Community 1707 N Main Street<br>Suffolk, VA 23434                                    |                                                                                                           | PC                             | To develop a comprehensive plan encouraging active lifestyles for Suffolk citizens that includes community engagement, environmental change and measurable outcomes                      | 7,830     |
| Suffolk Partnership for a Healthy Community 1707 N Main Street<br>Suffolk, VA 23434                                    |                                                                                                           | PC                             | For implementation of a 10-year community wellness plan that promotes active lifestyles, access to healthy foods and neighborhood engagement                                             | 17,915    |
| Suffolk Public Schools 100 N Main St<br>StPO Box 1549<br>Suffolk, VA 23434                                             |                                                                                                           | PC                             | To develop and implement After-School Challenge Clubs focused on obesity prevention and to establish salad bars in cafeterias for better nutrition                                       | 95,246    |
| Suffolk Redevelopment and Housing Authority 530 E Pinner Street<br>Suffolk, VA 23434                                   |                                                                                                           | PC                             | To raise awareness among residents of public housing communities in Suffolk about the health hazards from exposure to secondhand smoke in public places and reduce the number of smokers | 25,000    |
| Suffolk Redevelopment and Housing Authority 530 E Pinner Street<br>Suffolk, VA 23434                                   |                                                                                                           | PC                             | To help public housing residents become more aware of both the prevention and management of chronic disease                                                                              | 30,690    |
| Suffolk Salvation Army Corps 400 Bank St<br>Suffolk, VA 23434                                                          |                                                                                                           | PC                             | To provide low-income persons with improved access to their doctors, hospitals and pharmacies                                                                                            | 7,500     |
| The Genieve Shelter 157 N Main St<br>2nd Floor Ste R3<br>Suffolk, VA 23434                                             |                                                                                                           | PC                             | To support the establishment of the Development Coordinator position to encourage community participation, and financial support for The Genieve Shelters programs and special events    | 17,500    |
| The Genieve Shelter 157 N Main St<br>2nd Floor Ste R3<br>Suffolk, VA 23434                                             |                                                                                                           | PC                             | To support a Walk-A-Thon and fundraising event that will bring awareness to domestic violence and encourage victims to walk away from abuse                                              | 500       |
| The Genieve Shelter 157 N Main St<br>2nd Floor Ste R3<br>Suffolk, VA 23434                                             |                                                                                                           | PC                             | Volunteer Hampton Roads Board Boot Camp                                                                                                                                                  | 200       |
| The Healing Place of Hampton Roads<br>5265 Robin Hood Road Suite 700<br>Norfolk, VA 23513                              |                                                                                                           | PC                             | To provide seed funding for the start-up phase and operational needs for a program to help homeless men and women, including veterans, to recover from alcohol and drug addiction        | 5,000     |
| The Horses Helping Heroes Project<br>1807 Church Street Suite 100 PMB<br>Smithfield, VA 23430                          |                                                                                                           | PC                             | Funding so that Horses Helping Heroes might provide free horse therapy classes to veterans or first responders with special needs and disabilities                                       | 2,500     |
| The Planning Council 5365 Robin Hood Road Suite 700<br>Norfolk, VA 23513                                               |                                                                                                           | PC                             | To prevent and address obesity among children within private childcare settings and before/after school programs across Western Tidewater                                                | 65,998    |
| The Planning Council 5365 Robin Hood Road Suite 700<br>Norfolk, VA 23513                                               |                                                                                                           | PC                             | To coordinate the homelessness continuum of care process, which includes the management of housing, healthcare and support services                                                      | 8,023     |
| The Planning Council 5365 Robin Hood Road Suite 700<br>Norfolk, VA 23513                                               |                                                                                                           | PC                             | To coordinate services among homelessness continuum of care providers, including the management of housing, healthcare and support services                                              | 6,000     |
| <b>Total . . . . .</b>  <b>3a</b> |                                                                                                           |                                |                                                                                                                                                                                          | 3,599,033 |



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| The Planning Council 5365 Robin Hood Road Suite 700 Norfolk, VA 23513                                                  |                                                                                                           | PC                             | To support a Suffolk outreach initiative that enrolls uninsured children in FAMIS                                                                                                                                                                                                                                                        | 26,513    |
| The Rensselaerville Institute 2 Oakwood Place Delmar, NY 12054                                                         |                                                                                                           | PC                             | To define, track, achieve, communicate and improve results over the life of the Healthy People/Healthy Suffolk initiative                                                                                                                                                                                                                | 75,000    |
| The Up Center 222 W 19th St Norfolk, VA 23517                                                                          |                                                                                                           | PC                             | To expand trauma-informed-care groups for adults who have experienced trauma, to implement trauma-informed groups for children and adolescents based on best-practice concepts, and to educate human service providers in Trauma-Informed-Care techniques                                                                                | 7,669     |
| The Up Center 222 W 19th St Norfolk, VA 23517                                                                          |                                                                                                           | PC                             | To offer a traumatic stress symptom education and referral system to community providers and to conduct traumatic stress therapy for individuals referred                                                                                                                                                                                | 55,243    |
| The Wakefield Foundation PO Box 8 Wakefield, VA 23888                                                                  |                                                                                                           | PC                             | To help fund the production of an hour-long documentary film about the history of peanut farmers and peanut production                                                                                                                                                                                                                   | 5,000     |
| Town of Smithfield P O Box 246 Smithfield, VA 23431                                                                    |                                                                                                           | PC                             | To implement the Town of Smithfield community wellness initiative, Smithfield on the Move This culture-based plan includes broad-based education, marketing, infrastructure and programs that promote healthy nutritional choices while encouraging on-going physical activity to combat and prevent obesity in both children and adults | 5,500     |
| Town of Smithfield P O Box 246 Smithfield, VA 23431                                                                    |                                                                                                           | PC                             | To continue Smithfields community wellness initiative and to include incentives for Supplemental Nutrition Assistance Program (SNAP) households to shop at the Farmers Market for fresh produce                                                                                                                                          | 22,500    |
| Virginia Dental Association Foundation 3460 Mayland Court Suite 110 Richmond, VA 23233                                 |                                                                                                           | SO I                           | To support the 2014 day of free dental care, the "Mission of Mercy" project                                                                                                                                                                                                                                                              | 20,000    |
| Virginia Diabetes Council 2618 Iron Forge Road Herndon, VA 20171                                                       |                                                                                                           | PC                             | To provide an evidence-based, self-management program for Type 2 diabetics and promote healthy dining choices and active lifestyles                                                                                                                                                                                                      | 9,528     |
| Virginia Diabetes Council 2618 Iron Forge Road Herndon, VA 20171                                                       |                                                                                                           | PC                             | Tidewater Community College Social Media for Your Nonprofit, Building for the Future Leadership & Capital Campaigns MindEdge Fundraising for Nonprofit Organizations, Introduction to Grant Writing and Principles of Marketing for Nonprofit Organizations                                                                              | 150       |
| Virginia Faith Based Outreach Initiative 822 Seminole Drive Suffolk, VA 23434                                          |                                                                                                           | PC                             | To fund the development of health ministries through the education and distribution of health materials to faith and lay leaders                                                                                                                                                                                                         | 5,000     |
| Virginia Health Care Foundation 707 East Main Street Suite 1350 Richmond, VA 23219                                     |                                                                                                           | PC                             | To continue participation in the patient Medication Assistance Program with technological upgrades                                                                                                                                                                                                                                       | 12,500    |
| Virginia Legal Aid Society PO Box 6200 513 Church Street Lynchburg, VA 24505                                           |                                                                                                           | PC                             | To help eligible, disabled clients obtain Medicaid and/or Medicare coverage                                                                                                                                                                                                                                                              | 37,500    |
| Virginia Legal Aid Society PO Box 6200 513 Church Street Lynchburg, VA 24505                                           |                                                                                                           | PC                             | To help disabled clients navigate the complex Medicaid and Medicare application and appeals processes                                                                                                                                                                                                                                    | 37,500    |
| Virginia Poverty Law Center 700 East Main Street Suite 1410 RICHMOND, VA 23219                                         |                                                                                                           | PC                             | Advocacy for the expansion of Medicaid for low-income Virginians                                                                                                                                                                                                                                                                         | 500       |
| <b>Total . . . . .</b>  <b>3a</b> |                                                                                                           |                                |                                                                                                                                                                                                                                                                                                                                          | 3,599,033 |

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| Virginia Supportive Housing P O Box 8585<br>Richmond,VA 23226                   |                                                                                                           | PC                             | To provide medical and mental health services to disabled persons residing in permanent supportive housing                                                                                               | 7,500     |
| Virginia Supportive Housing P O Box 8585<br>Richmond,VA 23226                   |                                                                                                           | PC                             | To provide case management and access to medical and mental health services to disabled persons residing in permanent supportive housing                                                                 | 5,625     |
| Voices for Kids CASA Program P O Box 949 409 Main Street<br>Smithfield,VA 23431 |                                                                                                           | PC                             | For program expansion to serve and advocate for children involved in Suffolk juvenile courts due to neglect and abuse                                                                                    | 4,293     |
| Voices for Kids CASA Program P O Box 949 409 Main Street<br>Smithfield,VA 23431 |                                                                                                           | PC                             | To expand advocacy services for children involved in Suffolk juvenile courts due to neglect and abuse                                                                                                    | 28,980    |
| VOLUNTEER Hampton Roads 400 West O Iney Road Suite B<br>Norfolk,VA 23507        |                                                                                                           | PC                             | To honor members of the community for their outstanding contributions of volunteer time and talent for positive impact on our community                                                                  | 1,500     |
| VOLUNTEER Hampton Roads 400 West O Iney Road Suite B<br>Norfolk,VA 23507        |                                                                                                           | PC                             | To support the 2013 Institute for Nonprofit Leadership Conference that brings together local nonprofits and national caliber speakers to assist in capacity building                                     | 1,500     |
| Western Tidewater Community Services Board 5268 Godwin Blvd<br>Suffolk,VA 23434 |                                                                                                           | PC                             | For on-site security services 6 hours per day, 7 days per week for 6 months in the Outpatient Medical Detox Program                                                                                      | 4,368     |
| Western Tidewater Community Services Board 5268 Godwin Blvd<br>Suffolk,VA 23434 |                                                                                                           | PC                             | For additional weekly outpatient pediatric counseling and psychiatry in Western Tidewater                                                                                                                | 15,000    |
| Western Tidewater Community Services Board 5268 Godwin Blvd<br>Suffolk,VA 23434 |                                                                                                           | PC                             | For a Licensed Practical Nurse to provide medical care monitoring and intervention for participants with severe/profound intellectual disabilities and physical disabilities in the Day Support programs | 4,083     |
| Western Tidewater Community Services Board 5268 Godwin Blvd<br>Suffolk,VA 23434 |                                                                                                           | PC                             | To establish Western Tidewaters first outpatient medical detoxification program that provides daily testing, counseling, support and referral services to substance abusers                              | 50,000    |
| Western Tidewater Community Services Board 5268 Godwin Blvd<br>Suffolk,VA 23434 |                                                                                                           | PC                             | To support a telemedicine link to crisis services for children, adolescents and adults to local law enforcement agencies and hospitals                                                                   | 24,063    |
| Western Tidewater Community Services Board 5268 Godwin Blvd<br>Suffolk,VA 23434 |                                                                                                           | PC                             | Western Tidewater Community Services Board staff training                                                                                                                                                | 150       |
| Western Tidewater Community Services Board 5268 Godwin Blvd<br>Suffolk,VA 23434 |                                                                                                           | PC                             | To continue Western Tidewaters first outpatient medical detoxification program that provides daily testing, counseling, support and referral services to substance abusers                               | 50,000    |
| Western Tidewater Community Services Board 5268 Godwin Blvd<br>Suffolk,VA 23434 |                                                                                                           | PC                             | To support a telemedicine link to crisis services for children, adolescents and adults to local law enforcement agencies and hospitals                                                                   | 19,250    |
| Western Tidewater Community Services Board 5268 Godwin Blvd<br>Suffolk,VA 23434 |                                                                                                           | PC                             | For expanded outpatient pediatric counseling and psychiatry in Western Tidewater                                                                                                                         | 101,250   |
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| Western Tidewater Community Services Board 5268 Godwin Blvd<br>Suffolk, VA 23434                                       |                                                                                                           | PC                             | For medical care monitoring and intervention for participants with severe/profound intellectual disabilities and physical disabilities in the Day Support programs                                                                                               | 22,024    |
| Western Tidewater Free Clinic 2019 Meade Parkway<br>Suffolk, VA 23434                                                  |                                                                                                           | PC                             | To provide operational support for medical care and chronic disease management of uninsured patients                                                                                                                                                             | 225,000   |
| Western Tidewater Free Clinic 2019 Meade Parkway<br>Suffolk, VA 23434                                                  |                                                                                                           | PC                             | To provide operational support for medical and dental care, and chronic disease management of uninsured patients                                                                                                                                                 | 250,000   |
| Western Tidewater Free Clinic 2019 Meade Parkway<br>Suffolk, VA 23434                                                  |                                                                                                           | PC                             | To purchase A1C testing cassettes and supplies for the Obici Healthcare Foundation health fair                                                                                                                                                                   | 500       |
| Western Tidewater Health District 135 Hall Ave Suite A<br>Suffolk, VA 234344654                                        |                                                                                                           | PC                             | To implement a national model - the Nurse Family Partnership program - to help improve prenatal health, child health and development though age two in Suffolk and Isle of Wight County                                                                          | 38,845    |
| Western Tidewater Health District 135 Hall Ave Suite A<br>Suffolk, VA 234344654                                        |                                                                                                           | PC                             | A Dental Health Promotion Project To improve the oral health of children in Isle of Wight County, City of Franklin and Southampton County by improving the Medicaid/FAMIS utilization rate                                                                       | 2,103     |
| Western Tidewater Health District 135 Hall Ave Suite A<br>Suffolk, VA 234344654                                        |                                                                                                           | PC                             | To provide underinsured and uninsured diabetics with one-on-one chronic disease case management services                                                                                                                                                         | 20,000    |
| Western Tidewater Health District 135 Hall Ave Suite A<br>Suffolk, VA 234344654                                        |                                                                                                           | PC                             | To implement a national model - the Nurse Family Partnership program - to help reduce undesirable birth outcomes through education, nurse-case management, home visitations and transportation assistance for pregnant women in Suffolk and Isle of Wight County | 132,885   |
| Western Tidewater Health District 135 Hall Ave Suite A<br>Suffolk, VA 234344654                                        |                                                                                                           | PC                             | TO PROVIDE SUPPLIES FOR THE ORAL SCREENING AND HEALTH INFORMATION AT THE 2013 OBICI HEALTHCARE FOUNDATION COMMUNITY HEALTH SCREENING                                                                                                                             | 400       |
| Western Tidewater Health District 135 Hall Ave Suite A<br>Suffolk, VA 234344654                                        |                                                                                                           | PC                             | To offer mobile dental services to improve the oral health of children in Isle of Wight County, the City of Franklin and Southampton County by increasing the Medicaid/FAMIS utilization rate to rate                                                            | 6,950     |
| Western Tidewater Health District 135 Hall Ave Suite A<br>Suffolk, VA 234344654                                        |                                                                                                           | PC                             | To provide telehealth monitoring services for chronic disease patients who frequently visit emergency rooms, and to improve chronic disease self-management                                                                                                      | 67,137    |
| WHRO 5200 Hampton Blvd<br>Norfolk, VA 23508                                                                            |                                                                                                           | PC                             | To sponsor Another View, a monthly, call-in program, that addresses the health concerns of the African-American community                                                                                                                                        | 5,000     |
| <b>Total . . . . .</b>  <b>3a</b> |                                                                                                           |                                |                                                                                                                                                                                                                                                                  | 3,599,033 |

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| <b>Schedule B</b><br>(Form 990, 990-EZ, or 990-PF)<br><br>Department of the Treasury<br>Internal Revenue Service | <b>Schedule of Contributors</b><br><br>▶ <b>Attach to Form 990, 990-EZ, or 990-PF.</b><br><br>▶ <b>Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u>.</b> | OMB No 1545-0047 |
|                                                                                                                  |                                                                                                                                                                                                                          | <b>2013</b>      |

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| <b>Name of the organization</b><br>OBICI HEALTHCARE FOUNDATION INC | <b>Employer identification number</b><br>51-0249728 |
|--------------------------------------------------------------------|-----------------------------------------------------|

Organization type (check one)

|                    |                                                                                                           |
|--------------------|-----------------------------------------------------------------------------------------------------------|
| <b>Filers of:</b>  | <b>Section:</b>                                                                                           |
| Form 990 or 990-EZ | <input type="checkbox"/> 501(c)( ) (enter number) organization                                            |
|                    | <input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation |
|                    | <input type="checkbox"/> 527 political organization                                                       |
| Form 990-PF        | <input checked="" type="checkbox"/> 501(c)(3) exempt private foundation                                   |
|                    | <input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation            |
|                    | <input type="checkbox"/> 501(c)(3) taxable private foundation                                             |

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

|                                                                |                                                     |
|----------------------------------------------------------------|-----------------------------------------------------|
| <b>Name of organization</b><br>OBICI HEALTHCARE FOUNDATION INC | <b>Employer identification number</b><br>51-0249728 |
|----------------------------------------------------------------|-----------------------------------------------------|

**Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                                |
|------------|-------------------------------------------------------------------|----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1          | Virginia R Rawls Trust<br>332 W Constance RD<br>SUFFOLK, VA 23434 | \$ 9,621                   | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br><br>(Complete Part II for<br>noncash contributions ) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                                |
|            |                                                                   | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br><br>(Complete Part II for<br>noncash contributions )            |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                                |
|            |                                                                   | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br><br>(Complete Part II for<br>noncash contributions )            |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                                |
|            |                                                                   | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br><br>(Complete Part II for<br>noncash contributions )            |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                                |
|            |                                                                   | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br><br>(Complete Part II for<br>noncash contributions )            |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                                |
|            |                                                                   | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br><br>(Complete Part II for<br>noncash contributions )            |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                 | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                                |
|            |                                                                   | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br><br>(Complete Part II for<br>noncash contributions )            |

|                                                         |                                              |
|---------------------------------------------------------|----------------------------------------------|
| Name of organization<br>OBICI HEALTHCARE FOUNDATION INC | Employer identification number<br>51-0249728 |
|---------------------------------------------------------|----------------------------------------------|

| Part II                   | Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed |                                                |                      |
|---------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------|
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given                                                      | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| _____                     | _____<br>_____<br>_____<br>_____                                                                  | \$ _____                                       | _____                |
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given                                                      | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| _____                     | _____<br>_____<br>_____<br>_____                                                                  | \$ _____                                       | _____                |
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given                                                      | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| _____                     | _____<br>_____<br>_____<br>_____                                                                  | \$ _____                                       | _____                |
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given                                                      | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| _____                     | _____<br>_____<br>_____<br>_____                                                                  | \$ _____                                       | _____                |
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given                                                      | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| _____                     | _____<br>_____<br>_____<br>_____                                                                  | \$ _____                                       | _____                |
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given                                                      | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
| _____                     | _____<br>_____<br>_____<br>_____                                                                  | \$ _____                                       | _____                |

|                                                                |                                                     |
|----------------------------------------------------------------|-----------------------------------------------------|
| <b>Name of organization</b><br>OBICI HEALTHCARE FOUNDATION INC | <b>Employer identification number</b><br>51-0249728 |
|----------------------------------------------------------------|-----------------------------------------------------|

Part III

**Exclusively** religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc , contributions of **\$1,000 or less** for the year (Enter this information once See instructions ) ▶ \$

Use duplicate copies of Part III if additional space is needed

| (a) No.<br>from<br>Part I | (b) Purpose of gift                   | (c) Use of gift                     | (d) Description of how gift is held      |
|---------------------------|---------------------------------------|-------------------------------------|------------------------------------------|
| —                         | <div></div> <div></div> <div></div>   | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div>      |
|                           | (e) Transfer of gift                  |                                     |                                          |
|                           | Transferee's name, address, and ZIP 4 |                                     | Relationship of transferor to transferee |
| <div></div> <div></div>   |                                       | <div></div> <div></div> <div></div> |                                          |

| (a) No.<br>from<br>Part I | (b) Purpose of gift                   | (c) Use of gift                     | (d) Description of how gift is held      |
|---------------------------|---------------------------------------|-------------------------------------|------------------------------------------|
| —                         | <div></div> <div></div> <div></div>   | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div>      |
|                           | (e) Transfer of gift                  |                                     |                                          |
|                           | Transferee's name, address, and ZIP 4 |                                     | Relationship of transferor to transferee |
| <div></div> <div></div>   |                                       | <div></div> <div></div> <div></div> |                                          |

| (a) No.<br>from<br>Part I | (b) Purpose of gift                   | (c) Use of gift                     | (d) Description of how gift is held      |
|---------------------------|---------------------------------------|-------------------------------------|------------------------------------------|
| —                         | <div></div> <div></div> <div></div>   | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div>      |
|                           | (e) Transfer of gift                  |                                     |                                          |
|                           | Transferee's name, address, and ZIP 4 |                                     | Relationship of transferor to transferee |
| <div></div> <div></div>   |                                       | <div></div> <div></div> <div></div> |                                          |

| (a) No.<br>from<br>Part I | (b) Purpose of gift                   | (c) Use of gift                     | (d) Description of how gift is held      |
|---------------------------|---------------------------------------|-------------------------------------|------------------------------------------|
| —                         | <div></div> <div></div> <div></div>   | <div></div> <div></div> <div></div> | <div></div> <div></div> <div></div>      |
|                           | (e) Transfer of gift                  |                                     |                                          |
|                           | Transferee's name, address, and ZIP 4 |                                     | Relationship of transferor to transferee |
| <div></div> <div></div>   |                                       | <div></div> <div></div> <div></div> |                                          |

Form **4562**

Department of the Treasury  
Internal Revenue Service (99)

Depreciation and Amortization  
(Including Information on Listed Property)

▶ See separate instructions.    ▶ Attach to your tax return.

OMB No 1545-0172

**2013**

Attachment  
Sequence No **179**

Name(s) shown on return  
OBICI HEALTHCARE FOUNDATION INC

Business or activity to which this form relates  
GENERAL DEPRECIATION

**Identifying number**  
  
51-0249728

**Part I**

**Election To Expense Certain Property Under Section 179**  
*Note: If you have any listed property, complete Part V before you complete Part I.*

|                                                                                                                                                         |          |              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|----------|--------------|
| <b>1</b> Maximum amount (see instructions) . . . . .                                                                                                    | <b>1</b> |              |
| <b>2</b> Total cost of section 179 property placed in service (see instructions) . . . . .                                                              | <b>2</b> |              |
| <b>3</b> Threshold cost of section 179 property before reduction in limitation (see instructions) . . . . .                                             | <b>3</b> | \$ 2,600,000 |
| <b>4</b> Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- . . . . .                                                       | <b>4</b> |              |
| <b>5</b> Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions . . . . . | <b>5</b> |              |

|           |                                                                                                                             |                                     |                         |  |
|-----------|-----------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------|--|
| <b>6</b>  | <b>(a)</b> Description of property                                                                                          | <b>(b)</b> Cost (business use only) | <b>(c)</b> Elected cost |  |
|           |                                                                                                                             |                                     |                         |  |
|           |                                                                                                                             |                                     |                         |  |
| <b>7</b>  | Listed property Enter the amount from line 29 . . . . .                                                                     | <b>7</b>                            |                         |  |
| <b>8</b>  | Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 . . . . .                               | <b>8</b>                            |                         |  |
| <b>9</b>  | Tentative deduction Enter the smaller of line 5 or line 8 . . . . .                                                         | <b>9</b>                            |                         |  |
| <b>10</b> | Carryover of disallowed deduction from line 13 of your 2012 Form 4562 . . . . .                                             | <b>10</b>                           |                         |  |
| <b>11</b> | Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) . . . . . | <b>11</b>                           |                         |  |
| <b>12</b> | Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 . . . . .                              | <b>12</b>                           |                         |  |
| <b>13</b> | Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12 .▶                                               | <b>13</b>                           |                         |  |

**Note:** Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II**

**Special Depreciation Allowance and Other Depreciation (Do not include listed property )** (See instructions )

|                                                                                                                                                                 |           |         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------|
| <b>14</b> Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) . . . . . | <b>14</b> |         |
| <b>15</b> Property subject to section 168(f)(1) election . . . . .                                                                                              | <b>15</b> |         |
| <b>16</b> Other depreciation (including ACRS) . . . . .                                                                                                         | <b>16</b> | 118,901 |

**Part III**

**MACRS Depreciation (Do not include listed property.)** (See instructions.)

**Section A**

|                                                                                                                                                                                  |           |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--|
| <b>17</b> MACRS deductions for assets placed in service in tax years beginning before 2013 . . . . .                                                                             | <b>17</b> |  |
| <b>18</b> If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here . . . . . ▶ <input type="checkbox"/> |           |  |

**Section B—Assets Placed in Service During 2013 Tax Year Using the General Depreciation System**

| <b>(a)</b> Classification of property | <b>(b)</b> Month and year placed in service | <b>(c)</b> Basis for depreciation (business/investment use only—see instructions) | <b>(d)</b> Recovery period | <b>(e)</b> Convention | <b>(f)</b> Method | <b>(g)</b> Depreciation deduction |
|---------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------|----------------------------|-----------------------|-------------------|-----------------------------------|
| <b>19a</b> 3-year property            |                                             |                                                                                   |                            |                       |                   |                                   |
| <b>b</b> 5-year property              |                                             |                                                                                   |                            |                       |                   |                                   |
| <b>c</b> 7-year property              |                                             |                                                                                   |                            |                       |                   |                                   |
| <b>d</b> 10-year property             |                                             |                                                                                   |                            |                       |                   |                                   |
| <b>e</b> 15-year property             |                                             |                                                                                   |                            |                       |                   |                                   |
| <b>f</b> 20-year property             |                                             |                                                                                   |                            |                       |                   |                                   |
| <b>g</b> 25-year property             |                                             |                                                                                   | 25 yrs                     |                       | S/L               |                                   |
| <b>h</b> Residential rental property  |                                             |                                                                                   | 27 5 yrs                   | MM                    | S/L               |                                   |
|                                       |                                             |                                                                                   | 27 5 yrs                   | MM                    | S/L               |                                   |
| <b>i</b> Nonresidential real property |                                             |                                                                                   | 39 yrs                     | MM                    | S/L               |                                   |
|                                       |                                             |                                                                                   |                            | MM                    | S/L               |                                   |

**Section C—Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System**

|                       |  |  |        |    |     |  |
|-----------------------|--|--|--------|----|-----|--|
| <b>20a</b> Class life |  |  |        |    | S/L |  |
| <b>b</b> 12-year      |  |  | 12 yrs |    | S/L |  |
| <b>c</b> 40-year      |  |  | 40 yrs | MM | S/L |  |

**Part IV**

**Summary** (see instructions.)

|                                                                                                                                                                                                                              |           |         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------|
| <b>21</b> Listed property Enter amount from line 28 . . . . .                                                                                                                                                                | <b>21</b> |         |
| <b>22 Total.</b> Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions . . . . . | <b>22</b> | 118,901 |
| <b>23</b> For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs . . . . .                                                                  | <b>23</b> |         |



Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)  
**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

|                                                                                                                                                                            |                               |                                            |                            |                                                              |                        |                                                                                                            |                                |                                 |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|--------------------------------------------|----------------------------|--------------------------------------------------------------|------------------------|------------------------------------------------------------------------------------------------------------|--------------------------------|---------------------------------|--|
| 24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                               |                               |                                            |                            |                                                              |                        | 24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                |                                 |  |
| (a)<br>Type of property (list vehicles first)                                                                                                                              | (b)<br>Date placed in service | (c)<br>Business/ investment use percentage | (d)<br>Cost or other basis | (e)<br>Basis for depreciation (business/investment use only) | (f)<br>Recovery period | (g)<br>Method/ Convention                                                                                  | (h)<br>Depreciation/ deduction | (i)<br>Elected section 179 cost |  |
| 25Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) |                               |                                            |                            |                                                              |                        |                                                                                                            | 25                             |                                 |  |
| 26 Property used more than 50% in a qualified business use                                                                                                                 |                               |                                            |                            |                                                              |                        |                                                                                                            |                                |                                 |  |
|                                                                                                                                                                            |                               | %                                          |                            |                                                              |                        |                                                                                                            |                                |                                 |  |
|                                                                                                                                                                            |                               | %                                          |                            |                                                              |                        |                                                                                                            |                                |                                 |  |
|                                                                                                                                                                            |                               | %                                          |                            |                                                              |                        |                                                                                                            |                                |                                 |  |
| 27 Property used 50% or less in a qualified business use                                                                                                                   |                               |                                            |                            |                                                              |                        |                                                                                                            |                                |                                 |  |
|                                                                                                                                                                            |                               | %                                          |                            |                                                              |                        | S/L -                                                                                                      |                                |                                 |  |
|                                                                                                                                                                            |                               | %                                          |                            |                                                              |                        | S/L -                                                                                                      |                                |                                 |  |
|                                                                                                                                                                            |                               | %                                          |                            |                                                              |                        | S/L -                                                                                                      |                                |                                 |  |
| 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1                                                                                        |                               |                                            |                            |                                                              |                        | 28                                                                                                         |                                |                                 |  |
| 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1                                                                                                     |                               |                                            |                            |                                                              |                        |                                                                                                            | 29                             |                                 |  |

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person  
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

|                                                                                                    |                  |    |                  |    |                  |    |                  |    |                  |    |                  |    |
|----------------------------------------------------------------------------------------------------|------------------|----|------------------|----|------------------|----|------------------|----|------------------|----|------------------|----|
| 30 Total business/investment miles driven during the year ( <b>do not</b> include commuting miles) | (a)<br>Vehicle 1 |    | (b)<br>Vehicle 2 |    | (c)<br>Vehicle 3 |    | (d)<br>Vehicle 4 |    | (e)<br>Vehicle 5 |    | (f)<br>Vehicle 6 |    |
| 31 Total commuting miles driven during the year                                                    |                  |    |                  |    |                  |    |                  |    |                  |    |                  |    |
| 32 Total other personal(noncommuting) miles driven                                                 |                  |    |                  |    |                  |    |                  |    |                  |    |                  |    |
| 33 Total miles driven during the year Add lines 30 through 32                                      |                  |    |                  |    |                  |    |                  |    |                  |    |                  |    |
| 34 Was the vehicle available for personal use during off-duty hours?                               | Yes              | No | Yes              | No | Yes              | No | Yes              | No | Yes              | No | Yes              | No |
| 35 Was the vehicle used primarily by a more than 5% owner or related person?                       |                  |    |                  |    |                  |    |                  |    |                  |    |                  |    |
| 36 Is another vehicle available for personal use?                                                  |                  |    |                  |    |                  |    |                  |    |                  |    |                  |    |

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions)

|                                                                                                                                                                                                                           |     |    |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?                                                                                        | Yes | No |
| 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners |     | No |
| 39 Do you treat all use of vehicles by employees as personal use?                                                                                                                                                         |     | No |
| 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of vehicles, and retain the information received?                                                       |     | No |
| 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions )                                                                                                                    |     | No |
| <b>Note:</b> If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles                                                                                                         |     |    |

Part VI Amortization

|                                                                                     |                                 |                           |                     |                                          |                                   |
|-------------------------------------------------------------------------------------|---------------------------------|---------------------------|---------------------|------------------------------------------|-----------------------------------|
| (a)<br>Description of costs                                                         | (b)<br>Date amortization begins | (c)<br>Amortizable amount | (d)<br>Code section | (e)<br>Amortization period or percentage | (f)<br>Amortization for this year |
| 42 Amortization of costs that begins during your 2013 tax year (see instructions)   |                                 |                           |                     |                                          |                                   |
|                                                                                     |                                 |                           |                     |                                          |                                   |
| 43 Amortization of costs that began before your 2013 tax year                       |                                 |                           |                     | 43                                       |                                   |
| 44 <b>Total.</b> Add amounts in column (f) See the instructions for where to report |                                 |                           |                     | 44                                       |                                   |

## TY 2013 Accounting Fees Schedule

**Name:** OBICI HEALTHCARE FOUNDATION INC

**EIN:** 51-0249728

| Category                         | Amount | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
|----------------------------------|--------|--------------------------|------------------------|---------------------------------------------|
| TAX COMPLIANCE AND<br>AUDIT SVCS | 48,209 |                          |                        | 48,209                                      |

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2013 Depreciation Schedule

Name: OBICI HEALTHCARE FOUNDATION INC

EIN: 51-0249728

| Description of Property | Date Acquired | Cost or Other Basis | Prior Years' Depreciation | Computation Method | Rate / Life (# of years) | Current Year's Depreciation Expense | Net Investment Income | Adjusted Net Income | Cost of Goods Sold Not Included |
|-------------------------|---------------|---------------------|---------------------------|--------------------|--------------------------|-------------------------------------|-----------------------|---------------------|---------------------------------|
| LAND                    | 2010-03-01    | 102,507             |                           | L                  |                          |                                     |                       |                     |                                 |
| LAND-CONSTRUCTION       | 2010-03-01    | 349,632             | 56,242                    | SL                 |                          | 18,243                              |                       |                     |                                 |
| LAND IMPR FENCE         | 2010-04-09    | 1,300               | 487                       | SL                 | 8                        | 163                                 |                       |                     |                                 |
| BRONZE SIGN             | 2010-04-12    | 3,449               | 689                       | SL                 | 15                       | 230                                 |                       |                     |                                 |
| LANDSCAPING CONTRA      | 2010-05-13    | 54,997              | 15,582                    | SL                 | 10                       | 5,500                               |                       |                     |                                 |
| CIVIL CONSTRUCTION      | 2010-08-31    | 2,373               | 136                       | SL                 | 45                       | 53                                  |                       |                     |                                 |
| FINAL UNDERCUTTING      | 2010-09-01    | 1,524               | 262                       | SL                 | 15                       | 102                                 |                       |                     |                                 |
| REVIEW OF FINAL DR      | 2010-09-01    | 210                 | 12                        | SL                 | 45                       | 5                                   |                       |                     |                                 |
| ORIGINAL CONSTRUCT      | 2010-03-01    | 1,594,184           | 178,690                   | SL                 |                          | 57,953                              |                       |                     |                                 |
| STAIRS & CABINETS       | 2010-09-01    | 7,431               | 495                       | SL                 | 45                       | 165                                 |                       |                     |                                 |
| CONSTRUCTION ADMN       | 2010-09-01    | 4,653               | 267                       | SL                 | 45                       | 103                                 |                       |                     |                                 |
| SNOW GUARDS             | 2011-03-10    | 10,200              | 453                       | SL                 | 45                       | 227                                 |                       |                     |                                 |
| COMPUTER                | 2006-12-18    | 1,447               | 1,447                     | SL                 | 5                        | 0                                   |                       |                     |                                 |
| COPIER                  | 2006-12-18    | 6,100               | 6,100                     | SL                 | 5                        |                                     |                       |                     |                                 |
| 2 COMPUTER MONITOR      | 2006-12-18    | 3,423               | 3,423                     | SL                 | 5                        |                                     |                       |                     |                                 |
| BROTHER LASER PRIN      | 2006-12-18    | 707                 | 707                       | SL                 | 5                        |                                     |                       |                     |                                 |
| COMPUTER EQUIPMENT      | 2006-12-18    | 980                 | 980                       | SL                 | 5                        |                                     |                       |                     |                                 |
| 3 COMPUTER MONITOR      | 2007-01-02    | 5,308               | 5,308                     | SL                 | 5                        |                                     |                       |                     |                                 |
| COMPUTER EQUIPMENT      | 2007-01-02    | 912                 | 912                       | SL                 | 5                        |                                     |                       |                     |                                 |
| PHONE SYSTEM            | 2007-01-19    | 2,939               | 2,588                     | SL                 | 7                        | 351                                 |                       |                     |                                 |

| Description of Property | Date Acquired | Cost or Other Basis | Prior Years' Depreciation | Computation Method | Rate / Life (# of years) | Current Year's Depreciation Expense | Net Investment Income | Adjusted Net Income | Cost of Goods Sold Not Included |
|-------------------------|---------------|---------------------|---------------------------|--------------------|--------------------------|-------------------------------------|-----------------------|---------------------|---------------------------------|
| PHONES                  | 2007-01-24    | 591                 | 520                       | SL                 | 7                        | 71                                  |                       |                     |                                 |
| PHONE - VOICEMAIL       | 2007-02-14    | 2,601               | 2,292                     | SL                 | 7                        | 309                                 |                       |                     |                                 |
| PRINTER                 | 2007-02-15    | 657                 | 657                       | SL                 | 5                        |                                     |                       |                     |                                 |
| LAPTOP COMPUTER         | 2007-04-23    | 1,344               | 1,344                     | SL                 | 5                        |                                     |                       |                     |                                 |
| PROJECTOR               | 2007-04-23    | 1,302               | 1,302                     | SL                 | 5                        |                                     |                       |                     |                                 |
| GIFTS MGT SOFTWARE      | 2007-06-01    | 14,960              | 14,960                    | SL                 | 3                        |                                     |                       |                     |                                 |
| 3 POWER POINT SOFT      | 2007-06-01    | 595                 | 595                       | SL                 | 3                        |                                     |                       |                     |                                 |
| AVAYA PHONE- LISA       | 2007-07-13    | 435                 | 352                       | SL                 | 7                        | 62                                  |                       |                     |                                 |
| 2 ADOBE DREAM WEAV      | 2007-07-21    | 1,065               | 1,065                     | SL                 | 3                        |                                     |                       |                     |                                 |
| 2 ADOBE CREATIVE S      | 2007-09-21    | 837                 | 837                       | SL                 | 3                        |                                     |                       |                     |                                 |
| DESKTOP COMPUTER        | 2008-08-06    | 2,066               | 1,962                     | SL                 | 5                        | 104                                 |                       |                     |                                 |
| MICROSOFT OFFICE P      | 2008-09-22    | 897                 | 897                       | SL                 | 3                        |                                     |                       |                     |                                 |
| FILE ROOM SYSTEM        | 2008-10-03    | 1,300               | 1,300                     | SL                 | 10                       |                                     |                       |                     |                                 |
| DOCUMENTS MANAGER       | 2009-06-02    | 3,156               | 3,156                     | SL                 | 3                        |                                     |                       |                     |                                 |
| ESSENTIAL'S GIFTS       | 2010-01-01    | 13,720              | 13,720                    | SL                 | 3                        |                                     |                       |                     |                                 |
| 2 HP DESKTOP COMP       | 2010-06-11    | 2,596               | 1,428                     | SL                 | 5                        | 519                                 |                       |                     |                                 |
| WIRELESS KEYBOARD       | 2010-11-05    | 351                 | 169                       | SL                 | 5                        | 70                                  |                       |                     |                                 |
| FURNITURE               | 2006-12-07    | 5,255               | 4,755                     | SL                 | 7                        | 500                                 |                       |                     |                                 |
| CONFERENCE TABLE        | 2008-02-01    | 4,370               | 3,225                     | SL                 | 7                        | 624                                 |                       |                     |                                 |
| 8 CONFERENCE CHAIR      | 2008-02-01    | 1,253               | 925                       | SL                 | 7                        | 179                                 |                       |                     |                                 |

| Description of Property | Date Acquired | Cost or Other Basis | Prior Years' Depreciation | Computation Method | Rate / Life (# of years) | Current Year's Depreciation Expense | Net Investment Income | Adjusted Net Income | Cost of Goods Sold Not Included |
|-------------------------|---------------|---------------------|---------------------------|--------------------|--------------------------|-------------------------------------|-----------------------|---------------------|---------------------------------|
| 2 LEATHER MESH CHA      | 2008-08-04    | 713                 | 476                       | SL                 | 7                        | 102                                 |                       |                     |                                 |
| DESK & FILE CABINE      | 2008-08-01    | 781                 | 447                       | SL                 | 7                        | 112                                 |                       |                     |                                 |
| CONFERENCE TABLE        | 2010-03-01    | 1,750               | 542                       | SL                 | 7                        | 250                                 |                       |                     |                                 |
| DESK, FILE CABINET      | 2009-12-14    | 3,386               | 1,094                     | SL                 | 7                        | 484                                 |                       |                     |                                 |
| OFFICE CHAIR            | 2010-01-01    | 362                 | 130                       | SL                 | 7                        | 52                                  |                       |                     |                                 |
| BUILDING PROJECT C      | 2010-03-01    | 98,435              | 34,700                    | SL                 |                          | 11,254                              |                       |                     |                                 |
| SAFE                    | 2010-07-02    | 582                 | 228                       | SL                 | 7                        | 83                                  |                       |                     |                                 |
| OAK BASE TABLE          | 2010-12-20    | 600                 | 193                       | SL                 | 7                        | 86                                  |                       |                     |                                 |
| TASK CHAIR & KEYBO      | 2011-01-10    | 543                 | 175                       | SL                 | 7                        | 78                                  |                       |                     |                                 |
| LANDSCAPING-NEAR C      | 2011-10-03    | 6,008               | 901                       | SL                 | 10                       | 601                                 |                       |                     |                                 |
| LOCATION SIGN (MAI      | 2012-03-06    | 1,680               | 121                       | SL                 | 15                       | 112                                 |                       |                     |                                 |
| LANDSCAPING - MAIN      | 2012-03-28    | 4,993               | 499                       | SL                 | 10                       | 499                                 |                       |                     |                                 |
| CS5 SOFTWARE (3)        | 2011-04-06    | 1,832               | 1,221                     | SL                 | 3                        | 611                                 |                       |                     |                                 |
| HP DESKTOP COMPUTE      | 2011-04-20    | 5,291               | 2,028                     | SL                 | 5                        | 1,058                               |                       |                     |                                 |
| ADOBE COTRIBUTE LI      | 2011-05-01    | 339                 | 216                       | SL                 | 3                        | 113                                 |                       |                     |                                 |
| HP DESKTOP COMP         | 2011-08-25    | 1,890               | 599                       | SL                 | 5                        | 378                                 |                       |                     |                                 |
| SONIC WALL (COMPUT      | 2011-08-25    | 1,115               | 353                       | SL                 | 5                        | 223                                 |                       |                     |                                 |
| COMPUTER PROJECTOR      | 2011-08-26    | 917                 | 290                       | SL                 | 5                        | 183                                 |                       |                     |                                 |
| I- PAD (& APPS)         | 2011-09-26    | 650                 | 195                       | SL                 | 5                        | 130                                 |                       |                     |                                 |
| DELL DESKTOP COMPU      | 2012-03-26    | 2,800               | 560                       | SL                 | 5                        | 560                                 |                       |                     |                                 |

| Description of Property | Date Acquired | Cost or Other Basis | Prior Years' Depreciation | Computation Method | Rate / Life (# of years) | Current Year's Depreciation Expense | Net Investment Income | Adjusted Net Income | Cost of Goods Sold Not Included |
|-------------------------|---------------|---------------------|---------------------------|--------------------|--------------------------|-------------------------------------|-----------------------|---------------------|---------------------------------|
| COMPUTER MONITOR        | 2012-03-26    | 240                 | 48                        | SL                 | 5                        | 48                                  |                       |                     |                                 |
| CHAIR (PROGRAM OFF      | 2011-05-12    | 366                 | 100                       | SL                 | 7                        | 52                                  |                       |                     |                                 |
| BOOKCASE (PROGRAM       | 2011-07-18    | 224                 | 53                        | SL                 | 7                        | 32                                  |                       |                     |                                 |
| TASK CHAIR (EXECUT      | 2011-08-01    | 387                 | 92                        | SL                 | 7                        | 55                                  |                       |                     |                                 |
| FOUNDERS PLAQ           | 2011-10-01    | 549                 | 117                       | SL                 | 7                        | 78                                  |                       |                     |                                 |
| DESK HUTCH              | 2012-03-19    | 458                 | 65                        | SL                 | 7                        | 65                                  |                       |                     |                                 |
| WIRE SHELVING (3-4      | 2012-03-19    | 825                 | 118                       | SL                 | 7                        | 118                                 |                       |                     |                                 |
| PRINTER STAND           | 2012-03-19    | 377                 | 54                        | SL                 | 7                        | 54                                  |                       |                     |                                 |
| LATERAL FILE CABIN      | 2012-03-19    | 2,430               | 347                       | SL                 | 7                        | 347                                 |                       |                     |                                 |
| EXECUTIVE CHAIRS        | 2012-03-19    | 817                 | 117                       | SL                 | 7                        | 117                                 |                       |                     |                                 |
| LANDSCAPING- CAC        | 2011-10-03    | 6,008               | 901                       | SL                 | 10                       | 601                                 |                       |                     |                                 |
| LOCATION SIGN           | 2012-03-06    | 1,680               | 121                       | SL                 | 15                       | 112                                 |                       |                     |                                 |
| LANDSCAPING-MAIN        | 2012-03-28    | 4,993               | 499                       | SL                 | 10                       | 499                                 |                       |                     |                                 |
| CS5 SOFTWARE (3)        | 2011-04-06    | 1,832               | 1,222                     | SL                 | 3                        | 610                                 |                       |                     |                                 |
| HP DESKTOP COMPUTE      | 2011-04-20    | 5,291               | 2,028                     | SL                 | 5                        | 1,058                               |                       |                     |                                 |
| ADOBE COTRIBUTE LI      | 2011-05-01    | 339                 | 217                       | SL                 | 3                        | 113                                 |                       |                     |                                 |
| HP DESKTOP COMPUTE      | 2011-08-25    | 1,890               | 599                       | SL                 | 5                        | 378                                 |                       |                     |                                 |
| SONIC WALL              | 2011-08-25    | 1,115               | 353                       | SL                 | 5                        | 223                                 |                       |                     |                                 |
| COMPUTER PROJECTOR      | 2011-08-26    | 917                 | 290                       | SL                 | 5                        | 183                                 |                       |                     |                                 |
| I- PAD (&APPS)          | 2011-09-26    | 650                 | 195                       | SL                 | 5                        | 130                                 |                       |                     |                                 |

| Description of Property | Date Acquired | Cost or Other Basis | Prior Years' Depreciation | Computation Method | Rate / Life (# of years) | Current Year's Depreciation Expense | Net Investment Income | Adjusted Net Income | Cost of Goods Sold Not Included |
|-------------------------|---------------|---------------------|---------------------------|--------------------|--------------------------|-------------------------------------|-----------------------|---------------------|---------------------------------|
| DELL DESKTOP COMPU      | 2012-03-26    | 2,800               | 560                       | SL                 | 5                        | 560                                 |                       |                     |                                 |
| COMPUTER MONITOR        | 2012-03-26    | 240                 | 48                        | SL                 | 5                        | 48                                  |                       |                     |                                 |
| CHAIR (PROGRAM OFF      | 2011-05-12    | 366                 | 100                       | SL                 | 7                        | 52                                  |                       |                     |                                 |
| BOOKCASE                | 2011-07-18    | 224                 | 53                        | SL                 | 7                        | 32                                  |                       |                     |                                 |
| TASK CHAIR              | 2011-08-01    | 387                 | 92                        | SL                 | 7                        | 55                                  |                       |                     |                                 |
| FOUNDERS PLAQUE         | 2011-10-01    | 549                 | 117                       | SL                 | 7                        | 78                                  |                       |                     |                                 |
| DESK HUTCH              | 2012-03-19    | 458                 | 65                        | SL                 | 7                        | 65                                  |                       |                     |                                 |
| WIRE SHELVING           | 2012-03-19    | 825                 | 118                       | SL                 | 7                        | 118                                 |                       |                     |                                 |
| PRINTER STAND           | 2012-03-19    | 377                 | 54                        | SL                 | 7                        | 54                                  |                       |                     |                                 |
| LATERAL FILE CABIN      | 2012-03-19    | 2,430               | 347                       | SL                 | 7                        | 347                                 |                       |                     |                                 |
| EXECUTIVE CHAIRS        | 2012-03-19    | 816                 | 117                       | SL                 | 7                        | 117                                 |                       |                     |                                 |
| SOFTWARE                | 2007-01-02    | 730                 | 730                       | SL                 | 3                        |                                     |                       |                     |                                 |
| SOFTWARE                | 2006-12-18    | 452                 | 452                       | SL                 | 3                        |                                     |                       |                     |                                 |
| SOFTWARE                | 2007-03-31    | 849                 | 849                       | DS                 | 3                        |                                     |                       |                     |                                 |
| VITEX TREES (2)         | 2013-01-31    | 680                 | 17                        | SL                 | 10                       | 68                                  |                       |                     |                                 |
| DESK SCANNER (EXEC      | 2012-04-26    | 430                 | 79                        | SL                 | 5                        | 86                                  |                       |                     |                                 |
| SHARP 80" TV (BOAR      | 2012-12-26    | 5,399               | 270                       | SL                 | 5                        | 1,080                               |                       |                     |                                 |
| PRINTER, LASERJET       | 2013-02-05    | 210                 | 7                         | SL                 | 5                        | 42                                  |                       |                     |                                 |
| ROUND TABLE (2ND F      | 2012-04-12    | 519                 | 74                        | SL                 | 7                        | 74                                  |                       |                     |                                 |
| PADDED FOLDING CHA      | 2012-05-02    | 560                 | 73                        | SL                 | 7                        | 80                                  |                       |                     |                                 |

| Description of Property | Date Acquired | Cost or Other Basis | Prior Years' Depreciation | Computation Method | Rate / Life (# of years) | Current Year's Depreciation Expense | Net Investment Income | Adjusted Net Income | Cost of Goods Sold Not Included |
|-------------------------|---------------|---------------------|---------------------------|--------------------|--------------------------|-------------------------------------|-----------------------|---------------------|---------------------------------|
| GUEST CHAIRS, ROLL      | 2012-05-24    | 2,262               | 269                       | SL                 | 7                        | 323                                 |                       |                     |                                 |
| GUEST CHAIRS, WOOD      | 2012-06-27    | 722                 | 77                        | SL                 | 7                        | 103                                 |                       |                     |                                 |
| GUEST CHAIRS, WOOD      | 2012-05-24    | 2,507               | 298                       | SL                 | 7                        | 358                                 |                       |                     |                                 |
| CRENDENZA (ED)          | 2012-05-24    | 2,898               | 345                       | SL                 | 7                        | 414                                 |                       |                     |                                 |
| SOFA TABLE (PROGRA      | 2012-05-24    | 519                 | 62                        | SL                 | 7                        | 74                                  |                       |                     |                                 |
| OPEN BOOKCASE UNIT      | 2012-05-24    | 1,031               | 123                       | SL                 | 7                        | 147                                 |                       |                     |                                 |
| GUEST CHAIRS, OPEN      | 2012-06-27    | 1,247               | 134                       | SL                 | 7                        | 178                                 |                       |                     |                                 |
| ROUND TABLE (DIREC      | 2012-08-29    | 846                 | 71                        | SL                 | 7                        | 121                                 |                       |                     |                                 |
| RUGS, AREA              | 2013-02-18    | 7,051               | 168                       | SL                 | 7                        | 1,007                               |                       |                     |                                 |
| SOFA TABLE (GRANTS      | 2013-02-01    | 519                 | 12                        | SL                 | 7                        | 74                                  |                       |                     |                                 |
| LATERAL FILES, 2-D      | 2013-03-06    | 3,137               | 37                        | SL                 | 7                        | 448                                 |                       |                     |                                 |
| STAND-UP TABLE (ED      | 2013-07-31    | 1,855               |                           | SL                 | 7                        | 265                                 |                       |                     |                                 |
| BOOKCASE 3-SHELF (      | 2013-11-14    | 579                 |                           | SL                 | 7                        | 83                                  |                       |                     |                                 |
| LATERAL FILE 2-DRA      | 2014-03-31    | 1,623               |                           | SL                 | 7                        |                                     |                       |                     |                                 |
| DESKTOP COMPUTER H      | 2013-05-31    | 950                 |                           | SL                 | 5                        | 158                                 |                       |                     |                                 |
| LAPTOP COMPUTER 10      | 2013-05-31    | 950                 |                           | SL                 | 5                        | 158                                 |                       |                     |                                 |
| SOFTWARE MICROSOFT      | 2013-05-31    | 660                 |                           | SL                 | 3                        | 183                                 |                       |                     |                                 |
| SERVER HP PROLIENT      | 2013-06-18    | 3,500               |                           | SL                 | 5                        | 525                                 |                       |                     |                                 |
| SOFTWARE SERVER LI      | 2013-06-26    | 317                 |                           | SL                 | 3                        | 79                                  |                       |                     |                                 |
| COMPUTER HP (TOWER      | 2014-02-07    | 1,595               |                           | SL                 | 5                        | 53                                  |                       |                     |                                 |



| Description of Property | Date Acquired | Cost or Other Basis | Prior Years' Depreciation | Computation Method | Rate / Life (# of years) | Current Year's Depreciation Expense | Net Investment Income | Adjusted Net Income | Cost of Goods Sold Not Included |
|-------------------------|---------------|---------------------|---------------------------|--------------------|--------------------------|-------------------------------------|-----------------------|---------------------|---------------------------------|
| CANOPY TENT             | 2013-11-26    | 519                 |                           | SL                 | 5                        | 35                                  |                       |                     |                                 |
| BUILDING PROJECT        | 2010-03-01    | 16,945              | 10,069                    | SL                 |                          | 1,228                               |                       |                     |                                 |
| BUILDING PROJECT        | 2010-03-01    | 35,250              | 9,436                     | SL                 |                          | 2,556                               |                       |                     |                                 |

**Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.**

**TY 2013 Expenditure Responsibility Statement**

**Name:** OBICI HEALTHCARE FOUNDATION INC

**EIN:** 51-0249728

| Grantee's Name                          | Grantee's Address                                     | Grant Date | Grant Amount | Grant Purpose                                                                           | Amount Expended By Grantee | Any Diversion By Grantee? | Dates of Reports By Grantee | Date of Verification | Results of Verification |
|-----------------------------------------|-------------------------------------------------------|------------|--------------|-----------------------------------------------------------------------------------------|----------------------------|---------------------------|-----------------------------|----------------------|-------------------------|
| Applewood Farms Home Owners Association | 112 Benham Court<br>Suffolk, VA 23434                 |            | 5,000        | To sponsor the 2013 National Night Out Event                                            | 5,000                      | NO                        | 08/08/2013                  |                      |                         |
| Eternawell                              | 6546 Hampton Roads Parkway No 12<br>Suffolk, VA 23434 |            | 250          | To support a healthy people Suffolk walking group in North Suffolk                      | 250                        | NO                        | 4/16/2014                   |                      |                         |
| Hampton Roads Chamber of Commerce       | 500 East Main Street Suite 700<br>Norfolk, VA 23510   |            | 500          | To sponsor the May 2013 Suffolk Mingle on Main event featuring the Peanut City Cloggers | 500                        | NO                        | 05/30/2013                  |                      |                         |

**TY 2013 Investments Corporate  
Bonds Schedule****Name:** OBICI HEALTHCARE FOUNDATION INC**EIN:** 51-0249728

| <b>Name of Bond</b>           | <b>End of Year Book<br/>Value</b> | <b>End of Year Fair<br/>Market Value</b> |
|-------------------------------|-----------------------------------|------------------------------------------|
| RIDGEWORTH FD TOTAL RETURN BD | 0                                 | 0                                        |
| PIMCO GLOBAL BOND FUND        | 1,127,827                         | 1,127,827                                |

TY 2013 Investments Corporate  
 Stock Schedule

Name: OBICI HEALTHCARE FOUNDATION INC  
 EIN: 51-0249728

| Name of Stock                 | End of Year Book Value | End of Year Fair Market Value |
|-------------------------------|------------------------|-------------------------------|
| BABCOCK & WILCOX CO           | 106,240                | 106,240                       |
| CHECKPOINT SYS INC COM        | 128,161                | 128,161                       |
| PHARMERICA CORP COM           | 0                      | 0                             |
| FEMALE HEALTH CO/THE COM      | 231,535                | 231,535                       |
| HALLMARK FINL SVCS INC COM    | 0                      | 0                             |
| INTERACTIVE INTELLIGENCE      |                        |                               |
| GROUP COM                     | 0                      | 0                             |
| INTL FCSTONE INC COM          | 0                      | 0                             |
| OMEGA FLEX INC COM            | 81,322                 | 81,322                        |
| STAMPS COM INC COM NEW        | 0                      | 0                             |
| TANDY LEATHER FACTORY INC COM | 0                      | 0                             |
| UTAH MED PRODS INC COM        | 0                      | 0                             |
| WINMARK CORP COM              | 0                      | 0                             |
| BARRETT BILL CORP COM         | 0                      | 0                             |
| CABOT MICRO CORP COM          | 0                      | 0                             |
| CALGON CARBON CORP COM        | 0                      | 0                             |
| CIRCOR INTL INC COM           | 0                      | 0                             |
| EXELIS INC COM                | 131,169                | 131,169                       |
| FEDERATED INVESTORS INC       |                        |                               |
| CL B COM                      | 0                      | 0                             |
| HANESBRANDS INC COM           | 0                      | 0                             |
| JOHN BEAN TECHNOLOGIES COM    | 0                      | 0                             |
| LENDER PROC SVC INC COM       | 0                      | 0                             |
| LIVE NATION ENTERTAINMENT     |                        |                               |
| INC COM                       | 204,450                | 204,450                       |
| PENSKE AUTOMOTIVE GRP         |                        |                               |
| INC COM                       | 132,556                | 132,556                       |
| PERKINELMER INC COM           | 162,216                | 162,216                       |
| TIDEWATER INC COM             | 0                      | 0                             |
| VCA ANTECH INC COM            | 166,500                | 166,500                       |

| Name of Stock              | End of Year Book Value | End of Year Fair Market Value |
|----------------------------|------------------------|-------------------------------|
| ZEBRA TECHNOLOGIES CORP    |                        |                               |
| CORP COM CL A              | 0                      | 0                             |
| PIMCO COMMODITY REALRTN    | 2,746,108              | 2,746,108                     |
| STRATEGY-I                 | 0                      | 0                             |
| 3M CO COM                  | 0                      | 0                             |
| ACCENTURE PLC CL A COM     | 0                      | 0                             |
| AMERICAN EXPRESS CO COM    | 0                      | 0                             |
| AMERISOURCEBERGEN CORP COM | 0                      | 0                             |
| AUTOMATIC DATA PROCESSING  |                        |                               |
| INC COM                    | 0                      | 0                             |
| BANK OF NEW YORK MELLON    |                        |                               |
| CORP COM                   | 0                      | 0                             |
| BERKSHIRE HATHAWAY INC     |                        |                               |
| CL B COM NEW               | 0                      | 0                             |
| CINTAS CORP COM            | 0                      | 0                             |
| COMERICA INC COM           | 0                      | 0                             |
| COVIDEN PLC COM            | 0                      | 0                             |
| DEVON ENERGY CORP NEW COM  | 0                      | 0                             |
| GLAXOSMITHKLINE PLC ADR    | 0                      | 0                             |
| ILLINOIS TOOL WKS INC COM  | 0                      | 0                             |
| INGERSOLL-RAND PLC COM     | 0                      | 0                             |
| KIMBERLY CLARK CORP COM    | 0                      | 0                             |
| MICROSOFT CORP COM         | 0                      | 0                             |
| MONSANTO CO NEW COM        | 0                      | 0                             |
| NESTLE SA SPONS ADR        | 0                      | 0                             |
| OMNICOM GROUP COM          | 0                      | 0                             |
| SCHLUMBERGER LTD COM       | 0                      | 0                             |
| SYSCO CORP COM             | 0                      | 0                             |
| TE CONNECTIVITY LTD COM    | 0                      | 0                             |
| TIME WARNER INC NEW COM    | 0                      | 0                             |

| Name of Stock                  | End of Year Book Value | End of Year Fair Market Value |
|--------------------------------|------------------------|-------------------------------|
| WAL-MART STORES INC COM        | 0                      | 0                             |
| WILLIS GROUP HLDGS PLC         |                        |                               |
| USD.00011 COM                  | 0                      | 0                             |
| NEUBERGER BERMAN EQUITY INCOME |                        |                               |
| CHEROKEE INC DEL NEW COM       | 100,965                | 100,965                       |
| REIS INC COM                   | 108,913                | 108,913                       |
| AXIALL CORP COM                | 220,108                | 220,108                       |
| BARNES & NOBLE INC COM         | 0                      | 0                             |
| DYNEGY INC COM                 | 236,905                | 236,905                       |
| GRAFTECH INTL LTD COM          | 159,432                | 159,432                       |
| ISHARES TR RUSSELL 2000 INDEX  |                        |                               |
| ETF                            | 151,242                | 151,242                       |
| SAIC INC COM                   | 0                      | 0                             |
| WHITEWAVE FOODS CO COM-A       | 85,620                 | 85,620                        |
| WPX ENERGY INC COM             | 223,572                | 223,572                       |
| DANONE SA SPONS ADR            | 0                      | 0                             |
| EXPEDITORS INTL WASH INC COM   | 0                      | 0                             |
| PACCAR INC COM                 | 0                      | 0                             |
| ACTUANT CORP CL A COM          | 454,127                | 454,127                       |
| AMERICAN PUBLIC EDUCATION COM  | 0                      | 0                             |
| COLFAX CORP COM                | 383,113                | 383,113                       |
| CORPORATE EXECUTIVE BOARD CO C | 363,504                | 363,504                       |
| INTERVAL LEISURE GROUP INC COM | 0                      | 0                             |
| MASIMO CORP COM                | 0                      | 0                             |
| MIDDLEBY CORP COM              | 285,347                | 285,347                       |
| MORNINGSTAR INC COM            | 0                      | 0                             |
| REALD INC COM                  | 332,989                | 332,989                       |
| TRAVELZOO INC COM              | 140,492                | 140,492                       |
| HEICO CORP NEW CL A COM        | 220,957                | 220,957                       |
| XPO LOGISTICS INC COM          | 700,634                | 700,634                       |

| Name of Stock                  | End of Year Book Value | End of Year Fair Market Value |
|--------------------------------|------------------------|-------------------------------|
| AMERICA'S CAR-MART INC         | 170,616                | 170,616                       |
| USG CORP                       | 107,976                | 107,976                       |
| LINDSAY CORPORATION            | 229,268                | 229,268                       |
| LEIDOS HOLDINGS INC            | 53,055                 | 53,055                        |
| KNOWLES CORPORATION            | 44,198                 | 44,198                        |
| ENTEGRIS INC                   | 222,824                | 222,824                       |
| CST BRANDS INC                 | 171,820                | 171,820                       |
| COMPASS MINERALS INTERNATIONAL |                        |                               |
| INC                            | 222,804                | 222,804                       |
| CALGON CARBON CORP             | 213,934                | 213,934                       |
| CABLEVISION NY GROUP CLASS A   | 212,241                | 212,241                       |
| ADT CORP                       | 209,650                | 209,650                       |
| AARONS INC                     | 205,632                | 205,632                       |
| WINMARK CORP                   | 468,865                | 468,865                       |
| UTAH MED PRODS INC             | 155,563                | 155,563                       |
| TANDY LEATHER FACTORY INC      | 112,636                | 112,636                       |
| MESA LABS INC                  | 75,269                 | 75,269                        |
| JTH HOLDING-CL A               | 20,139                 | 20,139                        |
| INTL FCSTONE INC               | 331,169                | 331,169                       |
| HALLMARK FINL SVCS INC         | 5,119                  | 5,119                         |
| US ECOLOGY, INC.               | 193,321                | 193,321                       |
| POST HOLDINGS INC              | 464,496                | 464,496                       |
| PLATFORM SPECIALTY PRODUCTS    | 191,757                | 191,757                       |
| GRAHAM CORP                    | 94,976                 | 94,976                        |

**TY 2013 Investments - Land Schedule****Name:** OBICI HEALTHCARE FOUNDATION INC**EIN:** 51-0249728



**TY 2013 Investments - Other Schedule****Name:** OBICI HEALTHCARE FOUNDATION INC**EIN:** 51-0249728

| Category/ Item                | Listed at Cost or FMV | Book Value | End of Year Fair Market Value |
|-------------------------------|-----------------------|------------|-------------------------------|
| ALTERNATIVE INVESTMENTS - L/P |                       |            |                               |
| AND CORPORATIONS              |                       | 30,824,128 | 30,824,128                    |
| ALTERNATIVE INVESTMENTS -     |                       |            |                               |
| FOREIGN CORPORATIONS          |                       | 51,452,411 | 51,452,411                    |
| ALTERNATIVE INVESTMENTS -     |                       |            |                               |
| COLLECTIVE TRUSTS             |                       | 9,183,151  | 9,183,151                     |

TY 2013 Land, Etc. Schedule

Name: OBICI HEALTHCARE FOUNDATION INC  
EIN: 51-0249728

| Category / Item    | Cost / Other Basis | Accumulated Depreciation | Book Value | End of Year Fair Market Value |
|--------------------|--------------------|--------------------------|------------|-------------------------------|
| LAND               | 102,507            |                          | 102,507    |                               |
| LAND-CONSTRUCTION  | 349,632            | 74,485                   | 275,147    |                               |
| LAND IMPR FENCE    | 1,300              | 650                      | 650        |                               |
| BRONZE SIGN        | 3,449              | 919                      | 2,530      |                               |
| LANDSCAPING CONTRA | 54,997             | 21,082                   | 33,915     |                               |
| CIVIL CONSTRUCTION | 2,373              | 189                      | 2,184      |                               |
| FINAL UNDERCUTTING | 1,524              | 364                      | 1,160      |                               |
| REVIEW OF FINAL DR | 210                | 17                       | 193        |                               |
| ORIGINAL CONSTRUCT | 1,594,184          | 236,643                  | 1,357,541  |                               |
| STAIRS & CABINETS  | 7,431              | 660                      | 6,771      |                               |
| CONSTRUCTION ADMN  | 4,653              | 370                      | 4,283      |                               |
| SNOW GUARDS        | 10,200             | 680                      | 9,520      |                               |
| COMPUTER           | 1,447              | 1,447                    |            |                               |
| COPIER             | 6,100              | 6,100                    |            |                               |
| 2 COMPUTER MONITOR | 3,423              | 3,423                    |            |                               |
| BROTHER LASER PRIN | 707                | 707                      |            |                               |
| COMPUTER EQUIPMENT | 980                | 980                      |            |                               |
| 3 COMPUTER MONITOR | 5,308              | 5,308                    |            |                               |
| COMPUTER EQUIPMENT | 912                | 912                      |            |                               |
| PHONE SYSTEM       | 2,939              | 2,939                    |            |                               |
| PHONES             | 591                | 591                      |            |                               |
| PHONE - VOICEMAIL  | 2,601              | 2,601                    |            |                               |
| PRINTER            | 657                | 657                      |            |                               |
| LAPTOP COMPUTER    | 1,344              | 1,344                    |            |                               |
| PROJECTOR          | 1,302              | 1,302                    |            |                               |
| GIFTS MGT SOFTWARE | 14,960             | 14,960                   |            |                               |
| 3 POWER POINT SOFT | 595                | 595                      |            |                               |
| AVAYA PHONE- LISA  | 435                | 414                      | 21         |                               |
| 2 ADOBE DREAM WEAV | 1,065              | 1,065                    |            |                               |
| 2 ADOBE CREATIVE S | 837                | 837                      |            |                               |

| Category / Item    | Cost / Other Basis | Accumulated Depreciation | Book Value | End of Year Fair Market Value |
|--------------------|--------------------|--------------------------|------------|-------------------------------|
| DESKTOP COMPUTER   | 2,066              | 2,066                    |            |                               |
| MICROSOFT OFFICE P | 897                | 897                      |            |                               |
| FILE ROOM SYSTEM   | 1,300              | 1,300                    |            |                               |
| DOCUMENTS MANAGER  | 3,156              | 3,156                    |            |                               |
| ESSENTIAL'S GIFTS  | 13,720             | 13,720                   |            |                               |
| 2 HP DESKTOP COMP  | 2,596              | 1,947                    | 649        |                               |
| WIRELESS KEYBOARD  | 351                | 239                      | 112        |                               |
| FURNITURE          | 5,255              | 5,255                    |            |                               |
| CONFERENCE TABLE   | 4,370              | 3,849                    | 521        |                               |
| 8 CONFERENCE CHAIR | 1,253              | 1,104                    | 149        |                               |
| 2 LEATHER MESH CHA | 713                | 578                      | 135        |                               |
| DESK & FILE CABINE | 781                | 559                      | 222        |                               |
| CONFERENCE TABLE   | 1,750              | 792                      | 958        |                               |
| DESK, FILE CABINET | 3,386              | 1,578                    | 1,808      |                               |
| OFFICE CHAIR       | 362                | 182                      | 180        |                               |
| BUILDING PROJECT C | 98,435             | 45,954                   | 52,481     |                               |
| SAFE               | 582                | 311                      | 271        |                               |
| OAK BASE TABLE     | 600                | 279                      | 321        |                               |
| TASK CHAIR & KEYBO | 543                | 253                      | 290        |                               |
| LANDSCAPING- CAC   | 6,008              | 1,502                    | 4,506      |                               |
| LOCATION SIGN      | 1,680              | 233                      | 1,447      |                               |
| LANDSCAPING-MAIN   | 4,993              | 998                      | 3,995      |                               |
| CS5 SOFTWARE (3)   | 1,832              | 1,832                    |            |                               |
| HP DESKTOP COMPUTE | 5,291              | 3,086                    | 2,205      |                               |
| ADOBE COTRIBUTE LI | 339                | 330                      | 9          |                               |
| HP DESKTOP COMPUTE | 1,890              | 977                      | 913        |                               |
| SONIC WALL         | 1,115              | 576                      | 539        |                               |
| COMPUTER PROJECTOR | 917                | 473                      | 444        |                               |
| I- PAD (&APPS)     | 650                | 325                      | 325        |                               |
| DELL DESKTOP COMPU | 2,800              | 1,120                    | 1,680      |                               |

| Category / Item    | Cost / Other Basis | Accumulated Depreciation | Book Value | End of Year Fair Market Value |
|--------------------|--------------------|--------------------------|------------|-------------------------------|
| COMPUTER MONITOR   | 240                | 96                       | 144        |                               |
| CHAIR (PROGRAM OFF | 366                | 152                      | 214        |                               |
| BOOKCASE           | 224                | 85                       | 139        |                               |
| TASK CHAIR         | 387                | 147                      | 240        |                               |
| FOUNDERS PLAQUE    | 549                | 195                      | 354        |                               |
| DESK HUTCH         | 458                | 130                      | 328        |                               |
| WIRE SHELVEING     | 825                | 236                      | 589        |                               |
| PRINTER STAND      | 377                | 108                      | 269        |                               |
| LATERAL FILE CABIN | 2,430              | 694                      | 1,736      |                               |
| EXECUTIVE CHAIRS   | 816                | 234                      | 582        |                               |
| SOFTWARE           | 730                | 730                      |            |                               |
| SOFTWARE           | 452                | 452                      |            |                               |
| SOFTWARE           | 849                | 849                      |            |                               |
| VITEX TREES (2)    | 680                | 85                       | 595        |                               |
| DESK SCANNER (EXEC | 430                | 165                      | 265        |                               |
| SHARP 80" TV (BOAR | 5,399              | 1,350                    | 4,049      |                               |
| PRINTER, LASERJET  | 210                | 49                       | 161        |                               |
| ROUND TABLE (2ND F | 519                | 148                      | 371        |                               |
| PADDED FOLDING CHA | 560                | 153                      | 407        |                               |
| GUEST CHAIRS, ROLL | 2,262              | 592                      | 1,670      |                               |
| GUEST CHAIRS, WOOD | 722                | 180                      | 542        |                               |
| GUEST CHAIRS, WOOD | 2,507              | 656                      | 1,851      |                               |
| CRENDENZA (ED)     | 2,898              | 759                      | 2,139      |                               |
| SOFA TABLE (PROGRA | 519                | 136                      | 383        |                               |
| OPEN BOOKCASE UNIT | 1,031              | 270                      | 761        |                               |
| GUEST CHAIRS, OPEN | 1,247              | 312                      | 935        |                               |
| ROUND TABLE (DIREC | 846                | 192                      | 654        |                               |
| RUGS, AREA         | 7,051              | 1,175                    | 5,876      |                               |
| SOFA TABLE (GRANTS | 519                | 86                       | 433        |                               |
| LATERAL FILES, 2-D | 3,137              | 485                      | 2,652      |                               |

| Category / Item    | Cost / Other Basis | Accumulated Depreciation | Book Value | End of Year Fair Market Value |
|--------------------|--------------------|--------------------------|------------|-------------------------------|
| STAND-UP TABLE (ED | 1,855              | 265                      | 1,590      |                               |
| BOOKCASE 3-SHELF ( | 579                | 83                       | 496        |                               |
| LATERAL FILE 2-DRA | 1,623              |                          | 1,623      |                               |
| DESKTOP COMPUTER H | 950                | 158                      | 792        |                               |
| LAPTOP COMPUTER 10 | 950                | 158                      | 792        |                               |
| SOFTWARE MICROSOFT | 660                | 183                      | 477        |                               |
| SERVER HP PROLIENT | 3,500              | 525                      | 2,975      |                               |
| SOFTWARE SERVER LI | 317                | 79                       | 238        |                               |
| COMPUTER HP (TOWER | 1,595              | 53                       | 1,542      |                               |
| CANOPY TENT        | 519                | 35                       | 484        |                               |
| BUILDING PROJECT   |                    |                          |            |                               |
| BUILDING PROJECT   | 35,250             | 11,992                   | 23,258     |                               |

**TY 2013 Legal Fees Schedule****Name:** OBICI HEALTHCARE FOUNDATION INC**EIN:** 51-0249728

| <b>Category</b>                | <b>Amount</b> | <b>Net Investment<br/>Income</b> | <b>Adjusted Net<br/>Income</b> | <b>Disbursements for<br/>Charitable<br/>Purposes</b> |
|--------------------------------|---------------|----------------------------------|--------------------------------|------------------------------------------------------|
| LEGAL SERVICES - RESPOND<br>TO |               |                                  |                                |                                                      |
| AUDIT CONFIRMATION             | 435           |                                  |                                | 435                                                  |
| LEGAL SERVICES - REVIEW        |               |                                  |                                |                                                      |
| RETIREMENT PLAN                | 2,978         |                                  |                                | 0                                                    |

**TY 2013 Other Assets Schedule****Name:** OBICI HEALTHCARE FOUNDATION INC**EIN:** 51-0249728

| Description              | Beginning of Year -<br>Book Value | End of Year - Book<br>Value | End of Year - Fair<br>Market Value |
|--------------------------|-----------------------------------|-----------------------------|------------------------------------|
| ART COLLECTION           | 658,240                           | 658,240                     | 658,240                            |
| CEMETERY LOTS            | 24,000                            | 24,000                      | 24,000                             |
| ACCRUED INTEREST ON      |                                   |                             |                                    |
| INVESTMENTS              | 22,935                            | 6,537                       | 6,537                              |
| DEPOSITS                 | 100                               | 100                         | 100                                |
| DEFERRED FINANCING COSTS | 0                                 | 14,896                      | 14,896                             |

TY 2013 Other Decreases Schedule

**Name:** OBICI HEALTHCARE FOUNDATION INC

**EIN:** 51-0249728

| Description                    | Amount    |
|--------------------------------|-----------|
| UNREALIZED LOSS ON INVESTMENTS | 1,875,012 |



**TY 2013 Other Expenses Schedule****Name:** OBICI HEALTHCARE FOUNDATION INC**EIN:** 51-0249728

| Description                   | Revenue and Expenses<br>per Books | Net Investment<br>Income | Adjusted Net Income | Disbursements for<br>Charitable Purposes |
|-------------------------------|-----------------------------------|--------------------------|---------------------|------------------------------------------|
| DUES & SUBSCRIPTIONS          | 16,089                            |                          |                     | 16,089                                   |
| FOOD & CATERING               | 11,259                            |                          |                     | 10,807                                   |
| MAINTENANCE AGREEMENTS        | 48,018                            |                          |                     | 48,137                                   |
| INSURANCE                     | 11,455                            |                          |                     | 11,455                                   |
| OFFICE EXPENSES               | 30,076                            |                          |                     | 30,570                                   |
| AMORTIZATION                  | 2,472                             |                          |                     |                                          |
| MISCELLANEOUS                 | 12,272                            |                          |                     | 12,335                                   |
| LOSS ON DISPOSITION OF ASSETS | 5,648                             |                          |                     |                                          |
| FACILITY RENTAL               | 1,423                             |                          |                     | 2,222                                    |

## TY 2013 Other Income Schedule

**Name:** OBICI HEALTHCARE FOUNDATION INC

**EIN:** 51-0249728

| Description        | Revenue And<br>Expenses Per Books | Net Investment<br>Income | Adjusted Net Income |
|--------------------|-----------------------------------|--------------------------|---------------------|
| PARTNERSHIP INCOME | 2,452,198                         | 5,544,576                |                     |
| OTHER INCOME       | 1,320                             |                          |                     |

## TY 2013 Other Increases Schedule

**Name:** OBICI HEALTHCARE FOUNDATION INC

**EIN:** 51-0249728

| Description                          | Amount     |
|--------------------------------------|------------|
| PRIOR YEAR GRANTS RECOVERED          | 27,915     |
| UNREALIZED GAINS IN PARTNERSHIPS AND | 0          |
| FOREIGN INVESTMENTS                  | 11,398,597 |
| ROUNDING                             | 1          |

TY 2013 Other Liabilities Schedule

**Name:** OBICI HEALTHCARE FOUNDATION INC

**EIN:** 51-0249728

| Description                   | Beginning of Year - Book Value | End of Year - Book Value |
|-------------------------------|--------------------------------|--------------------------|
| DEFERRED EXCISE TAXES PAYABLE | 423,256                        | 648,839                  |

**TY 2013 Other Professional Fees Schedule****Name:** OBICI HEALTHCARE FOUNDATION INC**EIN:** 51-0249728

| Category                     | Amount  | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
|------------------------------|---------|--------------------------|------------------------|---------------------------------------------|
| INVESTMENT MANAGMENT<br>FEES | 944,002 | 944,002                  |                        |                                             |
| CONSULTANT FEES              | 32,016  |                          |                        | 29,220                                      |

## TY 2013 Taxes Schedule

**Name:** OBICI HEALTHCARE FOUNDATION INC

**EIN:** 51-0249728

| Category             | Amount  | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
|----------------------|---------|--------------------------|------------------------|---------------------------------------------|
| OTHER FEES AND TAXES | 409     |                          |                        | 409                                         |
| FEDERAL EXCISE TAXES | 396,013 |                          |                        |                                             |