Form **990-PF**

Department of the Treasury

Return of Private Foundation

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

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

2007

OMB No. 1545-0052

For calendar year 2007, or tax year beginning and ending Initial return **G** Check all that apply: Final return Amended return Address change Name change Name of foundation A Employer identification number Use the IRS label. Otherwise, BEAZLEY FOUNDATION INCORPORATED 54-0550100 Number and street (or P.O. box number if mail is not delivered to street address) print Room/suite **B** Telephone number or type. 3720 BRIGHTON STREET (757)393-1605See Specific City or town, state, and ZIP code ${f C}$ If exemption application is pending, check here \dots Instructions. PORTSMOUTH, VA D 1. Foreign organizations, check here 23707 2. Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation **H** Check type of organization: ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation E If private foundation status was terminated I Fair market value of all assets at end of year | J Accounting method: X Accrual under section 507(b)(1)(A), check here (from Part II, col. (c), line 16) Other (specify) F If the foundation is in a 60-month termination 66,797,520. (Part I, column (d) must be on cash basis.) ▶\$ under section 507(b)(1)(B), check here ... Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) charitable purposes (cash basis only) expenses per books income income N/A Contributions, gifts, grants, etc., received Check X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 8,246. 8,246. STATEMENT 1,486,263. 1,486,263. STATEMENT 4 Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) 7,407,050. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 35,468,317. 7,407,050. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications... 10a Gross sales less returns and allowances **b** Less: Cost of goods sold c Gross profit or (loss) 52,316. 62,511. STATEMENT 3 11 Other income 8,953,875. 8,964,070. Total. Add lines 1 through 11 192,733. 57,820. 134,913. Compensation of officers, directors, trustees, etc. 420,821. 43,164. 377,657. 14 Other employee salaries and wages 45,992. 9,198. 36,794. 15 Pension plans, employee benefits 16a Legal fees b Accounting fees ${f STMT}$ 4 21,375. 4,275 17,100. **c** Other professional fees 17 Interest 129.077. 4.649 36,677. 18 Taxes STMT 24,623. 2,947. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 4,422. 5,528. 1,106 22 Printing and publications 359,163. 290,240. 68,923. 23 Other expenses STMT 6 Total operating and administrative 1,199,312. 192,082. 897,803. expenses. Add lines 13 through 23 3,379,632. 3,379,632. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 4,277,435. 4,578,944. 192,082 27 Subtract line 26 from line 12: 4,374,931. **a** Excess of revenue over expenses and disbursements ... 8,771,988 **b Net investment income** (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)...

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	. *		
	art	column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	500.	500.			
	2	Savings and temporary cash investments	269,059.	486,707.	486,707.		
	3	Accounts receivable ►					
		Less: allowance for doubtful accounts ▶					
	4	Pledges receivable ►					
		Less: allowance for doubtful accounts ▶					
	5	Grants receivable					
		Receivables due from officers, directors, trustees, and other					
		disqualified persons					
	7	Other notes and loans receivable					
		Less; allowance for doubtful accounts					
ξ	8	Inventories for sale or use					
Assets		Prepaid expenses and deferred charges	6,082.	4,271.	4,271.		
Ä		Investments - U.S. and state government obligations STMT 7	0.	149,953.	149,953.		
		Investments - corporate stock STMT 8	55,502,154.	59,139,920.	61,747,600.		
		Investments - corporate bonds					
		Investments - land, buildings, and equipment: basis					
		Less: accumulated depreciation					
	12	Investments - mortgage loans					
	13	Investments - other STMT 9	3,245,068.	3,503,849.	3,503,849.		
	14	Land, buildings, and equipment: basis ► 760,142. Less: accumulated depreciation ► 448,936.					
		Less: accumulated depreciation 448,936.	315,859.	311,206.	890,109.		
	15	Other assets (describe ► STATEMENT 10)	18,444.	14,531.	890,109. 14,531.		
	16	Total assets (to be completed by all filers)	59,357,166.	63,610,937.	66,797,520.		
	17	Accounts payable and accrued expenses	107,776.	26,849.			
	18	Grants payable					
es	19	Deferred revenue					
≣		Loans from officers, directors, trustees, and other disqualified persons					
Liabilities	21	Mortgages and other notes payable	4 505 460	4 545 005			
_	22	Other liabilities (describe STATEMENT 11)	1,585,460.	1,545,227.			
		-	1 (02 226	1 570 076			
	23	Total liabilities (add lines 17 through 22)	1,693,236.	1,572,076.			
		Foundations that follow SFAS 117, check here					
S		and complete lines 24 through 26 and lines 30 and 31.	E7 662 020	62 020 061			
Net Assets or Fund Balances		Unrestricted	57,663,930.	62,038,861.			
ala		Temporarily restricted					
JQ E	20	Permanently restricted Foundations that do not follow SFAS 117, check here					
Ξ							
ō	27	and complete lines 27 through 31. Capital stock, trust principal, or current funds					
ets		Paid-in or capital surplus, or land, bldg., and equipment fund					
Ass		Retained earnings, accumulated income, endowment, or other funds					
et/		Total net assets or fund balances	57,663,930.	62,038,861.			
Z	30	Total list assets of fully datalices.	37,003,330.	02,030,001.			
	31	Total liabilities and net assets/fund balances	59,357,166.	63,610,937.			
P	art		•				
=				1 1			
		net assets or fund balances at beginning of year - Part II, column (a), line			57,663,930.		
		t agree with end-of-year figure reported on prior year's return)			4,374,931.		
		amount from Part I, line 27a		- l	4,3/4,931.		
					62,038,861.		
		ines 1, 2, and 3 eases not included in line 2 (itemize)		5	02,030,001.		
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30		62,038,861.		
Ť	. 0 141	accord of faire senting of according of your (into 1 minute into 0). I till in other	(8/3 1110 00		Form QQO_DF (2007)		

L	Part IV Capital Gains a	and Losses for Tax on Ir	nvestmen	t Income					
		ibe the kind(s) of property sold (e.g rehouse; or common stock, 200 sha			(b) H P - D -	ow acquired Purchase Donation	(c) Date (mo., c	acquired day, yr.)	(d) Date sold (mo., day, yr.)
1	a UBS LT CAP GAIN	N DISTRIBUTION			<u> </u>	Р	VARI	OUS	VARIOUS
b UBS ST CAP GAIN DISTRIBUTION					P	VARI		VARIOUS	
	THROUGH UBS					P	VARI		VARIOUS
_	d						V 1 11 L 1	.005	VIIICEOD
_	e								
_		(f) Depreciation allowed	(a) Cos	st or other basis	┷	l	(h) (Gain or (loss	<u> </u>
_	(e) Gross sales price	(or allowable)		expense of sale				s (f) minus	(g)
_	a 1,013,123. b 397,848.				_				1,013,123. 397,848.
_	c 34,057,346.		2	8,061,26	7.				5,996,079.
_	d		-	0,002,20					2/330/0130
_	e								
_		g gain in column (h) and owned by	the foundation	on 12/31/69	-+		(I) Gaine ((Col. (h) gair	n minue
_	Complete only for assets showing	. , ,		cess of col. (i)				not less tha	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		col. (j), if any				(from col.	
_		40 01 12/0 1/00	0101	0011 ()), 11 4119					1 012 122
_	a .				-+				1,013,123.
_	b								397,848.
_	С								5,996,079.
_	d								
_	e								
2	Capital gain net income or (net cap	oital loss) { If gain, also enter of the loss of the l	r in Part I, line - in Part I, line	⁷ }		2			7,407,050.
3	Net short-term capital gain or (loss								
Ū	If gain, also enter in Part I, line 8, o		iu (0).		J				
	If (loss), enter -0- in Part I, line 8					3		N/A	7
П	Part V Qualification U	nder Section 4940(e) for	Reduced	l Tax on Net	Inve	stment In	come		
(F	or optional use by domestic private	foundations subject to the section	4940(a) tax on	net investment in	ncome.)			
			` '			,			
lf	section 4940(d)(2) applies, leave th	is part blank.							
W	as the foundation liable for the secti	on 4942 tax on the distributable an	nount of any ve	ear in the base per	riod?				Yes X No
	"Yes," the foundation does not quali		, ,	•					
	Enter the appropriate amount in e				es.				
_	(a) Base period years	(b)		3 ,	(c)				(d)
	Base periód years Calendar year (or tax year beginnin	Adjusted qualifying dia	tributions	Net value of no		table-use asset	is	Distri	bùtión ratio vided by col. (c))
_	2006	9 111)	9,853.		62	508,99	7	(coi. (b) di	.059189
_	2005		7,474.			103,92			.063562
_			3,886.			390,15			.049746
_	2004		1,108.			951,40			.049170
_	2003								
_	2002	3,6/	1,529.		56,	818,72	/ •		.064618
									006005
2	Total of line 1, column (d)						2		.286285
3	Average distribution ratio for the 5	,	• •	,	,				
	the foundation has been in existen	ce if less than 5 years					3		.057257
4	Enter the net value of noncharitabl	e-use assets for 2007 from Part X,	line 5				4	6	3,981,755.
		•							· ·
5	Multiply line 4 by line 3						5		3,663,403.
J	manapiy into T by into U						··· •	1	-,
e	Enter 10/ of not investment in an	o (10/ of Dort L line 97h)							87,720.
0	Enter 1% of net investment incom	t (170 UI Pail I, IIIIt 2/D)					6		01,140.
_									2 751 102
7	Add lines 5 and 6						7		3,751,123.
_		5							4 277 425
8	Enter qualifying distributions from						8		4,277,435.
	If line 8 is equal to or greater than See the Part VI instructions	line 7, check the box in Part VI, line	t 1b, and comp	nete that part usin	ıg a 1%	tax rate.			

Pa	t VI Excise Tax Based on Investment Income (Section 4940	(a), 4940(b)	, 4940(e), or 4	948 -	see i	nstru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 📖 and ent	er "N/A" on line 1	l.]					
	Date of ruling letter: (attach copy of ruling letter if necessary-se	ee instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	X and enter	1%	1		8	7,7	20.
	of Part I, line 27b							
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% $lpha$	of Part I, line 12,	col. (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Oth	ers enter -0-)		2				0.
	Add lines 1 and 2			3		8	7 <u>,</u> 7	20.
	Subtitle A (income) tax (domestic section $4947(a)(1)$ trusts and taxable foundations only. Other			4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5		8	7 <u>,7</u>	20.
	Credits/Payments:							
	2007 estimated tax payments and 2006 overpayment credited to 2007	6a	47,761.					
	Exempt foreign organizations - tax withheld at source	6b						
	Tax paid with application for extension of time to file (Form 8868)	6c						
	Backup withholding erroneously withheld	6d						
	Total credits and payments. Add lines 6a through 6d			7		4	7,7	61.
	Enter any $$ penalty for underpayment of estimated tax. Check here $$ $$ $$ $$ $$ $$ if Form 2220 is attach			8			2,6	28.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			9		4	2,5	87.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10				
	Enter the amount of line 10 to be: Credited to 2008 estimated tax		Refunded ▶	11				
	t VII-A Statements Regarding Activities							
	During the tax year, did the foundation attempt to influence any national, state, or local legisla						Yes	
	any political campaign?					1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpose					1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities an	d copies of an	y materials publisł	ned or				
	distributed by the foundation in connection with the activities.							
	Did the foundation file Form 1120-POL for this year?					1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	-	0					
	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers.		0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendit	ture tax imposed	on foundation					
	managers. ▶ \$ 0 •							
	Has the foundation engaged in any activities that have not previously been reported to the IRS	5?				2		X
	If "Yes," attach a detailed description of the activities.							
	Has the foundation made any changes, not previously reported to the IRS, in its governing ins	•						37
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change					3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?					4a		
	If "Yes," has it filed a tax return on Form 990-T for this year?					4b		v
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?					5		X
	If "Yes," attach the statement required by General Instruction T.							
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eith	ier:						
	By language in the governing instrument, or Description that of factions are added to accomplish instrument as that as a read data.	dina ati a ma that a		la				
	By state legislation that effectively amends the governing instrument so that no mandatory The second is instrument to the second in						v	
7	remain in the governing instrument?					6	X	
	Did the foundation have at least \$5,000 in assets at any time during the year?					7	Λ	
	If "Yes," complete Part II, col. (c), and Part XV. Enter the states to which the foundation reports or with which it is registered (see instructions	a) \						
oa	VA							
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Att	orney Conoral (o	r decignate)					
	of each state as required by General Instruction G? If "No," attach explanation		- ,			8b	Х	
	Is the foundation claiming status as a private operating foundation within the meaning of sect					OD	45	
	year 2007 or the taxable year beginning in 2007 (see instructions for Part XIV)? <i>If "Yes," co</i>	, . ,	.,,,,			9		х
10 Did any nersons become substantial contributors during the tay year? If "You " attach a cabadula listing their names and addresses						10		X X

Pa	rt VII-A Statements Regarding Activities (continued)			
	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)	11a		Х
t	If "Yes," did the foundation have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and			
	annuities described in the attachment for line 11a?	11b		
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract?	12		Х
	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► BEAZLEYFOUNDATION.ORG			
14	The books are in care of ► ITS OFFICERS Telephone no. ►757-39	3-1	605	
	Located at ► FOUNDATION ADDRESS, PORTSMOUTH, VA ZIP+4 ►23			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
	and enter the amount of tax-exempt interest received or accrued during the year 15		/A	
Pa	rt 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
18	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.) Yes X No			
,	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1b		Х
	Organizations relying on a current notice regarding disaster assistance check here	10		21
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
(10		X
۰	before the first day of the tax year beginning in 2007? Tayon on failure to distribute income (continued to the foundation was a private appreciate foundation).	1c		Λ
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)): At the end of tax year 2007, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
č				
	If "Yes," list the years			
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
38				
	during the year? Yes X No			
t	If "Yes," did it have excess business holdings in 2007 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? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2007.) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	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 2007?	4b		X

BEAZLEY FOUNDATION INCOR			54-05501	00 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	L Y	es 🗶 No	
(2) Influence the outcome of any specific public election (see section 4955); o				
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,				
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und			27.72	
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h			▶□	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				
expenditure responsibility for the grant?		N/A Y	es L No	
If "Yes," attach the statement required by Regulations section 53.4945	• •			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p		,	37	
a personal benefit contract?				0 J
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If you answered "Yes" to 6b, also file Form 8870.			77 N	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		L Y	es A No	76
b If yes, did the foundation receive any proceeds or have any net income attribute				7b
Part VIII Information About Officers, Directors, Trusto Paid Employees, and Contractors	ees, roundation wa	anagers, nigni	y	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
, , ,	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense account, other
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
	ιο ροσιαστι	enter-o-)	compensation	anowanees
SEE STATEMENT 12		192,733.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	` hours per week devoted to position	(C) Compensation	and deferred compensation	allowances
ONLY EMPLOYEES MEETING QUALIFICATIONS				
ARE OFFICERS. SEE PART VIII				
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. If none, enter "N	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 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 number of organizations and other beneficiaries served, conferences convened, research papers produced	information such as the d, etc.	Expenses
1GIFTS AND GRANTS - SEE ATTACHED SCHEDULE FOR P	PART XV LINE 3A	
		3,379,632.
2 BEAZLEY SENIOR CENTER - SEE ATTACHED		
		254 600
		371,602.
3		
_		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines	s 1 and 2.	Amount
1 NONE		
0		
2		
All other program-related investments. See instructions.		
3		
		^
Total Add lines 1 through 3	▶	0.

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Р	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	63,923,113.
b	Average of monthly cash balances	1b	422,994.
C	Fair market value of all other assets	1c	609,989.
d	Total (add lines 1a, b, and c)	1d	64,956,096.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) le le 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	64,956,096.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	974,341.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	63,981,755.
6	Minimum investment return. Enter 5% of line 5	6	3,199,088.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	3,199,088.
2a	Tax on investment income for 2007 from Part VI, line 5 2a 87,720.		
b	Income tax for 2007. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	87,720.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,111,368.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,111,368.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,111,368.
Р	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	, , , , , , , , , , , , , , , , , , , ,	1a	4,277,435.
b	•	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	\	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	4,277,435.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	87,720.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	4,189,715.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	foundati	on qualifies for the section
	4940(e) reduction of tax in those years.		

Page 9

101111 330 11 (2001)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2006	(c) 2006	(d) 2007
1 Distributable amount for 2007 from Part XI,	Corpus	Tears prior to 2000	2000	2007
line 7				3,111,368.
2 Undistributed income, if any, as of the end of 2006:				0/===/0000
a Enter amount for 2006 only			108,104.	
b Total for prior years:			,	
, ,		0.		
3 Excess distributions carryover, if any, to 2007:				
a From 2002				
b From 2003				
c From 2004				
d From 2005				
e From 2006				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2007 from				
Part XII, line 4: ►\$ 4,277,435.				
a Applied to 2006, but not more than line 2a			108,104.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2007 distributable amount	4 055 060			3,111,368.
e Remaining amount distributed out of corpus	1,057,963.			
5 Excess distributions carryover applied to 2007 (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	1,057,963.			
b Prior years' undistributed income. Subtract	, ,			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2006. Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2007. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2008				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2002	•			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2008.	1 055 060			
Subtract lines 7 and 8 from line 6a	1,057,963.			
O Analysis of line 9:				
a Excess from 2003				
b Excess from 2004				
c Excess from 2005				
d Excess from 2006 e Excess from 2007 1,057,963.				
e Excess from 2007 1,057,963.				

Part XIV Private Operating Fo	oundations (see ins	structions and Part V	II-A, question 9)	N/A					
1 a If the foundation has received a ruling or	determination letter that	it is a private operating							
foundation, and the ruling is effective for 2007, enter the date of the ruling									
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)									
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	W/	W/X /				
income from Part I or the minimum	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total				
investment return from Part X for									
each year listed									
b 85% of line 2a									
c Qualifying distributions from Part XII,									
line 4 for each year listed									
d Amounts included in line 2c not									
used directly for active conduct of									
•									
exempt activities									
e Qualifying distributions made directly									
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 XV Supplementary Info			if the foundation	had \$5,000 or mo	ore in assets				
		nstructions.)							
1 Information Regarding Foundation	•								
a List any managers of the foundation who year (but only if they have contributed m			itributions received by the	foundation before the clos	se of any tax				
	.ore than \$5,000). (See Si	6011011 307 (u)(2).)							
NONE									
b List any managers of the foundation who			ı (or an equally large portio	on of the ownership of a pa	ırtnership or				
other entity) of which the foundation has	a 10% of greater interes	il.							
NONE									
2 Information Regarding Contribution	on, Grant, Gift, Loan,	Scholarship, etc., F	Programs:						
			e organizations and does n						
the foundation makes gifts, grants, etc. (see instructions) to indiv	iduals or organizations	under other conditions, co	mplete items 2a, b, c, and	d.				
a The name, address, and telephone number									
RICHARD BRAY; FOUNDA	TION ADDRES	S; 757-393	-1605						
b The form in which applications should be	e submitted and informat	ion and materials they	should include:						
WRITTEN POLICY AND G	UIDELINES A	VAILABLE U	PON REQUEST						
c Any submission deadlines:									
QUARTERLY (SEE GUIDE	LINES FOR D	ETAILS)							
d Any restrictions or limitations on awards	s, such as by geographica	al areas, charitable fields	s, kinds of institutions, or o	ther factors:					
HAMDWON DOADG ADEA O									

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to any foundation manager or substantial contributor Amount status of contribution Name and address (home or business) recipient a Paid during the year SEE ATTACHED STATEMENT NONE 0. ➤ 3a **b** Approved for future payment TCC EDUCATIONAL NURSING FOUNDATION, 500 E. MAIN SCHOLARSHIPS / STREET, NORFOLK, VA 23510 NURSING SCHOOL 511,701. NONE SUPPORT VA FOUNDATION FOR SCHOLARSHIPS / INDEPENDENT COLLEGES, 8010 ENDOWMENT RIDGE ROAD, SUITE B, 500,000. RICHMOND, VA 2 NONE 1,011,701. Total

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.				d by section 512, 513, or 514	(e)	
•	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income	
1 Program service revenue:	code		code	711104111		
a						
b						
c						
d						
e						
1						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash			14	0 246		
investments			14	8,246.		
4 Dividends and interest from securities			14	1,400,203.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property			01	62,511.		
7 Other investment income			101	02,311.		
8 Gain or (loss) from sales of assets other			18	7 407 050		
than inventory			10	7,407,050.		
9 Net income or (loss) from special events						
Gross profit or (loss) from sales of inventory Other revenue:						
GEE GELEENIE 10		<10,195				
. —		\10,13	,,,,			
b						
c	-		++-			
d						
6 Cubtatal Add aslumns (b) (d) and (s)		∠10 10E		9 964 070		
2 Subtotal. Add columns (b), (d), and (e)		<10,195) • >	8,964,070.	8,953,87	
3 Total. Add line 12, columns (b), (d), and (e)				13	0,900,07	

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

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

Did the every instant directly a real indirectly are not in any of the following with any other every instant described in certain \$704(a) of							Vaa	No	
1	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) Cash1								
	(2) C	Other assets				1a(2)		X	
	b Other	transactions:							
	(1) S	sales of assets to a noncharital	ble exempt organization			1b(1)		X	
								X	
								X	
								Х	
	(5) L	oans or loan guarantees				1b(5)		Х	
	(6) P	erformance of services or me	mbership or fundraising solicitatio	ns		1b(6)		Х	
								Х	
					ways show the fair market value of the g		sets		
					ie in any transaction or sharing arranger		,		
			other assets, or services received.	ou 1000 than han market valu	o many transaction of charmy arranger	nong onow m			
(a	Line no.	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description of transfers, transactio	ne and sharing ar	rangeme		
	,	(b) / into ant involved	N/A	oxompt organization	(a) Bessing tion of dansers, dansaction	no, and onamig a	rangome		
			N/A						
_									
_									
2	a Is the	foundation directly or indirect	tly affiliated with, or related to, one	or more tax-exempt organiz	zations described				
						Yes	X	. No	
		s," complete the following sch							
_		(a) Name of org		(b) Type of organization	(c) Description of re	lationship			
_		N/A		,,					
_									
_									
_									
	Under p	enalties of perjury, I declare that I h	ave examined this return, including acco	mpanying schedules and statem	l nents, and to the best of my knowledge and be	ief, it is true, corre	ect,		
			er than taxpayer or fiduciary) is based on		, ,		•		
				1					
ē		gnature of officer or trustee		I Date	Title				
Sign Here	ال 🔻	-		Title Check if	Preparer's SSN o	r PTIN			
g	, >	Preparer's		U	self-	1100010101010			
S	Paid Preparer's Use Only	signature	WANT C CONFINE		employed				
	Paid epare se On		MAN & COMPANY,		EIN ►				
	ر بِيَّ ا		COMMERCIAL PLAC	E, SULTE 800		-	-4^	^	
		address, and ZIP code NORF	OLK, VA 23510		Phone no. 7	57.624.			
						Form 990)-PF (2007)	

723622

FORM 990-PF INTEREST ON SAVINGS A	ND TEMPORARY CA	SH INVESTMENTS	STATEMENT 1
SOURCE			AMOUNT
CHECKING ACCOUNT		•	8,246.
TOTAL TO FORM 990-PF, PART I, LINE	3, COLUMN A		8,246.
FORM 990-PF DIVIDENDS AND	INTEREST FROM	SECURITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
ANNUITY FULTON FINANCIAL UBS PAINE WEBBER	74. 14,626. 1,471,563.	0. 0. 0.	74. 14,626. 1,471,563.
TOTAL TO FM 990-PF, PART I, LN 4	1,486,263.	0.	1,486,263.
EODM 000 DE	THE THOOME		CDA MEMENTO 2
FORM 990-PF	THER INCOME		STATEMENT 3
DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
MISCELLANEOUS FAIRFIELD ASSOCIATES LLC ELMHURST SQUARE ASSOCIATE LLC TIDEWATER HOLDINGS CO., LLC LUMBER RIVER ASSOCIATES LLC GALLERIA WOODS GARDENS ASSOCIATES ATLANTA-DURHAM HOLDINGS LLC ATLANTA-DALLAS HOLDINGS LLC STEELE CREEK ASSOCIATES LLC NASHVILLE-DALLAS HOLDINGS LLC DEVELOPMENT FUND I LLC RCC OLDE TOWNE LYNNHAVEN PARKWAY ASSOCIATES SOUTHWOOD ASSOCIATES HG HAMPTONS HOLDINGS LAKESHORE PRESTON HOLDINGS	<12,00 <8,99 <2,70 310,49 <33,20 <47,60 <77,60 <64,59 15,50 <23,80 <10 <3,70 <36,90 <24,70	49. 0 91.> 0 61.> 0 18.> 0 18.> 0 29.> 0 36.> 0 54.> 0 48. 0 83.> 0 17.> 0 18.> 0 96.> 0	· · · · · · · · · · · · · · · · · · ·
TOTAL TO FORM 990-PF, PART I, LINE	11 52,3	16. 62,511	•

FORM 990-PF	ACCOUNTI	NG FEES	S'.	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
ACCOUNTING	21,375.	4,275.		17,100.		
TO FORM 990-PF, PG 1, LN 16B	21,375.	4,275.		17,100.		
FORM 990-PF	TAX	ES	S	ratement 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
PAYROLL TAXES EXCISE TAXES MISCELLANEOUS TAXES	33,555. 87,751. 7,771.	3,574. 0. 1,075.		29,981. 0. 6,696.		
TO FORM 990-PF, PG 1, LN 18 =	129,077.	4,649.		36,677.		
FORM 990-PF	OTHER E	XPENSES	S	ratement 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
REPAIRS & MAINTENANCE GROUP INSURANCE UTILITIES INVESTMENT MGMT FEES PROGRAM SUPPLIES OFFICE SUPPLIES INSURANCE MISCELLANEOUS STAFF DEVELOPMENT	19,834. 114,793. 30,331. 124,085. 37,759. 9,759. 14,502. 1,355. 6,745.	956. 12,229. 1,994. 49,634. 0. 1,146. 1,422. 271. 1,271.		18,878. 102,564. 28,337. 74,451. 37,759. 8,613. 13,080. 1,084. 5,474.		
TO FORM 990-PF, PG 1, LN 23	359,163.	68,923.		290,240.		

	-		
FORM 990-PF U.S. AND STATE	E/CITY GOVERNME	ENT OBLIGATIONS	STATEMENT
DESCRIPTION	U.S. OTHE GOV'T GOV'		FAIR MARKET VALUE
GOV'T OBLIGATIONS	x	149,953.	149,953
TOTAL U.S. GOVERNMENT OBLIGATIONS	5	149,953.	149,953
TOTAL STATE AND MUNICIPAL GOVERNM	MENT OBLIGATION		
TOTAL TO FORM 990-PF, PART II, LI	INE 10A	149,953.	149,953
FORM 990-PF C	CORPORATE STOCK	τ	STATEMENT
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK		59,139,920.	61,747,600
TOTAL TO FORM 990-PF, PART II, LI	INE 10B	59,139,920.	61,747,600
FORM 990-PF OT	THER INVESTMENT		STATEMENT
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
CASH EQUIVALENTS PARTNERSHIP INTERESTS	COST	2,213,958. 1,289,891.	2,213,958 1,289,891
TOTAL TO FORM 990-PF, PART II, LI	INE 13	3,503,849.	3,503,849
FORM 990-PF	OTHER ASSETS		STATEMENT 1
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CASH SURRENDER VALUE OF LIFE INSU ANNUITY	JRANCE	14,074. 457.	14,074 457
TOTAL TO FORM 990-PF, PART II, LI	INE 15	14,531.	14,531

				_		
FORM 990-PF	OTHER LIAB	ILITIES		STAT	EMENT	11
DESCRIPTION				Al	MOUNT	
DEFERRED COMPENSATION ACCRUED EXCISE TAX				1	,502,6 42,5	
TOTAL TO FORM 990-PF, PART II	, LINE 22, C	OLUMN B		1	,545,2	27.
	LIST OF OFF	-		STAT	EMENT	12
NAME AND ADDRESS			COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPEN	
LAWRENCE W. I'ANSON, JR. 5409 HIGH ST WEST PORTSMOUTH, VA 23703			PRESIDENT 6,000.	0.		0.
P. WARD ROBINETT, JR. 500 CRAWFORD ST PORTSMOUTH, VA 23704		E, SECRI	ETARY 6,000.	0.		0.
LEROY T. CANOLES P.O. BOX 3037 NORFOLK, VA 23514	TRUSTE		6,000.	0.		0.
DIANE POMEROY GRIFFIN SUITE 303, #1 HIGH STREET PORTSMOUTH, VA 23704	TRUSTE		6,000.	0.		0.
W. ASHTON LEWIS 3412 WESTERN BRANCH BLVD CHESAPEAKE, VA 23321	TRUSTE	•	6,000.	0.		0.
WILLIAM H. HODGES 101 - 43RD & OCEANFRONT VIRGINIA BEACH, VA 23451	TRUSTE		6,000.	0.		0.
WHITNEY G. SAUNDERS 705 W. WASHINGTON STREET SUFFOLK, VA 23434	TRUSTE		6,000.	0.		0.
RICHARD S. BRAY 5409 HIGH ST WEST PORTSMOUTH, VA 23703	TRUSTE 40.	E, PRES	IDENT 150,733.	0.		0.
TOTALS INCLUDED ON 990-PF, PAGE	GE 6, PART V	III	192,733.	0.		0.

FORM 990-PF	ľO	HER REVENUE		STATEMENT 13
DESCRIPTION	BUS CODE	UNRELATED EXCL BUSINESS INC CODE	EXCLUDED AMOUNT	RELATED OR EXEMPT FUNC- TION INCOME
FAIRFIELD ASSOCIATES LLC	531120	<12,001.>		
ELMHURST SQUARE ASSOCIATE	531120	,		
LLC		49.		
TIDEWATER HOLDINGS CO.,	531120			
LLC	F21100	<8,991.>		
LUMBER RIVER ASSOCIATES	531120	<2,761.>		
GALLERIA WOODS GARDENS	531120	<2,701.>		
ASSOCIATES	331120	310,451.		
ATLANTA-DURHAM HOLDINGS	531120	0_0,10_0		
LLC		<33,218.>		
ATLANTA-DALLAS HOLDINGS	531120			
LLC	504400	<47,629.>		
STEELE CREEK ASSOCIATES	531120	177 636		
LLC NASHVILLE-DALLAS HOLDINGS	531120	<77,636.>		
LLC	331120	<64,554.>		
DEVELOPMENT FUND I LLC	531120	15,548.		
RCC OLDE TOWNE	531120	<23,883.>		
LYNNHAVEN PARKWAY	531120			
ASSOCIATES		<117.>		
SOUTHWOOD ASSOCIATES	531120	<3,718.>		
HG HAMPTONS HOLDINGS LAKESHORE PRESTON	531120 531120	<36,939.>		
HOLDINGS	331120	<24,796.>		
TOTAL TO FORM 990-PF, PG 13	1, LN 11	<10,195.>		

Form **2220**

Name

Part I

Department of the Treasury Internal Revenue Service

Underpayment of Estimated Tax by Corporations

➤ See separate instructions.
➤ Attach to the corporation's tax return.

FORM 990-PF

OMB No. 1545-0142

2007

BEAZLEY FOUNDATION INCORPORATED

Required Annual Payment

Employer identification number 54-0550100

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 34 on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

1	Total tax (see instructions)					1	87,720.
	Personal holding company tax (Schedule PH (Form 1120), lin Dook-back interest included on line 1 under section 460(b)(2) contracts or section 167(g) for depreciation under the income	for o	completed long-term				
C	Credit for Federal tax paid on fuels (see instructions)						
	I Total. Add lines 2a through 2c	2	d				
3	Subtract line 2d from line 1. If the result is less than \$500, do						
	does not owe the penalty				3	3	87,720.
4	Enter the tax shown on the corporation's 2006 income tax ret	•	,				48 864
	or the tax year was for less than 12 months, skip this line at	nd ei	nter the amount from line	3 on line 5		4	47,761.
_	Described annual resonant Enteration and the of the O or line	4 IE	the company tion is used in	d to alsia line 4			
Э	Required annual payment. Enter the smaller of line 3 or line enter the amount from line 3					.	47,761.
F	Part II Reasons for Filing - Check the boxes belo					,	47,7016
•	even if it does not owe a penalty (see instructions).	*** (11	at apply. If ally boxes are	onookou, mo oorporunon	must mor orm zzzo		
6	The corporation is using the adjusted seasonal installr	nent	method.				
7	The corporation is using the annualized income install	men	t method.				
8	X The corporation is a "large corporation" figuring its firs	t rec	juired installment based o	n the prior year's tax.			
P	Part III Figuring the Underpayment						
			(a)	(b)	(c)		(d)
9	Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers; Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9	05/15/07	06/15/07	09/15/07	,	12/15/07
10	Required installments. If the box on line 6 and/or line 7						
	above is checked, enter the amounts from Sch A, line 38. If						
	the box on line 8 (but not 6 or 7) is checked, see instructions ${\bf r}$						
	for the amounts to enter. If none of these boxes are checked, $% \left(1\right) =\left(1\right) \left(1\right$						
	enter 25% of line 5 above in each column.	10	11,940.	31,920.	21,930	١.	21,930.
11	Estimated tax paid or credited for each period (see						
	instructions). For column (a) only, enter the amount				25 020		
	from line 11 on line 15	11			35,820	<u>' </u>	
	Complete lines 12 through 18 of one column before						
10	going to the next column.	12					
	Enter amount, if any, from line 18 of the preceding column Add lines 11 and 12	13			35,820		
	Add amounts on lines 16 and 17 of the preceding column	14		11,940.	43,860		29,970.
	Subtract line 14 from line 13. If zero or less, enter -0-	15	0.	0.) .	0.
	If the amount on line 15 is zero, subtract line 13 from line						
	14. Otherwise, enter -0-	8,040	۱.(
17	Underpayment. If line 15 is less than or equal to line 10,			11,940.	-	╗	
	subtract line 15 from line 10. Then go to line 12 of the next						
	column. Otherwise, go to line 18	17	11,940.	31,920.	21,930) .	21,930.
18	Overpayment. If line 10 is less than line 15, subtract line 10						
	from line 15. Then go to line 12 of the next column	18					
	Go to Part IV on page 2 to figure the popula	, D.	not as to Dort IV if there	ara na antrica an lina 1	7 no nonalty is awa	٨	

For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2007)

JWA

Form 2220 (2007)

Part IV Figuring the Penalty

			(a)	(b)	(c)	(d)	
19	Enter the date of payment or the 15th day of the 3rd month after the close of the tax year, whichever is earlier (see instructions). (Form 990-PF and Form 990-T filers: Use 5th						
•	month instead of 3rd month.)	19					
20	Number of days from due date of installment on line 9 to the date shown on line 19	20					
21	Number of days on line 20 after 4/15/2007 and before 1/1/2008	21					
22	Underpayment on line 17 x Number of days on line 21 x 8%	22	\$	\$	\$	\$	
	Number of days on line 20 after 12/31/2007 and before 4/1/2008	23					
24	Underpayment on line 17 x Number of days on line 23 x 7%	24	\$	\$	\$	\$	
25	Number of days on line 20 after 3/31/2008 and before 7/1/2008	25					
26	Underpayment on line 17 x Number of days on line 25 X *%	26	\$	\$	\$	\$	
27	Number of days on line 20 after 6/30/2008 and before 10/1/2008	27	SEE	ATTACHED W	ORKSHEET		
28	Underpayment on line 17 x Number of days on line 27 x *% 366	28	\$	\$	\$	\$	
29	Number of days on line 20 after 9/30/2008 and before 1/1/2009	29					
30	Underpayment on line 17 x Number of days on line 29 x *%	30	\$	\$	\$	\$	
31	Number of days on line 20 after 12/31/2008 and before 2/16/2009	31					
32	Underpayment on line 17 x Number of days on line 31 x *%	32	\$	\$	\$	\$	
33	Add lines 22, 24, 26, 28, 30, and 32	33	\$	\$	\$	\$	
21	Penalty. Add columns (a) through (d) of line 33. Enter the to	tal h	are and on Form 1120- lie	na 22:			
J4	or the comparable line for other income tax returns		·	•	34	\$ 2,62	8.

^{*} For underpayments paid after March 31, 2008: For lines 26, 28, 30, and 32, use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Form **2220** (2007) JWA

FORM 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying No	umber
BEAZLEY FOU	UNDATION INCO	RPORATED		54-05	50100
(A)	(B)	(C) Adjusted	(D) Number Days	(E) Daily	(F)
*Date	Amount	Balance Due	Balance Due	Penalty Rate	Penalty
		-0-			
05/15/07	11,940.	11,940.	31	.000219178	8:
06/15/07	31,920.	43,860.	73	.000219178	702
08/27/07	<11,940.>	31,920.	10	.000219178	7(
09/06/07	<11,940.>	19,980.	9	.000219178	3.
09/15/07	21,930.	41,910.			
09/15/07	<11,940.>	29,970.	91	.000219178	59
12/15/07	21,930.	51,900.	3	.000219178	3
12/18/07	<11,941.>	39,959.	13	.000219178	11
12/31/07	0.	39,959.	91	.000191257	69
03/31/08	0.	39,959.	45	.000163934	29
nalty Due (Sum of Colur	nn F).				2,62

^{*} Date of estimated tax payment, withholding credit date or installment due date.

712511 04-27-07

Form	990-T	E	xempt Organization Bus	sines	ss Income T	ax Return	1	OMB No. 1545-0687
Depar	tment of the Treasury		and proxy tax und	er se	ction 6033(e))			ZUU/
	al Revenue Service (77)	For c	alendar year 2007 or other tax year beginning		, and ending			Open to Public Inspection for 501(c)(3) Organizations Only
A	Check box if address changed		Name of organization (Check box if name o		(Emp	loyer identification number loyees' trust, see instructions lock D on page 9.)		
B E:	kempt under section	Print	BEAZLEY FOUNDATION INC		5	4-0550100		
] 501()()	_ or	Number, street, and room or suite no. If a P.O. bo	x, see pa	age 9 of instructions.			lated business activity codes instructions for Block E
	408(e) 220(e)	Туре	3720 BRIGHTON STREET					age 9.)
	408A X 530(a)		City or town, state, and ZIP code				1	
	529(a)		PORTSMOUTH, VA 23707				531	.120
C Bo		F Group	exemption number (see instructions for Block F.)	<u> </u>				
at	end of year , 762, 397.		k organization type X 501(c) corporatio		501(c) trust	401(a) trust		Other trust
		n's nrim	ary unrelated business activity.	EE :	STATEMENT 1	4		
-			poration a subsidiary in an affiliated group or a pare				Ye	es X No
			tifying number of the parent corporation.	it Jubbi	diary controlled group:			US LEE INO
			ITS OFFICERS		Telenho	ne number $ ightharpoonup 7$	57-	393-1605
			de or Business Income		(A) Income	(B) Expenses		(C) Net
	Gross receipts or sale		as or Business mosmo		(-,	(= , = - , =		(2)::::
	Less returns and allo		c Balance	1c				
			A, line 7)	2				
3	Gross profit. Subtrac			3				
	·		rom line 1c Th Schedule D)	4a				
			Part II, line 17) (attach Form 4797)	4b				
				4c				
5			ips and S corporations (attach statement)	5				
6	Rent income (Schedu			6				
	,	, .	me (Schedule E)	7				
_				8				
8		-	and rents from controlled organizations (Sch. F)	P				
9			on 501(c)(7), (9), or (17) organization	9				
10			uma (Sahadula I)	10				
			ome (Schedule I)	11				
			3 J)	12				
			ns; attach schedule.)	13	0.			
			gh 12ot Taken Elsewhere (See instructions fo		• •			
Га	(Except for	contrib	utions, deductions must be directly connecte	d with t	the unrelated business	•		
14	Compensation of of	ficers, di	rectors, and trustees (Schedule K)				14	
15	Salaries and wages						15	
16	Repairs and mainter	nance .					16	
17	Bad debts						17	
18							18	
19	Taxes and licenses						19	
20			e instructions for limitation rules.)				20	
21			562)					
22	Less depreciation cl	laimed oi	n Schedule A and elsewhere on return		22a		22b	
23							23	
24			mpensation plans				24	
25	Employee benefit pr	ograms					25	
26			chedule I)				26	
27			hedule J)				27	
28	Other deductions (a	ttach sch	nedule)				28	
29			es 14 through 28				29	0.
30			ncome before net operating loss deduction. Subtrac				30	0.
31			n (limited to the amount on line 30)				31	
32			ncome before specific deduction. Subtract line 31 f				32	0.
33			y \$1,000, but see instructions for exceptions) $\ \dots$				33	1,000.
34	Unrelated busine of zero or line 32	ess taxa	able income. Subtract line 33 from line 32. If line	33 is gr	eater than line 32, enter tl	ne smaller	34	0

723701 02-18-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

orm **990-T** (2007)

Signature of officer Date Title instructions)? X Yes

Preparer's Paid Preparer's **Use Only**

signature Firm's name (or GOODMAN & COMPANY, L.L.P. yours if self-

ONE COMMERCIAL PLACE, SUITE 800 23510 NORFOLK, VA

Preparer's SSN or PTIN P00744975

54-0640067 757.624.5100 Phone no.

Form **990-T** (2007)

employed),

address, and

Check if

self-employed

D	TNCORPORATED

Schedule C - Rent Inco	me (Fr	om Real	Prope	rty and	d Personal	Proper	ty Lease	ed With Real P	rop	erty)(see instr. on pg 20)
1 Description of property										
(1)										
(2)										
(3)										
(4)										
. ,	:	2 Rent received	or accrued					_		
(a) From personal property (if rent for personal property 10% but not more the	is more than	age of	(b) F	f rent for pe	nd personal proper ersonal property ex t is based on profit	ceeds 50% (centage or if	3 Deductions directions 2(ectly co a) and	onnected with the income in 2(b) (attach schedule)
(1)										
(2)										
(3)										
(4)										
Total		0.	Total				0.			
Total income . Add totals of colum here and on page 1, Part I, line 6, o							0.	Total deductions. Enter here and on page Part I, line 6, column (B)		• 0.
Schedule E - Unrelated				ne (See	instructions or	n page 20))			
					2 .			3 Deductions directly to debt-fit		
1 Description of	debt-finance	ed property			2 Gross indocable financed	e to debt-	(a)	Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)
(1)										
(2)										
(3)										
(4)										
4 Amount of average acquisition debt on or allocable to debt-finance property (attach schedule)	ed	of or a debt-fina	adjusted ba llocable to nced proper schedule)		6 Column by colu			7 Gross income reportable (column 2 x column 6)		8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)						9/	6			
(2)						9/	6			
(3)						9/	6			
(4)						9/	6			
Totals								re and on page 1, ne 7, column (A).	0.	Enter here and on page 1, Part I, line 7, column (B).
Total dividends-received deduct					<u></u>					0.
Schedule F - Interest, <i>F</i>	Annuitie	es, Royal	ties, ar					nizations (See	instru	uctions on page 21)
				Exemp	t Controlled C	rganizatio	ons			
1 Name of Controlled Organizat	ion	Employer Ide Numb	entification per	Net ur (loss) (s	3 nrelated income see instructions)	Total paym	4 of specified nents made	5 Part of column 4 included in the cororganization's gross	that is itrolling incom	6 Deductions directly connected with income in column (5)
(1)										
(2)										
(3)										
(4)										
Nonexempt Controlled Organiz	zations									
7 Taxable Income		unrelated incom see instructions		9 To	tal of specified pay made	rments	in the cont	lumn 9 that is included rolling organization's ross income	11	Deductions directly connected with income in column 10
(1)									1	
(2)										
(3)										
(4)										
							Add columns Enter here and line 8, column	d on page 1, Part I,	Ente	columns 6 and 11. or here and on page 1, Part I, 8, column (B).
Totals								0.		0.
723721 / 02-18-08									1	Form 990-T (2007

BEAZLEY	FOUNDATION	INCORPORAT	ED.
		5047 7(3) (0)	

Schedule G - Investme (see inst	ent Income of a ructions on page 22		501(c)(7	7), (9), or (17) O	rganiza	tion				
1 Description of income				2 Amount of income	3 Deductions directly connected (attach schedule) 4 Set-aside (attach schedule)		Set-asides tach schedule)	5 Total deductions and set-asides (col. 3 plus col. 4)		
(1)										
(2)										
(3)										
(4)										
				Enter here and on page 1, Part I, line 9, column (A).					Enter here and on page 1, Part I, line 9, column (B).	
Totals				0.					0.	
Schedule I - Exploited			, Other	Than Advertis	ing Inc	ome				
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Exper directly con with produ of unrela business in	nected uction ated	4 Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	from ac is not u	s income tivity that unrelated ss income	ity that elated Expenses attributable to		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).	
(1)										
(2)										
(3)										
(4)										
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here a page 1, P line 10, co	art I, ol. (B).				•		Enter here and on page 1, Part II, line 26.	
Schedule J - Advertisi	0.		0.	22/					0.	
	Periodicals Rep				<u> </u>					
Part I moonie i foni			u conc		<u> </u>			1	7 Excess	
1 Name of periodical	2 Gross advertising income	advertising adver		4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income		6 Readership costs		readership costs (column 6 minus column 5, but not more than column 4).	
(1)										
(2)										
(3)										
(4)										
Totals (carry to Part II, line (5))	•	0.	0.						0.	
Part II Income From	Periodicals Rep 7 on a line-by-line b	orted on	a Sepa	arate Basis (For	each peri	odical liste	d in Pa	art II, fill in		
(1)	-							I		
(2)				1	1					
(3)										
(4)										
(5) Totals from Part I		0.	0.						0.	
(5) Totals Holli Later	Enter here and page 1, Part line 11, col. (<i>l</i>	on Enter h	ere and on 1, Part I 1, col. (B).	•					Enter here and on page 1, Part II, line 27.	
Totals, Part II (lines 1-5)	>	0.	0 .						0.	
Schedule K - Compen	sation of Office	rs, Direct	ors, an	id Trustees (see	instruction					
1 N	lame			2 Title		3 Perce time devo busine	ted to		ensation attributable elated business	
							%			
							%			
							%			
			—			1	۵.	1		

Form **990-T** (2007)

0.

Total. Enter here and on page 1, Part II, line 14

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT BUSINESS ACTIVITY

INVESTMENTS IN COMMERCIAL REAL ESTATE LIMITED PARTNERSHIPS TO FORM 990-T, PAGE 1

CT-13

Staple forms here New York State Department of Taxation and Finance

المصامات	Ducinos	I
Unrelated	business	income

_	Amended	Tax Return	Α	ll filers en	ter tax period:				
_	return	Tax Law - Article 13		eginning	01-01-0	7 6	ending		1-07
	mployer identification number	File number	Business telephone nu					ou claim an rpayment, mar	·k
Ļ	54-0550100	MM4	(757)393-				an)	X in the box	
٦٢	egal name of corporation			Trade name	/DBA				
	BEAZLEY FOUNDATION	INCORPORATED							
	Mailing name (if different from legal name above)			State or cou	intry of incorporation	Date rece	ived (for	Tax Departmer	nt use only)
	/o lumber and street or PO box			Date of inco	rporation				
		_		Date of frico	проганоп				
_	3720 BRIGHTON STREE		710	Familian	er de la companya de				
	City	State	ZIP code	business in NY	rations: date began 'S				
_	PORTSMOUTH, VA 237								
	IAICS business code number (from federal return)	If address above is new, mark	If your name, emplo or owner/officer info		ion number, address, hanged, vou must	Audit (for	Tax Depa	artment use on	ıly)
Ļ	531120	an X in the box	file Form DTF-95. If you may file Form D	only your add	lress has changed,				
'	Principal unrelated business activity		from our Web site, b	by phone, or b	y fax. See the Need				
	SEE STATEMENT 1		help? section of the						
	ve you filed New York State Form CT								
	rk an X in this box if you are an employee t			on 401(a)					<u> </u>
	rk an ${f X}$ in this box if you ceased operating				N (see section Who m	ust file For	n CT-13 i		
	A. Pay amount shown on line 22. Ma			ation Tax				Payment er	
_	 Attach your payment here. Detach 	· · · · · · · · · · · · · · · · · · ·	ructions for details.)			Α.			250.
_	omputation of income and ta								
1	Federal unrelated business taxable i	income before net operatir	ng loss deduction ar	nd after \$1	,000				_
	specific deduction						1.		0.
	New York State Article 13 tax deduc						2.		
	Additions required for shareholders						3.		
	Grossed-up taxes for shareholders of						4.		
	Other additions (see instructions)						5.		
	Add lines 1 through 5			-			6.		
	Other income (see instructions)								
	Federal S corporation shareholder s			-					
	Other subtractions (see instructions)								
	Total subtractions (add lines 7, 8, and						10.		
	Taxable income before net operating					_	11.		0.
	New York net operating loss deduct					_	12.		
	Taxable income (subtract line 12 from					[1	13.		0.
14	Allocated taxable income (multiply lin	· -	% from line 42; or						
	from line 13 if allocation is not cla	imed)				📭	14.		
	Tax based on income (multiply line 1						15.		0.
	Minimum tax						16.		250 • 00
	Tax (line 15 or line 16, whichever is la						17.		250.
	Total prepayments from line 46						18.		250
	Balance (if line 18 is less than line 17						19.		250.
	Interest on late payment (see instruc						20.		
	Late filing and late payment penaltie						21.		250
	Balance due (add lines 19, 20, and 2						22.		250.
	Overpayment (if line 17 is less than li						23.		
	Amount of overpayment on line 23 t						24.		
25	Amount of overpayment on line 23 t	o be refunded (subtract lir	ne 24 from line 23) $_{\cdot\cdot}$			2	25.		

768421

		-	o v		7 KV 11.1		
	you been audited by the Internal Revenue Service in the past ral return was filed on: 990T X Other:			No _2	If Yes, list years Attach a complete cop		our federal return.
	edule A - Unrelated business allocation						
warel	did not maintain a regular place of business outside New Yorknouse, or other space regularly used by the taxpayer in its unrecation, nature of activities, and number and duties of employe	elated b					
Ave	rage value of:		A New York St	tate	B Everywhere	1	
26	Real estate owned	26.]
27	Gross rents (attach list)	27.					1
	Inventories owned						1
29	Other tangible personal property owned	29.					1
	Total (add lines 26 through 29)						1
	Percentage in New York State (divide line 30, column A, by lin		olumn B)			31.	. %
	eipts in the regular course of business from:						
32	Sales of tangible personal property shipped to]
	points within New York State	. 32.					
33	All sales of tangible personal property						1
34	Services performed	. 34.					1
	Rentals of property						1
	Other business receipts						1
	Total (add lines 32 through 36)						1
	Percentage in New York State (divide line 37, column A, by lin		olumn B)			. 38.	. %
39	Wages, salaries, and other compensation of employees						
	(except general executive officers)	. 39.					
40	Percentage in New York State (divide line 39, column A, by lin		olumn B)			40.	. %
41	Total of New York State percentages (add lines 31, 38, and	40)				41.	. %
	Business allocation percentage (divide line 41 by three or by t	he num	ber of percentages)	٠		42.	. %
Coi	mposition of prepayments claimed on line 18*				Date paid		Amount
43	Payment with extension request, Form CT-5, line 5			43.	-		
44a	Second installment from Form CT-400			44a			
44b	Third installment from Form CT-400			44b			
44c	Fourth installment from Form CT-400			44c			
45	Amount of overpayment credited from prior years				45.		
	Total prepayments (add lines 43 through 45; enter here and on						
	 Taxpayers subject to the unrelated business income tax ar If you did make these unrequired payments, please report 		•				
Th	ird- Do you want to allow another person to discuss this re	turn wit	h the Tax Dept? (se	e inst	tr.) Yes (complete	the fo	ollowing) No
	Designee's name		Designee's phon	e nur			
desi	gnee				Number (PIN)	inoati	···
Certi	fication: I certify that this return and any attachments are to the	ne best	of my knowledge ar	nd be	lief true, correct, and cor	nplete	
	ature of authorized person			ial titl			Date
_	Signature of individual preparing this return	Firm	I n's name <i>(or yours it</i>	f self-	employed)		
ا ۾ ڇا. - ها	GOODMAN & COMPANY, L.L.P.						
Paid preparer	Address ONE COMMERCIAL PLACE, SU	TE 8			ID number		Date
ᄚ	NORFOLK, VA 23510				P00744975		

768431 / 08-07-07

See instructions for where to file.

FORM CT-13 1 PRINCIPAL UNRELATED BUSINESS ACTIVITY STATEMENT

INVESTMENTS IN COMMERCIAL REAL ESTATE LIMITED PARTNERSHIPS