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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047 Open to Public

A F	or the	2009 calendar year, or tax year beg	inning	<u>an</u> d	ending		
B C	heck if	use the LIKET DALITET	CHURCH ENDOWMEN	T FUND	,	D Employer identific	cation number
	Addres change Name change	INCORPORATED type Doing Business As		<u>-</u> .		54-0	858196
F	Initial return Termir ated	See Number and street (or P C	box if mail is not delivered to stree  AVENUE	et address)	Room/suite	E Telephone number	<del>.</del> 355–8637
	Ameno return Applic	city or town, state or cou			· ·	G Gross receipts \$ H(a) is this a group re	9,653,231.
	ition pendir					for affiliates?  H(b) Are all affiliates inc	Yes X No
			(insert no.) 4947(a)(1) or	527		If "No," attach a	list. (see instructions)
		FBCRICHMOND.ORG	ust X Association Oth	har .	1. 1/	H(c) Group exemption	
		organiaation Laboration	ust X Association Oth	her 🟲	L Year	of formation 1912 N	State of legal domicile VA
1 2	rt I	Summary		mo 1	TDE CU	DICTIAN ODC	ANTTAMIONO
& Governance	1	Briefly describe the organization's miss IN CARRYING OUT THE		es: TU A	IDE Ch	RISTIAN ORG	ANIZATIONS
ern	2	Check this box 🕨 📖 if the organi	zation discontinued its operation	ons or dispo	sed of more	than 25% of its net as	
ŏ	3	Number of voting members of the government	erning body (Part VI, line 1a)			3	15
8 9	4	Number of independent voting membe	ers of the governing body (Part	VI, line 1b)		4	15
©8	5	Total number of employees (Part V, line	e 2a)			5	0
Activities	6	Total number of volunteers (estimate if	i necessary)			6	0
ct	7a	Total gross unrelated business revenu	e from Part VIII, column (C), line	e 12		7a	0.
<b>S</b>	Ь	Net unrelated business taxable income	e from Form 990-T, line 34			7b	0.
						Prior Year	Current Year
⊒•	8	Contributions and grants (Part VIII, line	∍ 1h)			196,359.	902,830.
ے ق	9	Program service revenue (Part VIII, line	e 2g)				
		nvestment income (Part VIII, column (	<59,660.	> <608,327.>			
SCANNED JUL		Other revenue (Part VIII, column (A), Iir		)		6,230.	281.
<b>Z</b>		Total revenue - add lines 8 through 11				142,929.	294,784.
రా		Grants and similar amounts paid (Part		<u> </u>		1,380,326.	1,023,301.
S		Benefits paid to or for members (Part I					
ø		Salaries, other compensation, employe		, lines 5·10)			
Expenses		Professional fundraising fees (Part IX,					
ē		Total fundraising expenses (Part IX, co	_				
ũ						127,202.	135,642.
	18	Other expenses (Part IX - plumin (A), li Total expenses: Add lines 13-17 (must	regual Part IX column (A) line	25)		1,507,528.	1,158,943.
	19	Revenue less expenses. Subtractilne	18 from line 12	_0,		<1,364,599.	
es		3 JUN 2 1 2010 9	70 110 11 11 12 12 12 12 12 12 12 12 12 12 12		86	ginning of Current Year	End of Year
Assets or d Balances	20	Total assets (Part X. line 16)			-	18,050,899.	16,907,475.
Ass Ba	21	Total liebilities (Part X, line 26)				305,481.	397,726.
E E	22	vet asser 6 Luna balances Subtract	line 21 from line 20			17,745,418.	16,509,749.
	irt II	Signature Block	inte 21 from time 20	***		, ,	_ + /
L		Under penalties of perjury, I declare that I have ex and complete Declaration of preparer (other than	amined this return, including accompanyl officer) is based on all information of whice	ing schedules a	ind statements, any knowledge	and to the best of my knowled	ge and belief, it is true, correct,
				ta		1 1.	+/10
Sig	1	Signature of officer		1 vea	no	Date	7/10
Her	е	Signature of officer	A 8			Date	
		<u> </u>	(1)	<del></del>			
	<del></del>	Type or print name and title Preparer's		Date			er's identifying number structions)
Paid		signature Modo	& have	06/1	4/10 sel	ployed 🕨 🔲	<u> </u>
•	arer's	Firm's name (or LANE & ASS	OCIATES, P.C.			EIN ►	
USB	Only	self-employed), 2839 HATHA	•				
		address, and ZIP + 4 RICHMOND,				Phone no ► (	804)272-7421
May	the II	S discuss this return with the prepare		ons)			X Yes No

Pai	art III Statement of Program Service Accomplishments		70130 Fage 2
1	Briefly describe the organization's mission:  TO PROVIDE HELP & SUPPORT TO THE MINISTRIES OF FIRST THE COMMUNITY, AND STATE, NATIONAL AND INTERNATIONAL		
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?		Yes X No
3	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program service.	ces <sup>9</sup>	Yes X No
4	If "Yes," describe these changes on Schedule O.  Describe the exempt purpose achievements for each of the organization's three largest program services to	by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount allocations to others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Code: )(Expenses \$ 1,023,301. including grants of \$ 1,023,301.  THE ENDOWMENT PROVIDED GRANTS TO VARIOUS ORGANIZATION LIST.		ATTACHED )
4b	(Code: ) (Expenses \$ including grants of \$	) (Revenue \$	)
4c	Code: ) (Expenses \$ Including grants of \$	) (Revenue \$	)
4d	Other program services. (Describe in Schedule O.)		
4e	(Expenses \$ Including grants of \$ ) (Revenue \$		
			Form <b>990</b> (2009)

Form	990 (2009) INCORPORATED	54-0858196 Page	<u> 3</u>
Par	IV Checklist of Required Schedules		
		Yes N	0
1	s the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation	n)?	

			163	.10
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	_X_	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	_		
_	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			х
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		Х
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			Х
•	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	9		Х
40	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?	10		Х
	If "Yes," complete Schedule D, Part V  Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X	10		
11		11	Х	
	as applicable  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			••••
	Part VI			
	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	}		
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	ļ		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		Ì	l
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	ļ	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			,,
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals		1	v
	located outside the United States? If "Yes," complete Schedule F, Part III	16	<del> </del> -	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<del> </del>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<del> </del>	<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part Vill, line 9a? If "Yes,"	1.0		X
	complete Schedule G, Part III	20	+	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		990	(2009)
		· OIII		(

Form 990 (2009) INCORPORATED

Part IV Checklist of Required Schedules (continued)

Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
		v	
United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			v
	22		X
, , , , , , , , , , , , , , , , , , , ,			
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	240		
	250		Х
	25a		
	25h		Х
·	230		
	26		Х
	27		х
	- <del></del>		· · · · · · · · · · · · · · · · · · ·
•	28a	Ì '	х
			X
	28c		Х
	29		X
	30		X
•			[
	31		X
	32		X
	33		X
Was the organization related to any tax-exempt or taxable entity?		İ	
If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	ļ	X
Is any related organization a controlled entity within the meaning of section 512(b)(13)?		1	
If "Yes," complete Schedule R, Part V, line 2	35		X
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	X
Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1	
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	ļ	X
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		1	
Note. All Form 990 filers are required to complete Schedule O.	38		
{	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)?  If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	Did the organization answer "Yes" to Part VII, Section A. Ine 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I. Part IV Pes, "complete Schedule I. Part IV Pes," complete Schedule I. Part IV Pes, "complete Schedule I. Part IV Pes," complete Schedule I. Part IV Pes, "complete Schedule I. Part IV Pes," complete Schedule I. Part IV Pes, "complete Schedule I. Part IV Pes, "complete Schedule I. Part IV Pes," complete Schedule I. Part IV Pes, "complete Schedule I. Part IV Pes," complete Schedule I. Part IV Pes, "complete Schedule I. Part IV Pes," complete Schedule I. Part IV Pes, "complete Schedule I. Part IV Pes," complete Schedule I. Part IV Pes, "complete Schedule I. Part IV Pes," complete Schedule I. Part IV Pes, "complete Schedule I. Part IV Pes," complete Schedule I. Part IV Pes, "complete Schedule I. Part IV Pes," complete Schedule I. Part IV Pes, "complete Schedule I. Part IV Pes, "complete Schedule I. Part IV Pes," complete Schedule I. Part IV Pes, "complete Schedule I. Part IV Pes," complete Schedule I. Part IV Pes, "complete Schedule I. Part IV Pes," complete Schedule I. Part IV Pes, "complete Schedule I. Part IV Pes," complete Schedule I. Part IV Pes, "complete Schedule I. Part IV Pes, "complete Schedule I. Part IV Pes, "complete Schedule II Pes IV Pes, "complete Schedule II Pes IV Pes, "complete Schedule II Part IV Pes, "complete Schedule II Pes IV Pes IV Pes IV Pes IV Pes I	Did the organization answer "Yes" to Part VII, Section A, Ine 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, Part II Was the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the said day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25 Did the organization maintain an escrow account other than a refunding secrew at any time during the year to defease any tax-exempt bonds?  Did the organization act as an "on behalf of issuer for bonds outstanding at any time during the year? defease any tax-exempt bonds?  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II was a loan to or by a current or former officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part IV was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV was the organization are contributions for a person related to such an individual? If "Yes," complete Schedule L, Part IV an entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV an entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV an officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV and the org

Form 990 (2009)

INCORPORATED

			•		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		_			
	U.S. Information Returns. Enter -0- if not applicable	1a	0	4		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	ble gaming			
	(gambling) winnings to prize winners?		1	1c		<u>X</u>
<b>2</b> a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	0	┪		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see					1.7
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ed by t	his return?	3a	ļ	X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
<b>4</b> a	At any time during the calendar year, did the organization have an interest in, or a signature or other		· ·	١.	'	v
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		<u>X</u>
b	If "Yes," enter the name of the foreign country:					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Banka	and			
_	Financial Accounts.			-		X
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		•	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transit			5b		
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regi- Tax Shelter Transaction?	aromy	Frombited	5c		
6-	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t	he ora	anization policit	30		
oa	any contributions that were not tax deductible?	ne org	anization solicit	6a		Х
<b>.</b>	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions c	r aifts	"		
U	were not tax deductible?		y ginto	6b	1	
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods	and services			
Ī	provided to the payor?			7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	•		7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	vas rec	luired			
	to file Form 82827			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		]		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a	persor	nai			
	benefit contract?	-		7e	<u> </u>	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit confi	tract?		7f_		<u> </u>
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required		•	79		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-	C as re	equired?	7h	ļ	ļ
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting o					
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have ex-	cess b	usiness holdings			
	at any time during the year?			8	-	
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a	<del> </del>	<del> </del>
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	· ·	
10	Section 501(c)(7) organizations. Enter:	100	į.			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	מטו	<del></del>	1		
11	Section 501(c)(12) organizations. Enter:	11a	1	1		
a	Gross income from embers or shareholders	118		1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	116				
122	amounts due or received from them)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a		1
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				<u> </u>
	" 100, Onto the amount of tax exempt interest received of accuracy defined from		·	Forn	990	(2009)

54-0858196 Page **6** 

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?  10b	Sec	tion A. Governing Body and Management		_				
b Enter the number of voling members that are independent  Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees?  Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or frustees, or key employees to a management company or other person?  Did the organization have may significant changes to its organizational documents since the prior form 990 was filled?  Did the organization have members or stockholders?  Does the organization have members or stockholders?  Did the organization contemporaneously document the meetings held or written actions underfaken during the year by the following:  The poverning body?  Did the organization contemporaneously document the meetings held or written actions underfaken during the year by the following:  The governing body?  Did the organization contemporaneously document the meetings held or written actions underfaken during the year by the following:  The governing body?  Did the organization contemporaneously document the meetings held or written actions underfaken during the year by the following:  The governing body?  Did the organization contemporaneously document the meetings held or written actions underfaken during the year by the following:  The governing body?  Did the organization have all the governing body?  Did the organization have witten policies and procedures in Schedule O  Section B. Policies (This Section B enguests inferiments and addresses in Schedule O  Section B. Policies (This Section B enguests inferiments and addresses in Schedule O  Section B. Did the process for detarmining compensation with the policies and procedures governing body before filing the form?  The sharp organization have a written						.	Yes	No
Did any officer, director, trustees, or key employee have a farmly relationship or a business relationship with any other officer, director, trustees, or key employees to a management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?  3	1a	Enter the number of voting members of the governing body	1a					
officer, director, fusites, or key employee?  3 Ded the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors of fusitess, or key employees to a management company or other person?  4 Did the organization have make any significant changes to its organizational documents aince the pinor Form 990 was filled?  5 Did the organization have members or stockholders?  6 Does the organization have members or stockholders. Or other persons who may elect one or more members of the governing body?  5 Did a be organization have members or stockholders. Or other persons who may elect one or more members of the governing body?  5 Did a be organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  5 The governing body?  6 Each committee with authority to act on behalf of the governing body?  7 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If I 'Yes,' provide the names and addresses in Schedule O  5 Section B. Politicies (The Section B requests information about periodices not required by the Internal Revenue Code).  10a Does the organization have local chapters, branches, or affiliates?  10 If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?  11 A bescribe in Schedule O the process, if any, used by the organization to rewer this Form 990.  12 Does the organization have a written conflict of interest policy? If 'Yos,' go to line 13  13 A b are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  15 Did the process for determining compensation of the following persons include a review and approval by independent persons, companibility data, and contemporaneo	ь				15			
Did the organization delegate control over management duties customarily performed by or under the direct supervision of efficers, directors or trustees, or key employees to a management company or other person?  Did the organization become aware during the year of a material diversion of the organization's assets?  Did the organization become aware during the year of a material diversion of the organization's assets?  Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?  By the following:  The power of the organization have members, stockholders, or other persons who may elect one or more members of the governing body?  By the following:  The powering body?  By the following:  The powering body and the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  The powering body?  By the powering body?  By the following:  The powering body?  The powering bod	2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with	any other				
of officers, directors or frustees, or key employees to a management company or other person?  4					<u> </u>	2		<u>X</u>
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Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization is CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization's CEO, Executive Director, or top management official  The organization is CEO, Executive Director, or top management official  The organization is CEO, Executive Director, or top management official  The organization is CEO, Executive Director, or top management official  The organization is CEO, Executive Director, or top management official  The organization is CEO, Executive Director, or top management official  The organization is certificated in the organization is certificated in a point venture or similar arrangement with a taxable entity during the year?  The organization is a point venture or similar arrangement with a taxable entity during the year?  The organization is a point venture or similar arrangement with a taxable entity during the year?  The organization is a point venture or similar arrangement with a taxable entity during the organization to evaluate its participation in joint venture arrangement with a taxable entity during the organization to evaluate its participation or joint venture arrangement with a taxable entity during the organization to evaluate its participation or subject of the organization in joint venture arrangement with a taxable entity during the organization to evaluate its participation or joint venture or similar arrangement with a taxable entity during the organization to evaluate its participation or joi	13					$\neg$		X
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persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  a The organization's CEO, Executive Director, or top management official  b Other officers or key employees of the organization  if 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  b if 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed NONE  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  Own website Another's website X Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.  State the name, physical address, and telephone number of the person who possesses the books and records of the organization: TREASURER - 804-355-8637  2709 MONUMENT AVENUE, RICHMOND, VA 23220-2671			al by i	ndependent				
a The organization's CEO, Executive Director, or top management official  b Other officers or key employees of the organization  if 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)  16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a  taxable entity during the year?  b if 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  16b ✓  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed ► NONE  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  □ Own website □ Another's website ▼ Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.  20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► TREASURER − 804−355−8637  2709 MONUMENT AVENUE, RICHMOND, VA 23220−2671				•	ĺ			
b Other officers or key employees of the organization  If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)  16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a  taxable entity during the year?  b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed NONE  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  Own website Another's website X Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.  State the name, physical address, and telephone number of the person who possesses the books and records of the organization:  TREASURER - 804-355-8637  2709 MONUMENT AVENUE, RICHMOND, VA 23220-2671	а				1	5a		X
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)  16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  16a X  16a X  16a X  16b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE  18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  □ Own website □ Another's website X Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.  20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ TREASURER − 804−355−8637  2709 MONUMENT AVENUE, RICHMOND, VA 23220−2671	b	•			1	5b		X
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE  18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  □ Own website □ Another's website ▼ Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.  20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ TREASURER − 804−355−8637  2709 MONUMENT AVENUE, RICHMOND, VA 23220−2671	•							
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b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed NONE  18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  Own website Another's website X Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.  20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:  TREASURER - 804-355-8637  2709 MONUMENT AVENUE, RICHMOND, VA 23220-2671					1	6a	<del></del>	X
Exertion C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE  18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  □ Own website □ Another's website ▼ Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.  20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ TREASURER − 804−355−8637  2709 MONUMENT AVENUE, RICHMOND, VA 23220−2671	ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva-	aluate	its participation	1			
Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE  18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  □ Own website □ Another's website ▼ Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.  20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ TREASURER - 804-355-8637  2709 MONUMENT AVENUE, RICHMOND, VA 23220-2671		in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	janiza	ion's				
<ul> <li>List the states with which a copy of this Form 990 is required to be filed ► NONE</li> <li>Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.         <ul> <li>Own website</li> <li>Another's website</li> <li>Upon request</li> </ul> </li> <li>Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.</li> <li>State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► TREASURER - 804-355-8637</li> <li>2709 MONUMENT AVENUE, RICHMOND, VA 23220-2671</li> </ul>		exempt status with respect to such arrangements?			1	6b		L
Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  ☐ Own website ☐ Another's website ☐ Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.  State the name, physical address, and telephone number of the person who possesses the books and records of the organization:  TREASURER − 804−355−8637  2709 MONUMENT AVENUE, RICHMOND, VA 23220−2671	Sec							
public inspection. Indicate how you make these available. Check all that apply.  ☐ Own website ☐ Another's website ☐ X Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.  20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ►	17	List the states with which a sop) or the term see a se						
Own website Another's website X Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.  20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: TREASURER - 804-355-8637  2709 MONUMENT AVENUE, RICHMOND, VA 23220-2671	18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (501	(c)(3)s only) avai	lable fo	r		
<ul> <li>Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.</li> <li>State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ►</li></ul>								
statements available to the public.  State the name, physical address, and telephone number of the person who possesses the books and records of the organization:   TREASURER - 804-355-8637  2709 MONUMENT AVENUE, RICHMOND, VA 23220-2671	10	<del></del> · · · ·	conflic	t of interest police	cy, and	fına	ncıal	
State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ►	13				. , ,			
2709 MONUMENT AVENUE, RICHMOND, VA 23220-2671	20	State the name, physical address, and telephone number of the person who possesses the books a	ınd re	cords of the orga	anizatıo	n: 🕨	·	
			_					
		ZIOS MONUMENT AVENUE, KICHMOND, VA Z3ZZU-Z071				Orm	990	(2009)

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

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

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

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

X Check this box if the organization did not co	mpensate an	y cu	rren	t off	icer	, dire	cto	r, or trustee.		
(A)	(B)			(0	<b>&gt;</b> )			(D)	(E)	(F)
Name and Title	Average	Position						Reportable	Reportable	Estimated
	hours	(cl	heck	all	that	арр	ly)	compensation	compensation	amount of
	per week	ector	ŀ					from the	from related organizations	other compensation
	WEEK	individual trustee or director				page		organization	(W-2/1099-MISC)	from the
		ustbe	nstitutional trustee		8	pens		(W-2/1099-MISC)	,	organization
		쿭	foral		S S	yee yee	_			and related
		Individ	lns#	Officer	Key employee	Highest compensated employee	Form			organizations
SUSAN S. BEACH			-							
DIRECTOR	1.00	Х						0.	0.	0.
KIM O. BOYS		-	$\vdash$		-					
TREASURER	3.00	X	İ	Х				0.	0.	0.
THOMAS N. CHEWNING	<u> </u>				_	$\dagger$				
VICE PRESIDENT	1.00	x		Х				0.	0.	0.
VIRGINIA S. DARNELL		-				T	<del>                                     </del>			
SECRETARY	1.00	X		X	}			0.	0.	0.
CHARLOTTE K. EVANS			<del>                                     </del>			$\vdash$				
DIRECTOR	1.00	Х		1				0.	0.	0.
E. BRUCE HEILMAN										
DIRECTOR	1.00	X						0.	0.	0.
CARL W. JOHNSON				ŀ						
PRESIDENT	1.00	X		X				0.	0.	0.
LINN P. KRECKMAN						}				
DIRECTOR	1.00	X				<u> </u>	<u> </u>	0.	0.	0.
JAMES E. KULP			l							
DIRECTOR	1.00	X	<u> </u>			$oxed{igspace}$	L	0.	0.	0.
MICHAEL L. LIPFORD										
DIRECTOR	1.00	X	ļ	ļ		_	L-	0.	0.	0.
BURTON M. (MAC) MARSHALL				ĺ		1				0
DIRECTOR	1.00	Х		_	-	-	-	0.	0.	0.
JAMES E. MARKHAM	1 00								0.	0.
DIRECTOR	1.00	X	├	├-	├	-	1	0.	<u> </u>	
JAMES W. NORVELLE	1 00	,				1		0.	0.	0.
DIRECTOR	1.00	X	$\vdash$	├	┢		H	0.		
JULIA O. SCOTT DIRECTOR	1.00	J						0.	0.	0.
CHARLES W. TYSINGER	1.00	1	╁╌	╁	$\vdash$	┼	-		- 0.	
DIRECTOR	1.00	v	ŀ		1			0.	0.	0.
DIVECTOR	1.00	1	$\vdash$	╁	╁	+-	+-		<u> </u>	<del>                                     </del>
										[
		t	T		+-	+	$\vdash$			
		1								1
	<u> </u>	1		-	٠		<del></del>	<del></del>		- 000

Form 990 (2009)

	(A) Name and title	(B) Average			(C Posi	-	ì		( <b>D)</b> Reportable	<b>(E)</b> Reportable		Est	(F) ımate	:d
			Individual trustee or director	eck	all 1		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MIS	,	comp fro orga and	ount of other pensa- om the inization relate nization	tion e ion ed
<del></del>	. <u>- 199</u> 0													
			-											
				<u> </u>			Ļ		0.		0.			0
	mber of individuals (including bustion from the organization	t not limited to t	hose	list	ed a	bov	e) w	ho r	·	0,000 in reportabl			Yes	No
line 1a?	organization list any former office If "Yes," complete Schedule J fo	r such individua	i				-					3		х
and relat	individual listed on line 1a, is the ted organizations greater than \$ person listed on line 1a receive o	150,000? <i>If</i> "Yes	s," cc	mpi	ete	Sch	edul	e J t	for such individual			4		х
the orga	nization? <i>If</i> "Yes," complete Sch											5		Х
1 Complet	te this table for your five highest	compensated in	dep	end	ent d	cont	ract	ors t	that received more than	\$100,000 of com	pens	ation f	rom	
the orga	Name and busine	ss address							(B) Description of	services	С	(C ompe		'n
2 Total nu	mber of independent contractor	s (includina but	not l	ımıte	ed to	the	ose li	stec	d above) who received	more than		······		<del></del>
	O in compensation from the orga	-					0							

Form					TED				54-085	8196 Page <b>9</b>
Par	t V	Ш	Statement of Rever	nue						
				·			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
at st	1 ;	а	Federated campaigns		1a					
Contributions, gifts, grants and other similar amounts	ı	b	Membership dues		1b	_	_			
a, E	(	C	Fundraising events		1c					
<u> </u>	(		Related organizations		1d		_			
Sim			Government grants (contribut		1e		4			
اع کے	1		All other contributions, gifts, gran			902,830				
불형			similar amounts not included abo		1f	302,030				
9 5		_	Noncash contributions included in lines  Total. Add lines 1a-1f	s 1a-1r 3		<b>&gt;</b>	902,830			
			Total: Add lines fa fi			Business Co				
ایو	2 :	а				<u> </u>	<u></u>			
Program Service Revenue		b								
နှင့်		С								
E a		d								
<u> </u>		е								
مَ ا		f	All other program service reve	enue				ļ		
		9	Total. Add lines 2a-2f				<u> </u>			
	3		Investment income (including	dividenc	ls, intere	est, and	450 493			450,483.
1			other similar amounts)				450,483	•		430,403.
	4		Income from investment of ta	ix-exemp	t bona p	roceeds			-	<del> </del>
	5		Royalties	(0.5	Real	(II) Persona	1			
- 1	6	2	Gross Rents	10.1	icai_	(II) r el solita	<del>'-</del>			
İ			Less. rental expenses				7			` `
			Rental income or (loss)							
1			Net rental income or (loss)			)	·		<u> </u>	
ŀ	7	а	Gross amount from sales of		urities	(ii) Other				
			assets other than inventory	8299	637.					
İ		b	Less: cost or other basis							
-			and sales expenses	9358						
			Gain or (loss)	<105	8810	1	-1050010			<1058810.>
			Net gain or (loss)		, .		<1058810	•		71030010.
ě	8	а	Gross income from fundraising							
Ver			including \$contributions reported on line							
æ			Part IV, line 18	e 10). See	a					
Other Revenue		b	Less: direct expenses		b					
0			Net income or (loss) from fun	draising	events					
	9	а	Gross income from gaming a	ctivities.	See					
			Part IV, line 19		а					
			Less: direct expenses		b					
ĺ			Net income or (loss) from gar		/ities		<b>&gt;</b>		-	
	10	а	Gross sales of inventory, less	s returns						
			and allowances		a					
			Less: cost of goods sold		b	L				
ł		<u>c</u>	Net income or (loss) from sal Miscellaneous Reven		entory	Business Co	do			
ŀ	11	2	-			Dusiness Co	ide:	İ		†
	• •	a b						1		<del>                                     </del>
		c			<del></del>					
		ď	All other revenue				281			281.
		e	Total. Add lines 11a-11d			)	281			
	12		Total revenue. See instructions				294,784	0.	.  0	.<608,046.
93200 02-04	9 -10									Form <b>990</b> (2009)

### Form 990 (2009)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must compl	lete column (A) but are	not required to comple	ete columns (B), (C), and	d (D).
	not include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	1,023,301.	1,023,301.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal				<u>.</u>
c	Accounting	2,850.		2,850.	
ď	Lobbying				-
-	Professional fundraising services See Part IV, line 17				
f	Investment management fees	68,803.		68,803.	
g	Other	·			
12	Advertising and promotion	· · · · · · · · · · · · · · · · · · ·			
13	Office expenses				
14	Information technology				
15	Royalties .				
16	Occupancy				
17	Travel	-			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	56,986.		56,986.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	3,555.	<del></del> -	3,555.	
24	Other expenses Itemize expenses not covered	•			
	above (Expenses grouped together and labeled				
	miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
а	OTHER EXPENSES-MNGMNT-9	3,448.		3,448.	
b		•			
c			****		
d					
e			""		
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	1,158,943.	1,023,301.	135,642.	0.
26	Joint costs Check here Infollowing	, ,	, , , , , , , , , , , , , , , , , , , ,		
_•	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

Part	X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1	
	2	Savings and temporary cash investments		102,173.	2	365,521
ĺ	3	Pledges and grants receivable, net			3	180,859
	4	Accounts receivable, net		105,479.	4	15,171
	5	Receivables from current and former officers, director	ors, trustees, key			
		employees, and highest compensated employees.	Complete Part II			
		of Schedule L			5	
	6	Receivables from other disqualified persons (as defin	ned under section			
		4958(f)(1)) and persons described in section 4958(c)	(3)(B). Complete			
i		Part II of Schedule L			6	
ا ير	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
₹	9	Prepaid expenses and deferred charges			9	
			1			
		basis. Complete Part VI of Schedule D 10	a			
1	ь	Less: accumulated depreciation 10			10c	
1	11	Investments - publicly traded securities		14,042,445.	11	12,304,310
	12	Investments other securities See Part IV, line 11		22,022,000	12	
- 1	13	Investments - program-related See Part IV, line 11			13	
l i	14	Intangible assets		14		
i	15	Other assets. See Part IV, line 11	3,800,802.	15	4.041.614	
	16	Total assets. Add lines 1 through 15 (must equal lin	18,050,899.	16	4,041,614 16,907,475	
	17	Accounts payable and accrued expenses	20,000,0220	17		
1	18	• •		8,864.	18	8,864
	19	Grants payable Deferred revenue		0/0510	19	
1					20	
- 1	20	Tax-exempt bond liabilities	IV of Cohodula D		21	
.≌ ∣	21	Escrow or custodial account liability. Complete Part			21	
	22	Payables to current and former officers, directors, tr				
<u> 2</u> .		highest compensated employees, and disqualified p	ersons. Complete Part II		22	
		of Schedule L	AL	<u></u>	23	
	23	Secured mortgages and notes payable to unrelated			24	
- 1	24	Unsecured notes and loans payable to unrelated the	ro parties .	296,617.	25	388,862
- 1	25	Other liabilities. Complete Part X of Schedule D		305,481.	26	397,726
-+	26	Total liabilities. Add lines 17 through 25		303,401.	20	3317120
		Organizations that follow SFAS 117, check here	and complete			
Ses		lines 27 through 29, and lines 33 and 34.				
<u>ĕ</u>	27	Unrestricted net assets			27	
Ba	28	Temporarily restricted net assets			28	
2	29	Permanently restricted net assets	ু ত		29_	· · · · · · · · · · · · · · · · · · ·
급		Organizations that do not follow SFAS 117, check	k here ▶ X and			
ō		complete lines 30 through 34.			_	^
Set	30	Capital stock or trust principal, or current funds		0.	30	0
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or equip		0.	31	16 500 740
<u>ĕ</u>	32	Retained earnings, endowment, accumulated incom	ne, or other funds	17,745,418.	32	16,509,749
-	33	Total net assets or fund balances		17,745,418.	33	16,509,749
	34	Total liabilities and net assets/fund balances		18,050,899.	34	16,907,475

Form **990** (2009)

### FIRST BAPTIST CHURCH ENDOWMENT FUND,

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

54-0858196 Page 12 Form 990 (2009) INCORPORATED Part XI Financial Statements and Reporting Yes Accounting method used to prepare the Form 990. X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X **b** Were the organization's financial statements audited by an independent accountant? 2ь c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: Separate basis Consolidated basis Both consolidated and separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit X За

3ь

Form 990 (2009)

Act and OMB Circular A-133?

# SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

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

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

2009

Open to Public Inspection

Name of the organization

FIRST BAPTIST CHURCH ENDOWMENT FUND, INCORPORATED

Employer identification number 54-0858196

Part I	Reason f	or Public Chari	ty Status (All organiz	ations mus	st complet	e this part	) See inst	ructions		
The organ	nization is not a	private foundation t	pecause it is: (For lines 1	through 1	1, check o	only one b	ox)			
1 🗀			, or association of churc					•		
2 🔲	A school desc	cribed in section 17	<b>0(b)(1)(A)(ii).</b> (Attach Scl	hedule E.)						
з 🗔	A hospital or a	a cooperative hospit	al service organization o	described i	n section	170(b)(1)(	A)(iii).			
4 🔲	A medical res	earch organization o	perated in conjunction	with a hos	pıtal descr	ibed in <b>se</b>	ction 170	(b)(1)(A)(iii	i). Enter t	he hospital's name,
	city, and state	e:								
5 🗀	An organization	on operated for the l	benefit of a college or un	niversity ov	wned or op	erated by	a governr	mental unit	describe	ed in
	section 170(	<b>b)(1)(A)(iv).</b> (Comple	ete Part II )							
6	A federal, stat	te, or local governme	ent or governmental unit	t described	d in section	n 170(b)(1	)(A)(v).			
7 🗀	An organization	on that normally rec	eives a substantial part o	of its supp	ort from a	governme	ntal unit o	r from the	general p	oublic described in
	section 170(l	o)(1)(A)(vi). (Comple	te Part II.)							
8 🗔	A community	trust described in s	ection 170(b)(1)(A)(vi). (	(Complete	Part II)					
9			eives: (1) more than 33 1							
			nctions - subject to certa							
	income and u	nrelated business ta	axable income (less sect	tion 511 ta	x) from bu	sinesses a	cquired b	y the orga	nization a	after June 30, 1975
_		509(a)(2). (Complete	•							
10			perated exclusively to te							_
11 X			perated exclusively for the							
			itions described in section				). See sec	ction 509(a	a)(3). Che	eck the box that
		<u> </u>	organization and comple							1
	a X Type I			Тур					σ L	Type III · Other
e			t the organization is not							
			han one or more publich						9(a)(1) or	section 509(a)(2).
f	_		ten determination from t	the IRS tha	atitisa iy	ре і, туре	II, or Type	9 111		<u></u>
		ganization, check th		•		<b>.</b>	-646 - 6-11			لـــا
g			organization accepted ar							Yes No
			rectly controls, either al	one or tog	etner with	persons c	escribed	m (n) ano (	iii) below,	11g(i) X
			upported organization?	-			-			11g(ii) X
		•	n described in (i) above?		o2	•	-	•		11g(iii) X
			person described in (i) about the supported or				•			(119/11/)
h	Provide the id	Showing information	about the supported of	gariization	(5).					
		// FIN	(iii) Type of	(iv) is the o	organization	(v) Did voi	notify the	(vi) Is	the	(vii) Amount of
• •	e of supported ganization	(iı) EIN	organization		sted in your	organizat		organization (i) organiz	on in col   ed in the i	support
01	yamzation		(described on lines 1-9 above or IRC section	governing	document?	(i) of you	r support?	ÜS	2	******
			(see instructions))	Yes	No	Yes	No	Yes	No	
SEE I	PART III	,								
	4A SC		5,6		X		X		Х	1,023,301.
			7	1	ļ	<u> </u>				
			12	<u> </u>						
									ļ	
			1	1		1	1	I	1	

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

1,023,301.

932021 02-08-10

Section A. Public Support		· · · · · · · · · · · · · · · · · · ·	1		1	
Calendar year (or fiscal year beginning in)▶_	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
Include any "unusual grants ")					ļ	
2 Tax revenues levied for the organ-						
ization's benefit and either paid to					•	
or expended on its behalf		ļ				
3 The value of services or facilities		1				
furnished by a governmental unit to						
the organization without charge		-				
4 Total. Add lines 1 through 3					ļ <del></del>	_
5 The portion of total contributions						
by each person (other than a						
governmental unit or publicly						
supported organization) included						
on line 1 that exceeds 2% of the						
amount shown on line 11,						
column (f)				ļ		
6 Public support. Subtract line 5 from line 4		<u> </u>	<u> </u>		<u>l</u>	
Section B. Total Support	(-) 200F	(h) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Calendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(6) 2007	(0) 2008	(e) 2009	(i) Total
7 Amounts from line 4			<del> </del>			
8 Gross income from interest,			1			
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources  9 Net income from unrelated business		<del> </del>	<del>                                     </del>			
activities, whether or not the						
business is regularly carried on						
Other income Do not include gain						
or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
2 Gross receipts from related activities, e	to (see instruct	ione)	<u> </u>		12	I
13 First five years. If the Form 990 is for the state of	-	·	rd fourth or fifth t	ax vear as a sectio	L	
organization, check this box and stop		o mot, occome, m		w., ou. uo u ooo		▶[
Section C. Computation of Public		ercentage				
14 Public support percentage for 2009 (lir			column (f))		14	
15 Public support percentage from 2008	Schedule A, Par	t II, line 14			15	
16a 33 1/3% support test - 2009. If the org	anization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
stop here. The organization qualifies a	s a publicly sup	ported organizatio	n			►□
<b>b 33 1/3% support test - 2008.</b> If the org	anızation dıd no	ot check a box on	line 13 or 16a, and	l line 15 is 33 1/3%	6 or more, check th	ns box
and stop here. The organization qualif	es as a publicly	supported organia	zation			▶∟
7a 10% -facts-and-circumstances test	- <b>2009.</b> If the org	janization did not	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
and if the organization meets the "fact	s-and-circumsta	nces" test, check	this box and <b>stop</b>	here. Explain in Pa	art IV how the orga	nızation
meets the "facts-and-circumstances" t	est. The organiz	ation qualifies as a	a publicly supporte	d organization		
b 10% -facts-and-circumstances test	- <b>2008.</b> If the org	anization did not	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
more, and if the organization meets the	facts-and-circ	umstances" test, o	check this box and	stop here. Explai	n in Part IV how the	e _
organization meets the "facts-and-circu						▶∟
18 Private foundation. If the organization		. h	0- 40L 4747			<b>L</b>

Pa	art III Support Schedule for C	Organizations	Described in	Section 509(a	)(2) (Complete only	If you checked the bo	ox on line 9 of Part I )
	ction A. Public Support				· <del>-</del>		
Cal	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per- formed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose			<del> </del>		<del>                                     </del>	
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513		·····	<del> </del>	•		
4	Tax revenues levied for the organ-			1			
	rzation's benefit and either paid to or expended on its behalf						
5	The value of services or facilities		-	-	<u></u> .		
3	furnished by a governmental unit to					}	
	the organization without charge						
6							-
	a Amounts included on lines 1, 2, and				· · ·		
•	3 received from disqualified persons						
l	b Amounts included on lines 2 and 3 received			-			
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	İ			L		
	c Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)					1111	
Se	ction B. Total Support				·		·
Cal	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6		ļ. <u>.</u>	<u></u>			
10	a Gross income from interest,			1			
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources						
	<b>b</b> Unrelated business taxable income						
	(less section 511 taxes) from businesses					•	
	acquired after June 30, 1975			ļ			
	c Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
40	regularly carried on		-		<del></del>	<del> </del>	
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV.)					-	
	Total support (Add lines 9, 10c, 11, and 12)		- 64		l	nn F01/n)/3) argani	701100
14	First five years. If the Form 990 is fo	r the organization	s tirst, second, th	ra, tourth, or titth t	ax year as a secu	on 50 I(c)(3) organi.	zation,
80	check this box and stop here ction C. Computation of Publ	lic Support Pe	rcentage		<del>-</del>	· · · · · · · · · · · · · · · · · · ·	
15				column (f))		15	%
16			-	COIGITIIT (I))		16	<u>%</u>
	ction D. Computation of Inve			······	<del></del>	1.5	
17					· · · · · · · · · · · · · · · · · · ·	17	%
18				,	-	18	<u>~</u> %
	a 33 1/3% support tests - 2009. If the			on line 14, and lin	e 15 is more than		
	more than 33 1/3%, check this box a						▶□
	b 33 1/3% support tests - 2008. If the						and
	line 18 is not more than 33 1/3%, che						▶ □
_20	Private foundation. If the organization						▶□
			<del></del>				00 or 990-EZ) 2009

# Schedule D

\_\_\_\_\_

**Supplemental Financial Statements** 

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. 2009 Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

► Attach to Form 990. ► See separate instructions.

FIRST BAPTIST CHURCH ENDOWMENT FUND,

Employer identification number 54-0858196

	INCORPORATED		54-0858196
Par	tl Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi-	sed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990,	
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or p		storically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
_	day of the tax year.		
	Say of the tacyour		Held at the End of the Tax Year
а	Total number of conservation easements		2a
h	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic sti	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	···	2d
3	Number of conservation easements modified, transferred, re		L
3	year >	neased, extinguished, or terminated by the	o organization during the tax
4	Number of states where property subject to conservation ea	seement is located	
4 5	Does the organization have a written policy regarding the pe		
3	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		<del></del>
7	Amount of expenses incurred in monitoring, inspecting, and		
	Does each conservation easement reported on line 2(d) above		
8	and section 170(h)(4)(B)(ii)?	ve satisfy the requirements of section 170	Yes No
	In Part XIV, describe how the organization reports conservat		
9			
	include, if applicable, the text of the footnote to the organiza	mon s initiaticiai statements that describes	the organization's accounting for
Do	conservation easements.  III Organizations Maintaining Collections of	of Art Historical Treasures or C	Other Similar Assets
	Complete if the organization answered "Yes" to Form		The cirman resolution
	Complete in the organization anowered Tree to Ferni		
10	If the organization elected, as permitted under SFAS 116, no	at to report in the revenue statement and h	palance sheet works of art, historical
10	treasures, or other similar assets held for public exhibition, e		
			abile service, provide, in Fart XIV, the text of
_	the footnote to its financial statements that describes these If the organization elected, as permitted under SFAS 116, to		nee shoot works of ort. historical transuites
D	- · · · · · · · · · · · · · · · · · · ·		
	or other similar assets held for public exhibition, education, of	or research in furtherance of public service	e, provide the following amounts relating to
	these items:		► •
	(i) Revenues included in Form 990, Part VIII, line 1	•	<b>-</b>
_	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical tre		ai gain, provide
	the following amounts required to be reported under SFAS 1	116 relating to these items:	<b>.</b>
a	Revenues included in Form 990, Part VIII, line 1		> s > s
Ь	Assets included in Form 990, Part X	•	<b>&gt;</b> \$

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Schedule D (Form 990) 2009

4	Describe in Part XIV the intended uses of th	e organization's endowment	funds.		
Pa	rt VI Investments - Land, Buildin	gs, and Equipment. Se	e Form 990, Part X, line	10.	
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land				····
b	Buildings				
C	Leasehold improvements				
d	Equipment				
е	Other		<u>.                                  </u>		
ata	1 Add lines 12 through 1e (Column (d) must	equal Form 000 Part X colur	nn (R) Iine 10(c) )	<b>&gt;</b>	0.

Schedule D (Form 990) 2009

Part VII Investments - Other Securities.  (a) Description of security or category	(b) Book value		Method of valuation	on.
(including name of security)	(b) Book Value	Cost or o	end-of-year marke	et value
Financial derivatives		_		
Closely-held equity interests Other				
		-		
			- <del></del>	
			<del> </del>	
Total. (Col (b) must equal Form 990, Part X, col (B) line 12 )				
Part VIII Investments - Program Related	See Form 990, Part X, line		Method of valuation	on'
(a) Description of investment type	(b) Book value		end-of-year marke	
				<del> </del>
<u></u>				<del></del>
Total. (Col (b) must equal Form 990, Part X, col (B) fine 13)				
Part IX Other Assets. See Form 990, Part X,	(a) Description			(b) Book value
REAL ESTATE LOANS	<u> </u>	<del> </del>		3,111,786.
CSV LIFE INSURANCE				929,828.
	****			4 041 614
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. See Form 990, Part			<u> </u>	4,041,614.
1. (a) Description of liability	1 A, III le 23.	(b) Amount	, , , , , , , , , , , , , , , , , , , ,	······································
Federal income taxes				
LOANS PAYABLE - LIFE INSURA	NCE	353,603.		
DUE TO OTHER FUNDS		35,259.		
		200 060		
Total. (Column (b) must equal Form 990, Part X, col (B)		388,862.		
2. FIN 48 Footnote. In Part XIV, provide the text of the uncertain tax positions under FIN 48.	100thote to the organizatio	n's iinanciai statements that	reports the orga	mzation s liabliny for
932053 02-01-10	<del></del>			dule D (Form 990) 2009

## FIRST BAPTIST CHURCH ENDOWMENT FUND,

	dule D (Form 990) 2009 INCORPORATED	·		54-0858196	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited	Financial State	ements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		
3	Excess or (deficit) for the year Subtract line 2 from line 1		3		
4	Net unrealized gains (losses) on investments		4		
5	Donated services and use of facilities		5		
6	Investment expenses		6		<del></del>
	·		7		
7	Prior period adjustments		8		<del></del>
8	Other (Describe in Part XIV)		9		
9	Total adjustments (net). Add lines 4 through 8	-1.0	<del></del>		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and		10	Datum	
	t XII Reconciliation of Revenue per Audited Financial Stateme	1112 AALILL	nevenue per r		
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1			
а	Net unrealized gains on investments	2a		_	
b	Donated services and use of facilities	2b		_	
С	Recoveries of prior year grants	2c		_	
d	Other (Describe in Part XIV.)	2d		_	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		_	
ь	Other (Describe in Part XIV.)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	
	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents With	Expenses per	r Return	
1	Total expenses and losses per audited financial statements			1	<del></del>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
-	Donated services and use of facilities	2a			
a L		2b		-	
D	Prior year adjustments	<b>———</b>		-	
C	Other losses	2c		-	
đ	Other (Describe in Part XIV)	2d		-  _	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	<del></del>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	<del></del>	4	
b	Other (Describe in Part XIV.)	4b		-	
С	Add lines 4a and 4b	•		4c	
_5_	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		<del></del>	5	
	t XIV Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	l, lines 1a ai	nd 4; Part IV, lines	1b and 2b; Part V, lin	ie 4; Part
X, lin	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp	lete this pai	rt to provide any ac	dditional information.	

Schedule D (Form 990) 2009

SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

2009 Open to Public

Inspection

» × Employer identification number 54-0858196 Yes 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection FIRST BAPTIST CHURCH ENDOWMENT FUND, Part 1 General Information on Grants and Assistance criteria used to award the grants or assistance? INCORPORATED Name of the organization

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part # Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments and	Organizations in the	United States. C	omplete if the orga	anization answered "Y	es* to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Check this box if no on	55,000. Check this	box if no one recipien	t received more th	an \$5,000. Use Pa	ie recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	(Form 990) if addition	al space is needed
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRST BAPTIST CHURCH 2709 MONUMENT AVE							χ, 13.
RICHMOND, VA 23220	54-0515710		729,901.	0.	CASH		GROUNDS, STAFF
RICHMOND BAPTIST ASSOCIATION 3111 MOSS SIDE AVENUE RICHMOND, VA 23222	54-0585400		10,000.	0	САЅН		MISSIONS
RICHMOND BAPTIST HISTORICAL SOCIETY - P.O. BOX 34, UNIVERSITY OF RICHMOND - RICHMOND, VA 23173	54-0638224		7,500.	0	САЅН		MISSIONS
VIRGINIA BAPTIST HOMES 1900 LAUDERDALE DRIVE RICHMOND, VA 23238	52-1368410		40,000.	0	саѕн		MISSIONS
VIRGINIA BAPTIST MISSION BOARD 2828 EMERYWOOD PARKWAY RICHMOND, VA 23294	54-0575807		35,000.	0	CASH		MISSIONS, NEW CHURCHES
BAPTIST WORLD ALLIANCE 405 NORTH WASHINGTON STREET FALLS CHURCH, VA 22046	53-0204667		7,500.	0	САЅН		MISSIONS

2 Enter total number of section 501(c)(3) and government organizations

3 Enter total number of other organizations
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) 2009

Page 2

Schedule 1	Schedule I (Form 990) 2009	INCORPORATED 54-0858196
Part III	Grants and Other Assis	Part iii Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22
	Use Part IV and Schedu	Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	de the information	n required in Part I,	line 2, and any other	additional information.	
PART II, LINE 1, COLUMN (H):					
NAME OF ORGANIZATION OR GOVERNMENT:	FIRST	BAPTIST CHURCH	URCH		
(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY /MUSIC /RECREATION	: COMMUN	ITY /MUSIC	/RECREATION	NC	
/TELEVISION MINISTRY, BUILDING AND GROUNDS,	GROUNDS	STAFF	ASSISTANCE,		
SCHOLARSHIPS, YOUTH TRIPS - 2009 N	2009 NEW YORK CITY	i i	/ NORTH CAROLINA,	A, MISSION	
TRIPS, AND MULTI SUPPORT MISSIONS					

SCHEDULE 1-1	Continuation Sheet for Schedule I (Form 990)	
(Form 990)	▶ Attach to Form 990 to list additional information for	
Department of the Treasury Internal Revenue Service	Schedule I (Form 990), Part II or Part III.	
Name of the organization	FIRST BAPTIST CHURCH ENDOWMENT FUND,	<b>Employer</b> ide
	INCORPORATED	54-(

OMB No 1545-0047 2009

(Form 990) Department of the Trassury Internal Reventies Service		▼ Attach to Fo Sched	► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.	itional informatic Part II or Part III.	on for		Open to Public Inspection
Name of the organization FIRST BAPTIST INCORPORATED	PTIST CHURCH ATED	CH ENDOWMENT	T FUND,			Employe 5	Employer identification number 54–0858196
Part i Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II )	r Assistance to Go	vernments and Orgai	nizations in the Ur	nited States (Sch	edule I (Form 990), Pa	μ II )	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERNATIONAL MISSION BOARD 3806 MONUMENT AVE. P.O. BOX 6767 RICHMOND, VA 23230	54-0213930		37,900.	0	CASH		HUNGER AND RELIEF
AFRICAN COMMUNITY CHRISTIAN CHURCH 2300 DUMBARTON ROAD RICHMOND, VA 23228	ar.		.000,8	0	CASH		NEW CHURCHES
BAPTIST THEOLOGICAL SEMINARY AT RICHMOND - 3400 BROOK ROAD - RICHMOND, VA 23227	54-1510076		35,000.	0.	CASH		EDUCATION AND SCHOLARSHIP
JOHN LELAND CENTER THEO STUDIES 405 N. WASHINGTON ST., SUITE 200 FALLS CHURCH, VA 22046	:		15,000.	0	CASH		EDUCATION AND SCHOLARSHIP
VIRGINIA UNION UNIVERSITY 1500 NORTH LOMBARDY STREET RICHMOND, VA 23220	54-0524516		10,000.	0	CASH		EDUCATION AND SCHOLARSHIP
CROSS OVER HEALTH SERVICES 108 COWARDIN AVENUE RICHMOND, VA 23224	54-1371067		. 002, 3	0	CASH		RICHMOND COMMUNITY MINISTRY
HABITAT FOR HUMANITY 2281 DABNEY ROAD RICHMOND, VA 23230	54-1385198		5,500.	0.	САЅН		RICHMOND COMMUNITY MINISTRY
RICHMOND FRIENDS OF HOMELESS 5209 HACKNEY RD. RICHMOND, VA 23234  LHA For Privacy Act and Paperwork Reduction Act Notice. see the Instructions for Form 990.	duction Act Notice	see the Instructions	10,000. s for Form 990.	0.	CASH		RICHMOND COMMUNITY MINISTRY Schedule 1-1 (Form 990) 2009

<sup>56</sup> 

OMB No 1545-0047 2009 Open to Public Inspection	Employer identification number 54–0858196		(h) Purpose of grant or assistance	RICHMOND COMMUNITY MINISTRY				Schedule I-1 (Form 990) 2009
	Employer ic 54-	t II.)	(g) Description of non-cash assistance	RI	-,,,,,,,			
90) on for		Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	(f) Method of valuation (book, FMV, appraisal, other)	САSH				
iedule I (Form 99 itional informati ant II or Part III.		nited States (Sch	(e) Amount of non-cash assistance	0				
Continuation Sheet for Schedule I (Form 990)  ► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.	T FUND,	izations in the Ur	(d) Amount of cash grant	10,000.				for Form 990.
Continua ▼Attach to Fo Sched	CH ENDOWMENT FUND,	vernments and Orgar	(c) IRC section if applicable					For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
	BAPTIST CHURCH	Assistance to Go	(b) EIN					uction Act Notice
	FIRST	of Grants and Other	address of government	BYRD H				and Paperwork Red
SCHEDULE 1-1 (Form 990) Department of the Tressury	Name of the organization	Part t Continuation	(a) Name and address of organization or government	ACTS (NANCY WARMAN) 224 S CHERRY ST WM BYRD H RICHMOND, VA 23220				LHA For Privacy Act

### SCHEDULE O (Form 990)

### **Supplemental Information to Form 990**

Department of the Tonesco

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

Attach to Form 990.

2009 Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

FIRST BAPTIST CHURCH ENDOWMENT FUND, INCORPORATED

Employer identification number 54-0858196

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FORM	99	0,	PART	VI,	SECT	ION (	С,	LINE	19:	GOVE	RNI	NIG	DOC	UMEI	NTS	AND	FINA	NCIA	T_
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932211 02:03-10

Schedule O (Form 990) 2009

Schedule R (Form 990) 2009 2009 Open to Public Inspection Employer identification number 54-0858196 OMB No 1545-0047 Direct controlling Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) 170(B)(1)(A)(I N/A End-of-year assets status (if section 501(c)(3)) Public charity ► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Total income Exempt Code section 501(C)(3) ▶ See separate instructions. Related Organizations and Unrelated Partnerships Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or Legal domicile (state or foreign country) foreign country) VIRGINIA CHURCH ENDOWMENT FUND, LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. ► Attach to Form 990. Primary activity Primary activity WORSHIP SERVICES FIRST BAPTIST INCORPORATED FIRST BAPTIST CHURCH - 99-999999 Name, address, and EIN Name, address, and EIN of related organization of disregarded entity e Name of the organization RICHMOND, VA 23220 2709 MONUMENT AVE Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) Part Parti

FIRST BAPTIST CHURCH ENDOWMENT FUND,

INCORPORATED

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Schedule R (Form 990) 2009 Part III

Page 2

54-0858196

managing partner? Percentage ownership Schedule R (Form 990) 2009 Seneral or Identification of Related Organizations Taxable as a Corporation or Trust (Complete of the organization answered "Yes" to Form 990, Part IV, line 34 because of had one or more related organizations treated as a corporation or trust during the tax year.) Ξ Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets  $\equiv$ ate allocations? Disproportion-Yes Ξ Share of total income Share of end-of-year assets 6 Type of entity (C corp, S corp, or trust) ত্র Share of total income Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) ত্ত <u>e</u> Legal domicile (state or foreign country) O Direct controlling entity Primary activity ন্ত 3 Legal domicile (state or foreign country) Û Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization 932162 02-04-10 Part IV

# FIRST BAPTIST CHURCH ENDOWMENT FUND, INCORPORATED

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36)

Page 3

54-0858196

Schedule R (Form 990) 2009

Mark Consider for a discovered to lead in Death II II and a discovered in		3	1-
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	11:1/2	- Les	S.
a Receipt of (i) interest (ii) annutities (iii) royalties or (iv) rent from a controlled entity		- e-	×
<b>b</b> Gift, grant, or capital contribution to other organization(s)		4	×
c Gift, grant, or capital contribution from other organization(s)		10	×
		<b>1</b>	×
e Loans or loan guarantees by other organization(s)		1e	×
f Sale of assets to other organization(s)		=	×
g Purchase of assets from other organization(s)		19	×
h Exchange of assets		ŧ	×
i Lease of facilities, equipment, or other assets to other organization(s)		:=	×
			- :
Lease of facilities, equipment, or other assets from other organization(		ij	×
k Performance of services or membership or fundraising solicitations for other organization(s)		*	×:
		7	× :
m Sharing of facilities, equipment, mailing lists, or other assets		Ę	×
n Sharing of paid employees		7	×
o Reimbursement paid to other organization for expenses		0	×
			<b> </b> >
p Reimbursement paid by otner organization for expenses		d 1	د
q Other transfer of cash or property to other organization(s)		19	×
r Other transfer of cash or property from other organization(s)		11	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	ships and transaction thresholds.		
<b>(a)</b> Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved	ved
(1)			
(2)			
(3)			
(4)			
(5)			:
(9)			
331	Schedu	Schedule R (Form 990) 2009	0) 2009

Page 4

54-0858196

INCORPORATED

FIRST BAPTIST CHURCH ENDOWMENT FUND,

Schedule R (Form 990) 2009

Part Vi Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

נומו אנט וכן מיומוס כות מיומוט ביינות			,		9		14
(e)	(g)	<u>(</u> )	<u>(</u>	(a)		6	
Name, address, and EIN	Primary activity	Legal domicile	Are all partners section 501(c)(3)	Share of end-of-	Dispropor- tionate	Code V-UBI	General or managing
of entity		(state or foreign country)	Yes No	year assets		of Schedule K-1 (Form 1065)	
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932164 02-04-10

Schedule R (Form 990) 2009

# FIRST BAPTIST CHURCH ENDOWMENT FUND, INCORPORATED Director Addresses

Susan S. Beach	2003 Westover Hills Boulevard	Richmond VA 23225
Kim O. Boys	3501 Cheyenne Road	Richmond VA 23235
Thomas N. Chewning	4800 Lockgreen Circle	Richmond VA 23236
Virginia S. Darnell	7235 Brandy Branch Mill Rd	Mechanicsville VA 23111
Charlotte K. Evans	8393 Knollwood Court	Mechanicsville VA 23116
E. Bruce Heilman	4700 Cary Street Road	Richmond VA 23226
Carl W. Johnson	2232 Waters Mill Circle	Richmond VA 23235
Linn P. Kreckman	1134 West Avenue	Richmond VA 23220
James E. Kulp	9304 Erlwood Road	Richmond VA 23229
Michael L. Lipford	9904 River Road	Richmond VA 23238
Burton M. (Mac) Marshall	12717 Fox Meadow Drive	Richmond VA 23233
James E. Markham	11424 River Run Drive	Glen Allen VA 23059
James W. Norvelle	2013 Cedar Cone Drive	Richmond VA 23233
Julia O. Scott	2200 Sommie Lane	Richmond VA 23229
Charles W. Tysinger	410 St. Christopher Road	Richmond VA 23226