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Form **990**

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)

2009
Open to Public

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

Open to Public Inspection

A	For the	2009 cal	lendar year, or tax year beginning $$	JUN 30, 2010)
В	Check if	Please	C Name of organization	D Employer identif	ication number
Γ	Addres		DIGINOND TENTON HOUNDAMION		
_	change Name change	type	RICHMOND JEWISH FOUNDATION Doing Business As	─ 54-1	1623966
F	lnitial lreturn	See	Number and street (or P.O. box if mail is not delivered to street address) Room/si		
	Termin	Specific Instruc-	EAG2 MONUMENT ATTENTIO		-545-8656
	Amend return		City or town, state or country, and ZIP + 4	G Gross receipts \$	5,344,701.
	Application pendin		Richmond, VA 23226	H(a) Is this a group	
		F Nan	me and address of principal officer. Robert I. Nomberg	for affiliates?	Yes X No
	Tay ava		03 Monument Avenue, Richmond, VA 23226 us X 501(c)(3) ◀ (insert no)	H(b) Are all affiliates in	
			us X 501(c)(3) ◀ (insert no)	H(c) Group exempti	a list (see instructions)
					M State of legal domicile: VA
_		Summ			
ø			scribe the organization's mission or most significant activities: The Rich		
່ ໕U≬[∤ Governance			primary, trusted and expert resource fo		
&U ∭ overna	li .		is box I if the organization discontinued its operations or disposed of n	1	l .
 Go			of voting members of the governing body (Part VI, line 1a)	3	0.5
20 00 20 00 20 00	i		of independent voting members of the governing body (Part VI, line 1b) hber of employees (Part V, line 2a)	5	3
I LD & • Activities &	1		nber of volunteers (estimate if necessary)	. 6	4.0
iệ L	1		ss unrelated business revenue from Part VIII, column (C), line 12	7a	
~ ~	b	Net unrela	ated business taxable income from Form 990-T, line 34	7b	
ĺ				Prior Year	Current Year
ě	1		cions and grants (Part VIII, line 1h)	684,296	1,736,586.
Revenue	1	-	service revenue (Part VIII, line 2g)	-177 622	420 210
B.			nt income (Part VIII, column (A), lines 3, 4, and 7d) Que (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<177,633. 174,421.	
			enue addines 8 through 11 (must equal Part VIII, column (A), line 12)	681,084	
T			ng similar amounts paid (Part IX, column (A), lines 1-3)	1,147,591	
65			ead to dr to members (Part IX, column (A), line 4)		
- S	15	Salaries, c	other compensation, employee benefits (Part IX, column (A), lines 5-10)	299,010	218,694.
ens	1 / 11 -	31 /LI.34	nal jundraising fees (Part IX, column (A), line 11e)		
Expenses			draising expenses (Part IX, column (D), line 25) 204,873.	010 022	206 600
_		•	penses (Part IX, column (A), lines 11a-11d, 11f-24f)	218,833. 1,665,434.	
	1		enses. Add lines 13-17 (must equal Part IX, column (A), line 25) less expenses Subtract line 18 from line 12	<984,350	
PO.		1101011001	1000 OXPORTING OF THE TOTAL THE TE	Beginning of Current Year	l e
Net Assets or Fund Balances	20	Total asse	ets (Part X, line 16)	23,996,778	
ABS	21	Total liabil	lities (Part X, line 26)	10,113,055	
			ts or fund balances. Subtract line 21 from line 20	13,883,723	16,119,687.
P	art II		ture Block		des and balad des bases
		and comple	alties of perjury, I declare that I have examined this return, including accompanying schedules and statements the Declaration of preparer bother thing officer) is based on all information of which preparer has any knowle	ints, and to the best of my knowle	age and belief, it is true, correct,
Sia			1 Colt 1. My	1 Feb. 1, 2	1011
Sig He		Sign	nature of officer	Date	
110		▶ Ro	obert I. Nomberg, President & CEO		
			e or print name and title		
Pai	d	Preparer's	S Soland Date		arer's identifying number nstructions)
_	parer's	signature		employed > X	
	Only	yours if	PIIC & Moserey, DLC	EIN ▶	· · ·
	_	self-employ address, an			201_327 6027
— Ma	v tha IE	ZIP + 4	** K1CIMONQ, VA 23223		304-327-6827 X Yes No

		JEWISH FOUNDATION	54-1623966 Page 2
Pai	t III Statement of Program Serv	ice Accomplishments	
1 .	Briefly describe the organization's mission	: See Schedule O for Continua	tion
•		oundation is a primary, trust	
			gage, educate and
		f donors to create ongoing re	
		, and educational needs. Our	
2	Did the organization undertake any signific	cant program services during the year which were not listed	
	the prior Form 990 or 990-EZ?		☐ Yes X No
	If "Yes," describe these new services on S	schedule O.	
3	Did the organization cease conducting, or	make significant changes in how it conducts, any program	n services? Yes X No
•	If "Yes," describe these changes on Sche		
	_		wasa bu awasasa
4		its for each of the organization's three largest program sen	
		ons and section 4947(a)(1) trusts are required to report the	amount of grants and
	allocations to others, the total expenses, a	and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$	858,412. including grants of \$ 813,8	3 74.)(Revenue \$
	Last year the Richmon	d Jewish Foundation awarded o	ver \$800.000 in
		ons. These crucial funds enh	
		ound the world, addressing ne	
		human services, arts and cul	ture, overseas
	relief, medical resea	rch and social action	
		100 to 10	
4b	(Code.) (Expenses \$	including grants of \$) (Revenue \$
	,		,
			·
			
		·	
			
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$
	,		,
			
			
	_		_
		-	
4d	Other program services. (Describe in Sche	edule O)	
~u		ding grants of \$ (Revenue \$	V
_		858,412.	
<u>4e</u>	Total program service expenses ▶ \$	030,412.	- 000:
02000	•		Form 990 (2009)

Form 990 (2009) RICHMOND JEWISH FOUNDATION
Part IV Checklist of Required Schedules

•			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_ 1	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			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
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			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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			
•	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10	X	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable .	11	X	
•	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? Yes No	-		
40	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	1		-
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		X
D	and program service activities outside the United States? If "Yes," complete Schedule F, Part I			v
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b		<u> </u>
15	or entity located outside the United States? If "Yes," complete Schedule F, Part II	1		v
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		<u> </u>
16	located outside the United States? If "Yes," complete Schedule F, Part III	1		v
17	·	16		<u> </u>
• /	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part!	47		v
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17_		X
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		43
	complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		990 c	

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X

X

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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?

If "Yes," complete Schedule R, Part V, line 2

Note. All Form 990 filers are required to complete Schedule O.

rai	t v Statements negaring Other ins Filings and Tax Compliance				
•		1 1		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 7	1		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportable gaming			
	(gambling) winnings to prize winners?	1	1c		ļ
2a	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 3	l		
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax retuined		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	•			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	d by this return?	3a	ļ. <u> </u>	X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	•	3b	<u> </u>	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	• •			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶		İ		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank and			
	Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction of the control		_5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega	arding Prohibited	_		
_	Tax Shelter Transaction?		<u>5c</u> _		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne organization solicit	_		
	any contributions that were not tax deductible?		6a	 	<u> X</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or gitts	٠.		
_	were not tax deductible?		6b	<u> </u>	
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods and services			v
_	provided to the payor? If "You " did the payoration patify the depay of the yelling of the goods or convices provided?		7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	on required	7b		
С	to file Form 8282?	as required	7.		х
А	If "Yes," indicate the number of Forms 8282 filed during the year	7d	7c	-	-
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p		ł		
٠	benefit contract?	Jei Sonai	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti	act?	7f		X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	•	7g		1
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or				
-	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exc				
	at any time during the year?		8		х
9	Sponsoring organizations maintaining donor advised funds.	•			
а	Did the organization make any taxable distributions under section 4966?		9a	ŀ	X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	•	9b		X
10	Section 501(c)(7) organizations, Enter.				i
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			i
11	Section 501(c)(12) organizations. Enter]		
а	Gross income from members or shareholders	11a]		
b	Gross income from other sources (Do not net amounts due or paid to other sources against]		
	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a	<u>L</u> .	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
			Form	990	(2009)

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.

Sec	tion A. Governing Body and Management			-
			Yes	No
1a	Enter the number of voting members of the governing body	7		
b		7		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	7		
	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	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 "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		<u> </u>
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	-	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	
11A			.,	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
D	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	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?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization .	. 15b		_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	<u> </u>	_X_
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			•
<u></u>	exempt status with respect to such arrangements?	16b	·	
	tion 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 public inspection. Indicate how you make these available. Check all that apply.	ie tor		
	X Own website X 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 fina	ıncıal	
	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 organic	zation:	.	
	THE ORGANIZATION - 804-545-8653			
	5403 MONUMENT AVENUE, RICHMOND, VA 23226			
		Form	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.

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	(0)		Pos			l. A	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated do do employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Stewart M. Kasen				_						
Past President	2.00	X			L	L.		0.	0.	0.
Debra S. Gardner										
Past President	2.00	X						0.	0.	0.
Stuart H. Cantor										
President	6.00	X		X		ļ		0.	0.	0.
Andrew S. Brownstein										
Treasurer	4.00	X	<u> </u>	X				0.	0.	0.
Beth H. Long										
Secretary	2.00	X	<u> </u>	X				0.	0.	0.
Jeffrey M. Lacker										
<u> Vice-President</u>	2.00	X		X	L	<u> </u>		0.	0.	0.
Abby W. Moore										
Vice-President	2.00	X		X		<u> </u>		0.	0.	0.
Adam S. Plotkin										
Assistant Secretary	4.00	X		X	<u> </u>	<u> </u>		0.	0.	0.
Miriam R. Davidow					l					
Director	2.00	X		<u>. </u>				0.	0.	0.
Beryl W. Ball			İ							
Director	2.00	X	<u> </u>					0.	0.	0.
Gregory Itskovich										
Director	2.00	X	<u> </u>			ļ		0.	0.	0.
Richard D. Gary		ŀ			İ					
Director	2.00	X						0.	0.	0.
Rebecca Kalman-Winston										
Director	2.00	X						0.	0.	0.
Irving M. Blank				1				_	_	
Director	2.00	X		ļ				0.	0.	
Morton H. Brown					l					
Director	2.00	X	<u> </u>	<u> </u>	<u> </u>	<u> </u>		0.	0.	
Ruth Greene										
Director	2.00	X		_		<u> </u>		0.	0.	0.
Roger F. Leibowitz								_	_	
<u>Director</u> 932007 02-04-10	2.00	X	L			<u> </u>		0.	0.	0 . Form 990 (2009)

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Form **990** (2009)

Director

Director

Director

Director

Director

Director

Director

Director

Director

1b Total

	compensation from the organization			(
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		х
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		х
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to			
	the organization? If "Yes," complete Schedule J for such person	5		X
Ω-	All D. D. Ladar and A. O. A. A. A.			

Section B. Independent Contractors

	the organization NONE		
	(A) Name and business address	(B) Description of services	(C) Compensation
2	Total number of independent contractors (including but not limited to thos \$100,000 in compensation from the organization \$\infty\$ 0	e listed above) who received more than	

See Schedule J-2 for Part VII, Section A Continuation

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			EWISH FOUND	ATION		54-1623	966 Page 9
Pa	rt VI	II Statement of Revenue					
	•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts st	1 a	Federated campaigns	1a				
Contributions, gifts, grants and other similar amounts	t	Membership dues	1b				
ts,			1c				
igi <u>a</u>		· · · · · · · · · · · · · · · · · · ·	1d				
Sim		- · · /-	1e				
iğ je	f	All other contributions, gifts, grants, and	. 1 726 506				
별			ıf 1,736,586.				
ago	_	Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f		1,736,586.			
		Total. Accomics to the	Business Code	2,730,3000			
ا پو	2 a	ı	T				
ه <u>خ</u>	Ŀ						
Segre	c						
Sev	C	i				.=	
Program Service Revenue	e						
-	f	All other program service revenue					
-	3	Total, Add lines 2a-2f Investment income (including dividends	Interest and			· · - · · ·	
	3	other similar amounts)	, interest, and	402,607.			402,607.
	4	Income from investment of tax-exempt	•	102,0070			102,007
	5	Royalties	•				
		(i) Re	eal (II) Personal				
	6 a	a Gross Rents					
	k	Less: rental expenses					
1		Rental income or (loss)					!
ļ		Net rental income or (loss)					
İ	7 a	a Gross amount from sales of (i) Security (ii) Security (iii) Secu		ı			
		assets other than inventory Less, cost or other basis	780.				
		and sales expenses 29972	269				
	(Gain or (loss)					
		d Net gain or (loss)	>	25,711.			25,711.
<u>o</u>	8 8	a Gross income from fundraising events (not				
eun		including \$ of					
Pe		contributions reported on line 1c). See					
Other Revenue		Part IV, line 18	a				
₹		Less direct expenses	b				
		 Net income or (loss) from fundraising evaluation Gross income from gaming activities. See 				.,,	
	7 6	Part IV, line 19	a				
i	ŀ	Less: direct expenses	ь				
		. Net income or (loss) from gaming activity.	ies		}		
ļ	10 a	Gross sales of inventory, less returns					
		and allowances	a				
		Less: cost of goods sold	b]		
-		Net income or (loss) from sales of inven					
		Miscellaneous Revenue	Business Code		102 520		
		FEE INCOME	523000	182,528.	182,528.		
		b					· · · · · · · · · · · · · · · · · · ·
		d All other revenue					
		e Total. Add lines 11a-11d		182,528.	-		
	12	Total revenue. See instructions.		2,347,432.	182,528.	0.	428,318.
93200	9 -10						Form 990 (2009)

Part IX Statement of Functional Expenses

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

	not include amounts reported on lines 6b, 8b, 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		, <u>, , , , , , , , , , , , , , , , , , </u>		•
	organizations in the U.S. See Part IV, line 21	813,874.	813,874.		
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	98,832.	9,883.	43,486.	45,463.
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	95,947.	9,595.	42,216.	44,136.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	10,888.	1,089.	4,791.	5,008.
10	Payroll taxes	13,027.	1,303.	5,732.	5,992.
11	Fees for services (non-employees):				
а	Management				
b	Legal .	300.	30.	132.	138.
C	Accounting	8,750.	875.	3,850.	4,025.
d					
е	·		 .		
f	Investment management fees				
g					<u> </u>
12	Advertising and promotion	44 000			
13	Office expenses	11,096.	1,110.	4,882.	5,104.
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				
21	Payments to affiliates			0.460	0 500
22	Depreciation, depletion, and amortization	5,608.	560.	2,468.	2,580.
23	Insurance				
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	Administration of Endow	139,556.	13,956.	61,405.	64,195.
b	20 1 1 2	21,436.	2,144.	9,431.	9,861.
c	Allocated Expenses	20,713.	2,071.	9,114.	9,528.
d	Jewish Federations of N	10,000.	1,000.	4,400.	4,600.
е	Computer Support, Etc.	4,654.	465.	2,048.	2,141.
f		4,569.	457.	2,010.	2,102.
25	Total functional expenses. Add lines 1 through 24f	1,259,250.	858,412.	195,965.	204,873.
26	Joint costs. Check here if following	, _ , _ , _ ,			
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

932010 02-04-10

18063__1

Par	<u>t X</u>	Balance Sheet					
•					(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing		ļ	34,691.	1	11,074.
	2	Savings and temporary cash investments			·	2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net	4,205.	4	4,616.		
	5	Receivables from current and former officers, di	rectors	trustees, key			
		employees, and highest compensated employee	es. Con	plete Part II			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as					
		4958(f)(1)) and persons described in section 495	8(c)(3)	B) Complete			
		Part II of Schedule L		ļ		6	
\$	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges		ļ	5,212.	9	4,840.
	10a	Land, buildings, and equipment, cost or other					
		basis Complete Part VI of Schedule D	10a	77,819.			
	b	Less accumulated depreciation	10b	32,231.	12,673.	10c	45,588. 26,772,149.
	11	Investments - publicly traded securities			23,939,997.	11	26,772,149.
	12	Investments - other securities See Part IV, line 1	1			12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
-	16_	Total assets. Add lines 1 through 15 (must equa	al line 3	4)	<u>23,996,778.</u>	16	<u> 26,838,267.</u>
	17	Accounts payable and accrued expenses				17	729.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities			- · · - · · · · · · · · · · · · · · · ·	20	····
es	21	Escrow or custodial account liability Complete F		T		21	· · · · · · · · · · · · · · · · · · ·
Liabilities	22	Payables to current and former officers, director					
혈		highest compensated employees, and disqualific	ed pers	ons. Complete Part II			
_		of Schedule L		}		22	_
	23	Secured mortgages and notes payable to unrela		· ·		23	
	24	Unsecured notes and loans payable to unrelated	third j	parties	10 112 055	24	10 515 051
	25	Other liabilities Complete Part X of Schedule D			10,113,055.	25	10,717,851.
\dashv	26	Total liabilities. Add lines 17 through 25		77	10,113,055.	26	10,718,580.
		Organizations that follow SFAS 117, check he	ere 📂	and complete			
ဗိ	07	lines 27 through 29, and lines 33 and 34.			E 210 202		C 702 252
틸	27	Unrestricted net assets		•	5,318,302.		6,703,352.
<u>B</u>	28	Temporarily restricted net assets		• •	<u>2,878,525.</u>	28	3,087,969.
5	29	Permanently restricted net assets Organizations that do not follow SFAS 117, cl	anale be		5,686,896.	29	6,328,366.
Ē		complete lines 30 through 34.	ieck ne	ere 🕨 📖 and			
S	30	Capital stock or trust principal, or current funds				20	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or eq	unmar	at fund		30 31	<u> </u>
ξ	32	Retained earnings, endowment, accumulated in			·· -	31	
2	33	Total net assets or fund balances	come, (A OUTER INTIUS	13,883,723.	33	16,119,687.
ļ	34	Total liabilities and net assets/fund balances	•	}	23,996,778.	34	26,838,267.
	<u></u>	Total indulities and net assets/fully balances			23,330,110.	, 74	Form 990 (2009)

Form **990** (2009)

18063__1

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

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.

Form **990** (2009)

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Act and OMB Circular A-133?

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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. OMB No. 1545-0047

Inspection

Name of the organization

RICHMOND JEWISH FOUNDATION

Employer identification number

54-1623966 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv), (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I **b** Type II c ____ Type III - Functionally integrated d Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) h

(i) Name of supported organization	organization (described on line		(iii) Type of organization organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support	
		(see instructions))	Yes	No	Yes	No	Yes	No		
_	-	-								
					:					
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otal										

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Schedule A (Form 990 or 990-EZ) 2009

(Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (a) 2005 Calendar year (or fiscal year beginning in) (c) 2007 (d) 2008 **(b)** 2006 (e) 2009 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not 1954200. 9257079. include any "unusual grants.") 2797723. 2084274. 684,296. 1736586. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 2797723. 2084274. 1954200. 684,296. 1736586. 4 Total, Add lines 1 through 3 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) 3956516. 5300563. 6 Public support. Subtract line 5 from line **Section B. Total Support** Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (d) 2008 (c) 2007 (e) 2009 (f) Total 2797723. 2084274 1954200 684,296. 1736586 9257079. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 280,322. 421.124. 544,146. 423,617. 402,607. and income from similar sources 2071816. Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 274,882 253,019. 267,191 174,421 182,528. assets (Explain in Part IV) 1152041 12480936. 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 42.47 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 % 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 % 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and $\triangleright [X]$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008, If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2009

Section A. Public Support						
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 ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5				 		
7a Amounts included on lines 1, 2, and		 		 		
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support				_		
alendar year (or fiscal year beginning in)▶∟	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
3 Total support (Add lines 9, 10c, 11, and 12)						
4 First five years. If the Form 990 is for t	he organization	's first, second, thu	d, fourth, or fifth to	ax year as a secti	on 501(c)(3) organiz	ation,
check this box and stop here						
ection C. Computation of Public	Support Pe	ercentage				
5 Public support percentage for 2009 (lin	e 8, column (f)	divided by line 13, o	column (f))		15	
6 Public support percentage from 2008 S	chedule A, Par	t III, line 15	• • •		16	
ection D. Computation of Invest			·			
7 Investment income percentage for 200			ne 13. column (f))		17	
8 Investment income percentage from 20	•	•	(.,,)		18	
9a 33 1/3% support tests - 2009. If the o			 on line 14, and line	a 15 is more than		7 is not
more than 33 1/3%, check this box and						, 13 110t
						P L_
b 33 1/3% support tests - 2008. If the oline 18 is not more than 33 1/3%, chec						and
O Private foundation. If the organization						∑ ⊨
o ruvate igungation, n (18 gigali(2800))	ana mor citeck à					

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public

6

Open to Public Inspection

Employer identification number

	RICHMOND JEWISH FOUNDATION	54-162396
rt I	Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	ccounts. Complete if the

Pai	organizations maintaining Donor Advised organization answered "Yes" to Form 990, Part IV, line		or Accoun	ts. Complete if	the			
		(a) Donor advised funds	(b) Funds	and other acco	unts			
1	Total number at end of year	70						
2	Aggregate contributions to (during year)	1,265,696.						
3	Aggregate grants from (during year)	707,732.						
4	Aggregate value at end of year	4,498,372.						
5	Did the organization inform all donors and donor advisors in v	viting that the assets held in donor advised	d funds					
	are the organization's property, subject to the organization's	exclusive legal control?		X Yes	☐ No			
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant funds can be us	sed only					
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose co	onferring					
	ımpermissible private benefit?			X Yes	□ No			
Pai	t II Conservation Easements. Complete if the org	anization answered "Yes" to Form 990, Pa	rt IV, line 7					
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)						
	Preservation of land for public use (e.g , recreation or pl	easure) Preservation of an histo	ncally import	ant land area				
	Protection of natural habitat	Preservation of a certific	ed historic str	ucture				
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form of	a conservation	on easement on	the last			
	day of the tax year.		·					
			Н	eld at the End of t	he Tax Year			
а	Total number of conservation easements		2a					
b	Total acreage restricted by conservation easements	•	2b					
C								
d	Number of conservation easements included in (c) acquired a	fter 8/17/06	2d					
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the o	organization d	uring the tax				
	year ▶							
4	Number of states where property subject to conservation eas	ement is located						
5	Does the organization have a written policy regarding the pen	odic monitoring, inspection, handling of						
	violations, and enforcement of the conservation easements it			Yes	└─ No			
6	Staff and volunteer hours devoted to monitoring, inspecting,	_						
7	Amount of expenses incurred in monitoring, inspecting, and e		-		_			
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4)(B)(i)					
_	and section 170(h)(4)(B)(ii)?			└─ Yes	L∐ No			
9	In Part XIV, describe how the organization reports conservation	•	•		•			
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes th	e organization	n's accounting f	or			
Da	conservation easements. rt III Organizations Maintaining Collections of	Art Historical Treasures or Oth	or Similar	Accate				
Га	Complete if the organization answered "Yes" to Form 9	•	ici Siiiiiai	Assets.				
	Complete if the organization answered 100 to 10111	550,1 are 14, mile 5						
4.	If the organization elected, as permitted under SFAS 116, not	to report in its revenue statement and heli						
14	•	•		•				
	treasures, or other similar assets held for public exhibition, ed the footnote to its financial statements that describes these if		ic service, pro	ivide, ili Fart Aiv	, the text of			
_	If the organization elected, as permitted under SFAS 116, to i		s choot works	of art historias	l transcer			
D	or other similar assets held for public exhibition, education, or							
	these items:	research in furtherance of public service,	provide trie id	mowing amount	s relating to			
	(i) Revenues included in Form 990, Part VIII, line 1		▶ ¢					
	(ii) Assets included in Form 990, Part X	•	₽ •					
2	If the organization received or held works of art, historical trea	scures or other similar assets for financial	, Φ. Abivoro nice					
4	the following amounts required to be reported under SFAS 1:		gain, provide					
_	Revenues included in Form 990, Part VIII, line 1	to relating to these items.	▶ €					
a h	Assets included in Form 990, Part X	·	~ •		· <u></u>			
IJ	, acces included in Form 220, r are A		. • •.		· · · · · · · · · · · · · · · · · · ·			

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Schedule D (Form 990) 2009

		D JEWISH F		·		1623966 Page 2				
	rt III Organizations Maintaining C									
3	3 'Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items									
	(check all that apply)									
а	Public exhibition	c	Loan or exc	hange programs	•					
b	Scholarly research	e	e							
C	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how they further t	he organization's	s exempt purpose in	Part XIV.				
5	During the year, did the organization solicit of				ımılar assets					
	to be sold to raise funds rather than to be ma					Yes No				
Pai	rt IV Escrow and Custodial Arran		ete if organization ai	nswered "Yes" to	o Form 990, Part IV, I	line 9, or				
	reported an amount on Form 990, Par	··-		<u>.</u>						
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for contribution	s or other assets	s not included					
	on Form 990, Part X?					Yes No				
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing table.		["					
						Amount				
С					_1c					
d	Additions during the year				1d					
е	Distributions during the year				. <u>1e</u>					
f	Ending balance				1f					
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?		•	☐ Yes ☐ No				
	If "Yes," explain the arrangement in Part XIV									
Pai	rt V Endowment Funds. Complete if			<u> </u>						
		(a) Current year	(b) Prior year	(c) Two years ba	ack (d) Three years b	ack (e) Four years back				
1a	Beginning of year balance	9,180,352.								
b	Contributions	718,175.	512,182.							
С.	Net investment earnings, gains, and losses	934,403.								
đ	Grants or scholarships	107,836.	274,398.							
е	Other expenditures for facilities									
	and programs	200 125	452 010							
Т	Administrative expenses	398,125.	452,019. 9,180,352.							
g	End of year balance			<u></u>		<u> </u>				
2	Provide the estimated percentage of the year									
a	Board designated or quasi-endowment	<u>21.35</u>	%							
b	Permanent endowment ► 78.65 Term endowment ►	% %								
C	Are there endowment funds not in the posse	-	ation that are hold a	nd administrad	for the eventualist					
Sa		ssion or the organiz	ation that are neid a	na aaministerea	for the organization	V ₂ - N ₂				
	by. (i) unrelated organizations					Yes No 3a(i) X				
	(ii) related organizations					1 1				
h	If "Yes" to 3a(ii), are the related organizations	Listed as required o	n Schedule B2	•		3a(ii) X 3b				
4	Describe in Part XIV the intended uses of the	-				30				
_	rt VI Investments - Land, Building			Part X, line 10						
	Description of investment	(a) Cost or o			(c) Accumulated	(d) Book value				
	boson priori of invocations	basis (investr	',	(other)	depreciation	(u) book value				
12	Land			,	-1					
b	B									
c	Leasehold improvements									
d			7	7,819.	32,231.	45,588.				
	Other	****		.,	22,231.	<u> </u>				
	il. Add lines 1a through 1e (Column (d) must ed	gual Form 990, Part	X. column (B), line 1	(O(c).)	•	45.588.				

Schedule D (Form 990) 2009

18063 1

932053 02-01-10

	lle D (Form 990) 2009 RICHMOND JEWISH FOUNDATION				623966	Page
Part :		Audited Financial	State	ment		
	otal revenue (Form 990, Part VIII, column (A), line 12)	1			2,347	
	otal expenses (Form 990, Part IX, column (A), line 25)	2	_		1,259	
	xcess or (deficit) for the year Subtract line 2 from line 1	3	_		1,088	
	et unrealized gains (losses) on investments	4			1,129	200
5 D	onated services and use of facilities	. 5				
	evestment expenses	6				
	rior period adjustments					
	ther (Describe in Part XIV.)	8_			18	582
	otal adjustments (net). Add lines 4 through 8	9	_		1,147	
	xcess or (deficit) for the year per audited financial statements Combine lines 3 ai XII Reconciliation of Revenue per Audited Financial Stateme			eturn	2,235	964
•	otal revenue, gains, and other support per audited financial statements	Jinto With Hovendo	po	1	3,476	632
	mounts included on line 1 but not on Form 990, Part VIII, line 12.	•			3,110	002
	et unrealized gains on investments	2a 1,129,	200.			
	onated services and use of facilities	2b				
	ecoveries of prior year grants	2c				
	hther (Describe in Part XIV.)	2d				
	dd lines 2a through 2d	<u> </u>		2e	1,129	200
3 S	ubtract line 2e from line 1			3	2,347	432
4 A	mounts included on Form 990, Part VIII, line 12, but not on line 1	· · ·				
a In	envestment expenses not included on Form 990, Part VIII, line 7b	4a				
b 0	other (Describe in Part XIV)	4b				
сА	dd lines 4a and 4b			4c		0
	otal revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	2,347	432
	XIII Reconciliation of Expenses per Audited Financial Statem	ents With Expense	es per	Retur		
	otal expenses and losses per audited financial statements			1	1,259,	250
	mounts included on line 1 but not on Form 990, Part IX, line 25:	1 1				
	onated services and use of facilities	2a				
	rior year adjustments .	2b				
	other losses	2c				
	other (Describe in Part XIV)	2d				_
	dd lines 2a through 2d		-	2e	4 0 5 0	0
-	ubtract line 2e from line 1			3	1,259	250
	mounts included on Form 990, Part IX, line 25, but not on line 1.	1.1				
	evestment expenses not included on Form 990, Part VIII, line 7b	4a				
	other (Describe in Part XIV)	4b				^
	dd lines 4a and 4b			4c	1 250	250
	otal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) XIV Supplemental Information			5	1,259,	<u>.∠⊃U</u>
	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part	III. lines 1a and 4: Part IV	lines 11	and 21	n Part V line	4· Part
	2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also com					-r, rail
	V, line 4: Intended uses of organization					
<u>The</u>	Genesis Fund, the board-designated, unre	stricted end	owme	<u>nt i</u>	s used	for
F	edation operations					
roun	dation operations	<u> </u>				
and	to fund competitive grants for research.	Other endo	wmen	ts a	re	
	TO THE COMPOSITOR STATES TO TOUR TOUGHTON	Julia Chiao		<u> </u>		
inte	ended for a variety of uses					-
desi	gnated by donors. A number of these end	owments make	an	annu	al	
dist	ribution to The Jewish				<u>-</u>	
Fede	erations of North America Annual Campaign	which suppo			_	
932054 02-01-10				Schedu	le D (Form 9	90) 20(
.3	25					
1901	26 133457 18063 2009.05000 RICHMO	OND JEWISH FO	UND	TIOI	1806	3:

Schedule D (Form 990) 2009 RICHMOND JEWISH FOUNDATION	54-1623966 Page 5
Part XIV Supplemental Information (continued)	
causes. Other	
endowment funds support a special purpose or field of i	nterest with a
specific philanthropic mission.	
Part XI, Line 8 - Other Adjustments:	
Change in Value of Split Interest Agreements: 18582.	
	

932055 02-01-10

Schedule D (Form 990) 2009

SCHEDULE I (Form 990)

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

OMB No 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Department of the Treasury Internal Revenue Service		Comple	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.	n answered "Yes" on Fo	on Form 990, Par	t IV, line 21 or 22.		Open to Public
Name of the organization								Employer identification muhar
Marile Of the Organization	RICHMOND JEWISH FOUNDATI	EWISH FO	UNDATION					54-1623966
Part I General Inform	General Information on Grants and Assistance	d Assistance						
1 Does the organization maintain records to substantiate the amount of t	n maintain records to	substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	non
criteria used to award the grants or assistance?	i the grants or assist	ance?						X Yes
읈	e organization's proc	sedures for monit	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	funds in the United	States.			
Part II Grants and Oth	her Assistance to G	overnments and	Organizations in the	e United States. C	omplete if the orga	ınızatıon answered "Y	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	IV, line 21, for any
recipient that re	sceived more than \$5	5,000. Check this	box if no one recipier	nt received more th	an \$5,000 Use Pa	rt IV and Schedule I-1	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	al space is needed
1 (a) Name and address of organization or government	ss of organization nent	(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
Weinstein Jewish Community Center	min'ty Contor							
E 403 Monthsont Arro	Tooling Forting							
5405 monument Ave. Richmond va 23226				31 745	c			
National Andreas					>			
Congregation Beth Ahabah	abah							
1111 W. Franklin Street	eet	-	_					
Richmond, VA 23220				12,610.	0			
		_						
Beth Sholom Home of Virginia	Virginia							
1600 John Rolfe Parkway	мау				•			
Richmond, VA 23238				40,850.	0			
Virginia Holocanat Mnaanm	# o							
2000 E Cary Street				_				
ξ				7 327.	0			
	eration of							
Richmond - 5403 Monument Ave.	ment Ave							
Richmond, VA 23226				394,684,	0			
St. Paul's Episcopal	Church							
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					-			
olo E. Grace Street				6	c			
-:1	104(2)(0)			13,200	0			0
	section 501(c)(3) and	d government orç	janizations					18.
3 Enter total number of other organizations	other organizations							0.
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	Paperwork Reduct	ion Act Notice,	see the Instructions	for Form 990.				Schedule I (Form 990) 2009

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 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. Schedule I, Part I, Line 2: Grants are made from donor-advised funds, from	de the information are made	required in Part I,	ine 2, and any other or -advised	mation required in Part I, line 2, and any other additional information. made from donor-advised funds, from	
donor-designated permanent endowment funds,	nt funds,	and from	unrestrict	and from unrestricted funds in	
the Genesis fund.					

donor-designated permanent endowment Grants from donor-advised funds & funds are made to recommended or designated organizations only upon receipt

of information that includes verification of Sec. 501(c)(3) status,

Recipients of these mission statement, and current financial information.

grants must agree that the grant does not represent the payment or

932 102 02-02-10

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

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

OMB No 1545-0047 2009 .

Open to Public Inspection

Schedule I-1 (Form 990) 2009 (h) Purpose of grant or assistance Employer Identification number 54-1623966 (g) Description of non-cash assistance Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II) (book, FMV, appraisal, other) (f) Method of valuation Ö °. 히 0 (e) Amount of non-cash assistance Ö 。 Ö Ö (d) Amount of cash grant 7 000 57,309 5,000 5,000 30,100 009 9 30,000, 5,600 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) IRC section if applicable RICHMOND JEWISH FOUNDATION (p) EIN 7501 Boulders View Drive, Ste. 110 Massey Cancer Center, VA. Comm. Rosenbaum Yeshiva of New Jersey Visual Arts Center of Richmond Univ. - 401 College Street -(a) Name and address of organization or government Virginia Supportive Housing Richmond Jewish Foundation The Community Foundation Peninsula Temple Beth EL 666 Kinderdamack Road River Edge, NJ 76641 1812 W. Main Street 1700 Alameda De Las 2519 Hermitage Road San Mateo, CA 94403 Name of the organization Richmond, VA 23298 Richmond, VA 23220 Richmond, VA 23226 Richmond VA 23226 Richmond, VA 23225 Richmond, VA 23220 5403 Monument Ave. Richmond SPCA PO Box 8585 Part

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

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.

OMB No 1545-0047 2009 . Open to Public

(Form 990)
Information for (Form 990)

Schedule I-1 (Form 990) 2009 (h) Purpose of grant or assistance Inspection **Employer identification number** 54-1623966 (g) Description of non-cash assistance Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (book, FMV, appraisal, other) (f) Method of valuation Ö 。 . (e) Amount of non-cash assistance o (d) Amount of cash grant 5 500 5,244 000 9 39,132, For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) IRC section if applicable RICHMOND JEWISH FOUNDATION (b) EIN Jewish Community Federation of San Francisco - 121 Steuart Street -Bolling Haxall House Foundatior Fidelity Charitable Gift Fund (a) Name and address of organization or government San Francisco, CA 94401 211 E. Franklin Street Jewish Family Services Cincinnati, OH 45277 6718 Patterson Ave. Name of the organization Richmond, VA 23226 Richmond, VA 23219 PO Box 770001 Part LHA

Schedule I (Form 990) 2009

SCHEDULE J-2

(Form 990)

Continuation Sheet for Form 990

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. ➤ See the Instructions for Form 990.

Inspection

Name of the Organization

RICHMOND JEWISH FOUNDATION

Employer Identification number 54-1623966

RICHMOND JEWISH FOUNDATION							54-1623966			
Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest						t Compensated I	Employees			
(A)	(B)		(C) (D)					(D)	(E)	(F)
Name and title	Average			Pos		ı		Reportable	Reportable	Estimated
	hours	(cl	heck	all t	that	арр	ly)	compensation	compensation	amount of
	per	Ė				Γ.	İ	from	from related	other
	week		1			yee	İ	the	organizations	compensation
		定				i i		organization	(W-2/1099-MISC)	from the
		声	40		ŀ	ted e		(W·2/1099-MISC)		organization
	,	Ste	raste			bens				and related
		를	l Pul		oloye	E 03				organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Богтег			
		드	트	5	=	프	윤			
Jack Paul Fine	4 00									
Past President	1.00	X	_					0.	0.	0.
S. Harold Horwitz									_	_
Past President	1.00	X						0.	0.	0.
Neil S. Kessler		1								
Past President	1.00	X						0.	0.	0.
David M. Long										
Past President	1.00	X			L	L.		0.	0.	0.
Steve A. Markel										
Past President	1.00	X						0.	0.	0.
Marcia Penn, Ph.D.									<u>~_</u> _	
Past President	1.00	x						0.	0.	0.
Mark B. Sisisky	1.00								•	- 0.
Past President	1.00	Y						0.	0.	0.
Charles R. Swartz	1.00	^		-				0.	V •	
Director	2 00	.						0.	0.	_
Sam Asher	2.00	^					-		<u>0.</u>	0.
	1 00	٦,							•	
Director Namb	1.00	A			<u> </u>			0.	0.	0.
Robert I. Nomberg	F0 00							04 000	_	44 000
Executive Director	50.00	-		X				84,000.	0.	14,832.
 										
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2009

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

54-1623966 RICHMOND JEWISH FOUNDATION Types of Property (a) (b) (c) (d) Check if Number of Revenues reported on Method of determining applicable contributions Form 990, Part VIII, line 1q revenues Art - Works of art 2 Art - Historical treasures Art - Fractional interests 3 Books and publications Clothing and household goods 5 Cars and other vehicles 6 Boats and planes 7 8 Intellectual property X FMV - Publicly Trade 1,229,369. 9 Securities - Publicly traded 10 Securities - Closely held stock Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous Qualified conservation contribution -13 Historic structures Qualified conservation contribution - Other 14 Real estate - Residential 15 16 Real estate - Commercial 17 Real estate - Other 18 Collectibles 19 Food inventory 20 Drugs and medical supplies Taxidermy 21 22 Historical artifacts Scientific specimens 23 Archeological artifacts 24 Cash Surrender Value (Life Insuranc) X 9,552. 25 Other 26 Other 27 Other Other 28 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment 29 Ye<u>s</u> No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a X b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 X 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? X 32a b If "Yes," describe in Part II 33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,

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

describe in Part II.

Schedule M (Form 990) 2009

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Name of the organization

RICHMOND JEWISH FOUNDATION

Employer identification number 54-1623966

Form 990, Part I, Line 1, Description of Organization Mission:
endowments. We engage, educate and inspire generations of donors to
create ongoing resources for charitable, religious, and educational
needs. Our donors may choose legacies of Tzedakah and Tikkun Olam. We
effectively steward philanthropic assets entrusted to our care.
Form 990, Part III, Line 1, Description of Organization Mission:
legacies of Tzedakah and Tikkun Olam. We effectively steward
philanthropic assets entrusted to our care.
Form 990, Part VI, Section A, line 2: Robert Nomberg/Charles Swartz
Family Relationship
Form 990, Part VI, Section B, line 11: The Form 990 has been provided to
the Executive Committee.
Form 990, Part VI, Section B, Line 12c: Board members are required to
review the conflict of interest policy annually.
Form 990, Part VI, Section B, Line 15a: The process for determining
compensation of the Executive Director included a review and approval by
the Board of Directors. Additionally, the Board used comparability data
acquired from the Form 990s of other organizations and compensation
surveys. There is a written employment contract between the organization
and the Executive Director.

18063__1

SCHEDULE O

(Form 990)

Supplemental Information to Form 990

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 Internal Rev	of the Treasu	ıry			romis	eo or to p	rovide any Attach to	Form 99	nai intorm 0.	ation.			Open to Public Inspection
	the organ		RI	CHMON	D JEW	ISH F	OUNDA	TION				Employe 54-1	r identification number
Form	990,	Part	VI,	Sect	ion C	, Lin	e 19:	Avai	lable	upon	req	uest.	
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Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

		_							
	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box		\triangleright \mathbf{x}						
	If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).								
Do no	t complete Part II unless you have already been granted an automatic 3-month extension on a previously fi	led Fo	rm 8868.						
Par	Automatic 3-Month Extension of Time. Only submit original (no copies needed)								
A corp	poration required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete							
Part I	· · · · · · · · · · · · · · · · · · ·		▶ □						
	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an Income tax returns.	exten	sion of time						
noted (not a you m	ronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or conjust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files, gov/efile and click on e-file for Chanties & Nonprofits.	cally if nsolida	(1) you want the additional ated Form 990-T. Instead,						
Туре		Emp	loyer identification number						
print	RICHMOND JEWISH FOUNDATION	5	4-1623966						
File by to due dat filing yo	number, street, and room or suite no. If a P.O. box, see instructions or 5403 MONUMENT AVENUE	•							
return S instruct		·							
Chec	k type of return to be filed(file a separate application for each return)		-						
X Form 990 Form 990-T (corporation) Form 4720 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5227 Form 990-EZ Form 990-T (trust other than above) Form 6069 Form 990-PF Form 1041-A Form 8870									
Te ● If t	THE ORGANIZATION e books are in the care of ▶ 5403 MONUMENT AVENUE - RICHMOND, VA 232 ephone No ▶ 804-545-8653 FAX No. ▶ the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this		r the whole group, check this						
box	. If it is for part of the group, check this box and attach a list with the names and EINs of all	memb	ers the extension will cover.						
1	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt February 15, 2011 , to file the exempt organization return for the organization named a is for the organization's return for the organization's return for calendar year or \(\times \text{X} \) tax year beginning \(\text{JUL 1, 2009} \) , and ending \(\text{JUN 30, 2010} \)		The extension						
2	If this tax year is for less than 12 months, check reason Initial return Final return		Change in accounting period						
3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any								
_	nonrefundable credits. See instructions.	3a	\$						
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$						
С	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	30	Ψ						
•	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)								
	See instructions.	3с	s N/A						
Cauti	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-	EO for payment instructions.						

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)