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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)

OMB No 1545-0047

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

Open to Public Inspection

AI	for the	ZUU9 Ca	lendar year, or tax year beginning JUL 1, 2009 and ending	JUN 30, 2010	
B	Check if applicable	Please use IRS	C Name of organization	D Employer identifi	cation number
	Addres	s label or	ST. CHRISTOPHER'S SCHOOL FOUNDATION		
	Name change	type	Doing Business As	54-1	727301
	Initial return	See	Number and street (or P.O. box if mail is not delivered to street address) Room/sui	te E Telephone numbe	r
	Termin ated	Specific Instruc-	711 ST. CHRISTOPHER'S ROAD	804-	282-3185
	Amend		City or town, state or country, and ZIP + 4	G Gross receipts \$	26,956,520.
	Application		RICHMOND, VA 23226	H(a) Is this a group re	etum
	pendin	FNar	ne and address of principal officer:A. J. BOLLING III	for affiliates?	Yes X No
				43 H(b) Are all affiliates inc	luded? Yes No
			us: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527	If "No," attach a	list. (see instructions)
			W.STCHRISTOPHERS.COM	H(c) Group exemptio	
				ar of formation: 1993 N	A State of legal domicile: VA
P	art I	Summ			
æ	1 1	Briefly de	scribe the organization's mission or most significant activities: ${\color{blue} {\sf SEE}}$ ${\color{blue} {\sf SCHEI}}$	OULE O	
Activities & Governance				 	
er.	I -		s box Full if the organization discontinued its operations or disposed of m	ore than 25% of its net as	
Š			of voting members of the governing body (Part VI, line 1a)	3	12
9			of independent voting members of the governing body (Part VI, line 1b)	4	12
ijes			nber of employees (Part V, line 2a)	5	0
Ξ			nber of volunteers (estimate if necessary)	6	
AC			ss unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	Ь	Net unrei	ated business taxable income from Form 960 Cilibe 34 E.D	7b	
		 .	ions and grants (Part VIII, line 1h) S FEB 2 2 2011	Prior Year 3,047,007.	Current Year 7,251,711.
97				3,047,007.	1,231,111.
Revenue	1	-	service revenue (Fart VIII, line 29)	583,269.	-64,415.
æ			nt income (Part VIII, column (A), lines 3, 4 and 7d)	303,203.	-04,413.
			enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 40c, and 14e)	3,630,276.	7,187,296.
			enue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,382,538.	4,108,339.
			nd similar amounts paid (Part IX, column (A), lines 1-3)	4,302,330.	4,100,333.
	I	-	paid to or for members (Part IX, column (A), line 4)	-	
Expenses	15		other compensation, employee benefits (Part IX, column (A), lines 5-10)		
ᅙ	loa		nal fundraising fees (Part IX, column (A), line 11e)		
Ä	47		draising expenses (Part IX, column (D), line 25)	355,975.	402,566.
	1		penses (Part IX, column (A), lines 11a-11d, 11f-24f)	4,738,513.	4,510,905.
		•	enses. Add lines 13-17 (must equal Part IX, column (A), line 25) less expenses. Subtract line 18 from line 12	-1,108,237.	2,676,391.
-2	13	neveriue		Beginning of Current Year	End of Year
ets (20	Total acc	ets (Part X, line 16)	58,352,954.	66,679,914.
ASS.	21		lities (Part X, line 16)	4,550,727.	5,041,017.
NetrAssets or Fring Balances	22		s or fund balances. Subtract line 21 from line 20	53,802,227.	61,638,897.
P	art II		ture Block		
		Under pena	ulties of perjury, I declare that I have examined this return, including accompanying schedules and statemente te Declaration of preparer (other than officer) is based on all information of which preparer has any knowlet	ts, and to the best of my knowled	ge and belief, it is true, correct,
_		and comple	se Declaration of prepare (during that officer) is based on all information of which prepare has any knowled	ige.	
Sig	ın		/ Joling &	Z U W	
He		Sign	nature of officer	Date	
		Α.	J. BOLLING III, EXECUTIVE DIRECTOR		
		Тур	e or print name and title		
Pai	χ.	Preparer's		Check if Prepar	er's identifying number structions)
	parer's	signature	1000 L. 7 100 h h 1 411 11	employed	
	Only	Firm's nam yours if	GOODMAN & COMPANI	EIN ▶	
J00	, Unit	self-employ address, ar			
		ZIP + 4	GLEN ALLEN/ VA 23060-3394	Phone no. ► 8	04.282.7636
Ma	y the IF	RS discus	s this return with the preparer shown above? (see instructions)	· ·	X Yes No
9320	001 02-0	4-10 ∐ ⊦	A For Privacy Act and Paperwork Reduction Act Notice, see the separate i	nstructions.	Form 990 (2009)

4d Other program services. (Describe in Schedule O.)
(Expenses \$ including grants of \$

) (Revenue \$

Total program service expenses ▶\$ 4,273,656.

	t IV Checklist of Required Schedules	, 501		age o
rai	Checklist of Required Schedules		Yes	No
4	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		162	NO
1	If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	1 2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	1		
3	public office? If "Yes," complete Schedule C, Part I	3		x
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	├	\vdash	
9	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	⊢	\vdash	
0	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	۳		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u> </u>	 	 -
8		8	İ	x
_	Schedule D, Part III 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	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10		1		
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, VII, VIII, IX, or X		 	
11	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,	—	1	
	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	1		1
	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	1	l	l
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.		l	1
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	1
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 12A X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		1	

Form **990** (2009)

complete Schedule G, Part III

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

Part IV Checklist of Required Schedules (continued)

		} :	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	x	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
_	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	х	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete	1 '		
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			-
	instructions for applicable filing thresholds, conditions, and exceptions):			:
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	<u> </u>	<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	ļ	<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35	ļ	<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			77
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			37
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	<u> </u>	<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O.	_38_	X	2000)
		Form	990 (2009)

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Par				•	
				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 28			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			l
C	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portable gaming			l
	(gambling) winnings to prize winners?		1c	X	L
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 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	is?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see in	nstructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	l by this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	-			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		X
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 B	ank and			
	Financial Accounts.				
	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 transaction		5b		
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regard	ding Prohibited	_		
	Tax Shelter Transaction?		5c		-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit			x
_	any contributions that were not tax deductible?	6 .	6a_	-	 ^
þ	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or giπs	0 1.		
_	were not tax deductible?		6b		-
7	Organizations that may receive deductible contributions under section 170(c).	soods and convers		1	1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	joods and services	7a		x
.	provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	\vdash	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s required	├ `		
C	to file Form 8282?	is required	 7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	اٽ		
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a premium on a premiu				
•	benefit contract?	5,551.6.	7e	<u> </u>	x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?	7f		Х
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		X
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C	as required?	7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting org				
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exce	ess business holdings			
	at any time during the year?		8	<u> </u>	
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b	ļ	↓
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	Į	1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter.	1			
а	Gross income from members or shareholders	11a	l		
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form)	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	<u> </u>		(2000)

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					
		1 .	ì	1 2	Yes	No
1a	Enter the number of voting members of the governing body	1a		14		
b	Enter the number of voting members that are independent	1b		12		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other			37
	officer, director, trustee, or key employee?			2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	t supervision	l .	1	7.7
	of officers, directors or trustees, or key employees to a management company or other person?			3_	L	X
4	Did the organization make any significant changes to its organizational documents since the prior Fo		0 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's asser-	ts?		5		X
6	Does the organization have members or stockholders?			6	\vdash	<u> </u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	ember	s of the			v
_	governing body?	_	•	7a	<u> </u>	$\frac{x}{x}$
	Are any decisions of the governing body subject to approval by members, stockholders, or other per			7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken	dunng	the year			
	by the following:				J.	
	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	^	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ched	at the			v
<u> </u>	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 R	evenu	e Coae.)		1.4	
					Yes	No X
	Does the organization have local chapters, branches, or affiliates?	_• •	CCV - A	10a		
D	If "Yes," does the organization have written policies and procedures governing the activities of such	cnapt	ers, aπiliates,	400		
	and branches to ensure their operations are consistent with those of the organization?	.l AL_	- 40	10b	х	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before f	lling th	e form?	11	A	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			100	x	, ,
	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a		
D	Are officers, directors or trustees, and key employees required to disclose annually interests that conto conflicts?	uia giv	e rise	12b	x	
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	•Vec •	describe	120	 	
·	in Schedule O how this is done	<i>i</i> 65,	describe	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 approve	al hv ır	denendent	17		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		idependent			ĺ
а	The organization's CEO, Executive Director, or top management official			15a	i '	Х
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.)			1.55		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a			,
_	taxable entity during the year?			16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva	ıluate	ts participatio			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org		, ,			'
	exempt status with respect to such arrangements?			16b	1	
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶VA					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	r (501)	c)(3)s only) av	aılable for		
	public inspection. Indicate how you make these available. Check all that apply.		•			
	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, or	conflict	of interest po	olicy, and fina	ancial	
•	statements available to the public.		•			
20	State the name, physical address, and telephone number of the person who possesses the books a	nd rec	ords of the or	ganızation:	▶ _	
	A. J. BOLLING, III - (804) 282-3185					
	ST. CHRISTOPHER'S SCHOOL, RICHMOND, VA 23226					
					000	

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) Name and Title	(B) Average			Pos				(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director		Officer		Highest compensated 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
ATUL KAMRA BOARD MEMBER	2.00	х						0.	0.	0.
MICHAEL J. BOGESE, JR.			\vdash			T	\vdash	1		
BOARD MEMBER	2.00	X	L.		<u> </u>	<u> </u>	╙	0.	0.	0.
THOMAS R. TOWERS, JR.			ŀ		l					
BOARD MEMBER	2.00	X	ļ	ļ	_	<u> </u>	┕	0.	0.	0.
MATTHEW G. THOMPSON BOARD MEMBER	2.00	x						0.	0.	0.
A. J. BOLLING, III	1 2.00	-	-	\vdash	-	╁╌	-	 		
EXECUTIVE DIRECTOR	2.00	\mathbf{x}		x				0.	0.	0.
CHARLES M. STILLWELL	1			Ī		T	T			
BOARD MEMBER	2.00	X						0.	0.	0.
R. WHEATLEY MCDOWELL										_
BOARD MEMBER	2.00	X				L	L	0.	0.	0.
SAMUEL M. BEMISS	2 00	,,						0.	,	_
BOARD MEMBER	2.00	X	┡	L	⊢	├	╀╌	U.	0.	0.
JACK E. FOCKLER, JR. BOARD MEMBER, PRESIDENT	2.00	x		x				0.	0.	0.
TURNER A.M. BREDRUP		Г								
BOARD MEMBER	2.00	X						0.	0.	0.
LEWIS F. POWELL III	1								_	_
BOARD MEMBER, CHAIRMAN	2.00	X	_	Х	L	L	L	0.	0.	0.
G. SCOTT HETZER		l			l					
BOARD MEMBER	2.00	X	<u> </u>	_	—	┡	ļ	0.	0.	0.
DENNIS I. BELCHER	1			٠,,					0	۸ ا
SECRETARY	2.00	-	-	Х	⊢	\vdash	├	0.	0.	0.
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		-	 	\vdash	\vdash	\vdash	\vdash	 		
							L			

Part VII Section A. Officers, Directors, Tru	istees, Key E	mple	yee	s, a	nd l	High	est	Compensated Employ	ees (continued)				
(A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average			Pos				Reportable	Reportable			imate	
	hours	(cl	heck	all	that	арр	ly)	compensation	compensation from related			ount o	of
	per week	ector						from the	organizations			ouner Densa	tion
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Individual trustee or director	8			ated		organization	(W-2/1099-MISC	»		om the	
		rustee	trustee		9	E SE		(W-2/1099-MISC)		1	_	ınızatı	
		Ē	Institutional t	<u> </u>	Кеу етріоуее	S S CO	<u>_</u>					relate	
		횰	Instr	Officer	Keye	Highest compensated employee	Former				orga	nızatıc	JI 15
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			ľ					ı					
1b Total	•					▶		0.		0.			0.
2 Total number of individuals (including but r	ot limited to t	hose	liste	ed a	bov	e) w	ho r	received more than \$100	0,000 in reportable				
compensation from the organization									· · · · · · · · · · · · · · · · · · ·			1	0
					_					г		Yes	No
3 Did the organization list any former officer,			e, ke	y en	nplo	yee,	or	highest compensated ei	mployee on				x
line 1a? If "Yes," complete Schedule J for s 4 For any individual listed on line 1a, is the si			omn	one	atio		d 01	ther compensation from	the organization	┝	3		
and related organizations greater than \$15									the organization		4		X
5 Did any person listed on line 1a receive or a									ices rendered to	Ī			
the organization? If "Yes," complete Sched	•										5		Х
Section B. Independent Contractors													
 Complete this table for your five highest co 	mpensated in	dep	ende	ent c	cont	ract	ors	that received more than	\$100,000 of comp	ensa	ation f	rom	
the organization.									-				
(A) Name and business	address							(B) Description of s	SARVICAS	Cr	(C	i) nsatio	n
ST. CHRISTOPHER'S SCHOOL		Τ.						ADMINISTRATI	1		3111pCi	104110	<u> </u>
CHRISTOPHER'S ROAD, RICH			23	22	6			SUPPORT	'-		10	4,4	00.
	, ,			==	-								
									1				
												_	
2 Total number of independent contractors (including but i	act l	mito	nd to	the	العور	sto.	d above) who received r	nore than				
\$100,000 in compensation from the organi		.U. II				1	J. C	2 25010) WIIO 16061460 1					
			_	_	_								

Part IX Statement of Functional Expenses

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

	All other organizations must comp	iete column (A) but are			
	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	4,108,339.	4,108,339.		
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	104,400.		104,400.	
b	Legal				
	Accounting	•		,	
d	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	132,849.		132,849.	
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				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	54,291.	54,291.		
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	MAINTENANCE	111,026.	111,026.		
b	<u></u>				
С					
đ					
е					
f	All other expenses	4 -4	4 000 000	025 046	
<u>25</u>	Total functional expenses. Add lines 1 through 24f	4,510,905.	4,273,656.	237,249.	0.
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				

Pa	rt X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		4,576,378.	1	6,122,077.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net	[6,728,793.	3	9,748,192.
	4	Accounts receivable, net	[110,577.	4	77,489.
	5	Receivables from current and former officers, di	rectors, trustees, key			
		employees, and highest compensated employee	es. Complete Part II			
		of Schedule L		345,000.	5	307,500.
	6	Receivables from other disqualified persons (as	defined under section	*** ***		
		4958(f)(1)) and persons described in section 495	68(c)(3)(B). Complete			
		Part II of Schedule L			6	
23	7	Notes and loans receivable, net		250,000.	7	250,000.
Assets	8	Inventories for sale or use			8	
Ë	9	Prepaid expenses and deferred charges		16,014.	9	21,177.
	10a	Land, buildings, and equipment: cost or other		·"		
		basis. Complete Part VI of Schedule D	10a 4,249,601.			
	Ь	Less. accumulated depreciation	10b 110,574.	2,867,077.	10c	4,139,027.
	11	Investments - publicly traded securities	_	36,652,405.	11	40,006,642.
	12	Investments - other securities. See Part IV, line	1	6,250.	12	111,603.
	13	Investments - program-related. See Part IV, line	11	5,193,520.	13	4,187,676.
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		1,606,940.	15	1,708,531.
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	58,352,954.	16	66,679,914.
	17	Accounts payable and accrued expenses		587,897.	17	528,308.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
S	21	Escrow or custodial account liability. Complete	Part IV of Schedule D		21	
Ž	22	Payables to current and former officers, director	s, trustees, key employees,			
Liabilities		highest compensated employees, and disqualifi	ed persons. Complete Part II			
		of Schedule L			22	
	23	Secured mortgages and notes payable to unrela	ited third parties		23	
	24	Unsecured notes and loans payable to unrelate	d third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		3,962,830.	25	4,512,709.
	26	Total liabilities. Add lines 17 through 25		4,550,727.	26	5,041,017.
		Organizations that follow SFAS 117, check he	ere 🕨 💹 and complete			
98		lines 27 through 29, and lines 33 and 34.		05 005 040		22 422 425
anc	27	Unrestricted net assets		25,905,240.	27	33,409,497.
Ba	28	Temporarily restricted net assets		1,598,732.	28	4,869,090.
2	29	Permanently restricted net assets	E-7	26,298,255.	29	23,360,310.
Ţ		Organizations that do not follow SFAS 117, c	heck here 🕨 📖 and			
ğ		complete lines 30 through 34.				
)ets	30	Capital stock or trust principal, or current funds			30	
Ass	31	Paid-in or capital surplus, or land, building, or ed	•		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come, or other funds	F3 000 005	32	64 650 005
2	33	Total net assets or fund balances		53,802,227.	33	61,638,897.
	34	Total liabilities and net assets/fund balances		58,352,954.	34	66,679,914.

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)

За

X

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.

CHRISTOPHER'S SCHOOL FOUNDATION Reason for Public Charity Status (All organizations must complete this part.) See instructions. OMB No 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number 54-1727301

The organ	ization is not a	private foundation	because it is: (For lines 1	through 1	11, check	only one b	ox.)			- -		
1 🔲	A church, co	nvention of churche	s, or association of chure	ches desc	nbed in se	ction 170	(b)(1)(A)(i)					
2 🗀	A school des	cribed in section 17	'O(b)(1)(A)(ii). (Attach Sc	hedule E.)								
з 🗀	A hospital or	a cooperative hospi	tal service organization o	described	in section	170(b)(1)	(A)(iii).					
4 🔲	A medical res	search organization	operated in conjunction	with a hos	pital desci	nbed in se	ction 170	(b)(1)(A)(iii). Enter th	e hospital	's nam	e,
	city, and stat	e:										
5 🔲	An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or or	perated by	a governi	mental und	describe	d in		
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)				_					
6 🗀	A federal, sta	ite, or local governm	ent or governmental uni	t described	d ın sectio	n 170(b)(I)(A)(v).					
7 X			eives a substantial part					or from the	general p	ublic desc	ribed i	n
	=	b)(1)(A)(vi). (Comple	•									
8 🗔			ection 170(b)(1)(A)(vi).	(Complete	Part II.)							
9 🗀	-		eives. (1) more than 33 1			rom contri	butions, n	nembershii	o fees, and	d gross red	ceipts	from
	-		nctions - subject to certa					-		_		
			axable income (less sect	-	-	-				_		
		509(a)(2). (Complete	· ·		,			, g			-,	
10 🔲			perated exclusively to te	st for publ	ıc safetv. S	See sectio	n 509(a)(4	\$).				
11	-	•	perated exclusively for th	•	•			•	out the r	ourposes o	of one	or
	_		ations described in section									
		•	organization and comple		-			•				
	а П Туре	- · · ·	¬ ~		•	tionally in	tegrated		d \square	Type III · C	Other	
е 🗀			at the organization is not			-	•	r more disc				n
			han one or more publicly									
f			tten determination from t		_				(-7(-7		·- / ·- / ·	
		rganızation, check tl				F- 1, 1, p-	., ., .,					
g		•	organization accepted ar	nv aift or c	ontribution	n from anv	of the follo	owing pers	ons?			
3	_		lirectly controls, either al			-		•			Yes	No
		=	upported organization?			P		() (.,,	11g(i)		
	-		n described in (i) above?	,						11g(ii)		
	• • •	·	person described in (i) o		e?					11g(iii)		
h	• •	•	about the supported or	• •								
••				3	(-).							
(i) Name	of supported	(ii) EIN	(iii) Type of	(iv) Is the o	rganization	(v) Did you	u notify the	(vi) ls	the	(vii) Am	ount o	
	anization	(") = "	organization	in col. (i) lis				organizátio (i) organiza	n in col.		port	•
g.			(described on lines 1-9 above or IRC section	governing	document?	(i) of you	r support?	Ü.S.	?		,	
			(see instructions))	Yes	No	Yes	No	Yes	No			
							<u> </u>					
]					
					1							
				1								
	•	-										
Total						1						
	Drivony Ant on	od Danamusele Dade	etion Act Natice con t		tiona for			Cabadal	A /Fa	000 ~ 00	V E2/	2000

Form 990 or 990-EZ.

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Sec	ction A. Public Support	•		••	- -	 	
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	5,551,071.	5,470,983.	5,403,587.	3,047,007.	7,251,711.	26,724,359.
2	Tax revenues levied for the organ-						
	zation's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	5,551,071.	5,470,983.	5,403,587.	3,047,007.	7,251,711.	26,724,359.
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,					i	
	column (f)						105,539.
6	Public support. Subtract line 5 from line 4						26,618,820.
	ction B. Total Support		· •				-
Calc	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 4	5,551,071.	5,470,983.	5,403,587.	3,047,007.	7,251,711.	26,724,359.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	902,268.	1,029,356.	1,735,358.	1,369,656.	1,145,802.	6,182,440.
9	Net income from unrelated business						
_	activities, whether or not the						
	business is regularly carried on	Ì					
10	Other income. Do not include gain			Î			
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						32,906,799.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13				I, fourth, or fifth tax	x year as a sectio	n 501(c)(3)	
	organization, check this box and stop	-	,,		•	, , , ,	
Se	ction C. Computation of Publ		rcentage				
14	Public support percentage for 2009 (line 6, column (f) di	vided by line 11, co	olumn (f))		14	80.89 %
15	Public support percentage from 2008	Schedule A, Part	II, line 14			15	78.85 <u>%</u>
168	33 1/3% support test - 2009.if the o	rganization did not	check the box on	line 13, and line 14	4 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				ightharpoons X
t	33 1/3% support test - 2008.If the o	rganization did not	check a box on lin	ne 13 or 16a, and h	ne 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual						▶□
17a	10% -facts-and-circumstances tes	t - 2009.If the orga	inization did not ch	eck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts-and-circumstan	ces" test, check th	is box and stop he	ere. Explain in Pa	rt IV how the organ	nization
	meets the "facts-and-circumstances"						
Ŀ	10% -facts-and-circumstances tes					7a, and line 15 is	10% or
_	more, and if the organization meets the	•					
	organization meets the "facts-and-cire				-		
18	Private foundation. If the organization		-		-		s 🕨
						dule A (Form 990	

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and	747 2000	10,2000	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	\4/2000	(9) 2003	
membership fees received. (Do not					1	
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		 	<u> </u>			
3 Gross receipts from activities that				l		
are not an unrelated trade or bus-				İ		
iness under section 513		ļ				
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				ļ		
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		ļ		ļ		
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						
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6			_			
10a Gross income from interest,				[
dividends, payments received on securities loans, rents, royalties						
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b		1				
11 Net income from unrelated business		1				•
activities not included in line 10b,						1
whether or not the business is regularly carried on				į		
12 Other income. Do not include gain						
or loss from the sale of capital			i			
assets (Explain in Part IV.) 13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the	the organization	'e firet second the	rd fourth or fifth t	av vear as a sect	ion 501(c)(3) organi	zation
check this box and stop here	ine organization	13 m3t, 3000ma, tim	ra, roarar, or mare	ax your as a soor	on con (c)(c) organiz	
Section C. Computation of Public	Support Po	ercentage				
15 Public support percentage for 2009 (lin			column (fl)		15	
16 Public support percentage from 2008		-	Column (i))		16	-
Section D. Computation of Inves						
					17	
17 Investment income percentage for 200			ne 13, column (I))			
18 Investment income percentage from 2				. 4E +L	18	17
19a 33 1/3% support tests - 2009. If the c	-					1 / IS not
more than 33 1/3%, check this box an	•	•	•			. ▶∟
b 33 1/3% support tests - 2008. If the c	_					and r
line 18 is not more than 33 1/3%, chec	k this box ands	top here. The orga	ınızation qualifies a	as a publicly supp	oorted organization	►L
20 Private foundation. If the organization						

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

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 Inspection

Name of the organization

ST. CHRISTOPHER'S SCHOOL FOUNDATION

Employer identification number 54-1727301

Par	t I Organizations Maintaining Donor Advised		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 w	riting that the assets held in donor adv	used funds
3	are the organization's property, subject to the organization's ex		Yes No
6	Did the organization inform all grantees, donors, and donor ad		—
0	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?	donor advisor, or for any other purpos	Yes No
Par		inization answered "Yes" to Form 990	
1	Purpose(s) of conservation easements held by the organization		1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
'	Preservation of land for public use (e.g., recreation or pla	·	istorically important land area
	Protection of natural habitat		rtified historic structure
	Preservation of open space	r reservation of a ce	Tilled Historic Structure
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form	n of a conservation easement on the last
2	day of the tax year.	CONSERVATION CONTINUE TO THE TOTAL	TO A CONSCIVATION CASCINCTA ON the last
	day of the tax year.		Held at the End of the Tax Year
	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic structure	cture included in (a)	2c
d	Number of conservation easements included in (c) acquired af	• •	20
3	Number of conservation easements modified, transferred, rele		
3	year >	ased, extinguished, or terminated by the	The organization during the tex
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the period		- f
•	violations, and enforcement of the conservation easements it	• •	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, a	-	
7	Amount of expenses incurred in monitoring, inspecting, and el		
8	Does each conservation easement reported on line 2(d) above	_	
•	and section 170(h)(4)(B)(ii)?	, , , ,	Yes No
9	In Part XIV, describe how the organization reports conservation	n easements in its revenue and expens	se statement, and balance sheet, and
-	include, if applicable, the text of the footnote to the organization		
	conservation easements.		J J
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "Yes" to Form 9		
1a	If the organization elected, as permitted under SFAS 116, not	to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, edi		
	the footnote to its financial statements that describes these its		
b	If the organization elected, as permitted under SFAS 116, to re	eport in its revenue statement and bala	ance sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, or		
	these items:	·	
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		s
2	If the organization received or held works of art, historical treat	sures, or other similar assets for financ	
_	the following amounts required to be reported under SFAS 11		- •
а	Revenues included in Form 990, Part VIII, line 1	•	▶ \$
	Assets included in Form 990, Part X		\$
_			· · · · · · · · · · · · · · · · · · ·

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932051 02-01-10

Schedule D (Form 990) 2009

Sche	dule D (Form 990) 2009 ST • CHR	ISTOPHER'S	SCHOOL FO	UNDATION	5	54-17	27301	Page 2
	t III Organizations Maintaining C	collections of Ar	t, Historical Tr	easures, or Oth	er Simila	r Asse	ts (contin	ued)
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that are a	significant i	use of its	collection	items
	(check all that apply):							
а	Public exhibition	d	Loan or excl	hange programs				
b	Scholarly research	8	Other					
C	Preservation for future generations							
4	Provide a description of the organization's co	oilections and explair	n how they further th	ne organization's exe	empt purpo	se in Part	ł XIV.	
5	During the year, did the organization solicit of	r receive donations o	of art, historical trea	sures, or other simila	ar assets	_	_	
	to be sold to raise funds rather than to be m			_		!	Yes	No_
Par	t IV Escrow and Custodial Arran		ete if organization ar	nswered "Yes" to Fo	rm 990, Pa	rt IV, line !	9, or	
	reported an amount on Form 990, Pa							
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for contribution	s or other assets no	t included	<u></u>	٦	
	on Form 990, Part X?						∐ Yes	∐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:					
							Amount	
C	Beginning balance				1c			
a	Additions during the year				1d			
e 4	Distributions during the year				1e			
70	Ending balance Did the organization include an amount on F	orm 000 Bort V line	010	•• -	1f		Yes	□ No
	If "Yes," explain the arrangement in Part XIV		211				7 162	140
Pai			swered "Yes" to Fo	rm 990. Part IV. line	10.			
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance	39,175,578.	46,838,713.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,-,		(, , , , ,	
b	Contributions	2061593.	2015069.	·····		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
c	Net investment earnings, gains, and losses	5095998.	-6,468,174.					
d	Grants or scholarships	2528582.	2869304.					
е	Other expenditures for facilities				·			1
	and programs	2259413.	240,326.					i
f	Administrative expenses	237,249.	100,400.					
g	End of year balance	41,307,925.	39,175,578.		<u> </u>			
2	Provide the estimated percentage of the year		IS.					
а	Board designated or quasi-endowment	46.20	_%					
þ	Permanent endowment ► 46.21	%						
C		%						
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	nd administered for	the organiz	ation	<u></u>	
	by:						$\overline{}$	es No
	(i) unrelated organizations						3a(i)	X
	(ii) related organizations		0				3a(ii)	^ _
b	If "Yes" to 3a(ii), are the related organization:						3b]	
Da.	Describe in Part XIV the intended uses of the tVI Investments - Land, Building			Part V line 10				
rai	Description of investment	1	1		\ ooursulata	<u></u>	(d) Book	
	Description of investment	(a) Cost or o basis (investing			Accumulate epreciation	ŭ	(d) Book	value
10	Land	2236 (1117000)		4,992.			1,034	.992.
	Buildings			4,609.	110,5		$\frac{1,034}{3,104}$	
	Leasehold improvements		+ -,	-,	,		_,	<u>,</u>
d	•					\dashv		
	Other					$\neg \vdash$		
	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, column (B), line 1	10(c).)		ightharpoonup	4,139	,027.

Schedule D (Form 990) 2009

FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Sche	dule D (Form 990) 2009 ST. CHRISTOPHER'S SCHOOL FOUNDATION			1727301	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Audited Finan	cial Stat	emen		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		7,187	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		4,510	,905.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		2,676	
4	Net unrealized gains (losses) on investments	4		5,160	,279.
5	Donated services and use of facilities	5			
6	Investment expenses	6	_		
7	Prior period adjustments	7			
8	Other (Describe in Part XIV.)	8			
9	Total adjustments (net). Add lines 4 through 8	9		5,160	<u>,279.</u>
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		7,836	<u>,670.</u>
Pa	t XII Reconciliation of Revenue per Audited Financial Statements With Rever	nue per l	Returr		
1	Total revenue, gains, and other support per audited financial statements		1	12,347	<u>,575.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments 2a 5,16	0,279	4		
b	Donated services and use of facilities 2b		4 1		
С	Recoveries of prior year grants		4 1		
d	Other (Describe in Part XIV.)		-l l	F 160	0.770
е	Add lines 2a through 2d		2е	5,160	, 2/9.
3	Subtract line 2e from line 1		3	7,187	, 290.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.				
a	Investment expenses not included on Form 990, Part VIII, line 7b		-l -l		
Ь	Other (Describe in Part XIV.)		4 .		0.
C -	Add lines 4a and 4b Table was a see Add lines 2 and 4a (This much asset 5 arm 200, Part I from 10)		4c	7,187	
5 Da	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XIII Reconciliation of Expenses per Audited Financial Statements With Expe	neae na			, 200 •
1	Total expenses and losses per audited financial statements	11363 pe	1		0.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		+		•
_ _a	Donated services and use of facilities 2a				
b	Prior year adjustments 2b		1		
c	Other losses 2c		1 1		
d	Other (Describe in Part XIV.)		1		
9	Add lines 2a through 2d		2е		0.
3	Subtract line 2e from line 1		3		0.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			-	
а	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIV.)		1		
С	Add lines 4a and 4b		4c		0.
_5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5		0.
Pa	rt XIV Supplemental Information				· · · · · · · · · · · · · · · · · · ·
X, lin	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa e 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to pro	vide any a	dditiona	I information.	4; Part
<u>TH</u>	E EDUCATIONAL MINISTRY OF EXEMPT ORGANIZATIONS UNDER	SECT	ION	501(C)3	
			<u> </u>		

SCHEDULE I (Form 990)

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

Open to Public Inspection 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		Сошр	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▼ Attach to Form 990.	n answered "Yes" on Fo Attach to Form 990.	on Form 990, Par n 990.	t IV, line 21 or 22.		·	Open to Public Inspection
Name of the organization ST.		CHRISTOPHER'S	SCHOOL FOUN	FOUNDATION				Employer ide	Employer identification number 54-1727301
Part I General Information on Grants and Assistance	on Grants ar	nd Assistance							
1 Does the organization maintain records to substantiate the amount of	ain records to	o substantiate the		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	tion	× × ×
criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	rants or assis	tance? cedures for monit	toring the use of grant	funds in the United	States.			J	•
= 1	sistance to (sovernments and	d Organizations in the	e United States. C	omplete if the orga	nization 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	r any
recipient that received	I more than \$	5,000. Check this	s 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 1-1 (Form 990) if additional space is needed	al space is ne	■ pepee
1 (a) Name and address of organization or government	ganization	(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) or	(h) Purpose of grant or assistance
CHURCH SCHOOLS IN THE DIOCESE	CESE -								
ST. CHRISTOPHER'S SCHOOL -	- 711 ST.				-				
CHRISTOPHER'S ROAD - RICHMOND,	MOND, VA								
23226		54-0505886	501(C)(3)	0	3,116,078.			SCHOOL OPERATIONS	RATIONS
CHURCH SCHOOLS IN THE DIOCESE	CESE -								
ST. CHRISTOPHER'S SCHOOL - 711 ST.	- 711 ST.								
CHRISTOPHER'S ROAD - RICHMOND,	MOND, VA								
23226		54-0505886	501(C)(3)	0.	350,044.			SCHOLARSHIPS	IPS
CHURCH SCHOOLS IN THE DIOCESE	CESE -								
SCHOOL	- 711 ST.								
CHRISTOPHER'S ROAD - RICHMOND,	MOND, VA								
23226		54-0505886	501(C)(3)	0.	212,661.			LIBRARY	
CHURCH SCHOOLS IN THE DIOCESE	CESE -								
ST. CHRISTOPHER'S SCHOOL - 711 ST.	- 711 ST.								
CHRISTOPHER'S ROAD - RICHMOND,	MOND, VA								
23226		54-0505886	501(C)(3)	0.	26,578.			AWARDS	
CHURCH SCHOOLS IN THE DIOCESE	CESE -								
ST. CHRISTOPHER'S SCHOOL -	- 711 ST.								
CHRISTOPHER'S ROAD - RICHMOND,	MOND, VA								
23226		54-0505886	501(C)(3)	0.	402,978.			FACULTY SUPPORT	JPPORT
	n 501(c)(3) aı	nd government or	ganizations					A A	:
۳1	organizations							4	
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	rwork Reduc	stion Act Notice,	see the Instructions	for Form 990.				Schedu	Schedule I (Form 990) 2009

Schedule I (Form 990) 2009

932102 02-02-10

Page 2

54-1727301

ST. CHRISTOPHER'S SCHOOL FOUNDATION

Schedule | (Form 990) 2009

Part III

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

or Form 990-EZ, Part v, line 38a or 40b.

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

OMB No. 1545-0047

Open To Public Inspection

Name of the organization	
--------------------------	--

ST. CHRISTOPHER'S SCHOOL FOUNDATION

Employer identification number 54-1727301

Part I Excess Benefit	ransacti	ons (section	on 501(c)(3) and section	n 501(c)(4) organization	ns only).					
Complete if the organ	ization ansv	wered "Yes"	on Form 990, Part IV,	line 25a or 25b, or For	m 990-E	Z, Part	V, line 40	b.		
1 (a) Name of due				(h) Decembles		-41			(c) Con	rected?
(a) Name of disq	uaimed pen	son		(b) Description of	r transa	ction			Yes	No
					-					
						•	·			
2 Enter the amount of tax impor	sed on the	organization	managers or disqualifi	ed persons during the	year un	der		-	-	
section 4958							▶ \$			
3 Enter the amount of tax, if any	y, on line 2,	above, reim	bursed by the organiza	ition			▶ \$			
Part II Loans to and/or	From Int	terested	Persons.							
Complete if the organ	ization ansv	wered "Yes'	on Form 990, Part IV,	line 26, or Form 990-E	Z, Part \	/, line 38				
(a) Name of interested		to or from	(c) Original principal	(d) Balance due		ln_		oroved ard or		/ntten
person and purpose	the orga	nization?	amount		defa	ault?	comm	uttee?	agree	ment?
	То	From			Yes	No	Yes	No	Yes	No
STILLWELL - TUITI		X	25,000.	18,750.		X	X		X	
STILLWELL - TUITI		X	27,500.	20,625.		X	X		X	
STILLWELL - TUITI		X	30,000.	22,500.		X	X		Х	
STILLWELL - TUITI		X	32,500.	24,375.		X	X		X	
STILLWELL - TUITI		Х	35,000.	26,250.		Х	Х		Х	
STILLWELL - FACUL		Х	195,000.	195,000.		X	Х		X	
Total			▶ \$	307,500.						
Part III Grants or Assist	ance Be	nefiting l	nterested Person	s.						
Complete if the erger	uzation ansi	wered "Yes"	on Form 990, Part IV,	line 27.						

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance
Part IV Business Transactions Invo	olving Interested Persons.	

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person

(b) Relationship between interested person and the organization

(c) Amount of transaction

(d) Description of transaction organization's revenues?

Yes No

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule L (Form 990 or 990-EZ) 2009

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

OMB No 1545-0047

Open to Public Inspection

Name of the organization

ST. CHRISTOPHER'S SCHOOL FOUNDATION

Employer identification number 54-1727301

Pai	t I Types of Property						
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of de revenu	etermining	
1	Art - Works of art						 -
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						•
8	Intellectual property						
9	Securities - Publicly traded	X	3	913,856.	FMV ON DATE	OFG	IFT
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or						
	trust interests						
12	Securities - Miscellaneous	· · · · · · · · · · · · · · · · ·					
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other	ļ					
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other		· · · · · ·				
18	Collectibles						
19	Food inventory	<u> </u>	······································				
20	Drugs and medical supplies						
21 22	Taxidermy Historical artifacts						
23	Scientific specimens	<u> </u>					
24	Archeological artifacts		-				
25							
26	Other () Other ()						
27	Other • ()			· · · · · · · · · · · · · · · · · · ·			
28	Other (
29	Number of Forms 8283 received by the organ	zation during	the tax year for o	contributions	·		
	for which the organization completed Form 82		-				
	-					Ye	s No
30a	During the year, did the organization receive b	y contributio	on any property re	ported in Part I, lines 1-28 th	at it must hold for		
	at least three years from the date of the initial	contribution	, and which is not	required to be used for exer	npt purposes for		1
	the entire holding period?					30a	X
b	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance	policy that re	equires the review	of any non-standard contrib	outions?	31 X	
32a	Does the organization hire or use third parties	or related or	ganizations to sol	icit, process, or sell noncash	1	[
	contributions?					32a	X
b	If "Yes," describe in Part II.						
33	If the organization did not report revenues in o	olumn (c) fo	r a type of propert	y for which column (a) is che	ecked,		
	describe in Part II						
LHA	For Privacy Act and Paperwork Reduction	Act Notice	, see the Instruct	ions for Form 990.	Schedule N	/I (Form 99	90) 2009

SCHEDULE 0 (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.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 54-1727301

ST. CHRISTOPHER'S SCHOOL FOUNDATION	54-1727301
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATI	ON MISSION:
THE FOUNDATION'S PURPOSE AS A PUBLIC CHARITY SHALL	INCLUDE FOSTERING
AND PROMOTING THE WELFARE AND DEVELOPMENT OF ST. CH	RISTOPHER'S SCHOOL.
FORM 990, PART VI, SECTION B, LINE 11: COPY OF THE	DRAFT RETURN WAS
PASSWORD PROTECTED AND E-MAILED TO EACH BOARD MEMBE	R BEFORE FILING. A
MEETING FOLLOWS FOR QUESTIONS AND DISCUSSION.	
FORM 990, PART VI, SECTION B, LINE 12C: ANNUALLY AL	L BOARD MEMBERS SIGN
NEW CONFLICT OF INTEREST STATEMENTS WHICH ARE MAINT	AINED AT THE
ORGANIZATIONS BUSINESS OFFICE.	
FORM 990, PART VI, SECTION B LINE 15: QUESTION DOE	S NOT APPLY SINCE THE
ORGANIZATION HAS NO EMPLOYEES	
FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST	THE DOCUMENTS MAY BE
OBTAINED FROM THE BUSINESS OFFICE	THE DOCUMENTS HELL DE
OBTAINED FROM THE BOSTNESS OFFICE	
FORM 990, PART XI, LINE 2C:	
THE BOARD ASSUMES RESPONSIBILITY FOR OVERSIGHT OF T	HE AUDIT AND THE
SELECTION OF THE INDEPENDENT ACCOUNTANT, THIS PROCE	SS HAS NOT CHANGED
SINCE THE PRIOR YEAR.	

Fórm 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

Part I Automatic 3-Month Extension of Time. Only submit	onginal (no copies needed).
corporation required to file Form 990-T and requesting an automatic 6-month 6	extension - check this box and complete
art I only	· · · · · · · · · · · · · · · · · · ·
other corporations (including 1120-C filers), partnerships, REMICs, and trusts	must use Form 7004 to request an extension of time
file income tax returns.	
lectronic Filing (e-file). Generally, you can electronically file Form 8868 if you obted below (6 months for a corporation required to file Form 990-T). However, you automatic) 3 month extension or (2) you file Forms 990-BL, 6069, or 8870, go must submit the fully completed and signed page 2 (Part II) of Form 8868. For www.irs.gov/efile and click on e-file for Charities & Nonprofits.	you cannot file Form 8868 electronically if (1) you want the additional group returns or a composite or consolidated Form 990-T. Instead.
pe or Name of Exempt Organization	Employer identification number
int GM GWD I GMODWDD I G GGWOOT TOIDD I MIC	F4 4808301
ST. CHRISTOPHER'S SCHOOL FOUNDATIO	
Number, street, and room or suite no. If a P.O box, see instructions no your 711 ST. CHRISTOPHER'S ROAD	i.
turn See Structions City town or post office, state, and ZIP code. For a foreign address,	see instructions
RICHMOND, VA 23226	, oco mediacione.
theck type of return to be filed(life 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) trus	st) Form 5227
Form 990-EZ Form 990-T (trust other than above)	Form 6069
Form 990-PF Form 1041-A	Form 8870
A. J. BOLLING, III.	
The books are in the care of ST. CHRISTOPHER'S SCHO Telephone No (804) 282-3185 If the organization does not have an office or place of business in the United If this is for a Group Return, enter the organization's four digit Group Exempts ox If it is for part of the group, check this box and attach a I request an automatic 3-month (6-months for a corporation required to file	OOL - RICHMOND, VA 23226 AX No. States, check this box Ion Number (GEN) If this is for the whole group, check this is list with the names and EINs of all members the extension will cover the Form 990-T) extension of time until
The books are in the care of ST. CHRISTOPHER'S SCHO Telephone No (804) 282-3185 If the organization does not have an office or place of business in the United If this is for a Group Return, enter the organization's four digit Group Exemption If it is for part of the group, check this box and attach a	OOL - RICHMOND, VA 23226 AX No. States, check this box Ion Number (GEN) If this is for the whole group, check this is list with the names and EINs of all members the extension will cover the Form 990-T) extension of time until
The books are in the care of ▶ ST. CHRISTOPHER'S SCHO Telephone No ▶ (804) 282-3185 If the organization does not have an office or place of business in the United If this is for a Group Return, enter the organization's four digit Group Exemption If it is for part of the group, check this box ▶ and attach a I request an automatic 3-month (6-months for a corporation required to file FEBRUARY 15, 2011, to file the exempt organization	OOL - RICHMOND, VA 23226 AX No. States, check this box Ion Number (GEN) If this is for the whole group, check this is list with the names and EINs of all members the extension will cover the Form 990-T) extension of time until
The books are in the care of ▶ ST. CHRISTOPHER'S SCHO Telephone No ▶ (804) 282-3185 If the organization does not have an office or place of business in the United If this is for a Group Return, enter the organization's four digit Group Exemption If it is for part of the group, check this box ▶ and attach a I request an automatic 3-month (6-months for a corporation required to file FEBRUARY 15, 2011, to file the exempt organization is for the organization's return for: □ calendar year or	OOL - RICHMOND, VA 23226 AX No. States, check this box Ion Number (GEN) If this is for the whole group, check this is list with the names and EINs of all members the extension will cover the Form 990-T) extension of time until
The books are in the care of ST. CHRISTOPHER'S SCHO Telephone No (804) 282-3185 If the organization does not have an office or place of business in the United If this is for a Group Return, enter the organization's four digit Group Exemption If it is for part of the group, check this box and attach a I request an automatic 3-month (6-months for a corporation required to file FEBRUARY 15, 2011, to file the exempt organization is for the organization's return for: Calendar year or	OOL - RICHMOND, VA 23226 AX No. States, check this box Ion Number (GEN) If this is for the whole group, check this is list with the names and EINs of all members the extension will cover be Form 990-T) extension of time until return for the organization named above. The extension
The books are in the care of ST. CHRISTOPHER'S SCHO Telephone No (804) 282-3185 If the organization does not have an office or place of business in the United If this is for a Group Return, enter the organization's four digit Group Exempts ox If it is for part of the group, check this box and attach a I request an automatic 3-month (6-months for a corporation required to file FEBRUARY 15, 2011, to file the exempt organization is for the organization's return for: Calendar year or X tax year beginning JUL 1, 2009, and en	States, check this box In Number (GEN) If this is for the whole group, check this list with the names and EINs of all members the extension will cover the Form 990-T) extension of time until return for the organization named above. The extension Inding JUN 30, 2010 If this is for the whole group, check this is for the whole group.
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