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

OMB No 1545-0047 Open to Public Inspection

Α	For the	2012 calendar year, or tax year beginning and	d ending						
	Check if applicable	FIRST BAPTIST CHURCH ENDOWMENT FUND,		D Employer identific	cation number				
	Addres	INCORPORATED							
	Name change Initial	Doing Business As		54-0858196					
	iretum Termin ated	2705 HONOMENT AVENUE	Room/suite	E Telephone number 804-355-8637					
	Amend return	City, town, or post office, state, and ZIP code		G Gross receipts \$	11,220,890.				
	Application	KICHMOND, VA 23220-2071		H(a) Is this a group re	eturn				
	pendin	F Name and address of principal officer:CARL JOHNSON		for affiliates?	Yes X No				
		2709 MONUMENT AVENUE, RICHMOND, VA 23	3220-2	6 Н(b) Are all affiliates inc	cluded? Yes No				
1	Tax-exe	mpt status: X 501(c)(3)			list. (see instructions)				
J	Websit	e: ► FBCRICHMOND.ORG		H(c) Group exemptio					
K	Form of	organization	L Yea		A State of legal domicile VA				
P		Summary							
Φ	1 1	Briefly describe the organization's mission or most significant activities: ${f TO}$. If	AIDE C	HRISTIAN ORG	ANIZATIONS				
Governance	l .	IN CARRYING OUT THEIR MISSIONS							
Ĕ	2	Check this box 🕨 🔲 if the organization discontinued its operations or disp	osed of mo	re than 25% of its net as	ssets.				
8	3	Number of voting members of the governing body (Part VI, line 1a)		3	15				
	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	15				
es	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	0				
ΞĘ	6	Total number of volunteers (estimate if necessary)		6	0				
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.				
_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.				
				Prior Year	Current Year				
9	8	Contributions and grants (Part VIII, line 1h)	374,626.	980,833.					
a D	9	Program service revenue (Part VIII, line 2g)		0.	0.				
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	952,891.	1,322,788.					
<u> </u>	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,327,517.	2,303,621.				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1·3)		930,127.	933,168.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
Š	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.					
ğ	b	Total fundraising expenses (Part IX, column (D), line 25)	329.						
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		134,292.	159,877.				
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)— V	טי	1,064,419.	1,093,045.				
	19_	Revenue less expenses. Subtract line 18 from line 12	S	263,098.	1,210,576.				
Net Assets or	3	= JUN 2 7 20	13 14 B	eginning of Current Year	End of Year				
sets	20	Fotal assets (Part X, line 16)	101	17,692,391.	19,005,544.				
A A	21	Total liabilities (Part X, line 26)		446,027.	488,959.				
25	22	Net assets or fund balances. Subtract line 21 from line 20 OGDEN	-	17,246,364.	18,516,585.				
P	art II	Signature Block							
Und	der pena	ties of perjury, I declare that I have examined this return, including accompanying schedu	les and state:	ments, and to the best of m	y knowledge and belief, it is				
true	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of v	vhich prepare	er has any knowledge					
		Cafe Johnson		6-11-	/3				
Sig	jn	Signature of office		Date					
He	re	CARL JOHNSON, PRESIDENT							
		Type or print name and title							
		Print/Type preparer's name Preparer's signature		Date Check	PTIN				
Pai	d	MEDA S LANE Meda & Love	_	6-7-13 II self-employe					
	parer	Firm's name LANE & ASSOCIATES, P.C.		Firm's EIN ▶	54-1216800				
Use	Only	Firm's address ≥ 2839 HATHAWAY ROAD							
		RICHMOND, VA 23225		Phone no (804)272-7421				
Ma	y the IF	S discuss this return with the preparer shown above? (see instructions)			X Yes No				

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2012)

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)?		,,	i
_	If "Yes," complete Schedule A	1_	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			l v
4	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			х
5	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		
-	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
•	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,	<u> </u>		
	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		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		_X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
_	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			v
	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	11a		X
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
G	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	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	1		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		<u> </u>
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?			••
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		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		
U	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	140		
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
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, Parts III and IV	16		Х
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		_X_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	ļ <u></u>	<u>X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u> _
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	(00:0:
		Form	990	(2012)

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the	•	v	
00	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	<u> X</u>	-
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	00		x
23	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
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	23		
	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		
25a	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, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			.,
	of any of these persons? If "Yes," complete 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):	00-		v
a	, , , , , , , , , , , , , , , , , , , ,	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	28b		
C	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			_
	If "Yes," complete Schedule N, Part I	31		Х
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		X
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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	, , , , , , , , , , , , , , , , , , , ,	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
07	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	~~		v
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
	Mate: Vill And And are refulled to comblete actioning o			(2012)
				CU 121

	990 (2012) INCORPORATED 54-0858	<u> 196</u>	P	age \$
Par	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0· if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	_	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3ь		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	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: ▶			
	See instructions for 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
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			ļ
	any contributions that were not tax deductible as charitable contributions?	6a		X
	if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		ļ
	Organizations that may receive deductible contributions under section 170(c).			.,
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b_		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			٠,,
	to file Form 8282?	7c		X
	If "Yes," Indicate the number of Forms 8282 filed during the year	l _ l		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	_	
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	-	
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	7h		
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
	Sponsoring organizations maintaining donor advised funds.	8		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:	90		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.	m		,,,,,
	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			,
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X

14b

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

FIRST BAPTIST CHURCH ENDOWMENT FUND,

Form 990 (2012)

INCORPORATED

54-0858196

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.

	Check of Schoolule O contains a response to any question in this Part VI				X
Sec	Check if Schedule O contains a response to any question in this Part VI tion A. Governing Body and Management				
<u>oec</u>	tion A. Governing body and management			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	15		103	
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
ь	Enter the number of voting members included in line 1a, above, who are independent	15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any				
_	officer, director, trustee, or key employee?	Other	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct s	upervision			
•	of officers, directors, or trustees, or key employees to a management company or other person?	apa . (101011	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was fi	led?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint on	e or			
	more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholde	ers, or			
	persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the fo	llowing			
а	The governing body?	· ·	8a	Х	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at ti	he			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		<u>X</u>
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	ode.)			
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		<u>X</u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, a	ffiliates,		1	
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10ь		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before f	iling the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflict	s?	12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," desc	пbe			
	in Schedule O how this was done		12c	Х	
13	Did the organization have a written whistleblower policy?		13		<u>X</u>
14	Did 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 inde	pendent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				.,
	The organization's CEO, Executive Director, or top management official		15a		<u>X</u>
b	Other officers or key employees of the organization		15b		X
10	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with	a			v
L	taxable entity during the year?		16a		X
Ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its part	icipation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's				
500	exempt status with respect to such arrangements?		16b	ļ	
	tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ NONE				
17 10		F01(a)(2)a a a b) a			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section for public inspection. Indicate how you made these available. Check all that apply.	SUTICIONS ONLY) a	vallab	e	
		ula Ol			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of in	•	16	ole!	
13	statements available to the public during the tax year.	iterest policy, and	ıman	cial	
20	State the name, physical address, and telephone number of the person who possesses the books and record	s of the organizat	loc. -		
	TREASURER - 804-355-8637	s or the organizat	ioii. 💌		
	2709 MONUMENT AVENUE, RICHMOND, VA 23220-2671			-	
23200			Form	990	(2012)

Form 990 (2012) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if	Schedule C	contains a response	to any dijestion in	this Part VII
CHECKI	OCHEGINE C	CONTAINS A RESPONSE	to arry question in	LIND FAIL VII

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
- 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, if any. 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.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- 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	(do		Pos	ition		one	Reportable	Reportable	Estimated		
	hours per week	(do not check more than one '		compensation	compensation	amount of other						
	(list any				ľ		Ι	the	from related organizations	compensation		
	hours for	individual trustee or director	63			B		organization	(W-2/1099-MISC)	from the		
	related) Stage (truste		l ge	pensa		(W-2/1099-MISC)		organization		
	organizations below	T leut	Institutional trustae		g of	15 ag	_		!	and related organizations		
	line)	Individ	list Table	Officer	Key employee	Highest compensated employee	Former			organization o		
(1) SUSAN S. BEACH	1.00											
DIRECTOR		X				_		0.	0.	0.		
(2) KIM O. BOYS	3.00								_			
TREASURER	1 00	Х		Х		_		0.	0.	0.		
(3) THOMAS N. CHEWNING	1.00									•		
VICE PRESIDENT	1 00	Х		X	<u> </u>	<u> </u>	<u> </u>	0.	0.	0.		
(4) VIRGINIA S. DARNELL	1.00	Х		x				0.	ο.	0		
SECRETARY	1.00	Λ	-	Λ	-	-		0.	0.	0.		
(5) CHARLOTTE K. EVANS DIRECTOR	1.00	Х						0.	0.	0.		
(6) E. BRUCE HEILMAN	1.00	Λ			-	1	┢	0.	•			
DIRECTOR	1.00	х				-		0.	0.	0.		
(7) CARL W. JOHNSON	1.00			_			 					
PRESIDENT		Х		x	ŀ			0.	0.	0.		
(8) LINN P. KRECKMAN	1.00								-, -			
DIRECTOR		X						0.	0.	0.		
(9) JAMES E. KULP	1.00											
DIRECTOR		X						0.	0.	0.		
(10) MICHAEL L. LIPFORD	1.00											
DIRECTOR		Х		<u> </u>				0.	0.	0.		
(11) BURTON M. (MAC) MARSHALL	1.00									_		
DIRECTOR		Х						0.	0.	0.		
(12) JAMES E. MARKHAM	1.00									•		
DIRECTOR	1 00	X		ļ				0.	0.	0.		
(13) JAMES W. NORVELLE	1.00	х	ŀ					0.	0.	0		
DIRECTOR	1.00	A		_		_	-	0.	<u> </u>	0.		
(14) JULIA O. SCOTT	1.00	Х	İ					0.	0.	0.		
OIRECTOR (15) CHARLES W. TYSINGER	1.00	^	┢					0.	- 0.	•		
DIRECTOR	1.00	х						0.	0.	0.		
DIRECTOR								† -	- 0.	<u> </u>		
	-											
		1										

Form 990 (2012)

INCORPORATED

	990 (2012) INCORPORA									<u>54-085</u>	8196	Pa	ige 8
Par	t VII Section A. Officers, Directors, Trust	ees, Key Em	oloy	ees	, and	d Hi	ghe	st C	ompensated Employe	es (continued)			-
	(A) Name and title	(B) Average hours per week	Average Po (do not che box, unless					h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other		
		(list any hours for related organizations below line)	Individual frustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	fro orga and	pensa om the anizati i relate nizatio	ed
											<u> </u>		
											-		-
													
											-		
									0	0			^
С	Sub-total Total from continuation sheets to Part VII Total (add lines 1b and 1c)	, Section A					> >		0.	0 0 0	•		0.
2	Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	ed al	bove	e) wt	no re	eceived more than \$100	,000 of reportable	····	52 1	0
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for su		ıste	e, ke	y en	nplo	уее	, or	highest compensated e	mployee on	3	Yes	No X
4	For any individual listed on line 1a, is the sui and related organizations greater than \$150	m of reportabl ,000? If "Yes,	" co	mple	ete S	Sche	edule	e <i>J 1</i>	for such individual		4		Х
5 Sec	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," comp tion B. Independent Contractors							elat	ed organization or indivi	dual for services	5		Х
1	Complete this table for your five highest corthe organization. Report compensation for t										nsation fr	om	
	(A) Name and business	address	NC	ONI	<u> </u>				(B) Description of s	ervices	(C) Compen) satior	1
					-								
2	Total number of independent contractors (in	ncluding but n	ot İıı	mıte	d to	tho	se lis	sted	d above) who received m	ore than			•
23200 12-10	\$100,000 of compensation from the organiz	ation 🕨				(<u>) </u>				Form 9	90 (2	2012)

Form 990 (2012) INCORPO
Part VIII Statement of Revenue

INCORPORATED

-			Check if Schedule O cont	ains a response	to any question in	this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1	а	Federated campaigns	1a					
E a		b	Membership dues	1b					
Am (C	Fundraising events	1c					
E i		d	Related organizations	1d					
S.E		e	Government grants (contribut	ions) 1e					
it S		f	All other contributions, gifts, gran	its, and					
혈취			similar amounts not included abo	ve 1f	980,833.				
Contributions, Gifts, Grants and Other Similar Amounts		9	Noncash contributions included in lines	1a-1f \$					
2 4		h	Total. Add lines 1a-1f		•	980,833.		·········	
_	_				Business Code				
jce	2				· · ·		- 1		
Program Service Revenue		b						 	<u> </u>
Ye a		C							
Re		d							
Pro		e	All all		-				<u> </u>
		f	All other program service reverse. Add lines 2a-2f	enue					
\rightarrow	3	9	Investment income (including	dividende inter		· · · · · · · · · · · · · · · · · · ·			
	3		other similar amounts)	dividends, intere	est, and	763,672.			763,672
	4		Income from investment of ta	v-exempt bond r	roceede	103,012.			703,072
	5		Royalties	x exempt bond p	b l	· · · · · · · · · · · · · · · · · · ·			
	•		, io, aimos	(i) Real	(II) Personal				
	6	а	Gross rents	(V.100)	(1) (1)				
	_	-	Less: rental expenses						
			Rental income or (loss)						
			Net rental income or (loss)	<u></u>	>				
			Gross amount from sales of	(i) Securities	(II) Other				
			assets other than inventory	9,476,385.					
		b	Less: cost or other basis						
			and sales expenses	8,917,269.					
İ		C	Gain or (loss)	559,116.					
			Net gain or (loss)		•	559,116.			559,116.
une	8	а	Gross income from fundraisin	g events (not					
- Ju			including \$		1				
Other Reve			contributions reported on line	1c). See					
- Je			Part IV, line 18	а					
ਰੀ			Less: direct expenses	b					
			Net income or (loss) from fund		•	•••••			·
	9	a	Gross income from gaming ac						
			Part IV, line 19	a	·				
			Less: direct expenses	b					
			Net income or (loss) from gam						<u> </u>
	10	а	Gross sales of inventory, less and allowances						
		_	Less: cost of goods sold	a b					
				_					
1		Ü	Net income or (loss) from sale Miscellaneous Revenu		Business Code				
ł	11	<u> </u>			Business Code				
		a b							
		c		_			 		-
- 1		d	All other revenue	 -			-		 -
		-	Total. Add lines 11a-11d		•				<u> </u>
_	12		Total revenue. See instructions			2,303,621.	0.	0.	1,322,788.
23200 12-10-	9		<u> </u>						Form 990 (2012)

Form 990 (2012) INCORPORATED

Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp			mplete column (A)										
	Check if Schedule O contains a response to any question in this Part IX Do not include amounts reported on lines 6b, Total expenses Program service Management and Fundansing													
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses									
1	Grants and other assistance to governments and	000 160	000 160											
	organizations in the United States See Part IV, line 21	933,168.	933,168.											
2	Grants and other assistance to individuals in													
	the United States. See Part IV, line 22													
3	Grants and other assistance to governments,													
	organizations, and individuals outside the													
_	United States. 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 accruals and contributions (include													
•	section 401(k) and 403(b) employer contributions)													
9	Other employee benefits				 -									
10	Payroll taxes													
11	Fees for services (non-employees) Management													
a	-													
b	Legal	3,900.		3,900.										
d	· · · · · · · · · · · · · · · · ·	3,300.		3,700.										
0	Professional fundraising services See Part IV, line 17													
f	Investment management fees	82,379.		82,379.										
g		02/3/36		02/3/3.										
9	column (A) amount, list line 11g expenses on Sch O)													
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	31,495.		31,495.										
21	Payments to affiliates													
22	Depreciation, depletion, and amortization													
23	Insurance	20,305.		20,305.										
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)													
а	OTHER EXPENSES-FNDRSNG-	16,829.			16,829.									
b	TAXES	4,485.		4,485.	10/023.									
c	OTHER EXPENSES-MNGMNT-9	484.		484.										
d				101.										
	All other expenses													
25	Total functional expenses. Add lines 1 through 24e	1,093,045.	933,168.	143,048.	16,829.									
26	Joint costs. Complete this line only if the organization													
	reported in column (B) joint costs from a combined													
	educational campaign and fundraising solicitation	ļ												
	Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)													

Form 990 (2012)

Part X Balance Sheet Check if Schedule O contains a response to any question in this Part X Beginning of year End of year Cash · non-interest-bearing 1 166,685. 300,017. 2 Savings and temporary cash investments 2 18,710. 109,378. 131,111. 3 Pledges and grants receivable, net 3 28,308. 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 7 Notes and loans receivable, net 7 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 10b b Less: accumulated depreciation 10c 12,824,835. 14,230,938. 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 4,346,501. 4,541,452. 15 Other assets. See Part IV, line 11 15 17,692,391. 19,005,544. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 Accounts payable and accrued expenses 17 5,313. 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Liabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 440,714. 446,027. Schedule D 25 488,959. 488,959. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here \(\bigcup \bigcup X \) and complete lines 30 through 34. 0. 30 Capital stock or trust principal, or current funds 30 0. 31 Paid-in or capital surplus, or land, building, or equipment fund 31 17,246,364. 32 32 18,516,585. Retained earnings, endowment, accumulated income, or other funds 17,246,364. 18,516,585. 33 Total net assets or fund balances 33 17,692,391. 19,005,544. 34 Total liabilities and net assets/fund balances

Form 990 (2012)

Pa	rt XI Reconciliation of Net Assets				•	
	Check if Schedule O contains a response to any question in this Part XI	_			[X
1 2 3 4 5 6 7 8	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments	1 2 3 4 5 6 7 8 8 0	1,0	093 210 246	3,62 3,04	21. 15. 76.
9 10	Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	9			, 04	
	column (B))	10	18,	516	.58	35.
Pa	rt XII Financial Statements and Reporting	1 10			700	
	Check if Schedule O contains a response to any question in this Part XII				[
		_		'	Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
b	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?	d on a		2b		x
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	e basis.	<u> </u>	-		
c	consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	·				
	review, or compilation of its financial statements and selection of an independent accountant?			2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch		1			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audi	.t			
	Act and OMB Circular A-133?			3a		<u>X</u>
Ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audi				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		
			Fr	orm 🛭	990 (2	2012)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

| 2012

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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.

FIRST BAPTIST CHURCH ENDOWMENT FUND,

INCORPORATED

Inspection
Employer identification number

54-0858196

Part :	<u> </u>	tor Public Chai	rity Statu	S (All organiz	ations mus	st complet	te this par	t.) See inst	tructions.				
The organ	zation is not a	a private foundation	because it	s: (For lines	1 through 1	1, check	only one b	oox.)					
1 🔲	A church, cor	nvention of churche	s, or assoc	ation of chur	ches desci	nbed in se	ction 170	(b)(1)(A)(i)).				
2		cribed in section 1											
з 🗀		a cooperative hosp				n section	170(b)(1)	(A)(iii).					
4	-	search organization		-					(b)(1)(A)(i	ii). Enter	the hospita	al's na	me.
- —	city, and stat	_							1-7(-7(-7(-	.,			,
5 🗀	• •	on operated for the	benefit of a	college or u	niversity ov	vned or or	perated by	a govern	mental un	t describ	ned in		
•		(b)(1)(A)(iv). (Compl		conces or a	involsity of	villed of op	ocialed by	a govern	inenta un	it describ	Jea III		
•			•		• doordbood		- 470/b\/:	11/41/43					
6		ite, or local governm	-										
7 🗀		on that normally red		stantiai part	or its supp	ort from a	governme	entai unit c	or from the	generai	public des	спрес	ıın
	•	b)(1)(A)(vi). (Comple	•										
8 -	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												
9 🗀	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.												
 1	See section 509(a)(2). (Complete Part III.)												
10	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).												
11 X	X 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												
		type of supporting	organizatio	n and compl	ete lines 1°	le through	11h						
	a X Type !	! b	ype II	c L T	ype III • Fur	nctionally i	integrated	•	ј 📖 Тур	e III - No	n-functiona	illy into	egrated
e 📖	By checking	this box, I certify the	at the organ	ization is not	controlled	directly o	r indirectly	by one o	r more dis	qualified	persons of	her th	an
	foundation m	anagers and other	than one or	more publicly	y supporte	d organiza	itions des	cribed in s	ection 509	9(a)(1) or	section 50	9(a)(2)).
f	If the organiz	ation received a wri	tten determ	ination from t	the IRS tha	it it is a Ty	pe I, Type	II, or Type	e III				
	supporting or	rganization, check t	his box										
9	Since August	t 17, 2006, has the	organization	accepted ar	ny gift or co	ontribution	from any	of the follo	owing pen	sons?			
	(i) A person	n who directly or inc	directly cont	rols, either al	one or toge	ether with	persons o	described	ın (II) and (III) below	' ,	Yes	No
	the gove	erning body of the s	upported o	rganization?							11g(i)		X
	(ii) A family	member of a perso	n described	l ın (i) above?							11g(ii)		X
	(iii) A 35% d	controlled entity of a	a person de	scribed in (i) o	or (iı) above	?					11g(iii		X
h		ollowing information	· ·	**	• •								
		•		••	,	•							
(i) Name	of supported	(ii) EIN	(iii) Type o	f organization	(iv) Is the o	rganization	(v) Did voi	u notify the	(vi) is	the	(vii) Amour	t of m	onetanı
	nization	(, ב		on lines 1-9	in col (i) lis		organizat		organizati (i) organiz			pport	Ulletary
				IRC section	governing	locument?	(i) of you	r support?	US	?		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			(see ins	tructions))	Yes	No	Yes	No	Yes	No			
SEE F	ORM 990	,	<u> </u>										
PART	III.		501(C	(3)		Х	Х		X		93	33.	168.
	•				1								
									 				
			 		 			 	1				
											 		
									[
		L	1		ll		l	l	L	l	1		

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

Schedule A (Form 990 or 990-EZ) 2012

933,168.

232021 12-04-12

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under Part III. If the organization failed to qualify under Part III. If the organization failed to qualify under Part III. If the organization failed to qualify under Part III. If the organization for the organization contributions, and membership fees received. (Do not include any nature) in the part of the organization of the organization of the organization of the organization of the organization without charpe in the organization without charpe in the organization without charpe in the organization without charpe in the organization without charpe in the organization without charpe in the organization without charpe in the organization without charpe in the organization without charpe in the organization organization included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 8 Public support: Selection 2 from the 4 8 Gross income from included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 9 Note in the organization organization included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 10 Other income from increast, dividende, payments received on securities loans, reits, royalities and income from similar sources 9 Net income from increast, dividende, payments are caved on securities loans, reits, royalities and income from similar sources 9 Net income from similar sources 10 Other income Do not include gain or loss from the sale of capital assess (Explain in Part IV) 11 Total support exceeding of column (f) total organization or loss from the sale of capital assess (Explain in Part IV) 12 Gross recepts from related activities, also, (see instructions) 13 First five years. If the Form 990 is for the organization of included by line 11, column (f) 14 990 15 16 15 16 16 16 16 16 16 16 16 16 16 16 16 16	PE	rt II Support Schedule for	Organizations	Described in	Sections 170)(b)(1)(A)(iv) ar	nd 170(b)(1)(A)(v	/i)	
Section A. Public Support Calendar year (or listed year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total (f) Grist, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levide for the organization's benefit and either paut to or expended on its behalf The portion of stall contributions by a governmental unit to the organization without charge Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or bublicly supported organization) included on line 1 that exceeds 256 of the amount shown on line 11, column (f) Public support. Subtract lines 5 ron line 4 Gross income from increast, dividends, payments received on securities loans, rents, royalties and income from smilar sources Nether or not include gain or loas from the sale of capital assets (Explain in Part IV.) Total support. Add lines 7 through 10 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501c(is) organization, check this box and stop here. The organization qualifies as a publicly supported organization Public support percentage from 2011. Schedule A. Part III, line 14 Fullic support percentage from 2011. Schedule A. Part III, line 14 Fullic support percentage from 2011. Schedule A. Part III, line 14 Fullic support percentage from 2011. Schedule A. Part III, line 14 Fullic support percentage from 2011. Schedule A. Part III, line 14 Fullic support percentage from 2011. Schedule A. Part III, line 14 Fullic support percentage from 2011. Schedule A. Part III, line 14 Fullic support percentage from 2011. Schedule A. Part III, line 14 Fullic support percentage from 2011. Schedule A. Part III, line 14 Fullic support percentage from 2011. Schedule A. Part III, line 14 Fullic support percentage from 2011. Schedule A. Part III, line 14 Fullic support percentage from 2011. Schedule A. Part III, line 14 Fullic support percentage from 2011.		(Complete only if you checke	d the box on line 5	5, 7, or 8 of Part I	or if the organization	on failed to qualify	under Part III. If the	e organization	
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and stop here. The organization qualifies as a publicly supported organization				-		-l l 45 00 4/0	0/	-	
			=			a iine 15 is 33 1/3	% or more, check th	is box	
	17-		, ,			0 12 160 or 164	and line 14 is 100/		
17a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,	1/6								
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		-				•	art iv now the organ	inzation	
b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or			-	•		•	17a and line 15 in	10% 0*	
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organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								.	
	18			-				s F	
	18	Private foundation. If the organization	n did not check a	box on line 13, 16	ia, 16b, 17a, or 17	b, check this box	and see instruction	s ▶ □	

Schedule A (Form 990 or 990-EZ) 2012 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to
qualify under the tests listed below, please complete Part II)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and	1.1	1		1.7	1 1	
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,					1	
merchandise sold or services per-						
formed, 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 bus-						
iness 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			1-	ļ		
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and		1	1			
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		_				<u> </u>
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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						· · · · · · · · · · · · · · · · · · ·
11 Net income from unrelated business						
activities not included in line 10b,						
whether or not the business is						
regularly carried on 12 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part IV.)				<u> </u>	-	
13 Total support. (Add lines 9, 10c, 11, and 12)		l	L	L	<u> </u>	
14 First five years. If the Form 990 is for t	he organization's	s first, second, thir	d, fourth, or fifth to	ax year as a section	on 501(c)(3) organiz	ation,
check this box and stop here						
Section C. Computation of Public					,,	
15 Public support percentage for 2012 (lin			column (f))		15	9
16 Public support percentage from 2011 S					16	9
Section D. Computation of Invest			 		· · · · · · · · · · · · · · · · · · ·	
17 Investment income percentage for 201			ne 13, column (f))		17	
18 Investment income percentage from 20					18	9
19a 33 1/3% support tests - 2012. If the o	rganızatıon dıd r	not check the box	on line 14, and line	e 15 is more than :	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box and	stop here. The	organization qual	fies as a publicly	supported organiz	ation	▶
b 33 1/3% support tests - 2011. If the o				-		and
line 18 is not more than 33 1/3%, chec						
20 Private foundation. If the organization					-	▶ 🗔
232023 12-04-12					hedule A (Form 99	

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

2012 Open to Public Inspection

Name of the organization

FIRST BAPTIST CHURCH ENDOWMENT FUND,

Employer identification number 54-0858196

	INCORPORATED	IP I AII A' ' F '	<u> </u>
Par			or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	ed funds
•	are the organization's property, subject to the organization's		Yes No
		-	
6	Did the organization inform all grantees, donors, and donor a	· ·	· · · · · · · · · · · · · · · · · · ·
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	
Do.	Impermissible private benefit?		Yes No
Par	•		rart IV, line 7.
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or e	· 	torically important land area
	Protection of natural habitat	Preservation of a cert	ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic sti	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structi	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	
•	year ▶	induced by the	organization doming the tax
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe		
•	violations, and enforcement of the conservation easements	- · · · · · · · · · · · · · · · · · · ·	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
	Amount of expenses incurred in monitoring, inspecting, and	-	
7			
8	Does each conservation easement reported on line 2(d) about a set of 77(h)(4)(P)(h)2	ve satisfy the requirements of section 170	
•	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	•	
	include, if applicable, the text of the footnote to the organization	ition's financial statements that describes	the organization's accounting for
Des.	conservation easements.	/ A / 18:4: 1:-1 T	A) . O' !! A
Pai	TIL Organizations Maintaining Collections of		ther Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS	·	
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furthera	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr	ribes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	blic service, provide the following amounts
	relating to these items		
	(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 tre	easures, or other similar assets for financia	
~	the following amounts required to be reported under SFAS 1		g, p. ee e
•	Revenues included in Form 990, Part VIII, line 1	1.10 processory relating to triese iterris.	▶ €
a			► \$ ► \$
D	Assets included in Form 990, Part X		• •

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051

Schedule D (Form 990) 2012

					_	_
						_
Sched	dule	D (F	orm	990)	201	2

3a(ii)

3ь

(d) Book value

1a Land
b Buildings

d Equipmente Other

(b) Cost or other

basis (other)

(ii) related organizations

c Leasehold improvements

Description of property

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c))

(a) Cost or other

basis (investment)

(c) Accumulated

depreciation

<u>1. </u>	(a) Description of liability	(b) Book value	
(1)	Federal income taxes		
(2)	LOANS PAYABLE - LIFE INSURANCE	488,959.	
(3)			
(4)			
(5)	,		
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	488,959.	
2. FII	N 48 (ASC 740) Footnote. In Part XIII, 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 (ASC 740). Check here if the text of the footnote has been provided in Part XIII Schedule D (Form 990) 2012

FIRST BAPTIST CHURCH ENDOWMENT FUND, INCORPORATED 54-0858196 Page 4 Schedule D (Form 990) 2012 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2a a Net unrealized gains on investments b Donated services and use of facilities 2b c Recoveries of prior year grants 2c d Other (Describe in Part XIII.) 2đ e Add lines 2a through 2d 2e Subtract line 2e from line 1 3 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 b Other (Describe in Part XIII.) 4b c Add lines 4a and 4b 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a **b** Prior year adjustments 2b c Other losses 2c d Other (Describe in Part XIII.) 2d e Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a **b** Other (Describe in Part XIII.) c Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIII Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D (Form 990) 2012

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0047

Open to Public Inspection **Employer identification number**

Name of the organization FIRST BAPTIST INCORPORATED	TIST CHURCH	CH ENDOWMENT	IT FUND,			1	Employer identification numbe 54–0858196
Part i General Information on Grants and Assistance	nd Assistance						
1 Does the organization maintain records to substantiate the amount	to substantiate the		s or assistance, the	grantees' eligibilit	y for the grants or as	of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
criteria used to award the grants or assistance?	stance?	\$ 000 per 001.00 per 0		90			Yes X
Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments and	Oring the use of grant Organizations in the	e United States. C	omplete if the org	anization answered "	Yes" to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	\$5,000. Part II can	be duplicated if addit	ional space is need	ed.			
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIRST BAPATST CHIRCH							COMMUNITY /MUSIC
2709 MONUMENT AVE							MINISTRY, BUILDING AND
RICHMOND, VA 23220	54-0515710		632,862.	0.	саѕн		GROUNDS, STAPP
RICHMOND BAPTIST ASSOCIATION 3111 MOSS SIDE AVENUE RICHMOND VA 23222	7. 8.7 8.7 8.7 8.0 9.0		α	c	no e C		T C C T ON C
				;			
RICHMOND BAPTIST HISTORICAL SOCIETY - P.O. BOX 34, UNIVERSITY OF RICHMOND - RICHMOND, VA 23173	54-0638224		7,000.	0	CASH		MISSIONS
VIRGINIA BAPTIST HOMES 1900 LAUDERDALE DRIVE RICHMOND VA 23238	52-1368410		000	o	HS & C		MISSIONS
VIRGINIA BAPTIST MISSION BOARD 2828 EMERYWOOD PARRWAY RICHMOND, VA 23294	54-0575807		87,380.	o	CASH		MISSIONS, NEW CHURCHES
BAPTIST WORLD ALLIANCE 405 NORTH WASHINGTON STREET FALLS CHURCH, VA 22046	53-0204667		000 9	.0	САЅН		SNOISSIM
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nd government org	janizations listed in th	re line 1 table				

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2012)

232101 12-18-12

FUND,	
ENDOWMENT	
CHURCH	
BAPTIST	PORATED
FIRST	INCORPOR

Page 1

FIRST BAPTIST CHURCH ENDOWMENT FUND,

INCORPORATED

Schedule I (Form 990) (2012) INCORPORATED

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

Page 2

54-0858196

(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, Part III, column (b), and any other additional information.	de the information	required in Part I,	line 2, Part III, colum	ı (b), and any other additional inf	ormation.
NAME OF ORGANIZATION OR GOVERNMENT:	FIRST	BAPTIST CHURCH	URCH		
(H) PURPOSE OF GRANT OR ASSISTANCE:		TY /MUSIC	COMMUNITY /MUSIC /RECREATION	NC	
/TELEVISION MINISTRY, BUILDING AND GROUNDS,	GROUNDS,	STAFF AS	STAFF ASSISTANCE,		
SCHOLARSHIPS, YOUTH TRIPS, MISSION TRI	PS,	AND MULTI	SUPPORT MISSIONS	SSIONS	

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Internal Revenue Service

Name of the organization

FIRST BAPTIST CHURCH ENDOWMENT FUND, INCORPORATED

Employer identification number 54-0858196

FORM 990, PART VI, SECTION B, LINE 11: A COPY OF THE 990 IS AVAILABLE FOR
REVIEW BY BOARD MEMBERS PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C: ANNUALLY THE CONFLICT OF INTEREST
DISCLOSURE FORMS ARE GIVEN TO ALL BOARD MEMBERS TO COMPLETE, SIGN, AND
DATE. ANY CONFLICTS THAT ARE DISCLOSED ARE PRESENTED AND LOGGED INTO THE
MINUTES OF THE NEXT MEETING.
FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS AND FINANCIAL
DATA ARE AVAILABLE UPON REQUEST.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:
INCREASE CSV LIFE INSURANCE 59,645.

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

Part

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

2012 Open to Public Inspection,

OMB No 1545-0047

Employer identification number Direct controlling 54-0858196 entity End-of-year assets e Total income চ ► See separate instructions. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or foreign country) FIRST BAPTIST CHURCH ENDOWMENT FUND, ▶ Attach to Form 990. Primary activity INCORPORATED Name, address, and EIN (if applicable) of disregarded entity Name of the organization

Schedule R (Form 990) 2012 (g) Section 512(b)(13) ž × controlled entity? Yes Direct controlling entity status (if section 170(B)(1)(A) Public charity 501(c)(3)) Exempt Code section 501(C)(3) € Legal domicile (state or foreign country) VIRGINIA Primary activity WORSHIP SERVICES For Paperwork Reduction Act Notice, see the Instructions for Form 990. - 54-0515710 Name, address, and EIN of related organization FIRST BAPTIST CHURCH 23220 2709 MONUMENT AVE RICHMOND, VA

Identification of Related Tax-Exempt Organizations (Complete If the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

Part II

FIRST BAPTIST CHURCH ENDOWMENT FUND, INCORPORATED

Schedule R (Form 990) 2012 INCORPORATED

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

Page 2

54-0858196

	3	General or Percentage managing ownership partner?			e related	Sect 512(b contr	Yes No			Schedule R (Form 990) 2012
	0	General or managing partner?			ne or mor	(h) Percentage ownership				R (Form
	6	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			because it had or	(g) Share of Per end-of-year ow assets				Schedule
	ε	Disproportionate allocations?			t IV, line 34					
	(6)	Share of end-of-year assets			rm 990, Par	(f) Share of total income				
					red "Yes" to Fo	(e) Type of entity (C corp, S corp, or trust)		:		
	€	Share of total income			tion answer				•	
	(e)	Predominant income (related, unrelated, excluded from tax under sections 512-514)			if the organiza	(d) Direct controlling entity				30
					omplete	(c) Legal domicile (state or footign	(Someon Consult)			m
	(g)	Direct controlling entity			ration or Trust (Crear.)) activity				
	(3)	Legal domicile (state or foreign country)			as a Corpo	(b				
	(q)	Primary activity			janizations Taxable	<u> </u>				
-	(a)	Name, address, and EIN of related organization			Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	(a) Name, address, and EIN of related organization				2-10-12
					Part IV					232162 12-10-12

FIRST BAPTIST CHURCH ENDOWMENT FUND, INCORPORATED

Schedule R (Form 990) 2012

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

Page 3

54-0858196

Note. Complete line 1 if any entity is listed in Parts II, III, of IV of this schedule.				-	Tes . No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ns with one or more re	slated organizations listed	In Parts II-IV?		1
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				e E	×
b Gift, grant, or capital contribution to related organization(s)				£	×
c Gift, grant, or capital contribution from related organization(s)				10	×
d Loans or loan guarantees to or for related organization(s)				10	×
e Loans or loan guarantees by related organization(s)				1e	×
				*	>
T Dividends from related organization(s)				=	<u>د </u> :
g Sale of assets to related organization(s)				19	×
h Purchase of assets from related organization(s)				ŧ	×
i Exchange of assets with related organization(s)				#	×
j Lease of facilities, equipment, or other assets to related organization(s)				1,	×
k Lease of facilities, equipment, or other assets from related organization(s)				¥	×
l Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			=	×
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			Ę	×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			1	×
 Sharing of paid employees with related organization(s) 				10	×

 P Reimbursement paid to related organization(s) for expenses 				1	×
 Reimbursement paid by related organization(s) for expenses 				1	×
 Other transfer of cash or property to related organization(s) 				÷	×
s Other transfer of cash or property from related organization(s)				18	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete the	us line, including covered	relationships and transaction thresholds.		
(a) Name of other organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved	volved	
(1)					
(9)					
(4)					
(5)					
(9)					
232163 12-10-12	31		Schedule	Schedule R (Form 990) 2012	90) 2012

FIRST BAPTIST CHURCH ENDOWMENT FUND,

54-0858196. Page 4

Schedule R (Form 990) 2012 INCORPORATED

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

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

(k) rcentage nership				
General or Per managing ow partner?				
Code V-UBI General or Percentage amount in box 20 managing ownership of Schedule K-I partner? (Form 1065)				
(h) Disproportorational allocations?				
(9) Share of end-of-year assets				
(f) Share of total Income				
Are all Are all 501(c)(3) orgs?				
(d) Predominant income (related, unrelated, excluded from tax under section 512-514)				
(c) Legal domicile (state or foreign country)				
(b) Primary activity				
(a) Name, address, and EIN of entity				

Schedule R (Form 990) 2012

FIRST BAPTIST CHURCH ENDOWMENT FUND FORM 990 PART III LINE 4a SCHEDULE OF GRANTS FOR THE YEAR ENDED DECEMBER 31, 2012

First Baptist Church - Community Ministry	\$74,000.00
First Baptist Church - Music Ministry	6,500.00
First Baptist Church - Recreation Ministry	21,400.00
First Baptist Church - Television Ministry	205,174.52
First Baptist Church - TV ministry capital equipment	13,000.00
First Baptist Church - Buildings and Grounds	50,000.00
First Baptist Church - Staff Assistance	8,000.00
First Baptist Churc h- Family Counseling	8,000.00
First Baptist Church - Emerging Leaders	10,000.00
First Baptist Church - Week day Scholarships	14,400.00
First Baptist Church - Ministerial staff children scholarships	23,000.00
First Baptist Church - Partnership Missions	17,631.83
First Baptist Church - Pastor's Discretionary Fund	10,000.00
First Baptist Church - crisis fund	6,000.00
First Baptist Church - pension fund	52,841.00
Acts	7,000.00
African Community Christian Church	6,000.00
Baptist Theological Seminary at Richmond - Undesignated	60,000.00
Baptist World Alliance - General Fund	6,000 00
Bluefield College	4,500.00
Boy Scouts	2,000.00
Camp Piankatank	34,000.00
CARITAS	3,000.00
Chaplain Service Prison Ministry of VA	1,000.00
Cross Over Health Services	6,500.00
Daily Planet	1,000.00
Embrace Richmond	1,000.00
Feed More	5,000.00
Fellowship of Christian Athletes	1,000.00
First Baptist Church Scholarships	80,700.00
First Things First	1,000.00
Good Samaritan Ministries	1,000.00
Home Again (ESI Connections)	1,000.00
Hope in the Cities	3,000.00
International Mission Board	34,200.00
John Leland Center Theo Studies	13,500.00
Multi Support Missions	8,032.50
ReEstablish Richmond	5,000.00
Religious Herald	5,000.00
Richmond Baptist Association - Budget	8,000.00
Richmond Friends of Homeless	10,000.00
The Healing Place	1,000.00
The Resource Center	1,000 00
Virginia Baptist Historical Society	7,000.00
Virginia Baptist Homes - Benevolent Fund	6,000.00
Virginia Baptist Mission Board	22,500.00
Virginia Baptist Mission Board - Eagle Eyrie	21,879.85
Virginia Baptist Mission Board - Exec. Director Discretionary Fund	9,000.00
Virginia Home	2,500.00
Virginia Home for Boys & Girls	1,000 00
Virginia Union University	5,000.00
g	-,

Youth trips Missions	19,500.00
Homeless Christmas breakfast	800.00
Leland dinner	900.00
Memorial flowers 2011	27.00
Lucy Door Pension	4,681.56
Baptist Center for Ethics	1,000.00
Baptist Joint Committee	1,000.00
TOTAL GRANTS	<u>\$933,168.26</u>