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#### CHANGE OF ACCOUNTING PERIOD

Form **990** 

CANNED

## Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Do not enter Social Security numbers on this form as it may be made public.

Open to Public

Department of the Treasury

▶ Information about Form 990 and its instructions is at www.us gov/form990 Internal Revenue Service Inspection and ending DEC 31, OCT 1, 2013 2013 A For the 2013 calendar year, or tax year beginning Check of applicable C Name of organization D Employer identification number VIRGINIA LAW FOUNDATION 51-0198088 Doing Business As ]initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-105 WHITEWOOD ROAD 804-648-0112 Amende City or town, state or province, country, and ZIP or foreign postal code 3,387,514. G Gross receipts \$ Applica-tion pending CHARLOTTESVILLE, VA 22901 H(a) Is this a group return F Name and address of principal officer: JOHN D. EPPS Yes X No for subordinates? SAME AS C ABOVE H(b) Are all subordinates included? Tax-exempt status: X 501(c)(3) 501(c) ( )◀ (insert no.) L 4947(a)(1) or J 527 If "No," attach a list (see instructions) J Website: ► WWW.VIRGINIALAWFOUNDATION.ORG **H(c)** Group exemption number ▶ Form of organization: X Corporation Association Trust Other > L Year of formation: 1974 M State of legal domicile: VA Part I Summary Briefly describe the organization's mission or most significant activities: VIRGINIA LAW FOUNDATION'S Governance MISSION IS TO PROMOTE THROUGH PHILANTHROPY THE RULE OF LAW, 2 Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. 20 Number of voting members of the governing body (Part VI, line 1a) <u>20</u> Number of independent voting members of the governing body (Part VI, line 1b) 4 Activities & <del>4</del>7 Total number of individuals employed in calendar year 2013 (Part.V, line.2a) 5 182 6 Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 7b 0. NUY 20 Cons **Prior Year Current Year** 45,644. 34,170.Contributions and grants (Part VIII, line 1h) Revenue 4,653,677. 1,821,812. Program service revenue (Part VIII, line 2g) 595,445. 277,930. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 119,208. 585,103. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 5,879,869. 2,253,120. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 313,603 75.000. 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 2.161.780. 572,036. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 13,792. **b** Total fundraising expenses (Part IX, column (D), line 25) 2,730,810. 792,453. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 5,206,193. 1,439,489. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 673,676. 813,6<u>31.</u> 19 Revenue less expenses. Subtract line 18 from line 12 Assets or Balances **Beginning of Current Year** End of Year 18,455,451. 20 Total assets (Part X, line 16) 17,622,056. 929,773. 1,301,479 Total liabilities (Part X, line 26) 16,320,577. ,525,678. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign JOHN D. EPPS, Here PRESIDENT Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature Paid The 10 411811 LORI K. COCHRAN, CPA ₽00853221 DIXON HUGHES GOODMAN LLP Preparer 56-0747981 Firm's name Firm's EIN 4510 COX ROAD, SUITE 200 Use Only Firm's address Phone no. 804.282.7636 GLEN ALLEN, VA 23060-3394

Form 990 (2013)

JYes L\_\_No

May the IRS discuss this return with the preparer shown above? (see instructions)

VIRGINIA LAW FOUNDATION Part III | Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: VIRGINIA LAW FOUNDATION'S MISSION IS TO PROMOTE THROUGH PHILANTHROPY THE RULE OF LAW, ACCESS TO JUSTICE AND LAW RELATED EDUCATION. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported 75,000.) (Revenue \$ 83,275. including grants of \$ ) (Expenses \$ THE VIRGINIA LAW FOUNDATION MADE GRANTS IN SUPPORT OF PROJECTS THAT (1) PROVIDE SERVICES TO IMPROVE THE ADMINISTRATION OF JUSTICE; (2) LAW-RELATED EDUCATION; (3) PROMOTE UNDERSTANDING OF THE RULE OF LAW IN AMERICA; (4) PROVIDE LEGAL SERVICES TO THE UNDERPRIVILEDGED; PROVIDE PUBLIC SERVICE INTERNSHIPS FOR VIRGINIA LAW STUDENTS. DESCRIPTIONS BELOW. **PUBLIC SERVICE:** GRANTS WERE PROVIDED TO 8 VIRGINIA LAW SCHOOLS TO SUPPORT 31 FIRST AND SECOND YEAR VIRGINIA LAW STUDENTS WHO GAINED VALUABLE EXPERIENCE IN SERVICE LAW AS THEY INTERNED FOR VARIOUS PUBLIC SERVICE PUBLIC EMPLOYERS THROUGHOUT THE COMMONWEALTH DURING THE SUMMER. THROUGH THIS 990,904 • including grants of \$ ) (Revenue \$ THE VIRGINIA LAW FOUNDATION (VIRGINIA CLE) PRESENTED SEMINARS AND PROVIDED MATERIALS FOR THE CONTINUING LEGAL EDUCATION OF VIRGINIA ATTORNEYS. FOR THE SHORT YEAR ENDED DECEMBER 31, 2013 6,363 DIFFERENT CUSTOMERS PURCHASED BOTH SEMINARS AND PUBLICATIONS. THE TOTAL NUMBER OF SEMINARS SOLD TOTALED APPROXIMATELY 14,000 DURING THE SHORT YEAR ENDED DECEMBER 31, 2013. ) (Revenue \$ ) (Expenses \$ (Code including grants of \$

4d	Other program	services	(Describe	ın Schedule	e O.)
Tu	Other program	301 41003	(DOSCIIDO	III Ochlodan	· •

including grants of \$ 1,074,179. Total program service expenses

) (Revenue \$

SEE SCHEDULE O FOR CONTINUATION(S)

Form 990 (2013)

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Form 990 (2013) VIRGINIA LAW
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)?		х	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	3		x
	public office? If "Yes," complete Schedule C, Part I  Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	-		
4	dunng the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, 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?	_		v
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	40	x	
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
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			ì
а	as applicable.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
a	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
C	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	11c		<u> </u>
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			v
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		$\frac{X}{X}$
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
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		Х
100	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124	Schedule D, Parts XI and XII	12a		Х
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?			
-	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		Х
b	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 other assistance to or for any	4=		x
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
16	or for foreign individuals? 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		Х
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>
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		(0045)
		Form	<b>990</b> (	(2013)

Form 990 (2013) VIRGINIA LAW FOUND
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or 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		<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			ŀ
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	<u> </u>
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 25a	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	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	05-		х
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	_	
D	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		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	200		
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	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 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):			
	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
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, 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		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		_X_
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>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	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	24		х
35a	Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	334		<del></del>
Ü	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?			
	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			
	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	X	
		Form	990	(2013)

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Pai				
	Check if Schedule O contains a response or note to any line in this Part V	- :	V_	<del> </del>
4	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  Lib   U  Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			ĺ
С	(gambling) winnings to prize winners?	1c	х	ĺ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	<u> </u>		
	filed for the calendar year ending with or within the year covered by this return  2a 47			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2ь	Х	
_	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
	and the second of the second o	3b		
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: ▶			l .
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			i '
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<del></del>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			v
	any contributions that were not tax deductible as charitable contributions?	6a	_	<u> </u>
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6b	į	l
7	were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).	OD		<del></del>
' a	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 '
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
_	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e_		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 <b>f</b>		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		<del></del>
9	Sponsoring organizations maintaining donor advised funds.			l
a	Did the organization make any taxable distributions under section 4966?	9a		
10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<del></del>
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
a 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:			ļ
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			Į
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u></u>
	Note. See the instructions for additional information the organization must report on Schedule O.			
b				İ
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand		-	X
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
<u> </u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	990	(2013)
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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

	to and say, as, or rob seconds the order constant of the const			[ <del></del> ]
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	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 1a 20			
	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.			
b	Enter the number of voting members included in line 1a, above, who are independent  1b  20	l		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	_		<sub>v</sub>
_	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_		х
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	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		<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	7a		x
<b>L</b>	more members of the governing body?  Are any governing description of the experience recovered to (are subject to controlled by) members, stockholders, or	78		-
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, 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 following.	7.0		<del></del>
	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	$\vdash \vdash$
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	0.0		$\vdash$
J	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code )			
		-	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	-	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			ļ
	The organization's CEO, Executive Director, or top management official	15a	X	<u> </u>
b	Other officers or key employees of the organization	15b	X	<u> </u>
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			<b>.</b>
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	į		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	40.		•
800	exempt status with respect to such arrangements? tion C. Disclosure	16b		<u> </u>
17 ₁₽	List the states with which a copy of this Form 990 is required to be filed VA  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 T (Section 501(c)/3)s only if	wadah	lo.	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and organization logicate how you made these available. Check all that apply	ıvallaD	ıe	
	for public inspection Indicate how you made these available Check all that apply  Own website Another's website X Upon request Other (explain in Schedule O)			
10	·	d fina-	acial	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an statements available to the public during the tax year	u iiilaf	icidí	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion 🕨	•	
20	TERESA MOORE - 804-648-0112		-	
	105 WHITEWOOD ROAD, CHARLOTTESVILLE, VA 22901			

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

Check if Schedule O contains a response or note to any line in this Part 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.
- 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.

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

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

<b>(A)</b> Name and Title	(B) Average hours per	DOX	not c , unle	Pos heck ss pe	more rson	than	th an	'	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) JAMES V. MEATH	2.00									
PRESIDENT		Х		X			1	0.	0.	0.
(2) JOHN D. EPPS	3.00									•
PRESIDENT - ELECT		X	<u> </u>	X			L	0.	0.	0.
(3) IRVING M. BLANK	2.00									•
VICE PRESIDENT	1 00	X	ļ	X		ļ	ļ	0.	0.	0.
(4) YVONNE C. MCGHEE	1.00	<b>.</b>		v					_ ا	^
SECRETARY	2.00	X		X			┝	0.	0.	0.
(5) KAREN A. GOULD TREASURER	2.00	x		x				0.	0.	0.
(6) MANUEL A CAPSALIS	3.00	^	H	_		⊢	⊢	0.	0.	<u> </u>
PAST PRESIDENT	3.00	x		х				0.	0.	0.
(7) DAVID P. BOBZIEN	3.00	A	$\vdash$	Α		┢	⊢	0.	0.	- 0 •
CLE CHAIRMAN	3.00	х		х		]		0.	0.	0.
(8) GEORGE SHANKS	2.00		┢┈			$\vdash$	$\vdash$		•	
FELLOWS CHAIR		x	ŀ					0.	0.	0.
(9) HON, PAUL F. SHERIDAN	2.00	<del></del>				$\vdash$	┢			
FELLOWS COMMITTEE APPOINTEE		х					1	0.	0.	0.
(10) JAMES COX	2.00						t			
DIRECTOR		X						0.	0.	0.
(11) STEPHEN D. BUSCH	2.00									
DIRECTOR		x					1	0.	0.	0.
(12) MATTHEW E. CHEEK	2.00									
DIRECTOR		Х	ŀ				1	0.	0.	0.
(13) KATHY MAYS COLEMAN	3.00									
DIRECTOR		X						0.	0.	0.
(14) CYNTHIA E. HUDSON	2.00									
DIRECTOR		Х						0.	0.	0.
(15) ANGELICA D. LIGHT	2.00						Γ			
DIRECTOR		Х	L			<u> </u>		0.	0.	0.
(16) F. ANDERSON MORSE	2.00									
DIRECTOR	ļ <u>.</u>	Х	L			<u> </u>	L	0.	0.	0.
(17) JOHN M. OAKLEY, JR.	2.00						l		_ ;	_
DIRECTOR	<u> </u>	Х	L_				_	0.	0.	0.

332007 10-29-13

Form **990** (2013)

Ocotion A. Officers, Directors, 1140	tees, itey Lin	<del>5.0,</del>	-	, u	<u> </u>	9		Joinpendated Employe	C3 (00//til/10/00/	_			
(A) Name and title	(B) Average			(C Pos	ition			(D) Reportable	( <b>E)</b> Reportable		F	(F) stimat	ed
Name and title	hours per	box	not c	ss pe	rson	ıs bo	th an	1	compensation			nount	
	week		cer ar	nd a d	irecto	or/trus	stee)	from	from related			othe	
	(list any hours for	or director				L		the organization	organization (W-2/1099-MI			npens rom th	
	related	50 88	Stee			nsate	1	(W-2/1099-MISC)	(11 27 1000 1111	50,		janiza	
	organizations	al trus	nal tr		oyee	omps e						d rela	
	below line)	Individual trustee	Institutional trustee	Officer	Кеу етріоуев	Highest compensated employee	Former				org	anızat	ions
(18) G. MICHAEL PACE, JR.	2.00												
DIRECTOR	2 00	X	<u> </u>		ļ	┞-	L	0.		0.			0.
(19) JAN L. PROCTOR DIRECTOR	2.00	X						0.		0.			0.
(20) WILLIAM SCHMIDT	2.00	^			$\vdash$		_	0.		٠.			0.
DIRECTOR	2.00	x	Ì			l		0.		0.			0.
(21) CHARLES CRANK	40.00		$\vdash$			T							
DIRECTOR OF OPERATIONS		1				Х		106,819.		0.	1	7,0	47.
(22) RAYMOND WHITE	40.00								_				
EXECUTIVE DIRECTOR					<u> </u>	X		133,321.		0.	2	5,9	26.
		<u> </u>				_	<u> </u>						
dh. Cub Astal		<u></u>	<u> </u>		L	L	Ļ	240,140.		0.	1	2 9	73.
1b Sub-total c Total from continuation sheets to Part V	Il Section A							0.		<del>ŏ.</del>		2,,	0.
d Total (add lines 1b and 1c)	ii, Section A							240,140.		0.	4	2.9	73.
Total number of individuals (including but r	ot limited to th	ose	liste	ed at	bove	e) wl	ho r		,000 of reportab	le			
compensation from the organization													2
3 Did the organization list any former officer,	director or tri	ister	e ke	v en	nnlo	vee	or	highest compensated e	mplovee on	[		Yes	No
line 1a? If "Yes," complete Schedule J for s		3010	o, ite	.y C.	пріс	,,,,,	, 01	riigirest compensated e	mployee on		3		X
4 For any individual listed on line 1a, is the si		le co	omp	ensa	ation	n and	d ot	her compensation from	the organization				
and related organizations greater than \$15	0,000? <i>If</i> "Yes,	" co	mple	ete S	Sche	eduk	e J	for such individual	ļ	4	X		
5 Did any person listed on line 1a receive or							ela	ted organization or indivi	dual for services				<b> </b>
rendered to the organization? If "Yes," com Section B. Independent Contractors	plete Schedul	e J f	or se	ıch j	pers	son					5		Х
Complete this table for your five highest co	mpensated inc	depe	ende	nt c	ontr	racto	ors '	that received more than	\$100.000 of con	npens	ation	from	
the organization. Report compensation for	•	•							•				
(A)				_				(B)		_	(0		
Name and business	address	N	INC	<u> </u>			_	Description of s	ervices		ompe	nsatio	on ———
		_											
, <del></del>	<del></del>										·		
		_											
					_								
2 Total number of independent contractors (	including but a	ot I	mıtc	d to	the	se I	Sto:	d above) who received m	ore than				
Total number of independent contractors (     \$100,000 of compensation from the organi	=			u 10		se II: )	- -	above) who received m	ore man				
	· -								<del></del>		C	മാവ	2012)

Form 990 (2013) VIRGINI
Part VIII Statement of Revenue

		Check if Schedule O con	tains a response	or note to any lin	e in this Part VIII			. $\square$
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts	1 a	Federated campaigns	1a					
ărai our	b	Membership dues	1b					
S,E	С	Fundraising events	1c					
ar /		Related organizations	1d					
s, C	e		<del></del>					
ion	f	AH 6						
but The	_	similar amounts not included abo		34,170.				
ÖĔ	g			· · · · · · · · · · · · · · · · · · ·				
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f		<b></b>	34,170.			
		_		Business Code		_		
စ္ပ	2 a	EDUCATIONAL SEMINARS		900099	1,821,812.	1,821,812.		
ه ڲ	b							
Program Service Revenue	С							
eve	d	· · · · · · · · · · · · · · · · · · ·						
P. Og	е							
4	f	All other program service reve	enue					
	g	Total. Add lines 2a-2f		<b>&gt;</b>	1,821,812.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		•	144,286.	Ī		144,286.
	4	Income from investment of ta	x-exempt bond p	roceeds			•	-
	5	Royalties		•				
		·	(i) Real	(II) Personal				
	6 a	Gross rents		1				
	b	Less: rental expenses			j			
		Rental income or (loss)				İ		
		Net rental income or (loss)	•	<b>•</b>	İ	,		
		Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	1,207,221.					
	b	Less: cost or other basis						
		and sales expenses	1,073,577.			ļ		
	С	Gain or (loss)	133,644.					
	d	Net gain or (loss)		<b>&gt;</b>	133,644.			133,644.
6		Gross income from fundraisin	g events (not					
enne		including \$	of					
eve		contributions reported on line	1c). See					
Other Rev		Part IV, line 18	a					
₹	b	Less: direct expenses	b					
١	С	Net income or (loss) from fund	draising events	<b>•</b>				
		Gross income from gaming ac	_					
		Part IV, line 19	а					
	b	Less: direct expenses	b					,
	С	Net income or (loss) from garr	ning activities	<b>•</b>				
	10 a	Gross sales of inventory, less	returns					
		and allowances	а	178,489.				
	b	Less: cost of goods sold	b	60,817.				
	С	Net income or (loss) from sale	s of inventory	<b>•</b>	117,672.	117,672.		
ĺ		Miscellaneous Revenu	ie	Business Code				
- 1	11 a	MISCELLANEOUS		900099	1,536.	1,536.		<u></u>
	b							
	С							
	d	All other revenue						-
l	е	Total. Add lines 11a-11d	•	<b>•</b>	1,536.	T		
	12	Total revenue. See instructions.		<u> </u>	2,253,120.	1,941,020.	0.	277,930.
33200 10-29-	9 13							Form <b>990</b> (2013)

Form 990 (2013) VIRGINIA LAW :
Part IX | Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	ner organizations must co	omplete column (A).	
	Check if Schedule O contains a respor	nse or note to any line in			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	75,000.	75,000.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				<b>!</b>
	organizations, and individuals outside the				;
_	United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified				
v	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	435,571.	239,660.	183,865.	12,046.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	45,067.	26,316.	18,349.	402.
9	Other employee benefits	60,965.	35,299.	24,955.	711.
10	Payroll taxes	30,433.	17,121.	12,679.	633.
11	Fees for services (non-employees):				
а	Management				
b	Legal	2 700		2 700	
C	Accounting	3,700.		3,700.	
d	Lobbying  Professional fundrature converse See Port IV line 17				
e	Professional fundraising services. See Part IV, line 17 Investment management fees			^ /	
g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O.)	1,689.	1,013.	676.	
12	Advertising and promotion	41,809.	41,809.		
13	Office expenses	27,000.	12,939.	14,061.	
14	Information technology	29,393.	17,636.	11,757.	
15	Royalties	0.6 55.4	10.055	4.5	
16	Occupancy	26,754.	10,957.	15,797.	
17	Travel	4,142.		4,142.	
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials Conferences, conventions, and meetings				<del></del>
19 20	Interest				
21	Payments to affiliates		_		
22	Depreciation, depletion, and amortization	29,671.	17,803.	11,868.	
23	Insurance				
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 0.)				
а	CONDUCT OF CLE PROGRAMS	544,781.	544,781.		
b	BANK & CREDIT CARD FEES	49,669.	· · · · · · · · · · · · · · · · · · ·	49,669.	
С	COORDINATOR EXPENSES	33,845.	33,845.		
d					
e	All other expenses		0.00		
25_	Total functional expenses. Add lines 1 through 24e	1,439,489.	1,074,179.	351,518.	13,792.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.  Check here if following SOP 98-2 (ASC 958-720)				
	in following 30F 98-2 (ASC 938-720)	l			

Part	^	Balance Sneet			<del></del>
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		( <b>B)</b> End of year
	1	Cash · non-interest-bearing	233,908.	1	362,012
	1	Savings and temporary cash investments	2,120,050.	2	2,365,228
	2	Pledges and grants receivable, net	2,120,0301	3	2,000,220
	3		107,215.	4	68,401
	4	Accounts receivable, net	107711131	_	30,101
- 1	5	Loans and other receivables from current and former officers, directors,			
- 1		trustees, key employees, and highest compensated employees. Complete		5	
- 1		Part II of Schedule L		3	
1	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			
,,				6	
Assets	7	employees' beneficiary organizations (see instr). Complete Part II of Sch L  Notes and loans receivable, net	<u> </u>	7	
AS	7	Inventories for sale or use	249,710.	8	234,675
	8	Prepaid expenses and deferred charges	195,506.	9	116,308
ı	9	Land, buildings, and equipment: cost or other		-	
	iva	basis. Complete Part VI of Schedule D 10a 3,143,981.			
	h	Less: accumulated depreciation 10b 1,508,528.	1,659,603.	10c	1,635,453
	11	Investments - publicly traded securities	11,371,475.	11	11,927,190
- 1	12	Investments - other securities. See Part IV, line 11	1,684,589.	12	1,746,184
- 1	13	Investments - program-related. See Part IV, line 11		13	<u> </u>
- 1	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	17,622,056.	16	18,455,451
	17	Accounts payable and accrued expenses	341,816.	17	246,448
	18	Grants payable	163,000.	18	163,000
	19	Deferred revenue	796,663.	19	520,325
	20	Tax-exempt bond liabilities		20	
- 1:	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
န္မ	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		key employees, highest compensated employees, and disqualified persons.			
[ [		Complete Part II of Schedule L		22	
<b>-</b>   :	23	Secured mortgages and notes payable to unrelated third parties		23	_
- 1:	24	Unsecured notes and loans payable to unrelated third parties		24	· ·
	25	Other liabilities (including federal income tax, payables to related third			
ı		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D	1 201 470	25	020 772
	26	Total liabilities. Add lines 17 through 25	1,301,479.	26	929,773
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
Ses		complete lines 27 through 29, and lines 33 and 34.	16,274,398.		17,479,499
<u> </u>	27	Unrestricted net assets	46,179.	27 28	46,179
8	28	Temporarily restricted net assets	40,177.	29	40,173
<u> 목</u>	29	Permanently restricted net assets		29	
[ ]		Organizations that do not follow SFAS 117 (ASC 958), check here			
Net Assets or Fund Balances	20	and complete lines 30 through 34.		30	
ise	30 31	Capital stock or trust principal, or current funds		31	
<u> </u>	31 22	Paid-in or capital surplus, or land, building, or equipment fund		32	
Š	32 33	Retained earnings, endowment, accumulated income, or other funds	16,320,577.	33	17,525,678
	33	Total liabilities and not assets/fund balances	17,622,056.	34	18,455,451
	34	Total liabilities and net assets/fund balances		<del>, , ,</del>	Form <b>990</b> (2013

review, or compilation of its financial statements and selection of an independent accountant?

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

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

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

Form **990** (2013)

X

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Act and OMB Circular A-133?

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support** 

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

➤ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

**2013** 

Open to Public Inspection

Name of	the organizati	on		·				E	mployer	identificati	on nu	mber
		VIRGINI	A LAW FOUNDA	TION					5	1-0198	088	
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	te this part	t.) See ins	tructions.				
The organ	ization is not a	private foundation	because it is: (For lines	1 through	11, check	only one b	ox)					
1 🔲	A church, co	nvention of churche	s, or association of chur	ches desc	nbed in se	ction 170	(b)(1)(A)(i	).				
2	A school des	cribed in section 17	<b>'0(b)(1)(A)(ii).</b> (Attach Sc	hedule E.)								
з 🗀	A hospital or	a cooperative hospi	tal service organization	described	ın section	170(b)(1)	(A)(iii).					
4 🗔	A medical res	search organization	operated in conjunction	with a hos	spital desci	nbed in <b>se</b>	ction 170	(b)(1)(A)(ii	ii). Enter	the hospital	's nam	ıe,
	city, and stat	e:										
5 🗀	An organizat	on operated for the	benefit of a college or u	niversity o	wned or op	perated by	a govern	mental uni	t describ	ed in		
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6 🔲	A federal, sta	ite, or local governm	ent or governmental uni	t describe	d ın <b>sectio</b>	n 170(b)(1	1)(A)(v).					
7 📖	An organizat	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit d	or from the	general	public desc	ribed i	n
	section 170(	b)(1)(A)(vi). (Comple	te Part II.)									
8 🖳	-		section 170(b)(1)(A)(vi).		-							
9 X	-	·	eives: (1) more than 33									
			nctions - subject to certa									
			axable income (less sect	tion 511 ta	x) from bu	isinesses a	acquired b	y the orga	ınızatıon	after June 3	0, 197	'5.
		<b>509(a)(2).</b> (Complete	•									
10	•	•	perated exclusively to te	•	-			-				
11 📖	•		perated exclusively for the		•				-			or
		• • •	ations described in secti		•		2). See <b>se</b> e	cuon <del>sos</del> (	ajis). Ch	eck the box	ınaı	
	a Type	· · · · · · · · · · · · · · · · · · ·	organization and complype II c T		nctionally			TVD	o III - Noi	n-functionali	ly into:	rator
e 🗀			ype II	•	•	•		• •			-	
e	, ,	•	han one or more publicly		-	•	•		•	•		
f		=	tten determination from t						3(4)(1) 01	55511577 555	(4)(4)	
•	-	rganization, check th				P, .,p-	, , ,					
g		•	organization accepted ar	ny gift or c	ontribution	from any	of the foll	owing pers	sons?			
J	•		irectly controls, either al			•				,	Yes	No
	the gov	erning body of the si	upported organization?							11g(i)		
	(ii) A family	member of a persor	n described in (i) above?	1						11g(ii)		
	(iii) A 35%	controlled entity of a	person described in (i) o	or (II) above	e?					11g(iii)		
h	Provide the f	ollowing information	about the supported or	ganızatıon	(s).							
		<u> </u>										
(i) Name	of supported	(ii) EIN	(iii) Type of organization					(vi) Is organizatio		(vii) Amount	of mor	netary
orga	anization		(described on lines 1-9 above or IRC section		sted in your document?	organizat	on in coi. support?	(i) organiz U.S	ed in the	sup	port	
			(see instructions))		,	,,,,,			,			
			<u> </u>	Yes	No	Yes	No	Yes	No			
		<u>-</u> -			1				ļ			_
									<del> </del>			
		<del></del>		-						-		
								1				
				<del> </del>	<del> </del>				<del>  </del>			
Total												

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

Schedule A (Form 990 or 990-EZ) 2013

# Schedule A (Form 990 or 990-EZ) 2013 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(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 fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support	•					
Cale	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization'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	The portion of total contributions						
Ť	by each person (other than a						
	governmental unit or publicly	•					
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,		`		*		
	column (f)						
6	Public support. Subtract line 5 from line 4						
	ction B. Total Support		L <del> </del>	1	l	1	
	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 4		, , , , , , , , , , , , , , , , , , ,			(1,7)	
8	Gross income from interest,	-					
Ī	dividends, payments received on						
	securities loans, rents, royalties			1			
	and income from similar sources						
9	Net income from unrelated business						
•	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10			```			
	Gross receipts from related activities,	etc. (see instructi	ons)			12	
	First five years. If the Form 990 is for	•	-	rd, fourth, or fifth t	ax year as a sectio	on 501(c)(3)	
	organization, check this box and stop	here					
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2013 (	line 6, column (f) d	ivided by line 11,	column (f))		14	%
15	Public support percentage from 2012	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2013. If the	organization did no	ot check the box o	on line 13, and line	14 is 33 1/3% or r	nore, check this bo	ox and
	stop here. The organization qualifies	as a publicly supp	orted organizatio	n			ightharpoons
b	33 1/3% support test - 2012. If the	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/3%	6 or more, check tl	nis box
	and stop here. The organization qual	ifies as a publicly	supported organiz	ation			ightharpoons
17a	10% -facts-and-circumstances tes	t - 2013. If the org	janization did not	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstar	ces" test, check t	his box and stop I	here. Explain in Pa	rt IV how the organ	nization
	meets the "facts-and-circumstances"			•	·	J	ightharpoons
b	10% -facts-and-circumstances tes	-	-			17a, and line 15 is	10% or
-	more, and if the organization meets the	-					
	organization meets the "facts-and-circ				• •		▶
18	Private foundation. If the organization		-	•			s
<u> </u>						edule A (Form 990	

### | 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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not	40.050	50 OFF	62 200	45 644	24 450	004 000
	include any "unusual grants.")	40,859.	50,875.	63,390.	45,644.	34,170.	234,938.
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	4,813,997.	5,302,646.	5,044,301.	4,653,677.	1,821,812.	21,636,433.
3	Gross receipts from activities that are not an unrelated trade or business under section 513	·					
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf			:			
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5	4,854,856.	5,353,521.	5,107,691.	4,699,321.	1,855,982.	21,871,371.
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
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						0.
c	Add lines 7a and 7b						0.
8	Public support (Subtract line 7c from line 6)						21,871,371.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6	4,854,856.	5,353,521.	5,107,691.	4,699,321.	1,855,982.	21,871,371.
10a	dross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	292,382.	332,564.	333.347.	316,458.	144.286.	1,419,037.
r	Unrelated business taxable income	232,3021	332,3010	000,01,0	32072300		
-	(less section 511 taxes) from businesses acquired after June 30, 1975						
,	Add lines 10a and 10b	292,382.	332,564.	333,347.	316,458.	144,286.	1,419,037.
11			·	-			
12	Other income. Do not include gain or loss from the sale of capital	37,016.	46,745.	19,425.	25,742.	1,536.	130,464.
13	assets (Explain in Part IV.)  Total support. (Add lines 9, 10c, 11, and 12)	5,184,254.	5,732,830.	5,460,463.	5,041,521.	2,001,804.	23,420,872.
14	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth to	ax year as a sectio	n 501(c)(3) organiz	ation,
	check this box and stop here				· · · · · · · · · · · · · · · · · · ·		
	ction C. Computation of Publ						02 22
	Public support percentage for 2013 (	,	•	column (f))		15	93.38 %
16	Public support percentage from 2012					16	93.53 %
_	ction D. Computation of Inve			10k (6)	<del></del>	47	6.06 %
	Investment income percentage for 20			ie 13, column (f))		17	5.98 %
18	Investment income percentage from: a 33 1/3% support tests - 2013. If the			on line 14, and line	15 is more than 3		
198	more than 33 1/3%, check this box a						►X
,	33 1/3% support tests - 2012. If the	=	•	• •			•
•	line 18 is not more than 33 1/3%, che	-					<b>▶</b> □
20	Private foundation. If the organization		-				<b>&gt;</b>

Schedule A (Form 990 or 990-EZ) 2013 VIRGINIA LAW FOUNDATION 51-0198088 Page 4  Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.  Also complete this part for any additional information. (See instructions)
SCHEDULE A, PART III
THE ORGANIZATION ELECTED TO CHANGE ITS ACCOUNTING PERIOD FROM
THE FISCAL YEAR-END SEPTEMBER TO A CALENDAR YEAR-END DURING THE 2013 YEAR.
THE 2013 INFORMATION IN THE SUPPORT TABLE REFLECTS THREE MONTHS OF THE
ORGANIZATION'S ACTIVITIES FROM 10/01/2013 TO 12/31/2013.

#### **SCHEDULE D**

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.

Information about Schedule D (Form 990) and its instructions is at www.urs.gov/torm990.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990)

Inspection

Nam	e of the organization VIRGINIA LAW FOUND	ATION	Em	ployer identification 51-0198	
Pai		ed Funds or Other Similar Funds or	Acco	unts.Complete if t	the
	organization answered "Yes" to Form 990, Part IV, Iin			•	
		(a) Donor advised funds	(b) Fur	nds and other acco	unts
1	Total number at end of year			·- <del>-</del> -	
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 advised t	unds	·	
3	are the organization's property, subject to the organization's		GI IGO	Yes	☐ No
6	Did the organization inform all grantees, donors, and donor a		d only		
O	for chantable purposes and not for the benefit of the donor				
	impermissible private benefit?	or donor advisor, or for any other purpose con	ioning	Yes	☐ No
Pai		ganization answered "Yes" to Form 990. Part	IV. line 7		
1	Purpose(s) of conservation easements held by the organizat				
•	Preservation of land for public use (e.g., recreation or		cally imp	ortant land area	
	Protection of natural habitat	Preservation of a certified			
	Preservation of natural nabitat	Freservation of a certified	mstoric	Structure	
_	Complete lines 2a through 2d if the organization held a qual	ified conseniation contribution in the form of a	concen	ation essement on	the last
2		med conservation contribution in the form of a	conserv	ation easement on	lile last
	day of the tax year.			Held at the End of t	he Tax Year
	Tabel accepts of a consequent an acceptant		2a	TICIO AL LIIC EIIO OF L	inc rax rear
a	Total number of conservation easements		2b		
b	Total acreage restricted by conservation easements	musture included in (a)	2c		
C	Number of conservation easements on a certified historic st		26		
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	ـ ا		
_	listed in the National Register		2d		
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the org	janizatio	in during the tax	
	year	accoment is located			
4	Number of states where property subject to conservation ea	<del></del>			
5	Does the organization have a written policy regarding the pe			Yes	No
_	violations, and enforcement of the conservation easements		a the ve		140
6	Staff and volunteer hours devoted to monitoring, inspecting				
7	Amount of expenses incurred in monitoring, inspecting, and			<b>a</b>	_
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170(n)(4	)(D)(I)	Yes	□ No
_	and section 170(h)(4)(B)(ii)?				
9	In Part XIII, describe how the organization reports conservation				
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes the	organiza	ttion's accounting i	or
Da	conservation easements. rt III   Organizations Maintaining Collections of	of Art Historical Treasures or Othe	r Simi	lar Accete	
Pa	Complete if the organization answered "Yes" to Form		, Jiiii	iai Assets.	
1a	If the organization elected, as permitted under SFAS 116 (A				
	historical treasures, or other similar assets held for public ex		or public	c service, provide, i	n Part XIII,
	the text of the footnote to its financial statements that described the footnote to its financial statements that described the footnote to its financial statements that described the footnote to its financial statements that described the footnote to its financial statements that described the footnote to its financial statements that described the footnote to its financial statements that described the footnote to its financial statements that described the footnote to its financial statements that described the footnote to its financial statements that described the footnote to its financial statements that described the footnote to its financial statements that described the footnote to its financial statements that described the footnote its financial statements that described the footnote its financial statement in the footnote its financial statement in the footnote its financial statement in the footnote its financial statement in the footnote its financial statement in the footnote its financial statement in the footnote its financial statement in the financial statement in t		4		A la
b	If the organization elected, as permitted under SFAS 116 (A				
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of public	service,	provide the following	ng 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		ın, provi	de	
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items:			
а	Revenues included in Form 990, Part VIII, line 1			\$	
b	Assets included in Form 990, Part X			\$	

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

Schedule D (Form 990) 2013

33205

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 VIRGINIA LA	W FOUNDATIO	N	51-	-0198088	Page
Part VII Investments - Other Securities.			<del></del>		
Complete if the organization answered "Yes"	to Form 990, Part IV,	ine 11b. See Form 990, I	Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value		aluation: Cost or end	of-year market v	/alue
(1) Financial denvatives					
(2) Closely-held equity interests	_				
(3) Other			· · · · -	-	
(A) ALTERNATIVE INVESTMENTS	1,746,18	4. END-OF-Y	EAR MARKET	VALUE	
(B)					
(C)					
(D)					
(E)	<del></del>				
(F)					
(G)					
(H)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	1,746,18	4.			
Part VIII Investments - Program Related.					
Complete if the organization answered "Yes"	to Form 990, Part IV,	ine 11c. See Form 990, I	Part X, line 13		
(a) Description of investment	(b) Book value		aluation: Cost or end	of-year market v	alue
(1)					
(2)					
(3)					
(4)				,	·
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)					
Part IX Other Assets.					
Complete if the organization answered "Yes"	to Form 990, Part IV, I	ine 11d. See Form 990, I	Part X, line 15.		
(a)	Description			(b) Book va	lue
(1)					
(2)					
(3)					
(4)					
(5)					
(6)	<del></del>				
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		<u> </u>	<del></del> –	
Part X Other Liabilities.					
Complete if the organization answered "Yes"	to Form 990, Part IV,		990, Part X, line 25.		
1. (a) Description of liability		(b) Book value			
(1) Federal income taxes					
(2)					
(3)					
(4)					
(5)					

1.	(1,7 = 1 = 1,7 = 1,	, , ,	
(1)	Federal income taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25 )	<b>•</b>	

2. Liability for uncertain tax positions. 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) 2013

#### SCHEDULE F (Form 990)

#### **Statement of Activities Outside the United States**

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047
2013
Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Inspection
Employer identification number

,,,,	OCTATA 1350 TO	. TTNTT\				51-01980	0 0
Pa	RGINIA LAW FO			tside the United States. Comple	ate if the organ		
Га	Form 990, Part IV		ionvines ou	iside the office offices. Comple	ste ii tile olgali	ization answered	res on
1	For grantmakers. Does	the organization		ds to substantiate the amount of its grather the selection criteria used to award the			Yes No
2	United States.			procedures for monitoring the use of it	_	ther assistance ou	tside the
3				an be duplicated if additional space is i			
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	is a prod describe	vity listed in (d) gram service, e specific type ce(s) in region	(f) Total expenditures for and investments in region
CENT	RAL AMERICA AND						
	CARIBBEAN	0	0	INVESTMENT			697,175.
					·		
	· · · · · · · · · · · · · · · · · · ·						
3 a	Sub-total	0	0				697,175.
b	Total from continuation sheets to Part I	0	0				0.
С	Totals (add lines 3a						697 175

332071 10-03-13 Schedule F (Form 990) 2013

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

VIRGINIA LAW FOUNDATION

Schedule F (Form 990) 2013 VIRGINIA LAW FOUNDATION

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total number of r the IRS, or for which th	recipient organization he grantee or counsel	is listed above that are relians between	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	foreign country,	recognized as tax-ex	empt by		

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2013

26

Schedule F (Form 990) 2013 VIRGINIA LAW FOUNDATION 51-0198088

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

			1			
(h) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2013
(g) Description of non-cash assistance						Schedu
(f) Amount of non-cash assistance						
(e) Manner of cash disbursement						
of (d) Amount of cash grant	-			:		
) Number recipients						
(b) Region						
(a) Type of grant or assistance (b) Region (c						

Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	. Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	X Yes	□ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713)	Yes	X No
	S	chedule F (For	m 990) 2013

332075 10-03-13

SCHEDULE (Form 990)

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

▶ Attach to Form 990.

Open to Public Inspection

OMB No 1545-0047

2 |

Employer identification number 51-0198088X Yes 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Information about Schedule I (Form 990) and its instructions is at www irs gov/form990 VIRGINIA LAW FOUNDATION General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization Department of the Treasury Internal Revenue Service Part

2 Describe in Part IV the organization's procedures for monitoring the	ocedures for moni	toring the use of grant	use of grant funds in the United States	d States			
Part II 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 an	d Organizations in the	e United States. C	omplete if the orga	Inization answered "Y	res" 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 car	be duplicated if additi	ional space is need	led		;	
1 (a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIRGINIA POVERTY LAW CENTER 700 E. FRANKLIN STREET, 14TH FLOOR RICHMOND, VA 23219	54-1093402	501(C)(3)	10,000.	•0			LEGAL AID
GREATER RICHMOND BAR FOUNDATION P.O. BOX 3954 RICHMOND, VA 23235	54-1081082	501(C)(3)	50,000.	0			JUSTICE SERVER PROJECT
MARSHALL WYTHE SCHOOL OF LAW PULLER VETERAN'S CLINIC WILLIAMSBURG, VA 23187	54-6001718	115	15,000.	0			LEGAL ASSISTANCE TO VETERANS
<ul><li>2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table</li><li>3 Enter total number of other organizations listed in the line 1 table</li></ul>	and government or s listed in the line	ganizations listed in that table	ne line 1 table				, A

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

Schedule I (Form 990) (2013)

VIRGINIA LAW FOUNDATION

Page 2

51-0198088

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. Schedule I (Form 990) (2013)

Part III Grants and Other

(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. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	quired in Part I, line	2, Part III, column	(b), and any other ac	iditional information.	
PART I, LINE 2:					
THE GRANTS COMMITTEE INTERVIEWS THE	HE APPLICANTS	AND	THEN THEY		
MAKE A RECOMMENDATION TO THE BOARD		N THEIR DE	BASED ON THEIR DELIBERATIONS.	S. THE BOARD	
MUST APPROVE ALL GRANTS. VIRGINIA LAW	1	)ATION'S (	FOUNDATION'S (ORGANIZATION) GRANT	ON) GRANT	
SPENDING POLICY STATES THAT THE AN	ANNUAL SPENDING	IDING FACT	FACTOR IS BASED	O ON A	
FORMULA THAT IS FIVE PERCENT OF THE	IE AVERAGE		3-YEAR ROLLING MARKET VALUE	KET VALUE OF	
THE ORGANIZATION'S INVESTMENTS AT	SEPTEMBER	30 LESS	PROJECTED OPERATING	OPERATING	
COSTS FOR THE UPCOMING FISCAL YEAR.		r YEAR DON	ATIONS REC	CURRENT YEAR DONATIONS RECEIVED THROUGH	
DECEMBER 31 OFTEN SUPPLEMENT THE S	PENDING 1	ACTOR, TO	SPENDING FACTOR, TO ALLOW A LARGER	ARGER	
332102 10-29-13		31	!		Schedule I (Form 990) (2013)

Schedule I (Form 990) (2013)

#### **SCHEDULE J** (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

► Information about Schedule J (Form 990) and its instructions is at www.urs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

VIRGINIA LAW FOUNDATION

Employer identification number 51-0198088

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			Γ.
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			ĺ
	First-class or charter travel Housing allowance or residence for personal use	1		1
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
h	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
•	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
_	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	-	l '
	trastess, and officers, including the occurrence of society, regulating the forms choosed in the rate	<b> </b>		$\vdash$
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			1
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			'
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract	1 :		
	Independent compensation consultant  Compensation survey or study			!
	Form 990 of other organizations  X Approval by the board or compensation committee			
	Tom 550 of Other organizations			,
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			·
•	organization or a related organization:			ĺ
а	Receive a severance payment or change-of-control payment?	4a	- :	Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
-	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
Ŭ	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	1		
	The feet to any of miles has, not the persons and provide the application annealing to a service that are all the			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			,
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of			
а	The organization?	5a		_X_
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			t
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			į
	contingent on the net earnings of:			ł
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		
LHA	A For Paperwork Reduction Act Notice, see the Instructions for Form 990.  Schedule	J (For	n 990	2013

VIRGINIA LAW FOUNDATION Schedule J (Form 990) 2013

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W-2	V-2 and/or 1099-MIS	and/or 1099-MISC compensation	(C) Retirement and	ple	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits		reported as deferred in prior Form 990
(1) RAYMOND WHITE	(1)	125,204.	8,117.	0	9,810.	16,116.	159,247.	0.
EXECUTIVE DIRECTOR	: 🗉		0	0	0	0	0	0
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	(ii)							
332112 04-13-13				34			Schedu	Schedule J (Form 990) 2013

Schedule J (Form 990) 2013 VIRGINIA LAW FOUNDATION

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information

PART I, LINE 3:
THE CLE COMMITTEE AND THE VLF EXECUTIVE COMMITTEE CONFER TO
DETERMINE COMPENSATION FOR THE VLF/CLE EXECUTIVE DIRECTOR AND THEN THE FULL
VLF BOARD APPROVES THE COMPENSATION. THE CLE PERSONNEL COMMITTEE AND VLF
EXECUTIVE COMMITTEE, OF WHICH THE CHAIR OF THE CLE COMMITTEE IS A MEMBER,
CUSTOMARILY REVIEW COMPARATIVE SALARY DATA FROM THE NATIONAL CONFERENCE OF
BAR FOUNDATIONS AND/OR RELATED MATERIALS. THE RECOMMENDATION FROM THE
EXECUTIVE COMMITTEE DETERMINES THE COMPENSATION AND RECOMMENDS APPROVAL BY
THE VLF BOARD. THE PRESIDENT OF THE VLF CONSULTS WITH THE EXECUTIVE
DIRECTOR ON A WEEKLY BASIS AND REGULARLY INFORMS THE EXECUTIVE DIRECTOR
WITH PECARD TO HIS ENALHANTON OF HIS DEPENDMANCE

### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# 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.

Open to Public

OMB No 1545-0047

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 Name of the organization

Inspection Employer identification number

	VIRGINIA I	AW FOUNDATION		1-0198088
HODW OOO DADM	T T T T T T T T T T T T T T T T T T T	DECORTOMICAL OF ORCE	NTCAMION WIGGIO	AT .

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TO JUSTICE AND LAW RELATED EDUCATION.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
PROGRAM, STUDENTS WERE SENSITIZED TO THE IMPORTANCE OF PUBLIC INTEREST
AND PRO BONO WORK. SEVERAL HUNDRED CLIENT CASES WERE IMPACTED BY THE
WORK OF THESE INTERNS.
LAW RELATED EDUCATION:
APPROXIMATELY 300 ATTORNEYS, PARALEGALS, GOVERNMENT EMPLOYEES, MILITARY
PERSONNEL AND COMMUNITY ADVOCATES ATTENDED THE VIRGINIA POVERTY LAW
CENTER'S LEGAL AID CONFERENCE IN 2013, RECEIVING TRAINING IN A WIDE
VARIETY OF ISSUES AFFECTING THE LOW-INCOME POPULATION IN VIRGINIA.
THEIR TRAINING WILL BE APPLIED TO THOUSANDS OF LEGAL AID CLIENTS IN
VIRGINIA ANNUALLY.
ACCESS TO JUSTICE:
THE LEWIS B. PULLER, JR. VETERANS BENEFITS CLINIC ASSISTS CURRENT AND
FORMER MILITARY SERVICE MEMBERS WITH KNOWLEDGE OF AND ASSISTANCE WITH
PURSUING AVAILABLE DISABILITY BENEFITS RESULTING FROM THEIR MILITARY
SERVICE.

JUSTICESERVER PROGRAM IS AN ONLINE CASE MANAGEMENT SERVICE THAT ALLOWS LAWYERS IN PRIVATE PRACTICE TO BE MATCHED WITH CLIENTS NEEDING PRO BONO SERVICES. IT IS AN ALL-INCLUSIVE CASE MANAGEMENT SYSTEM THAT HAS

REVOLUTIONIZED CASE MANAGEMENT ASSIGNMENTS BY PRO BONO PROVIDERS IN

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 332211 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

**Employer identification number** 51-0198088

CENTRAL VIRGINIA. BY REDUCING REDUNDANCY AND COMBINING THE RESOURCES OF THE VARIOUS PRO BONO PROVIDERS, THE MAINTENANCE AND UPKEEP COSTS FOR THE PRO BONO PROVIDERS ARE REDUCED.

PART IV, LINE 12A & PART XII, LINE 2B: AUDITED FINANCIAL STATEMENTS: THE ORGANIZATION TYPICALLY OBTAINS AUDITED FINANCIAL STATEMENTS FOR EACH FISCAL YEAR. THIS FORM 990 COVERS A SHORT PERIOD DURING WHICH THE ORGANIZATION CHANGED ITS YEAR END. AN AUDIT WILL BE OBTAINED FOR THE 15 MONTH PERIOD THAT COVERS THIS SHORT PERIOD AND THE CALENDER YEAR OF 2014. NO SEPARATE AUDITED FINANCIAL STATEMENT WAS OBTAINED FOR THIS SHORT PERIOD.

FORM 990, PART VI, SECTION B, LINE 11:

THE 990 IS SCANNED AND SENT TO THE BOARD OF DIRECTORS FOR REVIEW BEFORE IT IS SIGNED BY OUR PRESIDENT, JAMES V. MEATH.

FORM 990, PART VI, SECTION B, LINE 12C:

AT THE BEGINNING OF EACH FISCAL YEAR, THE EXECUTIVE DIRECTOR OF VLF AND THE EXECUTIVE DIRECTOR OF VIRGINIA CLE CIRCULATE TO ALL BOARD AND COMMITTEE MEMBERS A COPY OF THE CONFLICT OF INTEREST POLICY. EACH MEMBER IS ASKED TO REVIEW, SIGN AND RETURN THE FORM FOR OUR FILES. BOARD MEETING MINUTES REFLECT WHEN A MEMBER ABSTAINS FROM VOTE DUE TO A CONFLICT OF INTEREST. DUE TO TRANSITION IN NUMEROUS POSITIONS, THE CONFLICT OF INTEREST INFORMATION FORM WAS NOT CIRCULATED IN FISCAL YEAR 2013 BUT THE FOUNDATION IS IN THE PROCESS OF DOING SO FOR FISCAL YEAR 2014 AND THE FORM WILL ALSO ASK ABOUT FISCAL YEAR 2013.

THE FOUNDATION'S DOCUMENTS ARE AVAILABLE FOR PUBLIC INSPECTION

AT THE FOUNDATION'S OFFICE. THESE ITEMS ARE NOT POSTED ON THE FOUNDATION'S

WEBSITE.

FORM 990, PART VI, SECTION C, LINE 19:

THE FOUNDATION'S DOCUMENTS ARE AVAILABLE FOR PUBLIC INSPECTION

AT THE FOUNDATION'S OFFICE. THESE ITEMS ARE NOT POSTED ON THE FOUNDATION'S

332212
09-04-13
Schedule O (Form 990 or 990-EZ) (2013)

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization VIRGINIA LAW FOUNDATION	Employer identification number 51-0198088
WEBSITE.	
FORM 990, PART XII, LINE 2C:	
NO CHANGES HAVE BEEN MADE TO THE OVERSIGHT PROCESS FROM	
PRIOR YEARS.	
	<del></del>
	<del></del>

## Form **8868**

(Rev January 2014)

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.

▶ Information about Form 8868 and its instructions is at www irs gov/form8868 ·

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

OMB No 1545-1709

ightharpoonup [X]

	re filing for an Additional (Not Automatic) 3-Month Ex					
Do not co	mplete Part II unless you have already been granted a	an automa	itic 3-month extension on a previous	ly filed Fo	rm 8868	
	c filing (e-file). You can electronically file Form 8868 if y					
equired t	o file Form 990-T), or an additional (not automatic) 3-moi	nth extens	sion of time. You can electronically fi	le Form 88	868 to request an	extension
of time to	file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for T	ransfers A	Associated With C	ertain
Personal	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions) For more details o	n the elec	tronic filing of this	s form,
ısıt www	irs gov/efile and click on e-file for Charities & Nonprofits					
Part I	Automatic 3-Month Extension of Time		ubmit original (no copies nee	eded).		
corpora	tion required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and o	complete		
art I only	1				)	<b>▶</b> □
All other o	corporations (including 1120-C filers), partnerships, REM	ICs, and t	rusts must use Form 7004 to reques	t an exten	sion of time	
o file inco	ome tax returns			Enter file	er's identifying nu	ımber
ype or	Name of exempt organization or other filer, see instru	ctions		Employer	identification nur	nber (EIN) or
rint	· -					
	VIRGINIA LAW FOUNDATION				51-01980	88
ite by the lue date for ling your	Number, street, and room or suite no If a P O box, s 105 WHITEWOOD ROAD	ee instruc	tions	Social se	curity number (SS	N)
eturn See nstructions	City, town or post office, state, and ZIP code For a fo	reign add	ress, see instructions			
	CHARLOTTESVILLE, VA 22901					
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			0 1
Applicati	on	Return	Application			Return
s F <u>or</u>		Code	Is For			Code
orm 990	or Form 990-EZ	01	Form 990 T (corporation)			07
orm 990	·BL	02	Form 1041-A			08
orm 472	0 (ındıvıdual)	03	Form 4720 (other than individual)			09
orm 990	-PF	04	Form 5227			10
orm 990	-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
orm 990	-T (trust other than above)	06	Form 8870			12
	TERESA MOORE	<del></del>				
	ooks are in the care of   105 WHITEWOOD B	ROAD	- CHARLOTTESVILLE,	VA 2	2901	
Teleph	one No > 804-648-0112		Fax No ▶			
If the o	organization does not have an office or place of business	s in the Ur	nited States, check this box		J	▶ ∐
If this	s for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) i	f this is foi	r the whole group.	, check this
oox 🕨	If it is for part of the group, check this box	and atta	ch a list with the names and EINs of	all memb	ers the extension	ıs for
1 1 re	quest an automatic 3-month (6 months for a corporation AUGUST 15, 2014 to file the exemp	•	to file Form 990-T) extension of time tion return for the organization name		The extension	
ıs fo	or the organization's return for	•				
▶[	calendar year or					
<b>)</b>	X tax year beginning OCT 1, 2013	, an	dending DEC 31, 2013			
-	, , ,	<del></del>	-			
2 If th	ne tax year entered in line 1 is for less than 12 months, c	heck reas	on Initial return I	Final retur	n	
[]	Change in accounting period					
3a If th	nis application is for Forms 990-BL, 990-PF, 990-T, 4720	or 6069,	enter the tentative tax, less any			
nor	refundable credits. See instructions			3a	\$	0.
	nis application is for Forms 990 PF, 990-T, 4720, or 6069	, enter an	y refundable credits and			
	mated tax payments made Include any prior year overp			3b	\$	0.
	ance due. Subtract line 3b from line 3a Include your pa					
	using EFTPS (Electronic Federal Tax Payment System)	-		3с	\$	0.
	If you are going to make an electronic funds withdrawal			453-EO ar	nd Form 8879-EO	for payment
nstructio						

Form 8868 (Rev 1-2014)

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

LHA 323841 12-31-13

Form 886	68 (Rev. 1-2014)					Page 2	
• If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension,	complete only Part II and check this	box		X	
<b>Note</b> . On	ly complete Part II if you have already been granted an a	automatic	3-month extension on a previously for	led Form	8868		
	are filing for an Automatic 3-Month Extension, comple						
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies needed)	l <u>.</u>	
			Enter filer's	identifyi	ng number, see i	nstructions	
Type or print	Name of exempt organization or other filer, see instru	ctions		Employe	r identification nu	mber (EIN) o	
File by the	VIRGINIA LAW FOUNDATION				51-01980	388	
due date for filing your return See Number, street, and room or suite no. If a P O box, see instructions  Social security number, street, and room or suite no. If a P O box, see instructions  Social security number, street, and room or suite no. If a P O box, see instructions.						SN)	
instructions	· · · · · · · · · · · · · · · · · · ·						
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 1	
Applicati	ion	Return	Application			Return	
Is For		Code	Is For			Code	
	or Form 990-EZ	01				<del>  000</del>	
Form 990		02	Form 1041-A			08	
	20 (individual)	03	Form 4720 (other than individual)			09	
Form 990	<del></del>	04	Form 5227			10	
	0-T (sec 401(a) or 408(a) trust)	05	Form 6069			11	
	O-T (trust other than above)	06	Form 8870			12	
STOP! D	o not complete Part II if you were not already granted	an autor	natic 3-month extension on a prev	rously file	ed Form 8868.		
If the control of the second o		Group Exe and atta NOVEM OCT 1 heck reas	emption Number (GEN)lich a list with the names and EINs of BER 15, 2014, 2013, and ending on Initial return	all memb	ers the extension 2 31, 2013 return	n is for	
	nis application is for Forms 990-BL, 990-PF, 990-T, 4720, prefundable credits. See instructions	, or 6069,	enter the tentative tax, less any	8a	\$	0.	
b If th	nis application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and estimated	1			
tax	payments made Include any prior year overpayment all	lowed as a	a credit and any amount paid		]		
pre	eviously with Form 8868			8b	\$	0.	
	lance due. Subtract line 8b from line 8a Include your pa	•	h this form, if required, by using			_	
EF	TPS (Electronic Federal Tax Payment System) See instri			8c	\$	0.	
Under pen It is true, c Signature	allies of perjury, I declare that I have examined this form, includ orrect, and complete, and that I am authorized to prepare this fo	ing accomi		the best o	of my knowledge and	d belief,	
oignature	Title 1	. KEUI.	V 444 ±	Dale	Form 9900	(Pay 1 201 4	
	, ,				rorm 8868	(HeV 1:2014	