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Form 990-PF Department of the Treasury Internal Revenue Service

## EXTENDED TO NOVEMBER 16, 2015 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public. Information about Form 990-PF and its separate instructions is at <a href="https://www.lrs.gov/form990of">www.lrs.gov/form990of</a>.

OMB No 1545-0052

For	calendar year 2014 or tax year beginning		, and ending		
Nar	me of foundation			A Employer identification	n number
	ILLIAMSBURG COMMUNITY HEAI	54-1822359	)		
	mber and street (or P O box number if mail is not delivered to street a	Room/suite	B Telephone number	<del></del>	
	801 COURTHOUSE STREET	200	757-345-09		
	y or town, state or province, country, and ZIP or foreign po: IILLIAMSBURG,VA 23188	stal code		C If exemption application is p	pending, check here
	VILLIAMSBURG, VA 23188 Check all that apply: Initial return	losted return of a fa	ormer public charity	D 1. Foreign organizations	c chack hara
G C	Final return	Amended return	officer public charity	1. roreign organization	s, check here
	Address change	Name change		Foreign organizations me check here and attach co	eeting the 85% test,
H C	Check type of organization: X Section 501(c)(3) exe			E If private foundation sta	
		Other taxable private founda	ition	under section 507(b)(1	
I Fa	air market value of all assets at end of year   J Accounting	g method: Cash	X Accrual	F If the foundation is in a	60-month termination
(fr		er (specify)		under section 507(b)(1	<b>→</b> [
	\$ 125,102,409. (Part I, colum	nn (d) must be on cash l	basis)		· · · · · · · · · · · · · · · · · · ·
Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received			N/A	
	2 Check X if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	3,055,342.	3,055,342.		STATEMENT 1
	5a Gross rents				
	D Net rental income or (loss)	6 060 000			
ē	68 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 10 517 071	6,068,097.			
Revenue	b Gross sales price for all 12,517,971.		6,055,321.		
è	7 Capital gain net income (rom Part IV Jine 2)	)	0,000,021.		
	O Income modifications		<u> </u>		
	Gross sales less returns 10a and allowances	1731			
	b Less Cost of goods sold	18			
	c Gross profit or (loss)	-			
	11 Other income OGDEN, U		><1,162,118.	>	STATEMENT 2
	12 Total. Add lines 1 through 11	7,894,953.	7,948,545.		122 250
	13 Compensation of officers, directors, trustees, etc	133,358.	0.		133,358.
	14 Other employee salaries and wages	548,300. 191,272.	98,694.		189,190.
S	15 Pension plans, employee benefits 16a Legal fees	191,414.	0.		100,100.
penses	b Accounting fees STMT 3	52,879.	5,288.		47,591.
Exp		171,485.	156,962.		13,001.
ě					
rati	18 Taxes STMT 5	132,174.	0.		1,374.
nist	19 Depreciation and depletion	13,522.	0.		
Ē	20 Occupancy	160,892.	19,917.		122,350.
Ä	21 Travel, conferences, and meetings	39,062.	0.		39,062.
auc	22 Printing and publications	7,237.	0.		7,237.
Ę	23 Other expenses STMT 6	293,647.	0.		293,369.
erat	24 Total operating and administrative	1 7/2 020	200 061		1,293,771.
Operating and Administrative	expenses. Add lines 13 through 23	1,743,828. 4,258,778.	280,861.		4,235,195.
	25 Contributions, gifts, grants paid 26 Total expenses and disbursements.	4,230,110.		<del> </del>	
	Add lines 24 and 25	6,002,606.	280,861.		5,528,966.
	27 Subtract line 26 from line 12;				<u> </u>
	Excess of revenue over expenses and disbursements	1,892,347.		l	
	b Net investment income (if negative, enter -0-)		7,667,684.		
	c Adjusted net income (if negative, enter -0-)			N/A	
4235 11-2	501 24-14 LHA For Paperwork Reduction Act Notice, see i	nstructions.			Form <b>990-PF</b> (2014)

Part III   Balance Sheets   reaches strokens with interserviers amone by   (a) Book Value   (b) Book Value   (c) Far Market Value   (b) Book Value   (c) Far Market Value   (b) Book Value   (c) Far Market	For	m 99	0-PF (2014) WILLIAMSBURG COMMUNITY	HEALTH FOUNDA	TION 54-	1822359 Page 2
Cash - non-interest-bearing	<u></u>		Ralance Shoots Attached schedules and amounts in the description	Beginning of year	End o	f year
1 Cade - non-interest-bearing   4.23,375.   4.34,896.   4.34,896.		art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
2 Surrogs and temporary cash investments  3 A Accounts receivable  Less; allowance for doubtful accounts  ► Predegar exervable  Less; allowance for doubtful accounts  ► Construct exervable  Receivables due from efficers, directors, trustees, and other doubtful accounts  ► Receivables due from efficers, directors, trustees, and other doubtful accounts  ► Receivables due from efficers, directors, trustees, and other doubtful accounts  ► Receivables due from efficers directors, trustees, and other doubtful accounts  ► Receivables due from efficers directors, trustees, and other doubtful accounts  ► Receivables due from efficers directors, trustees, and other doubtful accounts  ► Receivables due from efficers directors, trustees, and other doubtful accounts  ► Receivables due from efficers directors, trustees, and other doubtful accounts  ► Receivables due from efficers directors, trustees, and other doubtful accounts  ► Receivables due from efficers, directors, trustees, and other despendents  ■ Receivables due from efficers, directors, trustees, and other despendents  ■ Receivables due from efficers, directors, trustees, and other doubtful accounts  ■ Receivables due from efficers, directors, trustees, and other despendents  ■ Receivables due from efficers, directors, trustees, and other notes, paged to the complete due for the despendent of the efficiency due for the despendent of the efficiency due for the efficiency due fo		1	Cash - non-interest-hearing			
Security receivable   Less allowance for doubtful accounts   Less allowance for doubtful acco			•			
Pelceps receivable			· · ·	3,013,1311	2,270,020.	2,2,0,0201
4 Plegions receivable   Less; allowance for doubtful accounts    5 Grains receivable   6 Recovables due from officers, directors, trustees, and other desqualled persons   7 cours receivable   8 Recovables due from officers, directors, trustees, and other desqualled persons   9 and receivable   10 receivable   11 receivable   11 receivable   12 receivable   12 receivable   12 receivable   13 receivable   14 receivable   15 receivable   15 receivable   16 receivable   16 receivable   16 receivable   16 receivable   17 rec		3				
S Grants receivable  Receivables due from officers, directors, trustees, and other disqualified persons  Receivables due from officers, directors, trustees, and other disqualified persons  Receivables due from officers, directors, trustees, and other disqualified persons  Receivables due from officers, directors, trustees, and other disqualified persons  Receivables due from officers, directors, trustees, and other disqualified persons  Receivables due from officers, directors, trustees, and other disqualified persons  Receivables due from officers, directors, trustees, and other disqualified persons  Receivables due from officers, directors, trustees, and other disqualified persons  Receivables due from other directors  Receivables due from o						<u> </u>
8 Receivables due from efficers, directors, trustees, and other disqualified persons  7 cour notes ad ban receivable Less, allowance for diputful accounts ►  8 Investments - copyrate stock c investments - copyrate st		4			,	
Separation of the constitution of the const			Less: allowance for doubtful accounts			
The designation of the design of the desi		5	Grants receivable			
7 Pregrad expenses and deferred charges 8 Pregrad expenses and deferred charges 10a Investments - US. and state overment obligations 1 Investments - US. and state overment obligations 1 Investments - corporate stock 1 Investments - corporate stock 2 Investments - corporate stock 2 Investments - corporate stock 3 Investments - corporate stock 2 Investments - corporate stock 3 Investments - corporate stock 4 Investments - corporate stock 5 Investments - corporate stock 6 Investments - corporate stock 7 Investments - corporate stock 8 Investments - corporate stock 1 Investments - corporate stock 2 Investments - corporate stock 1 Investments - corporate stock 2 Inv		6	Receivables due from officers, directors, trustees, and other			
Less: allowance for doubtful accounts			disqualified persons			1
8 Investments - Curporate bonds 11 investments - Curporate bonds 12 investments - Curporate bonds 13 investments - Curporate bonds 14 investments - Curporate bonds 15 offer assets (describe ► STATEMENT 8) 127, 876, 514 . 125, 102, 409 . 125, 102, 409 . 127, 102, 409 . 127, 102, 409 . 127, 102, 409 . 127, 102, 409 . 127, 102, 409 . 127, 102, 409 . 127, 102, 409 . 127, 102, 409 . 127, 102, 409 . 127, 102, 409 . 127, 102, 409 . 127, 102, 409 . 127, 102, 409 . 127, 102, 409 . 127, 102, 409 . 127, 102, 409 . 127, 102, 368 . 124, 452, 435 . 127, 102, 409 . 127, 102, 368 . 124, 452, 435 . 127, 102, 409 . 127, 102, 368 . 124, 452, 435 . 127, 102, 368 . 124, 452, 435 . 127, 102, 368 . 124, 452, 435 . 127, 102, 368 . 124, 452, 435 . 127, 122, 368 . 124, 452, 435 . 127, 122, 368 . 124, 452, 435 . 127, 122, 368 . 124, 452, 435 . 127, 122, 368 . 124, 452, 435 . 127, 122, 368 . 124, 452, 435 . 127, 122, 368 . 124, 452, 435 . 127, 122, 368 . 124, 452, 435 . 127, 122, 368 . 124, 452, 435 . 127, 122, 368 . 124, 452, 435 . 127, 122, 368 . 124, 452, 435 . 127, 122, 368 . 124, 452, 435 . 127, 122, 368 . 124, 452, 435 . 127, 122, 368 . 124, 452, 435 . 127, 122, 368 . 124, 452, 435 . 127, 122, 368 . 124, 452, 435 . 127, 12		7	Other notes and loans receivable			
The propose of sale or use   Preparad expenses and deferred charges   Preparad expenses   Preparad						1 '
## Prepaid expenses and deferred charges 10a Investments - Corporate bonds   Investments - Invest	S	R				
Total inabilities (describe   STATEMENT 8	set			61 332	93 105	93 105
b investments - corporate stock c investments - corporate bonds 11 investments - corporate bonds 11 investments - complex degree by the second	Asi		, ,	01,332.		33,2031
Convestments - corporate bonds					<del></del>	
11		i	·			
12   Investments - mortgage loans   13   Investments - other   135 , 736   123 , 746 , 452   122 , 275 , 834   129 , 946   199 , 9		C	Investments - corporate bonds		· · · · · · · · · · · · · · · · · · ·	
1   1   1   1   1   1   1   1   1   1		11	Investments - land, buildings, and equipment basis			[
13   Investments - other   STMT 7   133,746,452.   122,275,834.   122,275,834.   124,275,834.   124,275,834.   124,275,834.   125,790.   19,946.   19,946.   19,946.   19,946.   19,946.   15,000   15			Less accumulated depreciation	_		
14 Land, buildings, and equipment: basis		12	Investments - mortgage loans			
115,790.   26,221.   19,946.   19,946.   19,946.   19,946.   19,946.   19,946.   19,946.   10,000   10   10   10   10   10   10		13	Investments - other STMT 7	123,746,452.	122,275,834.	122,275,834.
115,790.   26,221.   19,946.   19,946.   19,946.   19,946.   19,946.   19,946.   19,946.   10,000   10   10   10   10   10   10		14	Land, buildings, and equipment; basis ► 135,736.			
15 Other assets (describe ► 16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)			115 700	26,221.	19,946.	19,946.
16 Total assets (to be completed by all fillers - see the instructions. Also, see page 1, term 1)   127, 876, 514   125, 102, 409   125, 102, 409		15		· ·	<del></del>	
Instructions. Also, see page 1, item I)   127, 876, 514. 125, 102, 409. 125, 102, 409.						
17 Accounts payable and accrued expenses  18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (add lines 17 through 22) 23 Total liabilities (add lines 17 through 22) 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Capital stock, frust principal, or current funds 28 Paid-in or capital surplus, or land, bidg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances  17 Total liabilities and net assets/fund balances  17 Total liabilities and net assets/fund balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 20 Total net assets or fund balances at leginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 3 Other increases not included in line 2 (itemize) UNREALIZED LOSS ON INVESTMENTS 5 4,562,280. 5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30		١.,		127 876 514	125 102 409	125 102 409
18 Grants payable   18 Deferred revenue   20 Leans from officers, directors, trustiess, and other disqualified persons   21 Mortgages and other notes payable   20 Unter liabilities (add lines 17 through 22)   754,146. 649,974.	_	17		174 532	58 062	123,102,103.
19 Deferred revenue  10 Deferred revenue  11 Mortgages and other notes payable  21 Mortgages and other notes payable  22 Other liabilities (describe ► STATEMENT 8 ) 91,849 . 103,414 .  23 Total liabilities (add lines 17 through 22) 754,146 . 649,974 .  Foundations that follow SFAS 117, check here LX and complete lines 24 through 26 and lines 30 and 31 .  24 Unrestricted  25 Temporarily restricted  26 Perrmanently restricted  27 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31 .  28 Part-III Analysis of Changes in Net Assets or Fund Balances  1 Total liabilities and net assets/fund balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  29 Enter amount from Part I, line 27a .  30 Other increases not included in line 2 (itemize) ► UNREALIZED LOSS ON INVESTMENTS  5 4, 562, 280 .  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  8 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  8 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30						<u> </u>
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe  STATEMENT 8) 23 Total liabilities (add lines 17 through 22) 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds 28 Pand-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances 31 Total liabilities and net assets/fund balances 31 Total ret assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize)  MINREALIZED LOSS ON INVESTMENTS 4 124, 452, 435. 5 14, 562, 280. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30 6 124, 452, 435.			•	407,703.	400,470.	<b>,</b>
Total liabilities and not assets or fund balances  Total liabilities and not assets fund balances  Total liabilities and not assets fund balances  Total liabilities and not assets or fund balances  Total not assets or fund balances at beginning of year - Part III, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  Enter amount from Part I, line 27a  Add lines 1, 2, and 3  Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30  For time and complete lines 2 through 22)  Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  For time and complete lines 24 through 22)  Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30  For time and complete lines 24 through 22 (litemize) but NREALIZED LOSS ON INVESTMENTS  For time and complete lines 24 through 22 (litemize) but NREALIZED LOSS ON INVESTMENTS  For time and complete lines 24 through 22)  Total liabilities (add lines 1, 2 through 22)  Total liabilities (add lines 1, 2 through 22)  Total liabilities (add lines 2, 2 through 22)  Total liabilities (add lines 1, 2 through 22)  Total liabilities (add lines 1, 2 through 24)  Total liabilities and net assets/fund balances  Total net assets or fund balances at beginning of year - Part III, column (a), line 30  (must agree with end-of-year figure reported on prior year's return)  Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30	ies					1
Total liabilities and not assets or fund balances  Total liabilities and not assets fund balances  Total liabilities and not assets fund balances  Total liabilities and not assets or fund balances  Total not assets or fund balances at beginning of year - Part III, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  Enter amount from Part I, line 27a  Add lines 1, 2, and 3  Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30  For time and complete lines 2 through 22)  Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  For time and complete lines 24 through 22)  Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30  For time and complete lines 24 through 22 (litemize) but NREALIZED LOSS ON INVESTMENTS  For time and complete lines 24 through 22 (litemize) but NREALIZED LOSS ON INVESTMENTS  For time and complete lines 24 through 22)  Total liabilities (add lines 1, 2 through 22)  Total liabilities (add lines 1, 2 through 22)  Total liabilities (add lines 2, 2 through 22)  Total liabilities (add lines 1, 2 through 22)  Total liabilities (add lines 1, 2 through 24)  Total liabilities and net assets/fund balances  Total net assets or fund balances at beginning of year - Part III, column (a), line 30  (must agree with end-of-year figure reported on prior year's return)  Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30	Ħ	20			<del></del>	1 :
Total liabilities and not assets or fund balances  Total liabilities and not assets fund balances  Total liabilities and not assets fund balances  Total liabilities and not assets or fund balances  Total not assets or fund balances at beginning of year - Part III, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  Enter amount from Part I, line 27a  Add lines 1, 2, and 3  Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30  For time and complete lines 2 through 22)  Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  For time and complete lines 24 through 22)  Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30  For time and complete lines 24 through 22 (litemize) but NREALIZED LOSS ON INVESTMENTS  For time and complete lines 24 through 22 (litemize) but NREALIZED LOSS ON INVESTMENTS  For time and complete lines 24 through 22)  Total liabilities (add lines 1, 2 through 22)  Total liabilities (add lines 1, 2 through 22)  Total liabilities (add lines 2, 2 through 22)  Total liabilities (add lines 1, 2 through 22)  Total liabilities (add lines 1, 2 through 24)  Total liabilities and net assets/fund balances  Total net assets or fund balances at beginning of year - Part III, column (a), line 30  (must agree with end-of-year figure reported on prior year's return)  Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30	jap de			2.1	400 444	
Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Capital stock, trust principal, or current funds  28 Paid-in or capital surplus, or land, bldg., and equipment fund  29 Retained earnings, accumulated income, endowment, or other funds  30 Total net assets or fund balances  127,122,368.124,452,435.  127,122,36	_	22	Other liabilities (describe STATEMENT 8)	91,849.	103,414.	1
Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Capital stock, trust principal, or current funds  28 Paid-in or capital surplus, or land, bldg., and equipment fund  29 Retained earnings, accumulated income, endowment, or other funds  30 Total net assets or fund balances  127,122,368.124,452,435.  127,122,36		l				]
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24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.			Foundations that follow SFAS 117, check here			
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.  127, 122, 368. 124, 452, 435.			and complete lines 24 through 26 and lines 30 and 31.			,
25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances  127,122,368. 124,452,435.  127,122,368. 124,452,435.  127,876,514. 125,102,409.  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize)  5 UNREALIZED LOSS ON INVESTMENTS 5 4,562,280. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 124,452,435.	ès	24	Unrestricted	127,122,368.	124,452,435.	
26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances  127,122,368. 124,452,435.  127,876,514. 125,102,409.  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize)  Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize)  UNREALIZED LOSS ON INVESTMENTS 5 4,562,280. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 124,452,435.		25	Temporarily restricted			1
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(must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ►  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ► UNREALIZED LOSS ON INVESTMENTS  5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  1 127, 122, 368.  2 1,892,347.  3 0.  4 129,014,715.  5 4,562,280.	=		<u> </u>			
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ UNREALIZED LOSS ON INVESTMENTS 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 2 1,892,347. 3 0. 4 129,014,715. 5 4,562,280.	1		•	30		
3 0. 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► UNREALIZED LOSS ON INVESTMENTS 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  3 0. 4 129, 014, 715. 5 4, 562, 280. 6 124, 452, 435.		(mus	st agree with end-of-year figure reported on prior year's return)		1	
4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) UNREALIZED LOSS ON INVESTMENTS 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 124, 452, 435.	2	Ente	r amount from Part I, line 27a		2	1,892,347.
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5 Decreases not included in line 2 (itemize) ► UNREALIZED LOSS ON INVESTMENTS  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  6 124,452,435.	4	Add	lines 1, 2, and 3	· · · · · · · · · · · · · · · · · · ·	4	129,014,715.
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	<u> </u>		The state of the s			Form <b>990-PF</b> (2014)

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Form **990-PF** (2014)

5,536,213.

8

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

Form 990-PF (2014) WILLIAMSBURG COMMUNITY HEALTH FOUNDAT	ION		1822359		Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b)	, 4940(e), or 4	948	- see instru	ctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line	1.				1
Date of ruling or determination letter: {attach copy of letter if necessary-see instru	uctions)	_	i		ا است .
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter	1%	1	15	<u>3,3</u>	<u>54.</u>
of Part I, line 27b					t
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12,	, col. (b). 💚		-	_	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2			<u>0.</u>
3 Add lines 1 and 2		3	15	3,3	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	15	<u>3,3</u>	54.
6 Credits/Payments:		•			1
a 2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6a	109,089.				I
b Exempt foreign organizations - tax withheld at source 6b					į
c Tax paid with application for extension of time to file (Form 8868)	42,000.				
d Backup withholding erroneously withheld		_			j
7 Total credits and payments. Add lines 6a through 6d		7	15	<u>1,0</u>	89.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>&gt;</b>	9		2,2	65.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	. ▶	10			
11 Enter the amount of line 10 to be; Credited to 2015 estimated tax	Refunded <b>▶</b>	11			
Part VII-A   Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it pai	ticipate or intervene	ın		Yes	
any political campaign?			1a		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instruction			1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any	materials publish	ed or			
distributed by the foundation in connection with the activities					l <u> </u>
c Did the foundation file Form 1120-POL for this year?			1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	•				
(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	0.	-			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	on foundation				
managers. ► \$ 0 .				-	ΪX
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		Α.
If "Yes," attach a detailed description of the activities					
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article	es of incorporation, o	or		-	X.
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	Х	
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a	X	
b If "Yes," has it filed a tax return on Form 990-T for this year?			4b 5	_	X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?					<u> </u>
If "Yes," attach the statement required by General Instruction T					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
By language in the governing instrument, or		. 1			
By state legislation that effectively amends the governing instrument so that no mandatory directions that of the state of the sta	conflict with the state	aw	١.	v	
remain in the governing instrument?		,	6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, c	ol (c), and Part X\	/	7	^	
8a Enter the states to which the foundation reports or with which it is registered (see instructions)	<del></del>		[		
VA	d		<del></del>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (	or designate)			- <del>-</del>	
of each state as required by General Instruction G? If "No," attach explanation	4040(3/5) (- : - 1	d - ··	8b	Х	<del> </del>
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) (		endar			_ ~
year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part X			9		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their name	s and addresses		10 Form <b>99</b> 0	L DE	
			LOUIN AAL	,-rr	(20 14)

Form	990-PF (20	WILLIAMSBURG COMMUNITY HEALTH FOUNDATION	54 <u>-18</u> 22	359	F	age <b>5</b>
Pa	rt VII-A	Statements Regarding Activities (continued)				
11	At any time	during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	section 512	(b)(13)? If "Yes," attach schedule (see instructions)		11		_X_
12	Did the four	idation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisor	y privileges?			
	If "Yes," atta	ch statement (see instructions)		12		_X_
13	Did the four	idation comply with the public inspection requirements for its annual returns and exemption application?		13	Х	
	Website add	ress ► WWW.WILLIAMSBURGHEALTHFOUNDATION.ORG				
14			o. <b>▶</b> 757-34		<u>912</u>	
	Located at	▶ 4801 COURTHOUSE STREET, NO. 200, WILLIAMSBURG, VA	1 ZIP+4 ▶ <u>23</u>	<u> 188</u>		
15	Section 494	7(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			. ▶	
		e amount of tax-exempt interest received or accrued during the year	<b>▶</b> 15		<u>/A</u>	
16	At any time	during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		. }	Yes	No
	·-	r other financial account in a foreign country?		16		<u>X</u>
	See the inst	ructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the na	ime of the			,
	foreign cou					
Pa	<del></del>	Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form	4720 if any item is checked in the "Yes" column, unless an exception applies.	I		Yes	No
1a		rear did the foundation (either directly or indirectly);				1
		in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			į.
		money from, lend money to, or otherwise extend credit to (or accept it from)	<b>(</b> 49)			i
	•	alified person?	Yes X No			i
		goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No	}	l	
		mpensation to, or pay or reimburse the expenses of, a disqualified person?	Yes No			1
		er any income or assets to a disqualified person (or make any of either available	<del>.</del>	ł l	Ì	
		benefit or use of a disqualified person)?	Yes 🗓 No	1 1		
	` , •	o pay money or property to a government official? (Exception. Check "No"				1
		oundation agreed to make a grant to or to employ the official for a period after	Yes X No		- 1	
		ation of government service, if terminating within 90 days.)	Yes LA NO			i
	-	er is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		1b		x
		1941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		10	. —	
_	•	ns relying on a current notice regarding disaster assistance check here			ļ	. 1
(		idation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		1c	- 1	X
0		irst day of the tax year beginning in 2014? ilure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundatic	on	<del>- "</del>		
2		ection 4942(j)(3) or 4942(j)(5)):	<b>7</b> 11			
		of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) begin	ining			{
٠	before 201	<del></del>	Yes X No			1
		the years $\blacktriangleright$				-
ŀ	•	ny years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorr	rect			1
,		assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and att				į
		see instructions.)	N/A	2b		,
(		sions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	_					
38	Did the four	ndation hold more than a 2% direct or indirect interest in any business enterprise at any time				;
	during the		Yes No			
t	If "Yes," did	it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons	after			
		69; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) t				
	of holdings	acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule	e C,			ا
		0, to determine if the foundation had excess business holdings in 2014)		3b		X
4;		ndation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
t	Did the four	ndation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purp	ose that			ا ـ ـ ـ ا
	had not bee	n removed from jeopardy before the first day of the tax year beginning in 2014?		4b		X

Fbrm 990-PF (2014) WILLIAMSBURG COMMUNITY H			<u>54-18223.</u>	59 Page <b>6</b>
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be F	tequired (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	es 🔀 No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire			
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y6	es 🛣 No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
4945(d)(4)(A)? (see instructions)		Ye	es 🗶 No	1 1 '
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo			
the prevention of cruelty to children or animals?		Ye	es 🛣 No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A L	ib
Organizations relying on a current notice regarding disaster assistance check h	ere			1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintai	ned		
expenditure responsibility for the grant?	N	/A Y	s No	
If "Yes," attach the statement required by Regulations section 53 4945	5-5(d)			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on			
a personal benefit contract?		Y <sub>0</sub>	es 🛣 No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			Sb X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trustore Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	<b>/</b>	
List all officers, directors, trustees, foundation managers and their	oomponestion.		<del></del>	
List all officers, directors, dustees, foundation managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
	ιο ροσιασι	enter -0-7	compensation	allowallocs
SEE STATEMENT 9		133,358.	16,044.	0.
			1	
	<u>.                                    </u>			· · · · · · · · · · · · · · · · · · ·
2 Compensation of five highest-paid employees (other than those inc	· · · · · · · · · · · · · · · · · · ·	enter "NONE."	(d) combined to	(-) Evange
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
\ <del>-</del> /	devoted to position		and deferred compensation	allowances
	DIR - ACCOUNT			•
STREET, SUITE 200, WILLIAMSBURG, VA	40.00	101,068.	21,966.	0.
	DIR. COMMUNIC			•
STREET, SUITE 200, WILLIAMSBURG, VA	40.00	84,135.	15,274.	0.
	GRANTS PROGRA			0
STREET, SUITE 200, WILLIAMSBURG, VA	40.00	75,115.	17,344.	<u> </u>
	GRANTS PROGRA	į.		^
STREET, SUITE 200, WILLIAMSBURG, VA	40.00	62,802.	23,122.	0.
	GRANTS PROGRA			0.
STREET, SUITE 200, WILLIAMSBURG, VA	40.00	53,347.	9,311.	1
Total number of other employees paid over \$50,000	<del></del>	<del></del>		990-PE (2014)

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Total. Add lines 1 through 3

Form **990-PF** (2014)

4940(e) reduction of tax in those years.

Page 9

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,				
line 7				6,090,903.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			430,785.	
<b>b</b> Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2014:		- 0.		
a From 2009				
b From 2010				
c From 2011				
d From 2012				
e From 2013				
f Total of lines 3a through e	0.	1		
4 Qualifying distributions for 2014 from				
Part XII, line 4: ▶\$ 5,536,213.				
a Applied to 2013, but not more than line 2a			430,785.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				· · · · · · · · · · · · · · · · · · ·
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				5,105,428.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a) )  6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a, Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract	-			
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				985,475.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
a Eveness from 2014				

	SBURG COMMU				322359 Page 10
Part XIV Private Operating F	<del></del>		I-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for	·	-	▶ ∟	10000000	040(-)(5)
b Check box to indicate whether the found		g foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2014	<b>(b)</b> 2013	Prior 3 years (c) 2012	(d) 2011	(e) Total
income from Part I or the minimum	(a) 2014	(0)2013	(6) 20 12	(0)2011	(6) 10121
investment return from Part X for					
each year listed					
b 85% of line 2a					ļ <u> </u>
<ul> <li>Qualifying distributions from Part XII,</li> <li>line 4 for each year listed</li> </ul>					
d Amounts included in line 2c not	·				
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c  3 Complete 3a, b, or c for the alternative test relied upon:  a "Assets" alternative test - enter:  (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
	<del></del>		<del></del>	·	
<ol> <li>Information Regarding Foundation         <ul> <li>List any managers of the foundation wh</li> </ul> </li> </ol>		than 2% of the total con	tributions received by the	e foundation before the cl	ose of any tax
year (but only if they have contributed n			and and the control of the		
NONE  b List any managers of the foundation wh	n nun 100/ or more of th	a stock of a corporation	(or an equally large part	ion of the ownership of a	nartnership or
other entity) of which the foundation ha			(or an equally large port	ion of the ownership of a	partitership of
NONE					
	only makes contributions t	to preselected charitable	organizations and does		
the foundation makes gifts, grants, etc.	<del></del>				1d d.
a The name, address, and telephone num JEANNE ZEIDLER, 757-		he person to whom app	lications should be addre	essed:	
4801 COURTHOUSE STRE	ET #200, WI	LLIAMSBURG	, VA 23188		
b The form in which applications should be SEE ATTACHED GRANT G		tion and materials they s	hould include:		
c Any submission deadlines: SEE ATTACHED GRANT G	UIDELINES				
d Any restrictions or limitations on awards		al areas, charitable fields	, kınds of institutions, or	other factors.	

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	oona ibadan	
a Paid during the year				
SEE ATTACHED SCHEDULE	NONE			
				4,235,195.
				<del></del>
	ļ	Į		
	·			
Total			<b>▶</b> 3a	4,235,195.
b Approved for future payment				
SEE ATTACHED SCHEDULE	NONE			451 500
				451,500.
	7			
Total	<u> </u>	L	<b>▶</b> 3b	451,500.

Enter gross amounts unless otherwise indicated.		siness income		d by section 512, 513, or 514	(e)
4 Program convention and an artist	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		-		<del></del>
ab					<del></del>
•			+ +		······································
	_   _   -		<del>                                     </del>		
0	- <del>                                    </del>				
<u> </u>	_	-			
g Fees and contracts from government agencies	_     -		1 1		
2 Membership dues and assessments			tt-		
3 Interest on savings and temporary cash			1	· · · · · · · · · · · · · · · · · · ·	<del></del>
investments					
4 Dividends and interest from securities	900000	401.	14	3,054,941.	
5 Net rental income or (loss) from real estate:			1 1		
a Debt-financed property				<del></del>	
b Not debt-financed property			i — —		
6 Net rental income or (loss) from personal			<del> </del>		
property					
7 Other investment income	900000	<66,368.	<b>&gt;14</b>	<1,162,118.	· · · · · · · · · · · · · · · · · · ·
8 Gain or (loss) from sales of assets other	33333	100,000		,	
than inventory	900000	12,775.	18	6,055,322.	
9 Net income or (loss) from special events			<del>  </del>		<del></del>
10 Gross profit or (loss) from sales of inventory					· · · · · · · · · · · · · · · · · · ·
11 Other revenue:			1 1		
_			1		
a b			<del>  -</del>		
	<del></del>		<del>                                     </del>		
· · · · · · · · · · · · · · · · · · ·	_		1		<del></del>
П			+ +		
d					
е		<53.192.		7,948,145.	0
e 12 Subtotal. Add columns (b), (d), and (e)		<53,192.	>	7,948,145.	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	s)	<53,192.	>	7,948,145.	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation	•			13	7,894,953
е	•			13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Part XVI-B  Relationship of Activitie	es to the Accom	plishment of E	xempt	13Purposes	7,894,953
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in co	plishment of Explanation (e) of Part XVI-A	xempt	13Purposes	7,894,953
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in co	plishment of Explanation (e) of Part XVI-A	xempt	13Purposes	7,894,953
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in co	plishment of Explanation (e) of Part XVI-A	xempt	13Purposes	7,894,953
e  12 Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions to verify calculation  Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in co	plishment of Explanation (e) of Part XVI-A	xempt	13Purposes	7,894,953
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in co	plishment of Explanation (e) of Part XVI-A	xempt	13Purposes	7,894,953
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in co	plishment of Explanation (e) of Part XVI-A	xempt	13Purposes	7,894,953
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in co	plishment of Explanation (e) of Part XVI-A	xempt	13Purposes	7,894,953
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e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in co	plishment of Explanation (e) of Part XVI-A	xempt	13Purposes	7,894,953
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in co	plishment of Explanation (e) of Part XVI-A	xempt	13Purposes	7,894,953
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in co	plishment of Explanation (e) of Part XVI-A	xempt	13Purposes	7,894,953
e  12 Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions to verify calculation  Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in co	plishment of Explanation (e) of Part XVI-A	xempt	13Purposes	7,894,953
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in co	plishment of Explanation (e) of Part XVI-A	xempt	13Purposes	7,894,953
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e  12 Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions to verify calculation  Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in co	plishment of Explanation (e) of Part XVI-A	xempt	13Purposes	7,894,953
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in co	plishment of Explanation (e) of Part XVI-A	xempt	13Purposes	7,894,953
e  12 Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions to verify calculation  Part XVI-B  Relationship of Activitie  Line No.  Explain below how each activity for which the foundation's exempt purposes (other	income is reported in co	plishment of Explanation (e) of Part XVI-A	xempt	13Purposes	7,894,953
e  12 Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions to verify calculation  Part XVI-B  Relationship of Activitie  Line No.  Explain below how each activity for which the foundation's exempt purposes (other	income is reported in co	plishment of Explanation (e) of Part XVI-A	xempt	13Purposes	7,894,953
e  12 Subtotal. Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions to verify calculation  Part XVI-B  Relationship of Activitie  Line No.  Explain below how each activity for which the foundation's exempt purposes (other	income is reported in co	plishment of Explanation (e) of Part XVI-A	xempt	13Purposes	7,894,953

Form **990-PF** (2014)

423621 11-24-14

## Form 990-PF (2014) Part XVII In Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	e organization directly or indi			• •		tion 501(c) of		Yes	No
the Co	ode (other than section 501(c	)(3) organizations) o	or in section 52	27, relating to political orga	nizations?				
a Trans	fers from the reporting found:	ation to a noncharita	ible exempt or	ganization of:					İ
(1) C	eash						1a(1)		X
(2) 0	other assets						1a(2)		X
<b>b</b> Other	transactions:								
(1) S	ales of assets to a noncharita	ble exempt organiza	tion				1b(1)		Х
(2) P	urchases of assets from a no	ncharitable exempt o	organization				1b(2)		X
(3) R	ental of facilities, equipment,	or other assets					1b(3)		Х
(4) R	eimbursement arrangements	_				_	1b(4)		X
(5) L	oans or loan guarantees						1b(5)		Х
(6) P	erformance of services or me	mbership or fundrai	sing solicitatio	ons			1b(6)		Х
c Sharır	ng of facilities, equipment, ma	iling lists, other asse	ets, or paid em	ployees			1c		X
<b>d</b> If the	answer to any of the above is	"Yes," complete the	following sche	dule. Column (b) should al	ways show the fair i	narket value of the goods, of	her ass	ets,	
	vices given by the reporting fo								
colum	n (d) the value of the goods,	other assets, or serv	rices received.						
(a)Line no	(b) Amount involved	(c) Name of	noncharitable	e exempt organization	(d) Description	of transfers, transactions, and sl	narıng arr	angeme	nts
			N/A						
						<del></del>			
				<u> </u>					
								_	
						*			
				,-·		<u> </u>			
				<u> </u>		<del></del>			
2a Is the	foundation directly or indirect	ly affiliated with, or r	elated to, one	or more tax-exempt organ	zations described				
	tion 501(c) of the Code (other	• •	(3)) or in sect	ion 527?			Yes	X	No
b If "Yes	," complete the following sche								
	(a) Name of org	anization		(b) Type of organization		(c) Description of relationshi	P		
	N/A								
						-			
ا ا ا	nder penalties of perior, Toeclare to id belief, it is true, correct, and com-					May t	he IRS d	scuss ti	nis
Sign   1	1	74 14	-		<b>\</b> 0	show	with the below (	prepare see inst	r )?
Here		K. YVIIV	<u> </u>	11/11/15	Board	Chair X	Yes		No
	Signature of officer of trustee			Date	Trtle				
	Print/Type preparer's na	me	Preparer's si	gnature	Date	Check if PTIN			
	\ <b>V</b>		_	<b>~</b> .		self- employed			
Paid		MITH	Frank	H. Smith	11/09/15	P00			
Prepare	1	FA, PC				Firm's EIN ▶ 52-15	$1\overline{12}$	75	
Use On	- 1								
	Firm's address ▶ 18		NW #90						
	WA:	SHINGTON,	DC 20	036		Phone no. 202-82	<u>2-5</u> (	000	
						For	m <b>990</b>	- <b>PF</b> (	2014)

FORM 990-PF	DIVIDENDS	AND INTER	REST F	ROM SECUR	ITIES S	TATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAI GAINS DIVIDENI		(A) REVENUE ER BOOKS	(B) NET INVEST- MENT INCOME		
INVESTMENTS LIMITED	2,036,954.		0. 2	,036,954.	2,036,954.	• • • • • • • • • • • • • • • • • • • •	
PARTNERSHIPS UBI FROM	1,017,987.		0. 1	,017,987.	1,017,987.		
PARTNERSHIPS	401.		0.	401.	401.		
TO PART I, LINE 4	3,055,342.		0. 3	,055,342.	3,055,342.		
FORM 990-PF		OTHER 1	INCOME	<u> </u>	S	TATEMENT	2
DESCRIPTION			(A REVE PER B	NUE N	(B) ET INVEST- ENT INCOME	(C) ADJUSTED NET INCOM	
EARNINGS IN EQUITY UBI - PARTNERSHIPS	INVESTMENTS			62,118.>	<1,162,118.> 0.	•	
TOTAL TO FORM 990-P	F, PART I,	LINE 11 =	<1,2	228,486.>	<1,162,118.>		
FORM 990-PF		ACCOUNT	ING FE	ES	S	STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST-	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	
DESCRIPTION							
ACCOUNTING FEES		52,879		5,288.		47,59	1.

FORM 990-PF C	THER PROFES	SIONAL FEES	STATEMENT 4			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
CONSULTING FEES INVESTMENT FEES	14,523. 156,962.	0. 156,962.		13,001.		
TO FORM 990-PF, PG 1, LN 16C	171,485.	156,962.		13,001.		
FORM 990-PF	TAX	ES	S	ratement 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
MUNICIPAL PROPERTY TAXES FEDERAL EXCISE TAX	1,374. 130,800.	0. 0.		1,374.		
TO FORM 990-PF, PG 1, LN 18	132,174.	0.		1,374.		
FORM 990-PF	OTHER E	XPENSES	S'	TATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
PAYROLL FEES HEALTHCARE HEROES OFFICE SUPPLIES MARKETING TELEPHONE/INTERNET POSTAGE UTILITIES MAINTAINENCE AGREEMENTS INSURANCE DUES DCA- CHRONIC CARE DCA-SHIP PROGRAM DCA-HEALTH ADVISORY GROUP DCA-CBHI PROGRAM DCA-OTHER	2,000. 15,584. 14,727. 3,578. 11,381. 2,138. 611. 33,063. 12,801. 33,814. 40,184. 36,640. 20,500. 30,000. 36,626.	0. 0. 0. 0. 0. 0. 0.		2,000. 15,584. 12,894. 3,789. 12,140. 2,138. 611. 33,648. 12,801. 33,814. 40,184. 36,640. 20,500. 30,000. 36,626.		
TO FORM 990-PF, PG 1, LN 23	293,647.	0.		293,369		

FORM 990-PF (	OTHER	INVESTMENTS		STATI	EMENT 7
DESCRIPTION		VALUATION METHOD	BOOK VALUE		MARKET ALUE
SEE ATTACHED DETAIL		COST	122,275,83	122	,275,834.
TOTAL TO FORM 990-PF, PART II, I	LINE 1	13	122,275,83	122	,275,834.
FORM 990-PF (	OTHER	LIABILITIES		STATI	EMENT 8
DESCRIPTION			BOY AMOUNT	EOY A	AMOUNT
DEFERRED FEDERAL EXCISE TAX LIA	BILITY	T	91,84	19.	103,414.
TOTAL TO FORM 990-PF, PART II, 1	LINE 2	22	91,84	19.	103,414.
NAME AND ADDRESS		TITLE AND	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JEANNE ZEIDLER 4801 COURTHOUSE STREET, SUITE 20 WILLIAMSBURG, VA 23188	PI	RESIDENT/CEO/	SECRETARY		0.
DOUGLAS J MYERS 4801 COURTHOUSE STREET, SUITE 20 WILLIAMSBURG, VA 23188		DARD CHAIR 1.00	0.	0.	0.
JEFFERY O. SMITH 4801 COURTHOUSE STREET, SUITE 20 WILLIAMSBURG, VA 23188		DARD VICE CHA	IR 0.	0.	0.
JAMES R. GOLDEN 4801 COURTHOUSE STREET, SUITE 20 WILLIAMSBURG, VA 23188		DARD TREASURE 1.00	R 0.	0.	0.
STEPHEN R. ADKINS 4801 COURTHOUSE STREET, SUITE 20 WILLIAMSBURG, VA 23188		RUSTEE 1.00	0.	0.	0.

· WILLIAMSBURG COMMUNIT	Y HEALTH	FOUNDATION		54	4-1822359
CATHERINE ALLPORT 4801 COURTHOUSE STREET, WILLIAMSBURG, VA 23188	SUITE 20	TRUSTEE 0 1.00	0.	0.	0.
DAVID C. ANDERSON 4801 COURTHOUSE STREET, WILLIAMSBURG, VA 23188	SUITE 20	TRUSTEE 0 1.00	0.	0.	0.
DAVID E. BUSH 4801 COURTHOUSE STREET, WILLIAMSBURG, VA 23188	SUITE 20	TRUSTEE 0 1.00	0.	0.	0.
CRESSONDRA B. CONYERS 4801 COURTHOUSE STREET, WILLIAMSBURG, VA 23188				0.	0.
RANDALL FOSKEY 4801 COURTHOUSE STREET, WILLIAMSBURG, VA 23188				0.	0.
PAUL W. GERHARDT 4801 COURTHOUSE STREET, WILLIAMSBURG, VA 23188	SUITE 20	TRUSTEE 0 1.00	0.	0.	0.
F.BRIAN HIESTAND 4801 COURTHOUSE STREET, WILLIAMSBURG, VA 23188	SUITE 20	TRUSTEE 0 1.00	0.	0.	0.
JOYCE M. JARRETT 4801 COURTHOUSE STREET, WILLIAMSBURG, VA 23188	SUITE 20	TRUSTEE 1.00	0.	0.	0.
LAURA J. LODA 4801 COURTHOUSE STREET, WILLIAMSBURG, VA 23188	SUITE 20	TRUSTEE 1.00		0.	0.
STEPHEN H. MONTGOMERY 4801 COURTHOUSE STREET, WILLIAMSBURG, VA 23188	SUITE 20	TRUSTEE 1.00	0.	0.	0.
RICHARD H. RIZK 4801 COURTHOUSE STREET, WILLIAMSBURG, VA 23188	SUITE 20	TRUSTEE 1.00	0.	0.	0.
LOUIS F. ROSSITER 4801 COURTHOUSE STREET, WILLIAMSBURG, VA 23188	SUITE 20	TRUSTEE 1.00	0.	0.	0.
ROBERT G. SINGLEY 4801 COURTHOUSE STREET, WILLIAMSBURG, VA 23188	SUITE 20	TRUSTEE 1.00	0.	0.	0.

WILLIAMSBURG COMMUNITY HEALTH FOUNDATION		54-18	22359
MARSHELL N. WARNER TRUSTEE 4801 COURTHOUSE STREET, SUITE 200 1.00 WILLIAMSBURG, VA 23188	0.	0.	0.
JONATHAN V. WEISS TRUSTEE 4801 COURTHOUSE STREET, SUITE 200 1.00 WILLIAMSBURG, VA 23188	0.	0.	0.
CLARENCE A. WILSON TRUSTEE 4801 COURTHOUSE STREET, SUITE 200 1.00 WILLIAMSBURG, VA 23188	0.	0.	0
KIMBERLY ZEULI TRUSTEE 4801 COURTHOUSE STREET, SUITE 200 1.00 WILLIAMSBURG, VA 23188	0.	0.	0 .
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII	133,358.	16,044.	0.
FORM 990-PF SUMMARY OF DIRECT CHARITABLE	ACTIVITIES	STATEMEN	T 10
<del></del>			
CHRONIC CARE INITIATIVE- A COLLABORATIVE WITH HE ORGANIZATIONS THAT PROVIDE DIRECT SERVICES TO UN UNDER-INSURED, CHRONICALLY ILL INDIVIDUALS IN TH WILLIAMSBURG AREA. THE GOAL IS TO IMPROVE THE HUNDERSERVED COMMUNITY BY IMPROVING THE ORGANIZAT	NINSURED AND HE GREATER HEATLH OF THE FIONS'	FYDFN	פקי
ACTIVITY ONE  CHRONIC CARE INITIATIVE- A COLLABORATIVE WITH HE ORGANIZATIONS THAT PROVIDE DIRECT SERVICES TO UN UNDER-INSURED, CHRONICALLY ILL INDIVIDUALS IN TH WILLIAMSBURG AREA. THE GOAL IS TO IMPROVE THE H UNDERSERVED COMMUNITY BY IMPROVING THE ORGANIZAT INDIVIDUAL AND COLLECTIVE CAPACITY TO SERVE THIS	NINSURED AND HE GREATER HEATLH OF THE FIONS'	EXPENS	
CHRONIC CARE INITIATIVE- A COLLABORATIVE WITH HE ORGANIZATIONS THAT PROVIDE DIRECT SERVICES TO UN UNDER-INSURED, CHRONICALLY ILL INDIVIDUALS IN TH WILLIAMSBURG AREA. THE GOAL IS TO IMPROVE THE HUNDERSERVED COMMUNITY BY IMPROVING THE ORGANIZAT INDIVIDUAL AND COLLECTIVE CAPACITY TO SERVE THIS	NINSURED AND HE GREATER HEATLH OF THE FIONS' S POPULATION.		3,366
CHRONIC CARE INITIATIVE- A COLLABORATIVE WITH HE ORGANIZATIONS THAT PROVIDE DIRECT SERVICES TO UN UNDER-INSURED, CHRONICALLY ILL INDIVIDUALS IN TH WILLIAMSBURG AREA. THE GOAL IS TO IMPROVE THE HUNDERSERVED COMMUNITY BY IMPROVING THE ORGANIZAT INDIVIDUAL AND COLLECTIVE CAPACITY TO SERVE THIS TO FORM 990-PF, PART IX-A, LINE 1	NINSURED AND HE GREATER HEATLH OF THE FIONS' S POPULATION.	38	3,366
CHRONIC CARE INITIATIVE- A COLLABORATIVE WITH HE ORGANIZATIONS THAT PROVIDE DIRECT SERVICES TO UN UNDER-INSURED, CHRONICALLY ILL INDIVIDUALS IN TH WILLIAMSBURG AREA. THE GOAL IS TO IMPROVE THE H UNDERSERVED COMMUNITY BY IMPROVING THE ORGANIZAT INDIVIDUAL AND COLLECTIVE CAPACITY TO SERVE THIS TO FORM 990-PF, PART IX-A, LINE 1  FORM 990-PF SUMMARY OF DIRECT CHARITABLE	NINSURED AND HE GREATER HEATLH OF THE FIONS' S POPULATION.  ACTIVITIES  IMPROVE THE E //ISION BY	38	3,366
CHRONIC CARE INITIATIVE - A COLLABORATIVE WITH HE ORGANIZATIONS THAT PROVIDE DIRECT SERVICES TO UN UNDER-INSURED, CHRONICALLY ILL INDIVIDUALS IN TH WILLIAMSBURG AREA. THE GOAL IS TO IMPROVE THE H UNDERSERVED COMMUNITY BY IMPROVING THE ORGANIZAT INDIVIDUAL AND COLLECTIVE CAPACITY TO SERVE THIS TO FORM 990-PF, PART IX-A, LINE 1  FORM 990-PF SUMMARY OF DIRECT CHARITABLE  ACTIVITY TWO  SCHOOL HEALTH INITIATIVE PROGRAM- A PROGRAM TO I HEALTH AND WELLNESS OF STUDENTS AND STAFF IN THE WILLIAMSBURG-JAMES CITY COUNTY PUBLIC SCHOOL DIV SUPPORTING AND PROMOTING HEALTHY EATING AND PHYS	NINSURED AND HE GREATER HEATLH OF THE FIONS' S POPULATION.  ACTIVITIES  IMPROVE THE E //ISION BY	38	NT 11

FORM 990-PF	SUMMARY OF DIRECT	CHARITABLE ACTIVITIES	STATEMENT	12
ACTIVITY THREE				
SUPPORTING A CO HEALTH SERVICES PROJECTS INCLUI CENTER AND A NE	S TO CHILDREN, ADOLESC DE THE GREATER WILLIAM	HAT PROVIDE BEHAVIORAL ENTS AND THEIR FAMILIES. ISBURG CHILD ASSESSMENT . A ONE-STOP INFORMATION		
			EXPENSES	3
TO FORM 990-PF,	PART IX-A, LINE 3		30,0	000
FORM 990-PF	SUMMARY OF DIRECT	CHARITABLE ACTIVITIES	STATEMENT	13
ACTIVITY FOUR				
AND HEALTHCARE HEALTH OUTCOMES COMMUNITY. THE	PROVIDERS DESIGNED TO FOR CHILDREN LIVING COLLABORATIVE EMPLOY			
			EXPENSE	3
TO FORM 990-PF.	, PART IX-A, LINE 4		20,	500

Williamsburg Community Health Foundation, Inc. Form 990-PF, Part II, Line 13 - Investments (Other) Year Ended December 31, 2014

**Balance Sheet Total, line 13 Investments-Other** 

54-1822359

**\$** 122,275,834

### **Hedging and Total Return Assets**

MIT Private Equity Fund TIFF Absolute Return Pool Private Advisors Distressed Ops Fd TIFF Partners V - US TIFF Partners V - International	\$ 666,686 15,243,856 266,116 444,015 339,646
TIFF Secondary Partners I TIFF Real Estate Partners II	980,795 1,077,624
GMO Forestry Fund 7 Private Advisors Income Fund	1,457,258 94,530
TIFF PEP 2007	1,731,552
MA Investors Fund 1, LLC Private Advisors Small Co Buyout Fd	2,465,651 927,686
TIFF PEP 2008	1,183,040 8,302,322
TIFF Short Term Fund MREP 2008-DCIF	1,693,647
TIFF Secondary Partners II TIFF Multi-Asset Fund	2,256,856 36,606,426
TIFF Keystone Fund	42,936,032
TIFF PEP 2012 TIFF SOF	759,041 1,220,081
TIFF PEP 2013 TIFF PEP 2014	927,327 65,460
TIFF RR IV	90,792
Market Adjustment Pending Purchase/Sales/Withdrawals	 539,395

Williamsburg Community Health Foundation Form 990-PF, Part XV, Supplemental Information, Line 3a --Grants and Contributions Paid During the Year Year Ended December 31, 2014

	Relationship to Foundation Manager or	Foundation Status of		
Name and Address	Substantial	Recipient	Purpose of Grant or Contribution	Amount
Angels of Mercy Medical Mission 7151 Richmond Road, Suite 401 Williamsburg, VA 23188	N/A	Public Charity	Program Support Chronic Care Collaborative - Therapeutic Lifestyle Change Program	113,000
Angels of Mercy Medical Mission 7151 Richmond Road, Suite 401 Williamsburg, VA 23188	N/A	Public Charity	Program Support Healthcare Heroes Award	3,500
Avalon <sup>.</sup> A Center for Women and Children P.O Box 6805 Williamsburg, VA 23188	N/A	Public Charity	Program Support Healthcare Heroes Award	1,500
Bacon Street Post Office Drawer 279 Williamsburg, VA 23187-0279	N/A	Public Charity	Program Support Youth Substance Abuse Intervention and Treatment	44,000
Center For Child & Family Services Inc 2021 Cunningham Drive, Suite 400 Hampton, VA 23666-3371	N/A	Public Charity	Program Support Multicultural Counseling and Outreach Program for the Greater Williamsburg Area	38,000
Center For Child & Family Services Inc. 2021 Cunningham Drive, Suite 400 Hampton, VA 23666-3371	N/A	Public Charity	Program Support: Violence Prevention/Intervention Program	12,000
Center for Excellence in Aging & Lifelong Health 3901 Treyburn Drive, Suite 100 Williamsburg, VA 23185	N/A	Public Charity	Program Support Extending the Outreach and Impact of SBIRT Program to Serve Older Adults	20,000
Child Development Resources P O. Box 280 Norge, VA 23127	N/A	Public Charity	Program Support Infant & Parent Program	145,000
Child Development Resources P.O. Box 280 Norge, VA 23127	N/A	Public Charity	Program Support Parents as Teachers	122,000

Child Development Resources P.O. Box 280 Norge, VA 23127	N/A	Public Charity	Program Support Walking Works	200
Child Development Resources P.O. Box 280 Norge, VA 23127	N/A	Public Charity	Program Support Transit Van	19,500
City of Williamsburg Econimic Development Authority Municipal Building, 401 Lafayette Street Williamsburg, VA 23185-3617	N/A	Public Charity	Program Support Annual Award	2,000
Colonial Behavioral Health 473 McLaws Circle Williamsburg, VA 23185	N/A	Public Charity	Program Support Chronic Care Collaborative - Case Manager/Expanded Care Coordination Project	127,000
Colonial Behavioral Health 473 McLaws Circle Williamsburg, VA 23185	N/N	Public Charity	Program Support Greater Williamsburg Child Assessment Center	290,000
Colonial Behavioral Health 473 McLaws Circle Williamsburg, VA 23185	N/A	Public Charity	Program Support Intensive Outpatient Program	22,500
Colonial Community Corrections 4093 Ironbound Road, Suite B Williamsburg, VA 23188	N/A	Public Charity	Program Suport Better Ways: A Therapeutic & Transitional Substance Abuse Program	33,250
Community Housing Partners 448 Depot Street Christiansburg, VA 24073	N/A	Public Charity	Program Support Yorktown Community Health Initiative	14,500
FISH, Inc. 312 Waller Mill Road, Surte 800 Williamsburg, VA 23185	N/A	Public Charity	Program Support Health Priorities in Action	12,500
FISH, Inc. 312 Waller Mill Road, Suite 800 Williamsburg, VA 23185	N/A	Public Charity	Program Support Walking Works	200
Foodbank of the Virginia Peninsula 2401 Aluminum Avenue Hampton, VA 23661	N/A	Public Charity	Program Support Produce Distribution	20,000

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FREE Foundation for Rehabilitation Equipment P.O. Box 8873 Surry, VA 23883	N/A	Public Charity	Program Support Geographic Expansion to serve WHF service area	25,000
Gloucester-Mathews Care Clinic 2276 George Washington Memorial Highway Hayes, VA 23072	N/A	Public Charity	Program Support Chronic Care Collaborative	130,000
Grove Christian Outreach Center 8910-E Pocahontas Trail Williamsburg, VA 23185	N/A	Public Charity	Program Support Food Access Outreach Program	11,000
Housing Partnerships, Inc. 115 Palace Lane Williamsburg, VA 23185	N/A	Public Charity	Program Support Lead Paint Testing	25,990
James City County Parks and Recreation 5300 Palmer Lane, Suite 1-A Williamsburg, VA 23188	N/A	Public Charity	Program Support Water Bottle Filling Stations	1,789
Literacy for Life at the Rita Welsh Adult Learning Center P.O Box 8795 Williamsburg, VA 23187	N/A	Public Charity	Program Support Health Education and Literacy (HEAL)	52,500
New Horizons Family Counseling Center P.O. Box 8795 Williamsburg, VA 23187	A/A	Public Charity	Program Support New Directions for Family and Youth Development	62,250
Olde Towne Medical Center 5249 Olde Towne Road Williamsburg, VA 23188	N/A	Public Charity	Basic Operating Support	483,000
Olde Towne Medical Center 5249 Olde Towne Road Williamsburg, VA 23188	N/A	Public Charity	Program Support Chronic Care Collaborative	250,000
Olde Towne Medical Center 5249 Olde Towne Road Williamsburg, VA 23188	N/A	Public Charity	Program Support Walking Works	2,000
Olivet Medical Ministry, Inc. 1620 Old Williamsburg Road Yorktown, VA 23690	N/A	Public Charity	Program Support Chronic Care Collaborative - Effective Management of Chronic Care Patients with	420,000

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Olivet Medical Ministry, Inc. 1620 Old Williamsburg Road Yorktown, VA 23690	N/A	Public Charity	Program Support Volunteer Recruitment Program	33,000
Peninsula Agency on Aging 739 Thimble Shoals Boulevard, Suite 1006 Newport News, VA 23606-3585	N/A	Public Charity	Program Support Community Action Plan on Aging	20,000
Peninsula Agency on Aging 739 Thimble Shoals Boulevard, Suite 1006 Newport News, VA 23606-3585	N/A	Public Charity	Program Support RIDES Program	168,916
Peninsula Agency on Aging 739 Thimble Shoals Boulevard, Suite 1006 Newport News, VA 23606-3585	N/A	Public Charity	Program Support SHARP (Senior Health assistance Resource Project)	192,000
Rx Partnership 2924 Emerywood Parkway, Suite 300 Richmond, VA 23294	N/A	Public Charity	Program Support Chronic Care Collaborative	30,000
Sentara Williamsburg Regional Medical Center Auxiliary 100 Sentara Circle Williamsburg, VA 23188	N/A	Public Charity	Program Support Free Bone Density Testing Program	2,000
Sentara Williamsburg Regional Medical Center Auxiliary 100 Sentara Circle Williamsburg, VA 23188	N/A	Public Charity	Program Support Free Mammogram Program	2,000
The Arc of Greater Williamsburg 202-D Packets Court Williamsburg, VA 23185	N/A	Public Charity	Program Support "Stay Fit for the Future: Continuing Adapted Wellness Programming	20,000
The Arc of Greater Williamsburg 202-D Packets Court Williamsburg, VA 23185	N/A	Public Charity	Program Support Walking Works	200
Thomas Nelson Educational Foundation, Inc. P O Box 9407 Hampton, VA 23670	N/A	Public Charity	Program Support Emergency Medical Services Teaching Ambulance-Based Patient Treatment	75,000
Virginia Health Care Foundation 707 E. Main Street, Suite 1350 Richmond, VA 23219	N/A	Public Charity	Program Support Greater Williamsburg Medication Access Program	380,000

Virginia Legacy Soccer Club 1117 Old Colony Lane Williamsburg, VA 23185	A/N	Public Charity	Program Support Virginia Legacy Soccer Club Community Partnership Program	16,000
Virginia Regional Ballet, Inc 1228 Richmond Road Williamsburg, VA 23185	A/N	Public Charity	Program Support Fitness Camp	2,000
WRHO, Hampton Roads Educational Telecommunications Association, Inc. 5200 Hampton Boulevard Norfolk, VA 23508-1507	N/A	Public Charity	Program Support Geddy Educational Fund	50,000
Williamsburg Area Fath in Action 354 McLaws Circle, Suite 2 Williamsburg, VA 23185	N/N	Public Charity	Program Support Medical Transportation	22,000
Williamsburg Area Faith in Action 354 McLaws Circle, Suite 2 Williamsburg, VA 23185	N/A	Public Charity	Program Support Walking Works	200
Williamsburg Area Faith in Action 354 McLaws Circle, Suite 2 Williamsburg, VA 23185	N/A	Public Charity	Program Support Coordinating Resources to Help Seniors Age in Place	19,000
Williamsburg Area Meals-On-Wheels, Inc. P O. Box 709 Williamsburg, VA 23187-0709	N/A	Public Charity	Program Support Safety net nutrition for low income residents during challenging times	40,000
Williamsburg Area Meals-On-Wheels, Inc. P.O. Box 709 Williamsburg, VA 23187-0709	N/A	Public Charity	Program Support Walking Works	200
Williamsburg-James City County Public Schools 101-D Mounts Bay Road, P.O. Box 8783 Williamsburg, VA 23187-8783	N/A	Public Charity	Program Support School Health Intrative Program (SHIP)	290,000
Williamsburg-James City County Public Schools 101-D Mounts Bay Road, P.O. Box 8783 Williamsburg, VA 23187-8783	N/A	Public Charity	Program Support Walking Works	1,000
Williamsburg Soccer Foundation P.O. Box 584 Williamsburg, VA 23187-0584	N/A	Public Charity	Program Support Annual Awards	2,000

York County Division of Juvenile Services 224 Ballard Street, P O Box 532 Yorktown, VA 23690

**Public Charity** 

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Program Support Psychological and Substance Abuse Services (PSAS) Program

**Total Contribution Given** 

49,000

4,235,195

Williamsburg Community Health Foundation Form 990-PF, Part XV, Supplemental Information, Line 3b --Grants Approved for Future Payment Year Ended December 31, 2014

Name and Address	If Individ, List Relationship to Foundation Manager or Substantial Contributor	Foundation Status of Recipient	Purpose of Grant or Contribution	Amount
Bacon Street Post Office Drawer 279 Williamsburg, VA 23187-0279	N/A	Public Charity	Public Charity Program Support Youth Substance Abuse Intervention and Treatment	19,000
Center For Child & Family Services Inc. 2021 Cunningham Drive, Suite 400 Hampton, VA 23666-3371	N/A	Public Charity	Public Charity Program Support Multicultural Counseling and Outreach Program for the Greater Williamsburg Area	19,000
Colonial Community Corrections 4093 Ironbound Road Williamsburg, VA 23188	N/A	Public Charity	Public Charity Program Support Better Ways: A Therapeutic & Transitional Substance Abuse Program	14,250
FREE Foundation for Rehabilitation Equipment P.O. Box 8873 Surry, VA 23883	N/A	Public Charity	Public Charity Program Support Geographic Expansion to serve WHF service area	25,000
Gloucester Mathews Care Clinic 2276 George Washington Memorial Highway Hayes, VA 23072	A/A	Public Charity	Public Charity Program Support Chronic Care Collaborative	130,000
Literacy for Life College of William and Mary 301 Monticello Avenue Williamsburg, VA 23187	N/A	Public Charity	Public Charity Program Support Health Education and Literacy (HEAL)	35,000
New Horizons Family Counseling Center P.O. Box 8795 Williamsburg, VA 23187	N/A	Public Charity	Public Charity Program Support New Directions for Youth and Family Development	62,250
Olde Towne Medical and Dental Center 5249 Olde Towne Road Williamsburg, VA 23188	N/A	Public Charity	Public Charity Program Support Hospital to Home Program	33,000

WHRO, Hampton Roads Educational	۷/۷	Public Charity Program Support	20,000
Telecommunications Assocations, Inc. 5200 Hampton Boulevard Norfolk, VA 23508-1507		Geddy Educational Fund	
Williamsburg Area Faith in Action 354 McLaws Circle, Suite 2 Williamsburg, VA 23185	N/A	Public Charity Program Support Aging in Place	19,000
Williamsburg Area Meals-On-Wheels, Inc. P O Box 709 Williamsburg, VA 23187-0709	N/A	Public Charity Program Support Community safety net for sufficient nutrition and nutrition education for low income area residents	24,000
York County Division of Juvenile Services 224 Ballard Street, P.O. Box 532 Yorktown, VA 23690	N/A	Public Charity Program Support Psychological and Substance Abuse Services (PSAS) Program	21,000

\$ 451,500

**Total Future Payments** 

# The following criteria apply to all WCHF grants:

- Basic eligibility:
- Agency type
- Non-profit 501(c)3 agencies (IRS determination letter required)
- State, local or other government agencies
- Fiscal Sponsorships in accordance with WCHF policies are permitted
- Program/project must serve residents in the WCHF service area (City of Williamsburg, City of Poquoson, James City County, York County) 0
- Required documents from applicant agencies (in addition to WCHF application forms):
- **Board roster**
- Annual report
- o IRS Form 990
- Annual audit in accordance with WCHF policies
- Allowable costs:
- Program and/or operating costs as outlined in the grant application
- Indirect costs calculated at up to 15% of salaries and wages (employee benefits not included) included in the project budget
- Employee benefits in accordance with WCHF policies
- Excluded costs:
- Annual appeals and fundraising
- Endowments
- Real estate acquisition
- Restoration of funds cut by governments or other organizations
- > Lobbying

Grant category	Eligibility (in addition to basic eligibility)	Requirements	<b>P</b>	Characteristics	\$ \$	Application forms (in addition to required documents)
Foundation-	<ul> <li>Invitation only</li> </ul>	Program aligns	•	Ongoing grant	•	Streamlined WCHF
directed	<ul> <li>May evolve from</li> </ul>	significantly with WCHF	•	Intense, year-round staff		application
	another type of grant	Strategic Plan		involvement	•	List of measurable goals,
	category	<ul> <li>Population served aligns</li> </ul>	•	Innovative, thus outcomes		both long-term and for
	<ul> <li>Or may develop into</li> </ul>	with WCHF Strategic Plan		may initially involve some		grant cycle
	another type of grant	<ul> <li>Need for program is</li> </ul>		uncertainty	•	Organization budget
	category	clearly demonstrated	•	Involves collaboration	•	Program budget
		<ul> <li>Outcomes are process-</li> </ul>		with multiple partners	•	Program budget narrative
		driven, data-driven and			•	Job description(s), if
		long-term				applicable
					•	Contract includes
						measurable goals with six-
						month and final reporting
						requirements

Grant	Eligibility (in addition to	~	Requirements	ಕੱ	Characteristics	Api	Application forms (in
category	basic eligibility)					adc	addition to required documents)
Basic	<ul> <li>Invitation only</li> </ul>	•	Organization mission	•	Ongoing grant	•	Streamlined WCHF
Operating	<ul> <li>May evolve from</li> </ul>		aligns with WHCF	•	Intense staff involvement		application
Support	another type of grant		Strategic Plan		at the invitation stage of	•	List of measurable goals
	category	•	Population served aligns		grant making process		for grant cycle
	<ul> <li>Or may develop into</li> </ul>		with WCHF Strategic Plan	•	Grant made on an annual	•	Organization budget
	another type of grant	•	Need for the organization		basis	•	Contract includes
	category		mission is clearly	•	Grant funds are		measurable goals with six-
	<ul> <li>Government agencies,</li> </ul>		demonstrated		unrestricted, keeping in		month and final reporting
	colleges and	•	Outcomes are data-driven		mind excluded costs		requirements
	universities, and		and clear	•	Outputs and outcomes are		•
	hospitals are not eligible	•	Organization has		predictable		
	<ul> <li>No agency may receive</li> </ul>		significant track record	•	Initial "basic operating		
	more than one WCHF		and must have received		support" funding		
	"basic operating		WCHF funding within the		recommendations are		
	support" grant at any		last three years		based on existing WCHF		
	given time	•	WCHF support may not		funding amounts and		
			exceed 30% of		supported by best-		
			organization budget		practices research		
		•	Organization has				
			demonstrated at least				
			three years of stable				
			executive leadership				
		•	Must successfully seek				
			funding from additional				
			sources				

Grant	Eligibility (in addition to	Requirements	Characteristics		App	Application forms (in addition
category	basic eligibility)				to re	to required documents)
Basic	<ul> <li>Invitation only</li> </ul>	<ul> <li>Program goals aligns with</li> </ul>	<ul> <li>Ongoing grant</li> </ul>		•	Streamlined WCHF
Program	<ul> <li>May evolve from</li> </ul>	WCHF Strategic Plan	<ul> <li>Intense staff involvement at</li> </ul>	vement at		application
Support	another type of grant	<ul> <li>Population served aligns</li> </ul>	the invitation stage of grant	e of grant	•	List of measurable goals
	category	with WCHF Strategic Plan	making process		-	for grant cycle
	<ul> <li>Or may develop into</li> </ul>	<ul> <li>Need for the program is</li> </ul>	<ul> <li>Grant made on an annual</li> </ul>	annual	•	Program budget
	another type of grant	clearly demonstrated	basis		•	Program budget narrative
	category	<ul> <li>Outcomes are data-driven</li> </ul>	<ul> <li>Offers an opportunity for</li> </ul>	nity for	•	Program income form
	<ul> <li>No agency may receive</li> </ul>	and clear	service delivery of interest	interest	•	Job description(s), if
	more than two WCHF	<ul> <li>Organization operating the</li> </ul>	to WCHF			applicable
	"basic program	program has significant	<ul> <li>Grant funds are restricted</li> </ul>	stricted	•	Contract includes
	support" grants in any	track record	to specific program	۲	~	measurable goals with six-
	calendar year	<ul> <li>Must successfully seek</li> </ul>	<ul> <li>Outputs and outcomes are</li> </ul>	omes are	_	month and final reporting
		funding from additional	predictable		·-	requirements
		sources	<ul> <li>Initial "basic program</li> </ul>	am		
			support" funding			
			recommendations are	are		
			based on existing WCHF	WCHF		
			funding amounts and	and		
			supported by best-practices	:-practices		
			research			

Grant category		Eligibility (in addition	&	Requirements (	Cha	Characteristics	Api	Application forms (in addition to	
	\$	to basic eligibility)					req	required documents)	
Responsive	•	Initiated by LOI			•	Provides opportunity to	•	Post-LOI, invitation to apply:	-
	•	Open to any	•	Population served aligns		fund new initiatives		<ul> <li>Current WCHF</li> </ul>	
		qualified applicant		with WCHF Strategic Plan	•	May include WCHF requests		application	
	•	Or may develop	•	Program/project aligns		to address a specific need		<ul> <li>Program budget</li> </ul>	
		from a "basic		with WCHF Strategic Plan	•	May be one-time grant		<ul> <li>Program budget</li> </ul>	
		operating	•	Need for program is	•	Or funding declines over 3		narrative	
-		support" or "basic		demonstrated		to 4 years or less:		<ul> <li>Program income form</li> </ul>	
		program support"	•	Outcomes are data-driven		<ul><li>Year 1 was a new</li></ul>		<ul> <li>Job description(s), if</li> </ul>	
		grant should		and near-term		grant or from a		applicable	
		WCHF choose to	•	If applicable, realistic		different category	•	Contract includes indicators of	
,		decrease funding		sustainability plan in place		<ul><li>Vear 2 at 75%</li></ul>		success with six-month and final	_
	•	No agency may		to accommodate		<ul> <li>Year 3 at 50%</li> </ul>		reporting requirements	-
		receive more than		decreased funding		<ul><li>Vear 4 at 25%</li></ul>			
		two WCHF				<ul><li>Year 5 at zero</li></ul>			
		"responsive"			•	Not obligated to fund for			
		grants in any				four years if outcomes are			
		calendar year				not met			-
					•	Or, if successful, program			
						"graduates" to another level			